

2019/20  
**ANNUAL REPORT**  
TO THE COMMUNITY



NORTHUMBERLAND HILLS  
HOSPITAL



1000 DePalma Drive, Cobourg, Ontario, K9A 5W6  
905.372.6811 | [nhh.ca](http://nhh.ca) | [info@nhh.ca](mailto:info@nhh.ca)

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# MESSAGE FROM THE CHAIR OF THE BOARD

It is hard to believe that 12 months have passed since I became NHH Board Chair. The 2019/20 year was marked by several significant changes.... As part of the transformation of health care in Ontario, the Ministry of Health introduced Ontario Health; Northumberland's application to form an Ontario Health Team received approval; and, of course, our lives, our families, and our Hospital were confronted with a pandemic for the first time in our lives.

The first three quarters of the fiscal year saw strong operational and financial performance and a solid risk management plan. Being in such a strong position is, I'm sure, one of the reasons that NHH weathered and is weathering the following months of COVID-19 so effectively. An equally important reason is the calibre of the leaders and managers that we are so fortunate to have. President and CEO Linda Davis, Chief of Staff Dr. Mukesh Bhargava and the rest of the Senior Management Team brought a wealth of experience and leadership ability to the unprecedented situation and they are supported by directors and managers who work behind the scenes in collaboration with medical practitioners and staff to keep themselves and their patients safe while continuing to provide exceptional patient care.

I fervently wish that the threat of COVID-19 was behind us but it isn't and we don't know when our lives and families and our Hospital will return to a new normal. Despite this uncertainty the community can count on NHH to be ready to help when its services are needed and, I believe, to emerge even stronger from this challenge. To that end, the four priorities of our Strategic Plan (Quality and Safety, Great Place to Work and Volunteer, Collaborative Community Partnerships and Operational Excellence) continue to guide us well.

Quality and safety has, perhaps, never been more top of mind. Our Board and committee meetings continue to receive progressive evidence of the team's work to enhance continuous quality improvement through the development of an enhanced corporate dashboard and quality improvement plan.

Likewise, the Board has witnessed progress in the renewal of NHH's professional practice model, grounded in a shared leadership approach well matched with NHH's culture, and the intentional investment in staff and management education,



development and succession planning, including cultural sensitivity.

Community partnerships have been further strengthened this year in many areas, both in terms of expanded relationships with local and regional partners, as evidenced by the Ontario Health Team of Northumberland, but also at a grass roots level, interacting on a one-on-one basis with the patients and caregivers we serve, through events like our fall open house and PACE conversations, our Patient and Family Advisory Council, which continued to grow and expand its input into quality improvement and experience, and inside our organization, with the increased collaboration between the Hospital, the NHH Foundation and the NHH Auxiliary.

With the completion of our four-year Hospital Improvement Plan requirements, and the efficiencies therein, operational excellence, as detailed in the reports from our President and CEO, and Chief of Staff, remains a priority at NHH. While there will be short-term challenges, the legacy of COVID-19 may well be more creative and innovative uses of our physical, technological and human resources...necessity often being the mother of invention.

In closing, I would like to say to my colleagues, the Directors and Community Members of the NHH Board: you bring exceptional skills and experience to the table and it is an honour to work with you. Thank you for your contributions over this past unusual year.

**Chair, NHH Board of Directors,  
Pam Went**

# MESSAGE FROM THE PRESIDENT AND CEO

Healthcare and hospital activity rarely stand still, and the past year has been no exception—in fact, in 2019/20 NHH has seen several unprecedented events. In November NHH received an historic in-year funding injection of \$3.79M. The funding was proof of the government’s commitment to fix inequities that have long challenged NHH and many medium-sized hospitals. This was a truly memorable day for the Hospital as it finally opened the door to long-term stability for our operations and the opportunity to protect and better plan for the core service needs in this growing community.

One might ask: so what can top that? Well, on March 11<sup>th</sup> 2020 a once-in-a century journey began when the World Health Organization declared COVID-19 a global pandemic. The next weeks, and now months, have been spent ensuring the Hospital was prepared, with health care partners in the community, to support a potential influx of COVID-19 positive patients. I am extremely grateful for the amazing work done by NHH staff and physicians who literally overnight put in place the structures and processes to support NHH’s COVID-19 Assessment Centre and, just a few short weeks after that, developed a pandemic patient pathway which painstakingly mapped out safe pathways to support the needs of patients who may have contracted the virus and those who rely on us for other urgent services while also keeping our team safe. The work done from March to December 2019 to strengthen NHH’s relationships across health and social care sectors and, together, form the Ontario Health Team of Northumberland—one of the province’s first Ontario Health Teams (OHTs)—proved to be solid ground on which NHH and our OHT-N partners could come together to quickly support local patient needs during the very unusual times created by the pandemic.

Weekly conference calls with Public Health and members of the OHT-N provided channels for the sharing of supplies, resources, information and support. These conversations also led NHH to proactively reach out to the broader network of long-term care and retirement residences in our area to offer assistance which in turn developed into opportunities to support COVID-19 testing and infection and prevention and control within many of these homes. Although there is little positive about a pandemic, it did provide the opportunity to strengthen the development of fruitful partnerships across sectors.



The OHT-N proved to be the perfect vehicle through which this collaboration could occur. I thank the province for granting us approval to proceed, and all the health care partners across Northumberland County—including patients and caregivers—who have committed to the OHT model and continue to come together with a common commitment to improve patient, caregiver and provider experience; improve health outcomes and, ultimately, improve value to this County.

Interspersed with these major developments, the Hospital strained to meet the needs of rising inpatient volumes and high numbers of alternate level of care (ALC) patients, particularly in the first three quarters of the year. Fortunately, as a direct result of the injection of funding noted above, we were able to redistribute medical-surgical inpatient beds across both 2B and 2A units. In 2016 NHH had made the difficult decision to consolidate medical/surgical care onto 2B in order to gain needed efficiencies. As patient volumes surged, capacity swelled high above what was intended, causing challenges for patients, families and staff. With the 2019 increase in funding we were able, in early 2020, to return 2B and 2A medical/surgical units to appropriate sizes—a critical move that eased hallway healthcare and, in hindsight, proved very beneficial in the context of COVID-19 as well. Ministry of Health support for up to eight ALC patients waiting for long-term care to pass this time in a local retirement home setting also reduced the

number of ALC patients waiting in Hospital, and freed up much needed capacity. We look forward to the continuation of this support in the year ahead.

Advancements in technology continued over the past year as well, enhancing patient care and organizational operations. Three examples are the introduction of a new nurse call system, bringing improvements to the communication between nursing staff and patients; a major upgrade to one of NHH's three surgical suites; and, the installation of an award-winning co-generation arrangement which will reduce NHH's energy costs by approximately \$120,000/year. All of these upgrades and more took many hours to implement and refine and I want to recognize the teams involved for their work. Certainly, surgical suite and nurse call upgrades could not have happened without the significant donor support coordinated by our hard working NHH Foundation, and this too must also be recognized.

Working with our Patient and Family Advisory Council and Quality and Practice Committees, we implemented further measures to monitor and enhance quality and patient satisfaction, including the development and completion of more than 1000 real-time patient satisfaction surveys, improved discharge instructions, ED wait time enhancements and – with OHT-N partners – planning for Northumberland's first cross-sector patient and family advisory body.

The current pandemic has highlighted some of the weaknesses within our health and social care infrastructure. It has also highlighted the amazing support NHH has from this community. There are so many examples of acts of kindness and generous donations that have been provided to staff and physicians at NHH this past year. It is with deep appreciation that I say thank you to each and every one of you for all the support you have provided. We are in this together and together we will get through.

President and CEO,  
Linda Davis

## **HISTORIC IN-YEAR FUNDING ANNOUNCEMENT, \$3.79 MILLION, NOVEMBER 1, 2019**



(L-R) Penny Baird, RN, Charge Nurse, 2B Medical/Surgical Unit; David Piccini, MPP for Northumberland-Peterborough South; Dr. Mukesh Bhargava, Chief of Staff; Linda Davis, President and CEO

# MESSAGE FROM THE CHIEF OF STAFF

What can we say about 2019/20? A few short months ago, as the fiscal year drew to a close, we had begun reflecting on the decade that passed and the new decade that we were going to be in. In mid-March 2020, however, our organization went into full pandemic mode with COVID-19 consuming our normal day-to-day operations.

The pandemic challenged, frustrated, and—in many ways—strengthened not only our hospital teams, but our community as a whole. Opportunities presented themselves that might not have otherwise. Relationships strengthened. Our physicians and staff were challenged to "plan for the worst – while hoping for the best" and they did exactly that. The teams navigated uncharted waters under extreme pressures and uncertainty – not ever really knowing when and if the tide was going to change. To say that I am extremely thankful for my colleagues and their clinical and administrative expertise would be an understatement...to say that I am truly humbled and incredibly blessed, **would say it all.**

I also learned a great deal about how supportive, kind and generous our community is, with all the appreciation, donations and support. Northumberland truly embraced the statement that "We are all in this together," and, I believe, when the pandemic is finally behind us, we will emerge stronger as a result of that local collaborative spirit.

## Highlights for 2019/20 include the following:

- ◆ Strengthening of quality processes across all departments through quality dashboards
- ◆ Enhancing team and inter-departmental collaboration on multiple clinical (quality) efficiencies throughout the year
- ◆ Increasing local access to specialty services, focusing on ear nose and throat, wound care and virtual offerings through our Ontario Telemedicine Network clinic
- ◆ Improving opportunities for medical staff connections through offerings of mortality and morbidity (M&M) rounds, support groups, morning and evening socials and a revitalization of the medical director lounge
- ◆ Reviewing needs assessment for enhancing clinical space (onsite and off)



- ◆ Significantly increasing physician engagement and participation through the introduction of efficient survey tools to gather provider feedback and contributions
- ◆ Continuous review of medical human resource sustainability plans by Department Chiefs to ensure a strong and sustainable workforce
- ◆ Medical staff development and implementation of a team approach for rounding at the start of the pandemic to build resilience and decrease exposure

Our region's reopening of the hospital services paused at the start of the pandemic has now begun, following the province's approval. Catching up has started and will continue for a bit. We will take a steady, staged approach to this, as we must, and readjust if required. My aim is to learn from the experience and galvanize Innovation and change where appropriate in 2020/21.

Chief of Staff,  
Dr. Mukesh Bhargava

# LOCAL GOVERNANCE BOARD OF DIRECTORS 2019/20



**From L-R, front row:** Marg Hilborn\* (President, NHH Auxiliary); Starr Olsen; Lynda Kay (First Vice Chair); Susan Walsh\* (VP, Patient Services and Chief Nursing Executive); Pam Went (Chair); Elizabeth Selby; Dr. Mukesh Bhargava\* (Chief of Staff).

**Second row:** Dave Slater (Second Vice Chair); Tyler Hathway\* (Past Chair, NHH Foundation Board); Tom McLean; Michael McAllister; Cyndi Gilmer; Ann Logan; Bob Carman; Dr. Fraser Cameron\* (President, Medical Staff Association); Linda Davis\* (President and CEO).

**Absent from photo:** Catharine Tozer; Dr. Sarah Karkhanechi\* (Vice President, Medical Staff Association) and Don Morrison.

\*= *ex officio* (appointed by virtue of their office)

## Community Members

Community members are also recruited regularly, through an open call for interest, to serve on NHH Board committees. Part of the Board's commitment to providing the opportunity for public input to the Board's decision-making processes, the role of Community Member is also an important method of Board succession planning. Committee 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. In 2019/20 the following Community Members served at NHH:

- ◆ Sharon Anderson
- ◆ Bree Nixon
- ◆ John Saunders
- ◆ Kendra Simmons
- ◆ Ross Stevenson

For more information on the NHH Board, please see the Accountability tab of our website, [www.nhh.ca](http://www.nhh.ca)

# FACTS AND FIGURES

## NHH DEPARTMENT CHIEFS:

DIAGNOSTIC IMAGING  
Dr. Joe Parravano

MENTAL HEALTH SERVICES  
Dr. Rajinder Momi

EMERGENCY  
Dr. Peter Barnett

PATHOLOGY  
Dr. Allison Collins

FAMILY PRACTICE  
Dr. Jeff Knackstedt

POST-ACUTE SPECIALTY SERVICES  
Dr. Wang Xi

MATERNAL CHILD  
Dr. Kathy Barnard-Thompson

SURGICAL SERVICES  
Dr. Andrew Stratford

MEDICINE  
Dr. Santosh Lakshmi

## 745 FULL AND PART-TIME STAFF

Full-time: 321

Part-time: 424

## 164 MEDICAL PRACTITIONERS

Physicians (including specialists): 146

Midwives: 18











## 400+ VOLUNTEERS

Board of Directors  
Board Community Committee Volunteers  
Auxiliary  
Foundation  
Spiritual Care  
Patient and Family Advisory Council

*\*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.*



# ACTIVITY SNAPSHOT

SERVICE ACTIVITY		April 1, 2018 to March 31, 2019	April 1, 2019 to March 31, 2020
	Emergency Department Visits	33,748	33,758
	Admissions	4,402	4,337
	Births	583	583
	Surgical Cases	5,116	5,255
	Dialysis Visits	7,364	7,966
	Chemotherapy Visits	8,349	8,797
	Out-Patient Ambulatory Care Clinic Visits (Excluding Mental Health)	19,032	19,312
	Diagnostic Imaging	65,979	63,737
	Community Mental Health		
	Individuals Served	4,669	4,888
	Face-to-Face Visits	18,412	18,434
	Telemedicine	1,612	1,237

\*Note: service activity in selected areas was negatively impacted by COVID-19 in March, 2020

# FINANCIAL HIGHLIGHTS

Northumberland Hills Hospital (NHH) finished the year in a positive position with a net surplus of \$1.7 Million, 2.2% of total revenues, due in part to cost savings initiatives and base and one-time funding adjustments from the Ministry of Health (MOH). Looking forward to the significant future investment required to support NHH's share of the regional procurement of a Clinical Information System, the Board granted approval to set aside \$1 Million from the surplus for this high priority investment.

Higher than planned patient volumes during the 2019/20 fiscal year created financial pressures which were alleviated through one-time funding to support additional beds and to offset operating pressures. The MOH provided In-year funding to support medium-sized hospitals and NHH received \$3.784 Million during the fiscal.

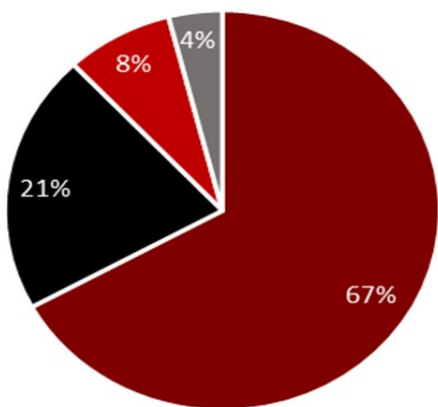
Acute alternative level of care (ALC) days have continued to increase over the years, averaging 26.94% for fiscal year 2019/20, and remaining significantly above the target set in NHH's Hospital Service Accountability Agreement (H-SAA) with the province.

Initiated in 2018/19, a MOH-supported transitional care collaboration with two local retirement homes continues to allow a small number of eligible patients to temporarily transition, with assistance, to a local retirement home setting while awaiting an opening in long-term care.

This has freed up some acute care capacity, but the lack of availability of both long-term care and home and community resources continues to result in high volumes of patients waiting in hospital to return home with supports.

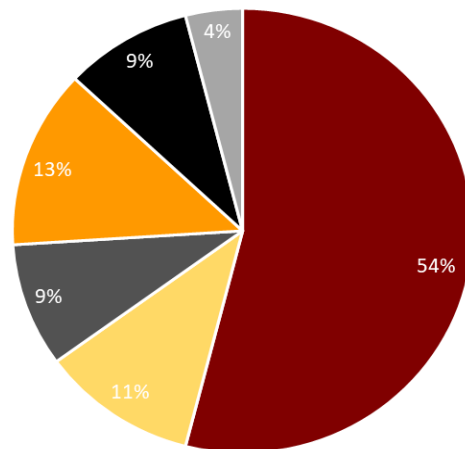
There are uncertainties going into fiscal year 2020/21 due the COVID-19 pandemic situation. NHH will continue to work cooperatively with its partners within the community and the MOH in an ongoing effort to achieve long-term financial sustainability while also maintaining, or enhancing, vital patient care services for the benefit of the community that we are honoured to serve.

**2019/20 Operating Revenue**  
**\$76,000,860**



- Provincial Funding 67%
- Patient & Other Revenue 21%
- Separately Funded Programs 8%
- Amortization of Contributions 4%

**2019/20 Operating Expenses**  
**\$75,267,518**



- Salaries, Wages & Benefits 54%
- Medical Remuneration 11%
- Drugs & Medical Supplies 9%
- General Supplies & Other 13%
- Separately Funded Programs 9%
- Amortization of Capital Assets 4%

# FINANCIAL STATEMENT HIGHLIGHTS

## CONDENSED STATEMENT OF FINANCIAL POSITION

As at March 31	2020	2019
<b>Assets</b>		
Current assets	\$12,045,175	\$ 8,732,236
Capital assets	44,372,984	44,683,504
	<b>56,418,159</b>	<b>53,415,740</b>
<b>Liabilities &amp; Deferred Capital Contributions</b>		
Current liabilities	11,368,590	\$ 9,378,222
Long-Term liabilities	5,274,888	4,734,345
Deferred capital contributions	41,788,191	43,015,612
	<b>58,431,669</b>	<b>57,128,179</b>
<b>Net Assets (Deficiency)</b>	<b>(2,013,510)</b>	<b>(3,712,439)</b>
	<b>\$56,418,159</b>	<b>\$53,415,740</b>

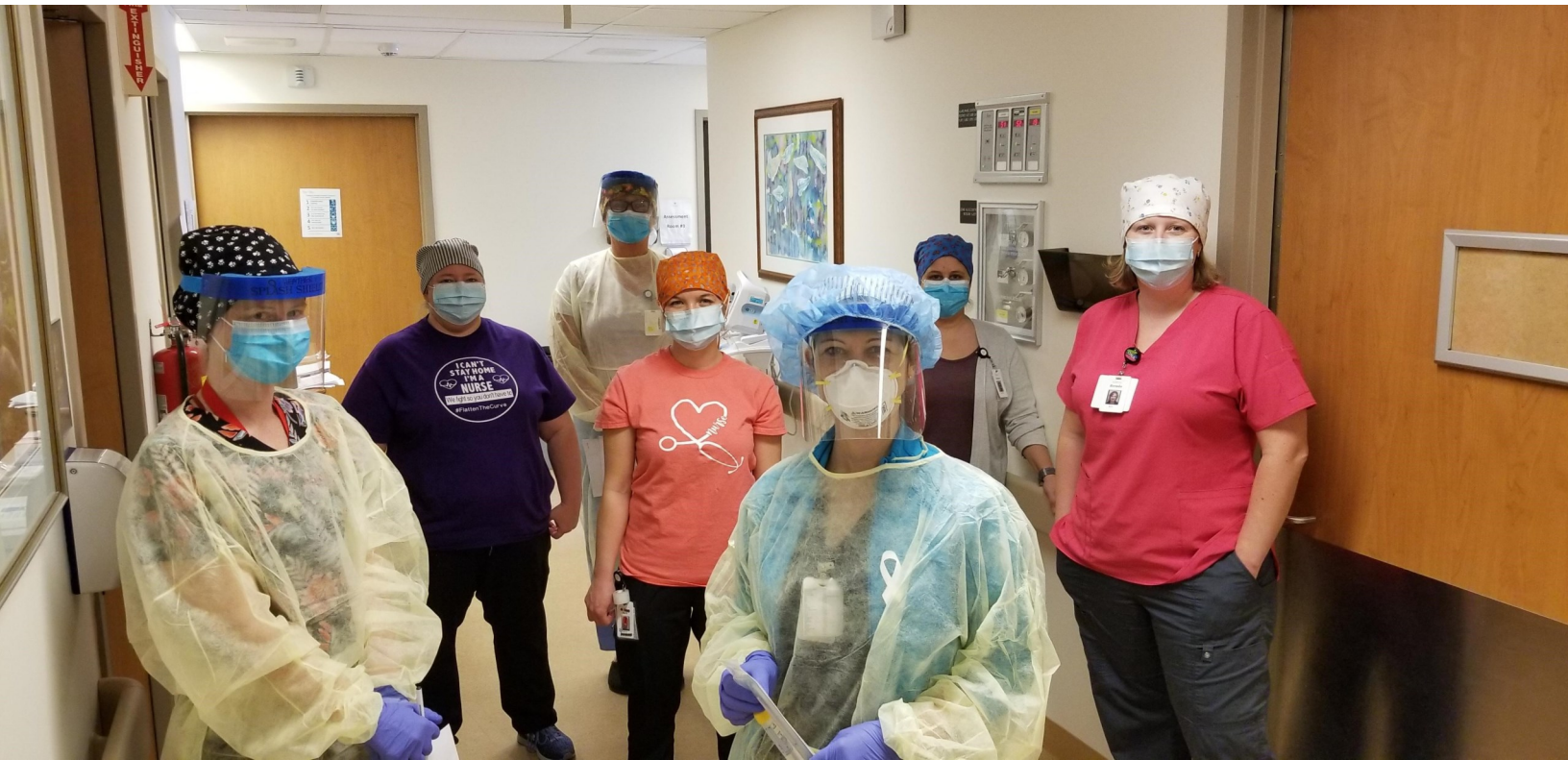
## CONDENSED STATEMENT OF REVENUE AND EXPENSES

For the year ended March 31	2020	2019
<b>Revenue</b>		
Provincial funding	\$53,853,184	\$49,534,220
Separately funded programs	6,368,068	6,301,967
Patient and other revenue	17,131,838	16,794,558
Amortization of deferred capital contributions	3,241,787	3,370,115
	<b>80,594,877</b>	<b>76,000,860</b>
<b>Expenses</b>		
Salaries, wages and benefits	42,836,274	40,520,297
Medical remuneration	8,589,319	8,887,083
Drugs and medical supplies	7,290,633	6,681,315
General supplies and other	10,109,134	9,217,708
Separately funded programs	6,720,499	6,167,016
Amortization of capital assets	3,350,089	3,741,414
Restructuring activities	-	52,685
	<b>78,895,948</b>	<b>75,267,518</b>
<b>Excess of revenue over expenses</b>	<b>\$ 1,698,929</b>	<b>\$ 733,342</b>

The condensed financial highlights are taken from the 2019 audited financial statements dated June 4, 2020. The audit was performed by KPMG LLP, Chartered Accountants. Copies of the audited financial statements are available on our website at [www.nhh.ca](http://www.nhh.ca) or in hardcopy on request.

# COVID-19 Assessment Centre

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The NHH COVID-19 Assessment Centre opened on Saturday, March 14, 2020, just days after the global pandemic was declared. As of June 16, 2020, the Centre has already supported over 6,162 virtual and in-person visits. Of those, swabs to test for COVID-19 have been completed on 3,782 individuals.

Demand for COVID-19 assessment is expected to continue through 2020/21. Relocated in June 2020 from its original home in the Ambulatory Care Clinic space to the former IM Care offices within the NHH Emergency Department, the NHH COVID-19 Assessment Centre is open daily from 8AM to 4PM. These hours of operation are subject to change. While walk-ins are accepted, it is strongly recommended that you call

ahead (905-377-7783) to schedule your assessment. This will help our team minimize wait times for all who need this service, and support physical distancing requirements. As always, if symptoms are severe, call 911 and alert the dispatcher to the potential concern regarding COVID-19 so they can be appropriately prepared.

For the latest news on COVID-19, please see our website, [www.nhh.ca/covid-19](http://www.nhh.ca/covid-19)