

2018/19
ANNUAL REPORT
TO THE COMMUNITY

*BUILDING CAPACITY AND QUALITY
THROUGH MORE INTEGRATED CARE, TOGETHER*




NORTHUMBERLAND HILLS
HOSPITAL

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(see p. 26
for details)

If you're suffering from nerve problems in the arms and legs, you must read about a clinical study that showed...

How 85% Of Patients Eliminated Numbness, Tingling, or Sharp Pains

Numbness, tingling, and pain are extremely annoying problems.

They may come and go...interrupt your sleep...and even make your arms or legs feel weak at times. Maybe you've even been to other doctors and they claim all the tests indicate you *should* feel fine.

If You Read Nothing Else, Read This:

More than 20 million Americans suffer from peripheral neuropathy, a problem caused by damage to the nerves that supply your arms and legs.

This painful condition interferes with your body's ability to transmit messages to your muscles, skin, joints, or internal organs. If ignored or mistreated, neuropathy can lead to irreversible health conditions.

Why not get help by those trained to correct the major cause of peripheral neuropathy. Read the full facts on this page.

MORE PILLS ARE NOT THE SOLUTION

A common treatment for many nerve problems is the 'take some pills and wait and see' method.

While this may be necessary for temporary relief of severe symptoms, using them long term is no way to live. Some of the more common drugs given include pain pills, anti-seizure medications, and anti-depressants -- all of which have serious side effects.

THE LIKELY CAUSE OF YOUR PROBLEM

My name is Dr. Peter Herron, owner and chiropractor at Herron Family Chiropractic. I've been helping people with neuropathy and nerve problems for more than 20 years.

Often neuropathy is caused by a degenerating spine pressing on the nerve roots. This can happen in any of the Vertebral joints from the neck all the way down to the tail bone.

The good news is that chiropractic treatments have proven effective in helping to remove the pressure on the nerves. By using gentle techniques, I'm able to release the pressure that has built up on the nerve. This allows the nerve to heal and the symptoms to go away.

For example, numerous studies have proven chiropractic's effectiveness in helping nerve conditions.

Patients showed an **85.5% resolution of the nerve symptoms** after only 9 chiropractic treatments. - *Journal of Chiropractic Medicine 2008*

With chiropractic care, patients had "significant improvement in perceived comfort and function, nerve conduction and finger sensation overall." - *JMPT 1998*

"Significant increase in grip strength and normalization of motor and sensory latencies were noted. Orthopedic tests were negative. Symptoms dissipated." - *JMPT 1994*

What these studies mean is that you could soon be enjoying life...without those aggravating nerve problems.

COULD THIS BE YOUR SOLUTION?

It's time for you to find out if chiropractic will be your neuropathy solution.

For a limited time, \$35 will get you all the services I normally charge new patients \$120 for!

What does this offer include? Everything. Take a look at what you will receive:

- An in-depth consultation about your health and well-being where I will

listen...really listen...to the details of your case.

- A complete neuromuscular examination.
- A full set of specialized x-rays to determine if a spinal problem is contributing to your pain or symptoms... (NOTE: These would normally cost you at least \$85).
- A thorough analysis of your exam and x-ray findings so we can start mapping out your plan to being pain free.

Don't let numbness, tingling, and pain hold you back from enjoying



Until **August 30, 2019** you can get everything I've listed here for only \$35. You're saving a considerable amount by taking me up on this offer. Call **905-377-0555** now. We can get you scheduled for your consultation, exam and x-rays as soon as there's an opening.

Our office is called Herron Family Chiropractic. We are located in the Fleming Building in Cobourg. My assistant Carmen is one of the friendliest people I know. Call her and tell her you would like to come in for the Nerve Evaluation so she can make room in the schedule and make sure you receive proper credit for this special offer.

Sincerely,
Peter J. Herron, D.C.



in conjunction with



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Message from the Chair of the Board	4
Message from the President and CEO	5
Strategic Plan 2017/18 – 2020/21	6
Services Provided at NHH Today	8
Message from the Chief of Staff	11
Facts & Figures	12
Financial Highlights	14
Reward and Recognition Highlights 2018/19	16
Community Partnerships	18
Patient and Family Engagement	19
Exceptional Community Support	20
Your Generosity	23
Local Governance	24
Volunteering Opportunities	26
Looking for a Family Doctor?	28



As I reflect on the past twelve months, and my concluding year as your Board Chair, so many positive highlights come to mind.

At the top of this list is the October, 2018 celebration of NHH's 15th anniversary. A community open house, co-hosted with the NHH Foundation, and supported by both NHH Auxiliary and Patient and Family Advisory Council (PFAC) volunteers, provided an opportunity for the clinical teams across the hospital to showcase the services and expertise available at NHH today, and the equipment that supports that care, thanks to generous donor support. It was a wonderful evening, and a fitting celebration for a community that has done and continues to do so much to support its hospital. Feedback was so positive another open house is being planned for this coming fall.

2018/19 marked the completion of the half-way point of our four-year Strategic Plan and, as this Report demonstrates, solid progress is being made in each of our four priority areas of focus. The Plan is summarized for your reference on page 6 of this Report, published in full on our website, nhh.ca, and reported on at each of our monthly public Board meetings. It is the roadmap guiding NHH to build on past strengths, sustain and—as needs dictate—grow local hospital services, amidst an ever-changing landscape of health system transformation, and it is serving us well.

Three of the four strategic priorities set out in NHH's Strategic Plan are, to some extent, expected areas of focus for any hospital: Quality and Safety, Operational Excellence and a commitment to invest in making NHH a "Great Place to Work and Volunteer." The fourth strategic priority—Collaborative Community Partnerships—has proven to be in increasing alignment with not only our local patient, caregiver and provider expectations, but also the broader direction of the Ontario health care system as a whole.

At the Board table, and in our Committee meetings, we have been impressed by the many creative community partnerships that have expanded in the past year to enhance local patient and caregiver experience. The walk-in counselling service expanded for local youth is one example—a partnership between NHH Community Mental Health, Rebound Child and Youth Services, and Northumberland Community Counselling Centre—and the Northumberland PACE partnership. Initiated three years ago by Dr. Mukesh Bhargava, this past year, with community partner support, PACE has brought lively health, wellness and prevention talks of interest to over 700 local residents and many more (thanks to video streaming on nhh.ca). We look forward to further opportunities for community partnerships to benefit local care in the context of the new Ontario Health Teams.

Another highlight for me has been the solid working relationship that has continued to grow between the Board and our two direct reports: President and CEO Linda Davis and Chief of Staff, Mukesh Bhargava. The Board is grateful for

their leadership and advice, and I want to thank them both for their support to me during my term as Chair. I also want to recognize Dr. Bhargava, our medical chiefs and the 155 medical practitioners active at NHH today, for their dedication and clinical skill.

This spirit of mutual respect and teamwork extends to the many volunteers who support NHH each and every day. Foundation, Auxiliary, Patient and Family Advisory Council, Spiritual Care, community drivers and St John Therapy Dog visitors—all are examples of the generosity that lives in this community, as are my fellow Board and Community volunteers, whose service to this hospital must also be noted, particularly my First Vice Chair Pam Went, and Second Vice chair Lynda Kay. Thank you.

Perhaps the greatest highlight for me in the past year has been witnessing the local impact of the skillful advocacy demonstrated by our CEO, Linda Davis. Linda, supported by our strong senior team, successfully proved, with support from the Ontario Hospital Association, the business case for a much-needed base funding adjustment for this hospital. This increase was formally received into the Hospital's operating base in 2018/19, and is today having a direct impact on NHH's ability to better meet the needs of the population in Northumberland, and address capacity issues. Likewise, Linda's advocacy for funding to support alternate level of care patients—including temporary funding for additional in-patient beds, and creation of a temporary transitional care partnership with area retirement homes—is providing both clinical and financial benefits.

Thanks in part to these advocacy efforts, and also in part to the NHH team's continued commitment to efficiency, NHH is marking its third consecutive year of modest operating surpluses. The stability that comes with this will help position this hospital—and community—for the opportunities that will come within the new more integrated health care landscape.

Our Board looks forward to the continued support of the Ministry of Health and Long-Term Care, and Northumberland-Peterborough South MPP David Piccini. We welcome continued growth of all these positive relationships in the exciting year ahead, as we work together for the benefit of the patients and families we serve.

**CHAIR, NHH BOARD OF DIRECTORS,
Elizabeth Selby**



2018/19 was another very busy and rewarding year at NHH, with local patient need continuing to increase in almost all areas of the hospital and our staff, physicians, donors and volunteers ready and committed to the delivery of “Exceptional patient care, every time” to the best of their ability.

The Service Activity results shared in this year’s Report provide clear evidence of the rising demand for many of the services we deliver today. The related graphic on page 13, detailing the continued challenge of Alternate Level of Care (ALC) patient needs, speaks to what we consider to be our greatest pressure.

Once again, NHH has experienced periods this past year when 30 per cent of our inpatients had completed their acute care stay and, to no fault of their own, were awaiting discharge to an ‘alternate’ (usually long-term care) option. In other words, only 70 per cent of NHH’s acute beds were actually available to the community’s rising acute care needs.

While we are better prepared in our inpatient units to support this ‘new normal,’ and continue to receive one-time surge relief funding from the government to assist, this situation is having a significant impact on the day-to-day workload for staff, physicians and volunteers. As well, in the Emergency Department (ED), we have seen lengthening wait times for those entering hospital through the ED (see page 13), an increase in patients who must be admitted to a bed in a crowded ED, and frustration for ED patients, their loved ones and the health professionals who care for them are challenges.

In February of this year, the government offered temporary support for some NHH ALC patients to await long-term care in a more suitable setting—local retirement homes. This is welcome help, but it is not a long-term solution. System reform is needed. It is an issue we continue to monitor closely while advocating for acute care hospital needs.

Despite our ALC pressures, service to patients increased in many areas of NHH. Admissions, diagnostic imaging examinations, births, palliative care, surgical cases, dialysis visits, chemotherapy visits, outpatient ambulatory care clinic visits, mental health visits and telemedicine have all increased.

I must credit the exceptional staff, physicians and volunteers at NHH with meeting this demand while, at the same time, advancing significant continuous quality improvements, such as pressure ulcer prevention, the management of behaviour responses in patients with dementia and delirium, and drug distribution and management.

Collaborative community partnerships are essential to our ability to serve rising needs, and nowhere is this more apparent than in the area of our community mental health, where partnerships with area providers and local police are making a real difference in patient experience.

What lies ahead? Certainly, the need for long-term solutions for ALC. Growth is also going to be essential for NHH, for our ambulatory care service (to add to our current offerings and plan for physical space requirements), medical/surgical care (to increase bed spaces to better meet inpatient volumes), cancer



(L-R) Linda Davis, President and CEO, with Elizabeth Selby, Board Chair.

care (to expand and redesign the physical space our services are delivered in, to improve patient flow and care), and dialysis (to expand to meet rising local demand).

Working with the NHH Foundation, NHH is undertaking a master planning exercise to determine all the future programs and services needed to properly support care in our community over the next 25 years. Consideration is being given to the physical infrastructure required of our facility to deliver that care, including a proposed Health Centre on campus, and the information technology that is needed to support care, specifically the implementation of a new Clinical Information System, which will introduce much needed capacities we do not have today to connect electronic health records with others, including patients.

Opportunities presented by health system transformation and, specifically, the new Ontario Health Teams, are very positive for our community, which works very well together.

With high population growth projected (12% by 2026 and 21.5% by 2036), coupled with dramatic increases in the percentage of individuals 65 and over, the future is bright, and growing, for NHH. My heartfelt thanks to all who have a hand in this hospital—from professional staff to volunteers, donors to community partners. We will build capacity and quality, through increasingly integrated care, together.

**PRESIDENT AND CEO,
Linda Davis**



CREATING OUR FUTURE TOGETHER

PRIORITIES AND ENABLERS AT A GLANCE



OUR SHARED PURPOSE

*Exceptional patient care.
Every time.*



CORE VALUES

- Integrity
- Quality
- Respect
- Compassion
- Teamwork



STRATEGIC PRIORITIES

- Quality and Safety;
- Great Place to Work and Volunteer;
- Collaborative Community Partnerships; and
- Operational Excellence.



STRATEGIC ENABLERS

- Technology
- Communication
- Education



Now entering its third year, the 2017/18 – 2020/21 Strategic Plan is proving to be a sound roadmap for the sustainability of NHH as an efficient, high-quality community hospital with ever growing linkages between local and regional partners to build capacity and further strengthen local patient care. Developed in collaboration with patients, caregivers, staff and physicians, a copy of our Plan is available on our website. Our Senior Team reports monthly at our open Board meetings on progress against these priorities, and we adjust our Plan annually to incorporate new opportunities or challenges, as circumstances require.”

Linda Davis,
NHH President and CEO

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DID YOU KNOW? NHH PROVIDES SERVICE IN FOUR KEY AREAS:

1. ACUTE CARE;
2. POST-ACUTE SPECIALTY SERVICES;
3. OUTPATIENT CARE; AND
4. DIAGNOSTICS.

NHH services continue to grow and change based on the needs of the communities we serve, the funding available to meet those needs and, increasingly, creative community partnerships to enhance.

Local and regional partnerships continue to grow as health care providers in Northumberland work together to create efficiencies across the broader health-care system while supporting care close to home.

Today, NHH is one of an increasingly inter-related network of care provider organizations in our region and, through the Ontario Health Team of Northumberland Collaborative Planning Committee, we are actively pursuing—with patients and caregivers—ideas where we can work together even more.

Below is an overview of NHH's current services, related supports and linkages to local partners and regional centres.



ACUTE CARE

Emergency Staffed by family physicians, emergency medicine specialists, nurse practitioners, skilled nursing staff and other health care professionals, the NHH Emergency Department (ED) is open 24 hours a day, seven days a week, 365 days a year. The ED is easily accessible by ground ambulance transport and an on-site heliport provides increased access for emergency patients arriving at and departing from the hospital by air. NHH's ED team saw close to 35,000 patient visits in 2018/19.

Intensive Care Comprised of six private rooms, including one with negative pressure isolation capabilities, NHH's Intensive Care Unit is equipped with state-of-the-art patient bed and medical equipment including ready access to life-saving technologies such as cardiac and arterial monitoring and respiratory ventilation and pressure support.

Medical/Surgical Inpatient Care The largest unit in the hospital, the medical/surgical unit provides inter-professional care for patients who require acute care.

Maternal/Child Care With six birthing suites, a dedicated operating room for caesarean sections and an experienced health care team, NHH provides newborns and their families with the personal and exceptional care expected of a community hospital. The team supported close to 600 births at NHH in 2018/19, the highest number yet, thanks to a

strong partnership with local family physicians, obstetrician-gynaecologists, anesthetists and midwives.

Surgical Services With a growing number of patient cases each year (over 5,000 in 2018/19), NHH's surgical program provides a range of services, including general surgery, gynaecology, ophthalmology, orthopaedics, otolaryngology, plastics and urology as well as dental/oral surgery. Both day surgery and inpatient surgical services are provided.



POST-ACUTE SPECIALTY SERVICES

Inpatient Rehabilitation Specialized in caring for patients recovering from strokes, operations and injuries, NHH's inter-professional team of nurses, doctors and therapists partner with patients and their families to offer a therapeutic program designed to help people achieve their rehabilitation goals, and regain as much independence as possible.

Palliative Care NHH's Palliative Care program provides a specialized approach to pain and symptom management for people experiencing a life limiting illness – whatever the diagnosis. The goal of such therapy is to improve quality of life for both patient and family. Patients are admitted to NHH for treatment and support with challenging or complex symptoms; many go home with support from our community partners while others remain for end of life care. The local need for palliative care continues to rise as our local population ages. In 2018/19, 376 patients received palliative care at NHH – an increase of 23% over the past three years alone. As our population ages and grows, the need for palliative care will grow too. NHH continues to collaborate with Community Care Northumberland (CCN) in the implementation of the local Palliative Care Community Team and welcomes CCN's work to establish west Northumberland's first Hospice Care Centre, Ed's House, in the coming year. Ed's House will support rising demand and offer an alternative to hospital care for those who are eligible; investments in hospital-based palliative care services and supports will also continue.

Restorative Care Specially designed for adults who are no longer in the acute phase of an illness but do not yet have the strength or independence necessary to safely return home, Restorative Care focuses on rebuilding strength and reducing the need for assistance that often follows an acute illness. Assess and Restore is a successful nurse practitioner-



led 'intervention' housed within NHH's Restorative Care unit that is continuing to have a very positive impact on the number of patients able to safely return home with supports versus the previous alternative: long-term care.



OUTPATIENT CARE

Ambulatory Care Clinics NHH's Ambulatory Care Unit hosts clinics with a growing number of physicians and specialists in the areas of internal medicine, obstetrics and gynaecology, ophthalmology, general surgery, cardiology, ear/nose/throat, plastic surgery, paediatrics, rheumatology, mental health, neurology, orthopaedics, pain management and urology. Our health care team provides consultations, treatments and assessments including minor procedures as well as pre-operative assessment and education. 19,032 patient visits were registered in these clinics in 2018/19, a 4.4% increase over the patient visits registered the year prior, and a clear demonstration of the growing value of this service.

Cancer and Supportive Care Clinic Offered in partnership with the Durham Regional Cancer Centre and the Central East Regional Cancer Centre, the Cancer and Supportive Care Clinic at NHH provides blood and iron treatments not related to cancer as well as cancer care, including chemotherapy infusions, diagnosis, follow-up and supportive treatments. Like NHH's Ambulatory Care Clinics, Cancer and Supportive Care has seen a significant increase in demand in recent years, with 8,349 visits registered in 2018/19, up 7.2% from 7,790 patient visits in 2017/18.

Community Mental Health Services In partnership with regional as well as local mental health and social care affiliates, NHH's mental health and addictions services, located at 1011 Elgin Street West, Suite 200, provides a variety of services to close to 40,000 visits per year to clients 7 years of age or older to treat a wide range of mental health issues. Specialized services such as Assertive Community Treatment, Supportive Housing and Intensive Case Management are also offered. A new walk-in clinic, providing counselling services on a drop-in basis two days a week (Tuesdays and Thursdays) in collaboration with Rebound Child and Youth Services and Northumberland Community Counselling Services, is proving beneficial. Also expanding is a collaboration with local law enforcement, introduced in 2017/18. Known as M-HEART, which stands for Mental Health Engagement And Response Team, this particular collaboration has brought a mobile crisis intervention option to Northumberland that is proving effective at decreasing the escalation of mental health symptoms and mental health crises in hard-to-reach vulnerable populations.

Dialysis A satellite of the Peterborough Regional Renal Program, NHH provides haemodialysis to Level II dialysis patients. A renal insufficiency and nephrology clinic is also offered through the regional program with the support of nephrologists, dietitians, social workers and nurses. More and more local residents are requiring dialysis and, as a result, this clinic saw 7,364 visits in 2018/19, a 1.7% year-over-year increase from 2017/18.

Telemedicine – In addition to NHH's own Ambulatory Care Clinics and in-patient services, 1,612 specialist consultations were completed through NHH in 2018/19 thanks to the Ontario Telemedicine Network (OTN)—another significant year-over-year increase (1,141 in 2017/18). Now in operation at NHH for seven years, OTN provides local patients with access to specialists outside our community, without leaving home. Consultations are facilitated for a broad range of patient needs on both an outpatient and inpatient basis, increasing local access to specialized care, minimizing travel for vulnerable patients and their families and resulting in significant patient experience benefits and system cost savings.



DIAGNOSTICS

Diagnostic Imaging – NHH offers Magnetic Resonance (MR) imaging, Bone Mineral Densitometry (BMD), advanced Computed Tomography (CT) scanning, diagnostic and screening mammography, nuclear medicine, interventional radiography, general X-ray and ultrasound on an emergency, inpatient and outpatient basis.

Women's Health – the Women's Health Centre at NHH offers BMD testing, breast ultrasound and ultrasound-guided breast biopsies, mammography and mammography-guided biopsies (stereotactic biopsies). An affiliate of the Ontario Breast Screening Program services (OBSP), NHH also offers mammogram self-referral for eligible Ontario women between the ages of 50 and 74.



CLINICAL AND HOSPITAL SUPPORTS

It takes many hands to provide safe, high quality care. Supporting our patient care services are dedicated teams of other professionals who, indirectly, make care possible. These include:

- Administration
- Maintenance/ Environmental Services
- Housekeeping
- Laboratory Services
- Medical Device Reprocessing
- Pharmacy



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**MD Financial
Management**



As our fiscal year 2018/19 draws to a close, we reflect on what we have achieved and what lies ahead of us.

The past year has been a year where our front-line staff and physicians have provided care to a growing number of patients, often in what is referred to as a “surge” circumstance. Surge is status (defined as the need to operate four (and quite often more) inpatient beds over our budgeted plan.

The highlights of the year included the successful recruitment of physicians who expressed an interest in working at Northumberland Hills Hospital. In 2018/19, we welcomed the following new professional staff: Dr(s) Rys, Rotolo, Karkenechi, Ketov, Paramsothy, Mohajerani, Becker, Luong, Gorsht and Forrester. Registered Midwife Jocelyn Latter was also welcomed to our team. These practitioners will strengthen medical human resource support in NHH’s Emergency Department (ED), Diagnostic Imaging, Surgical Services, Ambulatory Care and Maternal/Child Care programs. An additional 15 ED locum service provider physicians were also credentialed to support our medical human resource needs in the ED.

We are both fortunate and proud to be a hospital where family physicians continue to provide inpatient care to their patients. For those patients whose family physicians do not provide hospital care (approximately 60 per cent), we offer an excellent hospitalist service. The Nurse Practitioner/Physician hospitalist team has been instrumental in effectively and efficiently managing our challenging bed situations in both our medical/surgical unit and post-acute specialty services. Staff physicians, namely Dr(s) Carson Kwok, Adriana Palencar, Karen Northey and Trisha Rys, have also contributed to the hospitalist service at a time of critical need.

Our journey of participating in medical education has progressed. Dr. Mark Essak is leading our hospital in the launch of the Queen’s Integrated Clerkship Program, with our first scheduled Clinical Clerks due to arrive in January 2020! Dedicated faculty development will be the key to the program’s success. I’m also very pleased to report that the following physicians now hold assistant professor (adjunct faculty) and other formal faculty appointments at Queen’s University: Dr(s) Al-Ali, Barnard-Thompson, Becker, Bhargava, M., Cameron, Crawford, Essak, Hameed, Haunts, Koneru, Luong, MacPherson, McGarry, McMillan, Miller, Momi, Nie, J., Pepper, Sharma, Smith, Stratford, A., Woodward and Xi. Several of our visiting itinerant specialists also hold appointments.

Dr. Kirk Haunts was recently awarded a Regional Education Award in the Mentorship category through the Distributed Medical Education Office at Queen’s University. This award recognizes excellence in teaching, mentorship and education development in community sites. Dr. Haunts was chosen among over 1500 regional preceptors.

NHH has been chosen to participate in the Enhanced Recovery Canada Safety Improvement Project (ERAS) hosted by the Canadian Patient Safety Institute (CPSI). CPSI accepts a maximum of 12 teams from various organizations across the country to participate and we are very proud to be among them this year. This program is broadly seen as a catalyst in the clinical setting to support improved patient safety outcomes. Our surgical team has championed ERAS at NHH, and they are very passionate about the opportunities it presents.

Our ICU team designed and implemented a new nurse-initiated electrolyte replacement protocol resulting in quicker correction of electrolyte imbalance.

Our Obstetrician-Gynecologists have made significant progress toward our ambitious quality target of achieving a rate of zero per cent caesarean sections in low-risk pregnancy.

Anesthesiologists have continued a strong service supporting not only the surgeons but also the Maternal/Child Care service, Intensive Care Unit, and the Emergency Department for the sickest of our patients.

Our Pain and Palliative program both continue to provide a valuable service to inpatients and outpatients.

Community Mental Health continues to look at innovative collaborative partnerships to improve access for all, with initiatives such as the recent expansion of the adult Walk-In Counselling Clinic to now serve youth ages 7 and up, and the M-HEART Project, a partnership with our local Police Service.

Our Lab implemented a digital pulmonary function testing and electrocardiogram solution with very positive results.

Our hospital-acquired pressure injury rate—another zero per cent goal—has seen significant progress through meticulous work from staff, physicians and quality leadership.

The preventable readmission rate for patients with heart failure and pneumonia also has a zero per cent target and we are seeing positive progress.

It appears we are close to seeing some significant activity in the acquisition of a new Clinical Information System (CIS) with a targeted implementation in 2021.

The hospital is research ready for clinical studies, and we hope to see some begin in 2019/20.

Members of NHH’s medical staff, recognizing the realities of provider stress, are also experimenting with a weekly (informal) drop-in social “Coffee with Colleagues” on Tuesday mornings in the doctors’ lounge.

This year also saw the introduction of UpToDate, a well-respected and used clinical resource. This was supported through a combination of hospital and General Medical Staff Association financing.

In 2018/19 we moved to a centralized on-call scheduling web-based platform (MESHAI) which has improved communications and overall operational efficiencies.

We continue to focus on increasing services closer to home, taking care of patients in the right location and updating our Clinical Information System. We must do this while improving provider experience.

As always, please share ideas that you think I can facilitate as the Chief of Staff.

**CHIEF OF STAFF
Dr. Mukesh Bhargava**





NHH DEPARTMENT CHIEFS:

DIAGNOSTIC IMAGING Dr. Matthew Vaughan	MATERNAL/CHILD Dr. Nasser Abu Awad (Acting)	PATHOLOGY Dr. Allison Collins
EMERGENCY Dr. Peter Barnett	MEDICINE Dr. Rajesh Krishnan	POST-ACUTE SPECIALTY SERVICES Dr. Wang Xi
FAMILY PRACTICE Dr. Jeffrey Knackstedt	MENTAL HEALTH SERVICES Dr. Rajinder Momi	SURGICAL SERVICES Dr. Andrew Stratford



667
FULL- AND
PART-TIME
STAFF

UP
FROM
654 LAST
YEAR

Full-time: **294** Part-time: **373**



155
MEDICAL
PRACTITIONERS

DOWN
2 FROM
LAST
YEAR

Physicians (including specialists): **136**
Midwives: **17**



408*
VOLUNTEERS

Board of Directors
(not including ex officio members): **12**

Board Community
Committee Volunteers: **3**

Auxiliary: **325**

Foundation: **50**

Spiritual Care: **8**

Patient and Family
Advisory Council: **10**

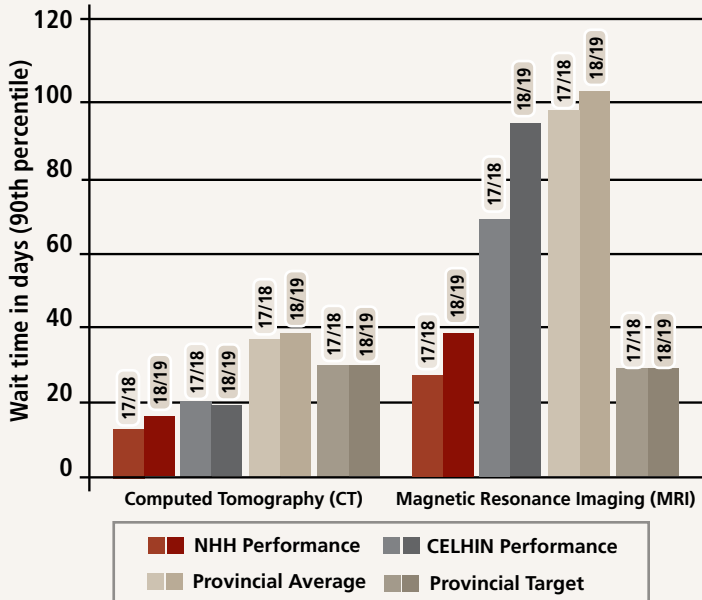
**Also active at NHH are countless volunteers associated with external groups, including the St. John Ambulance Therapy Dog program, community drivers who support NHH patients through Community Care Northumberland, the Canadian Cancer Society and many others.*

SERVICE ACTIVITY	April 1, 2017 to March 31, 2018	April 1, 2018 to March 31, 2019
Emergency Department Visits	34,051	33,748
Admissions	4,280	4,402
Diagnostic Imaging Exams	61,599	65,979
Births	551	583
Surgical Cases	4,997	5,116
Dialysis Visits	7,279	7,364
Chemotherapy Visits	7,790	8,349
Out-patient Ambulatory Care Clinic Visits (Excluding Mental Health)	18,232	19,032
Community Mental Health		
Individuals Served	3,953	4,669
Face-to-Face Visits	17,556	18,412
Telemedicine Visits	1,141	1,612

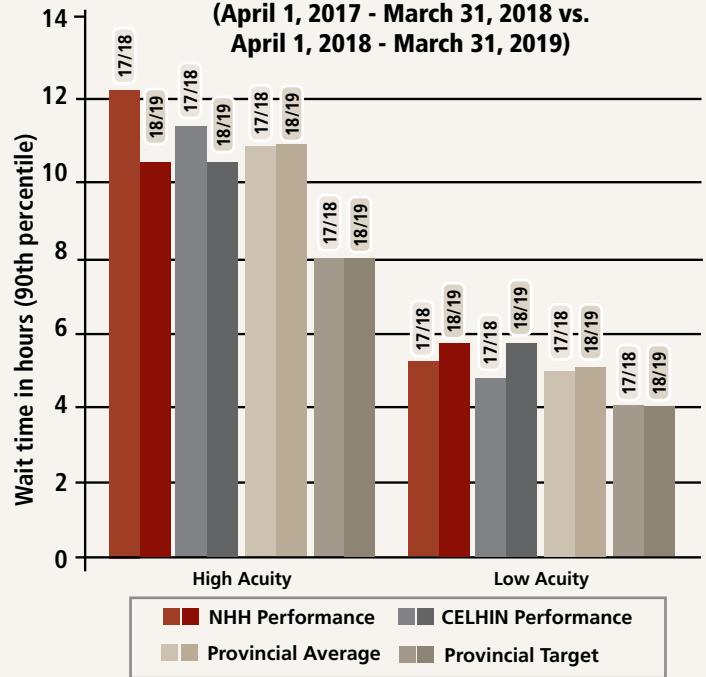
For additional information on quality and safety indicators at NHH, including NHH's annual Quality Improvement Plan priorities, please see the [Accountability](#) section at [nhh.ca](#).



Diagnostic Wait Times (April 1, 2017 - March 31, 2018 vs. April 1, 2018 - March 31, 2019)

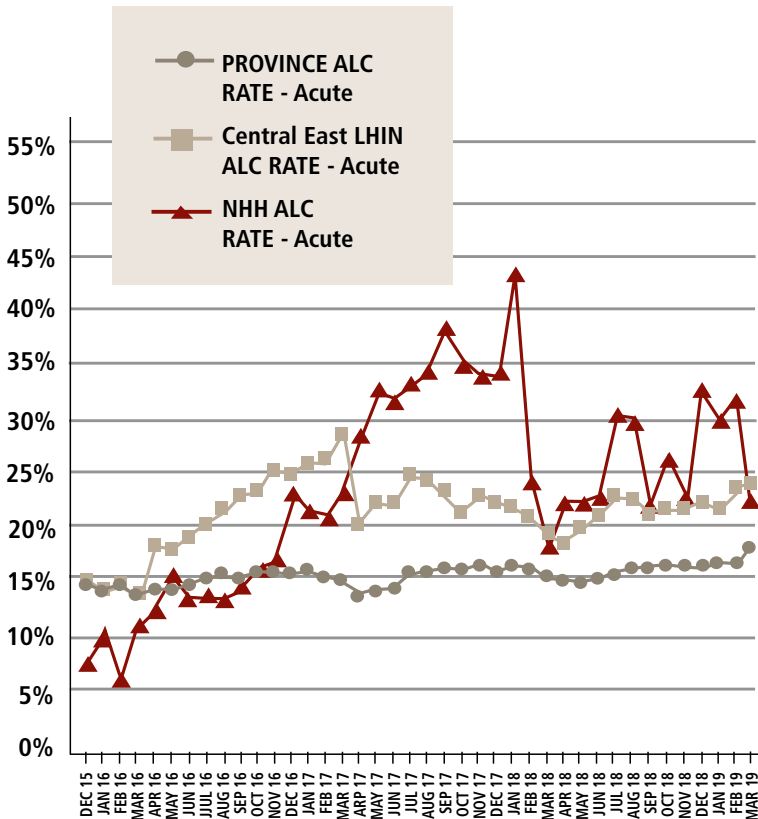


Emergency Department Wait Times (April 1, 2017 - March 31, 2018 vs. April 1, 2018 - March 31, 2019)



Note: 90th percentile = the number of days/hours it takes to complete the surgery, exam or visit for nine out of 10 patients.
Data Source: Access to Care, Cancer Care Ontario

Alternate Level of Care (ALC) Performance - Acute Cases



Top 6 Inpatient and Outpatient Surgery Cases by Major Surgical Category

Major Surgical Category	FY 2017/18	FY 2018/19
Diseases and Disorders of the Digestive System (Includes colonoscopies, gastroscopies, hernia repairs, intestinal resections with and without colostomy, appendectomy)	2263	2421
Diseases and Disorders of the Eye (includes cataract removal/lens insertion)	1271	1322
Diseases and Disorders of the Kidney, Genitourinary Tract, Male and Female Reproductive System (includes hysterectomy, endometrial ablation and other gynecological interventions)	249	261
Diseases and Disorders of the Ear, Nose, Mouth and Throat (includes tonsillectomy/adenoidectomy, myringotomy with tubes, major and minor ear interventions and dental surgery)	371	243*
Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast (includes mastectomy)	220	192
Diseases and Disorders of the Hepatobiliary System and Pancreas (includes gall bladder removal)	163	188

*Due to temporary vacancy of ENT surgeon.

FINANCIAL HIGHLIGHTS



NHH finished the year with a net surplus of \$0.73 Million, 1% of total revenues, due in part to the cost savings initiatives and base funding adjustments from the Ministry of Health and Long-Term Care (MOHLTC). Anticipating the need for a significant future investment in a transformational Clinical Information System, the Board approved to set aside \$0.5 Million from the surplus for this investment.

Higher than planned patient volumes during the 2018/19 fiscal year created financial pressures which were alleviated through one-time funding to support additional beds and to offset operating pressures.

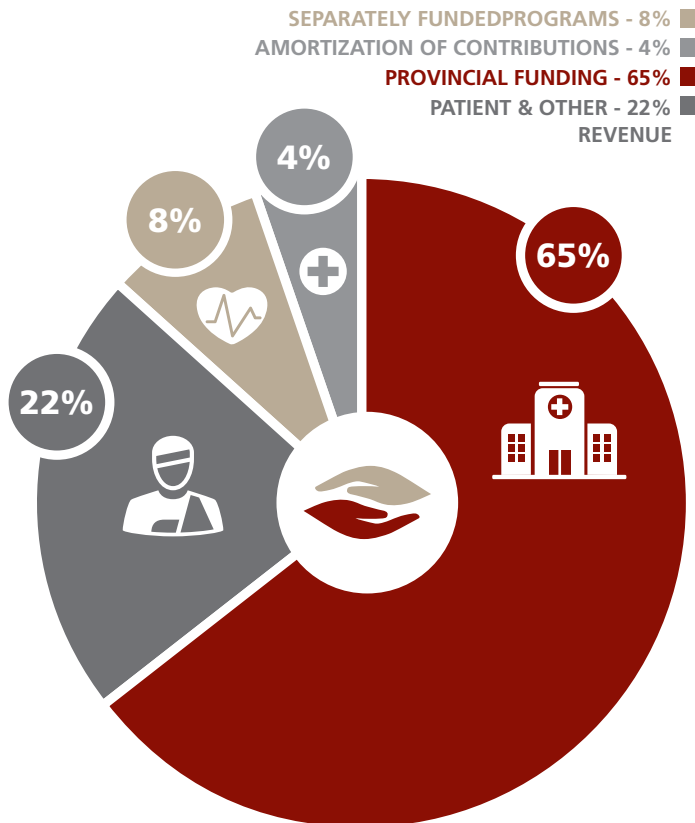
NHH saw increased patient activity throughout the year, with the number of open beds exceeding the number of funded beds 94% of the time.

Acute care hospitals are designed for people with urgent or acute health care needs. In recent years, however, acute care hospitals have become a less-than-ideal 'home' for those awaiting an alternate level of care (ALC)—in most cases, a long-term care bed—as the need for these spaces has exceeded the current system's capacity.

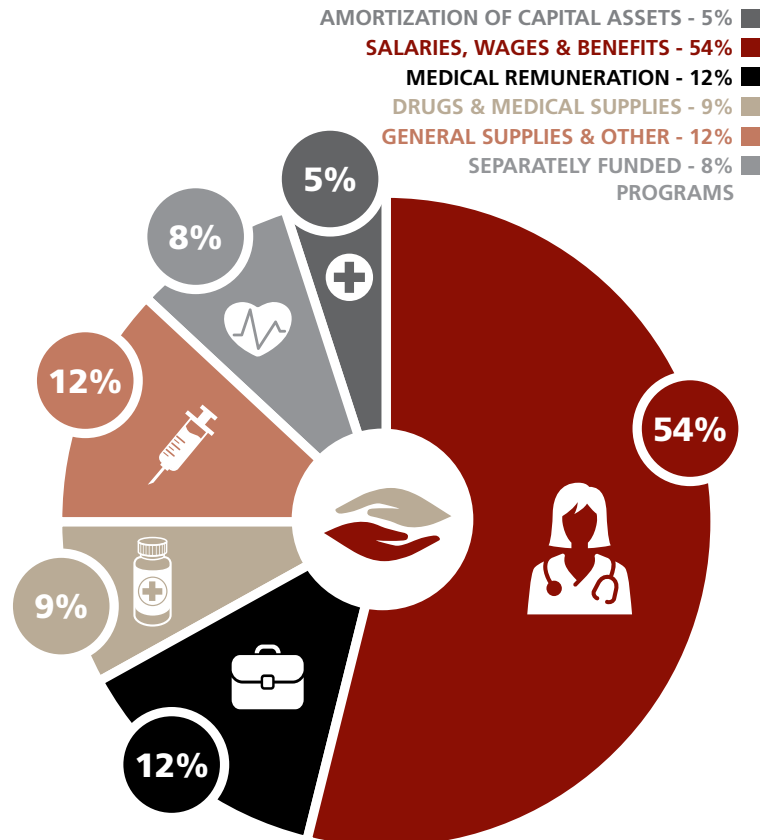
Acute ALC days continually increased at NHH this year, rising as high as 29.5% in Q4 and remaining significantly above our target. Additional long-term care beds are planned for Northumberland County, but these will not be complete for several years. In the meantime, we sustain actions within our control to minimize ALC pressures. With MOHLTC support, NHH introduced in February 2019 a temporary transitional care option with two local retirement homes. Funding for 8 NHH ALC patients was received and continues, permitting eligible ALC patients to await long-term care outside the hospital setting and thereby freeing up necessary acute care capacity at NHH while longer-term solutions to provincial ALC pressures are developed.

Going into 2019/20 NHH is in a much stronger financial position. The hospital will continue to work cooperatively with its partners within the community and the MOHLTC in an ongoing effort to achieve long-term financial sustainability while also maintaining, or enhancing, vital patient care services for the benefit of the patients we are honoured to serve.

2018/19 OPERATING REVENUE \$76,000,860



2018/19 OPERATING EXPENSES \$75,267,518





CONDENSED STATEMENT OF FINANCIAL POSITION

As at March 31	2019	2018
ASSETS		
Current assets	\$8,732,236	\$9,180,625
Capital assets	\$44,683,504	\$43,847,029
	\$53,415,740	\$53,027,654
LIABILITIES & DEFERRED CAPITAL CONTRIBUTIONS		
Current liabilities	\$9,378,222	\$9,556,645
Long-term liabilities	\$4,734,345	\$4,662,400
Deferred capital contributions	\$43,015,612	\$43,254,390
	\$57,128,179	\$57,473,435
Net Assets (Deficiency)	(\$3,712,439)	(\$4,445,781)
	\$53,415,740	\$53,027,654



CONDENSED STATEMENT OF REVENUE AND EXPENSES

For the year ended March 31	2019	2018
REVENUE		
Provincial funding	\$49,534,220	\$46,296,986
Separately funded programs	\$6,301,967	\$6,021,022
Patient and other revenue	\$16,794,558	\$16,000,276
Amortization of deferred capital contributions	\$3,370,115	\$3,481,631
	\$76,000,860	\$71,799,915
EXPENSES		
Salaries, wages and benefits	\$40,520,297	\$38,222,546
Medical remuneration	\$8,887,083	\$8,983,220
Drugs and medical supplies	\$6,681,315	\$5,521,361
General supplies and other	\$9,217,708	\$8,755,779
Separately funded programs	\$6,167,016	\$6,049,621
Amortization of capital assets	\$3,741,414	\$3,749,482
Restructuring activities	\$52,685	\$191,803
	\$75,267,518	\$71,473,812
Excess of revenue over expenses	\$733,342	\$326,103

The condensed financial highlights are taken from the 2019 audited financial statements dated June 13, 2019. The audit was performed by KPMG LLP, Chartered Accountants. Copies of the audited financial statements are available on our website at www.nhh.ca or in hardcopy on request.



Individual and group achievements demonstrating NHH values of integrity, quality, respect, compassion and teamwork are celebrated throughout the year. Shared here are some special highlights from 2018/19.

HEALING HANDS AWARDS, 2018



Healing Hands Awards, 2018 – Recognized in October, 2018, in conjunction with NHH’s 15th anniversary celebrations, our 2018 award recipients are (L-R): Karen Walsh, Food Service Worker; Valerie Rumball, Admitting Clerk; Wendy Scott, Senior Medical Radiation Technologist, Mammography; Rachel Chard, Case Manager, Community Mental Health; Mariette Pelletier, Registered Nurse, Medical/Surgical Inpatient Unit; and Dr. Peter Barnett, physician and Department Chief, Emergency Department.

DEDICATED PHYSICIAN SUPPORT



Dr. Jeff Knackstedt, 25-year pin recipient – Originally a GP-Anesthetist and, more recently, a key lead for NHH’s hospitalist program, which provides in-patient care to patients whose family physicians do not have local hospital privileges, Dr. Jeff Knackstedt has been a strong supporter of NHH and the local delivery of quality patient care. Also recognized this year for 25 years of service are Drs Frank and Paul Marrocco, while Dr. Mark Azzopardi was recognized for 30 years of service and Drs. Frank Hassard and Oluoyomi Sobowale were each thanked for a decade of care. Thank you to all NHH physicians for the continued support.

OUTSTANDING LEADERSHIP AWARD, 2019



Leanne Simmons (above), Social Worker, Community Mental Health, was the recipient of our Outstanding Leadership Award.

OUTSTANDING INNOVATION AWARD, 2019



Inpatient Rehabilitation RN Monique Korzeniewicz (above), was the recipient of the Outstanding Leadership Award.

10-YEAR PIN RECIPIENTS





15-YEAR PIN RECIPIENTS



20-YEAR PIN RECIPIENTS



Three individuals received 20-year pins this year: Susan Delong, Diagnostic Imaging Clerk, shown above with program director Ian Moffat, as well as David Comeau (RPN) and Deanna Jones (OR Tech/RPN).

25-YEAR PIN RECIPIENTS



(L-R) Rebecca Rutherford, RN and NHH Telemedicine coordinator, and Doris Chin Brunton, Diagnostic Imaging Clerk.

30-YEAR PIN RECIPIENTS



35-YEAR PIN RECIPIENT



Pam Oakman received the pin for NHH's longest-serving staff member at the 2019 Award ceremony this spring. A clerk in the Finance Department, Pam has worked in many areas of the hospital throughout her career.

COMMUNITY PARTNERSHIPS



Thanks to a partnership with Alderville First Nation, Alderville Health and Social Services and the Central East Regional Cancer Program, NHH introduced the first annual National Indigenous Peoples Day Celebration at the hospital in June, 2018. An opportunity for staff, physicians and volunteers to learn more about Indigenous traditions, the event included territorial recognition, ceremonial drumming, a smudge ceremony and education.



A new partnership between NHH's Community Mental Health Service, Rebound Child and Youth Services (RCYS) and Northumberland Community Counselling Centre (NCCC) enabled the launch of a new youth walk-in counselling option this year, for children ages 7 and up. Opened in March, 2019, the walk-in is accessed through a centralized intake location at NHH's Community Mental Health offices at 1011 Elgin Street West, Suite 200, Cobourg. Adult walk-in counselling is available as well. See www.mentalhealthwalkinclinic.ca to learn more.



NHH Foundation Board Chair Tyler Hathway with Catherine Lennox, receiving a cheque from the estate of Cheryl Lennox.



David Piccini, Northumberland-Peterborough South MPP (centre), with members of NHH's Community Mental Health team and local police services during a ride-along demonstrating Northumberland's mobile Mental Health Engagement & Response Team (M-HEART), a partnership bringing justice and health care teams together for better street-level care.



St. John Therapy Dog Rio poses with Catrina at a hospital visit in February 2018. Therapy dogs are regular visitors at NHH, bringing smiles to the faces of patients, visitors and staff alike.



Dr. Mukesh Bhargava speaking at one of 10 Northumberland PACE community conversations held this past year. Now a partnership between NHH, the NHH Foundation, the Northumberland Family Health Team, the Community Health Centres of Northumberland, internal medicine specialists IMCare and Loyalist College, PACE is a monthly TED Talks-inspired speakers' series hosted in both Port Hope and Cobourg to explore timely health and wellness topics. See www.pacetalks.com for details.

NHH's Patient and Family Advisory Council (PFAC) continued to grow in 2018/19, expanding the inclusion of the patient and caregiver voice in decision making throughout the hospital.

Now in its third year, and comprised of 10 volunteers and two staff co-facilitators, the NHH PFAC is supporting the enhancement of care at NHH through a mix of group, individual and project team work. PFAC advisors are active at NHH in three ways:

1. On Quality and Practice Committee (QPCs), as equal partners with staff/physicians on all core NHH QPCs
2. Through departmental assignments (for example, supporting the HR department with selected interviews)
3. Through special quality projects (corporate, QPC and/or program driven, including some with community partners)

One key quality project that would not have been possible without PFAC input in the last year has been the introduction and expansion of real time patient satisfaction surveys—a key effort to enhance patient experience, by seeking a better understanding of what our patient's value most.



By using a co-design model with the PFAC, NHH developed patient value statements for both the Emergency Department and Inpatient care. These statements then helped to guide the development of questions for new real-time patient experience surveys that are now conducted randomly at NHH to monitor how we are performing against patient expectations and, most important, what corrective actions we can put in place—quickly—if required.

PFAC volunteers:

- Helped co-design the questionnaires
- Help to conduct the actual surveys with patients
- Monitor results/actions and offer proposals to improve patient satisfaction levels at QPC and quarterly meetings

Shown at left are the value statements developed, and outcomes following the first year of this work.

For more information on NHH's Patient and Family Advisory Council, please see their recently updated webpages under the Patients tab at nhh.ca

Patient Value Statement	
 <p>Emergency Department</p> <p>"Given my medical needs that brought me to the Emergency Department, I would be very satisfied to have been (1) treated with respect, courtesy, and compassion, (2) processed without undue delays, and (3) kept fully informed of expectancies throughout my journey. In addition I value amenities available for my comfort during my ED patient experience." – PFAC advisors</p>	 <p>Inpatient care</p> <p>"Given my medical condition and needs, I would be very satisfied to have had (1) reasonable and timely access to comfortable, well equipped accommodations, (2) responsive and truly caring nurses, physicians and staff, and (3) kept well informed about any tests, procedures, results, care plans and other relevant matters for my recovery and health, so (4) I can go home." – PFAC advisors</p>
NHH Performance vs. Ontario Average (July 2018 to March 2019)	
<p>How satisfied are you with the overall care you received while in hospital?</p> <ul style="list-style-type: none"> • NHH real-time survey results*: 76% • Ontario average**: 43% 	<p>How satisfied are you with the overall care you received while in hospital?</p> <ul style="list-style-type: none"> • NHH real-time survey results: 88% • Ontario average: 63%
<p>Would you speak positively of your experience in the department to your family and friends?</p> <ul style="list-style-type: none"> • NHH real-time survey results: 55% • Ontario average: 42% 	<p>Would you speak positively of your experience in the department to your family and friends?</p> <ul style="list-style-type: none"> • NHH real-time survey results: 83% • Ontario Average: 65%

* represents 'top box' survey responses to NHH real time surveys, reflecting patients who said this was their experience "always".
 ** Ontario average drawn from NRC Health patient survey results, conducted post-discharge across Ontario hospitals.



EXCEPTIONAL COMMUNITY SUPPORT



The NHH Foundation's 2018 Light Up A Life Campaign raised a record-breaking \$191,000 for surgical scopes. Campaign Chair, Dr. Alison Tilley, accepts a donation from Ian Bowen.



The first-ever Colour Run for Care was held in Port Hope during July. Hundreds of participants helped raise over \$5,000. Featured above is a team from the Maternal Child Care program.



A fun night out! Sip'N Shop, sponsored by Lindsay Edwards, drew a crowd of over 200 people who sipped, shopped and danced the night away.



The Little Treasure Shop (LTS) is a thriving gift shop operated by the NHH Auxiliary in the heart of the hospital. In 2018/19, LTS was able to contribute \$80,000 to NHH's capital equipment needs, thanks to the community's support-almost half of the NHH Auxiliary's annual fundraising commitment to NHH!



Wine & Ale in the Park raised a record-breaking \$20,000. Pictured are Shelley Ferguson, Eric Sturzenegger and Angie Turpin.



Wine & Ale in the Park Signature Sponsor – Tony Pulla and Jan Rosamond.



Rosamelia Pareja, Brad Willcocks, Dr. Linda Cole and Mario Pareja enjoy themselves during the NHH Foundation's 2018 New York, New York gala ball. The gala raised over \$270,000.

There are many ways to stay connected with your hospital...

- Visit our website, nhh.ca
- Subscribe to our community e-newsletter, In Touch (go to nhh.ca and follow the prompts on the home page to sign up for this monthly email)
- Follow us on Twitter @NorHillsHosp or LinkedIn
- Email us through our Contact Us service (info@nhh.ca or direct via nhh.ca)
- Call the NHH Public Affairs office directly at 905-377-7757
- Volunteer (see p. 26 for details)

Thanks for your interest, your ideas and your feedback!



The Northumberland Hills Hospital Foundation has once again had a tremendous year! As I approach the end of my term as Chair of the Foundation Board of Directors, I want to recognize our community and share thanks with everyone who has helped us exceed our fundraising goals.

The Foundation ran many outstanding events throughout the year, which couldn't be successful without the great amount of time and effort put forward by the many volunteers who come out to help. The 18th annual Hospital Gala again set a new record for fundraising (\$270,000), led by a team of doctors who initiated the bidding for the Fund Me auction, which this year raised a record \$122,700 to help replace the nurse call system. Several other initiatives also set new records, including our annual Light up a Life Campaign, raising \$190,000 for surgical scopes.

At the end of our fiscal year of 2018/2019, we had generated revenues of \$3.4 million, greatly exceeding our budgeted goal of \$2.3 million. While we are able to raise a significant amount of funds through both Foundation led events and the generosity of 3rd party events, we are only able to attain this level of fund-raising with the generosity of leadership gifts of \$200,000 or more. This year we had 4 such gifts. With so many charitable choices in Northumberland County this proves our community has incredible capacity, and the desire to help ensure we have the best healthcare possible, close to home. We were able to provide NHH with \$3.1 million for capital needs that the government does not fund. Every single dollar we receive is an important dollar in supporting NHH. Thank you to each and every one of our donors!

This year we had two dates that allowed community members to see the equipment that our charitable dollars pay for. A behind-the-scenes tour and our Scrubbed-In event

showcased the incredible passion the doctors, nurses, and all staff at NHH have for providing care to our community, and their desire for even greater things. Thank you to the entire team for showcasing this!

There are tremendous opportunities for our hospital to continue to be leaders in healthcare and providers of the best care close to home. The Northumberland Hills Hospital Board and senior staff are doing outstanding work in identifying and prioritizing goals for the hospital's future all the while operating in a high pressure environment. Thank you to all of those Board members and the Senior Staff for the great work you do!

We have several Foundation Board members who are completing their terms this year. Louise Stevenson, Scott Fraser, and Jim Mills have all contributed greatly to the efforts of the Foundation, and have had a great impact on me in my role as chair. I welcome our new incoming members, and Jeff Gilmer to the position of Chair. I look forward to seeing his leadership contribute to the great future of our hospital. Thank you to all of our Board and committee members for the time and effort you contribute to the Foundation, and always with great joy!

In closing I must recognize the team that pulls everything together and makes our Foundation such a success. Every encounter with one of the Foundation staff starts with a smile and ends with a thank you. Your enthusiasm and drive to support the hospital and our community is truly the foundation of all of our fund-raising success. To Wendy, Natasha, Adrienne, and Rhonda, the biggest thank you for your tireless efforts!

*Tyler Hathway,
Chair, NHH Foundation*



NHH Auxiliary volunteers celebrated 95 years of effective and compassionate assistance to hospital, patients, visitors and staff in the fall of 2018.



On December 6, 2018, the NHH Auxiliary celebrated the 50th anniversary of their very successful thrift shop, Petticoat Lane.



In the fall of 2018 we, the NHH Auxiliary (NHH), celebrated! It was our 95th Anniversary in October and former President Gayle Metson organized a wonderful gathering and about 100 NHH volunteers and guests shared their stories of friends, colleagues and days gone by and present. Brian Driscoll created a truly memorable sideshow set to the music of the times which had toes tapping and smiles on all of our guests' faces. It was a wonderful celebration!

Along with the celebration this past year, there has also been change, not for the sake of change but because it was timely and needed. A very capable team of three Past Presidents was charged with the challenge of updating the Auxiliary constitution and by-laws. Our updated set of rules will allow us to work more efficiently and effectively. Thanks to Yvonne Green, Gayle Metson and Pat Page Hoisak for all of the time, concerted effort, and fine tuning needed to get this big job done.

The other big change which may be more noticeable than our constitution was the acquisition of our new volunteer uniforms. Same colour, new design. These were unveiled at the Auxiliary's Annual General Meeting this spring. There will be no new expense incurred by volunteers for the new look.

We have also taken on a new area of support in the form of real time patient experience surveys. These surveys, conducted by a mix of senior staff, Auxiliary and Patient and Family Advisory Council volunteers, have been successfully rolled out to the hospital Emergency Department and on the 2nd floor medical/surgical inpatient unit before patients return home. This gives a real time overview of how patients/families feel regarding the care and stay while at

NHH. If necessary, follow up is done by hospital staff.

Change of duties and added responsibilities on the second floor have allowed us to reorganize volunteer shifts based on the needs of patients and assistance to staff. Our Maternal/Child Care volunteer continues to deliver bonnets and certificates to NHH's newest arrivals.

We continue to hold steady with membership at approximately 325 active volunteers.

Many of our volunteers work in the fundraising sector of the Auxiliary and we are pleased to report that once again this year we have donated \$200,000 for the purchase of equipment in support of care close to home. Thanks to the Crafters for lovingly creating handmade items for the whole family, The Little Treasure Shop for the beautiful array of tempting fashions and gift items, as well as Petticoat Lane with their never ending and incredible selection of previously loved household goods and clothing and so much more. Last but not least, a special thank you to the Local Cobourg Bridge Group who donate to the NHH Auxiliary every year. These activities, along with the sale of flowers last fall (initiated on our behalf by the late Bill Patchett) enabled us to successfully raise the funds referenced above.

The NHH Auxiliary Petticoat Lane Shop will continue to be in the same location on Munroe Street in Cobourg. A new lease was signed earlier this spring and we look forward to giving the store a bit of a change and refresh. Watch for more sales from the Petticoat Lane team in the year ahead!

*Marg Hilborn,
President NHH Auxiliary*



**NORTHUMBERLAND HILLS
HOSPITAL FOUNDATION**
Better Care for Our Community

**YOUR GENEROSITY HAS BEEN INSTRUMENTAL
IN IMPROVING PATIENT CARE**

In the past year the NHH Foundation contributed **\$3,148,343** to purchase lifesaving medical equipment to help keep quality patient care close to home. A contribution of this magnitude is outstanding for a community our size and speaks to the level of commitment and interest donors have in helping their family, friends and neighbours at a time of their greatest need. Here's a look of some of the highlights made possible by local donations.



**New Surgical Scopes -
\$178,000**



New Mammography Unit - \$530,000



**Sara Flex Patient Lift -
\$3,000**



New Fluoroscopy Unit - \$903,971



Neonatal Warmer - \$23,000



Twelve local directors and six “ex officio” members of NHH’s skills-based Board are responsible for developing policy, planning for the future and monitoring operational and financial performance. Direct community participation in the governance of NHH—and succession planning for the Board—is further supported by Community members who serve on specific Board committees. For more information on the NHH Board, including biographies of current members, agendas of upcoming meetings and meeting minutes, please see nhh.ca.

NORTHUMBERLAND HILLS HOSPITAL BOARD OF DIRECTORS, 2018/19



From L-R, front row:

Starr Olsen; Susan Walsh, VP, Patient Services and Chief Nursing Executive; Elizabeth Selby (Chair); Pam Went (First Vice Chair); and, Dr. Mukesh Bhargava (Chief of Staff).

Second row:

Catharine Tozer; Bob Carman; Lynda Kay (Second Vice Chair); Ann Logan; and, Linda Davis (President and CEO). Back row: Tyler Hathway (Foundation Board Chair); Tom McLean; Kai Liu; David Slater; and, Michael McAllister.

Missing from photo:

Cyndi Gilmer; Marg Hilborn (President, NHH Auxiliary); Dr. Matthew Vaughan (President, Medical Staff Association); and, Dr. Kaes Al-Ali (Vice President, Medical Staff Association).

NORTHUMBERLAND HILLS HOSPITAL COMMUNITY MEMBERS, 2018/19

As part of its commitment to public input on Board decision-making process, and as a method of succession planning, NHH regularly recruits community members to sit on its Board committees. Community Members are considered active participants with voting privileges at committee meetings and may be subsequently appointed to fill a vacant position on the Board of Directors. The selection of Directors is governed by the Board’s policies, procedures and bylaws in order to meet its governance needs for a skills-based Board. In 2018/19, the following individuals served as Community Members on the NHH Board:

Don Morrison
Bree Nixon
Kendra Simmons

For more on the NHH Board, please see the Accountability tab on nhh.ca



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INTERESTED IN GETTING INVOLVED IN YOUR HOSPITAL?

Start a conversation about volunteering opportunities at NHH. There are many ways to get involved, from joining the NHH Auxiliary to lending a hand with a Foundation event or supporting the governance of the hospital through the Board. Volunteering has been proven to benefit the donor as much as the recipient!



NHH Auxiliary

For full details, including an application form, see the Volunteers tab on nhh.ca or call 905-372-6811 ext. 4630



NHH Board of Directors

The next call for interest in the NHH Board's Community Committee membership is planned for the fall of 2019. Watch nhh.ca for details or contact the NHH Board Nominating Committee via Stacy Connell, sconnell@nhh.ca, to learn more about forthcoming opportunities on the skills-based Board and the process for expressing interest.



NHH Patient and Family Advisory Council

Now in its third year, the Patient and Family Advisory Council is one more opportunity to get involved with your hospital. Expressions of interest are now accepted at any time, and eligible individuals will be matched with opportunities as they become available that best fit their interest and past experience. Please see the dedicated Patient and Family Advisory Council page on nhh.ca or contact Jennifer Gillard, Senior Director, Public Affairs and Strategic Partnership, at jgillard@nhh.ca or 905-377-7757 to learn more.



NHH Foundation

For full details on the Foundation's many activities and events, go to nhhfoundation.ca; to speak to someone about volunteer opportunities, call the Foundation office at 905-372-6811, ext. 3066



Spiritual Care Advisors

Call Karen Truter, 905-372-5811, ext. 3212



St. John's Therapy Dog Program

Call Amy Turcotte, Branch Administrator, St. John Ambulance Northumberland, 905-372-0564 or email her at amy.turcotte@sja.ca

WILLIAM R. PATCHETT
JANUARY 24, 1939 – MAY 10, 2019



Fondly remembered for his generous and long-standing support to our community and hospital, and sadly missed. Bill's Garden lives on at NHH, and continues to grow, thanks to his leadership.

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LOOKING FOR A FAMILY DOCTOR?

HEALTH CARE CONNECT

The Province of Ontario provides a centralized service for connecting patients with family doctors who are currently accepting patients. Supported by the Ministry of Health and Long-Term Care, the service is called **Health Care Connect**.

Call at 1-800-445-1822 or visit Ontario.ca/healthcareconnect to register.



For further information on local opportunities contact the Northumberland Family Health Team (call 289-252-2139 or visit nfht.ca), the Community Health Centres of Northumberland (call 905-885-2626 or visit porthopechc.ca) or the physicians' offices directly (see your local Yellow Pages under Physicians).



Our Services

Primary Care

We provide a holistic health assessment and primary health care services such as immunization, check-ups, family planning assistance and on-going medical care. Our doctors and nurse practitioners see clients who experience a particular episode of illness or injury (having the flu or spraining an ankle), and also work with clients who are dealing with on-going chronic illness such as diabetes. Staff try to not only treat the illness or condition but to educate the clients as well, to encourage self-care for the given condition and to provide information to promote health and wellbeing. Our health care staff will refer and work with specialists and in-home or hospital care providers as needed by the client.

Dental Services

The PHNCHC believes that good oral health is an important part of good overall health.

Our dental team which includes dentists, hygienists and dental assistants provide dental care 5 days per week to those who cannot access care due to financial hardship such as those receiving Ontario Works, Ontario Disability Support and those with a low annual income who do not have access to dental benefits.

Diabetes Education Centre (DEC)

Staffed by registered nurses and dietitians who are all Certified Diabetes Educators. Our services are for adults with Type 1 and Type 2 diabetes or those who are at risk of developing diabetes. Clients may self-refer and our staff will work collaboratively with referring physicians and primary care providers. Individual and small group counselling is available as well as Diabetes Cooking classes. Services are provided in Port Hope, Cobourg and Colborne.

GAIN Outreach Team

GAIN is a network of coordinated health care services and partners working together to strengthen the supports and capacity of frail older adults. The GAIN program is for frail older adults living at home or in a retirement residence with multiple complex medical problems including one or more of the following:

- Cognitive impairment
- Falls or risk of falls
- Incontinence
- Decreased function
- Impaired mobility
- Multiple medications

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