



NORTHUMBERLAND HILLS HOSPITAL

NEWS RELEASE – FOR IMMEDIATE RELEASE

NHH concludes 2015/16 fiscal year with \$848 operating surplus – 2016/17 budget still a work in progress as multi-year Hospital Improvement Plan implementation and discussions with Central East LHIN continue

NORTHUMBERLAND COUNTY, Monday, June 20th, 2016—Approximately 50 people attended the Annual General Meeting of Northumberland Hills Hospital (NHH) on Thursday, June 16th in the NHH Education Centre. Chaired by Jack Russell, NHH Board Chair, the audience included Board Directors, community committee volunteers, local health-care providers, staff, physicians, area residents, municipal leaders and media.

Bill Gerber, Chair of the Board's Finance and Audit Committee, shared the Financial Statements for the year ended March 31st, 2016, announcing that NHH concluded the year with a very small operating surplus of \$848. Gerber attributed three factors to the final result, namely: additional Ministry of Health and Long-Term Care funding thanks to NHH's continued efficiency and better-than-expected cost-per-weighted case; one-time funding assistance from the Central East Local Health Integration Network to support the implementation of the Hospital Improvement Plan (HIP); and a 10 per cent decrease in occupancy from the prior year, due largely to lower than expected surge activity.

While meeting its Hospital Service Accountability Agreement requirement of a balanced operating budget, NHH's small surplus fell far short of the \$648,867 operating surplus required to sustain eligibility under the province's Working Funds Deficit Initiative. As a result, NHH did not receive the third and final installment it would have been eligible for under this Initiative, which was a sum of \$422,900.

"Looking ahead to the current fiscal year (2016/17)," Gerber noted, "our hospital's efficiency rating has improved even more, resulting in further modest funding increases. In addition, the External Operational Review identified opportunities for revenue-generating and cost-reduction strategies in order to improve our financial position over the next four years. These recommendations have been incorporated into our Hospital Improvement Plan but, despite both the funding increase and the mitigation strategies, NHH is still, as yet, unable to deliver a balanced budget for the current fiscal year."

"NHH continues to work with our LHIN and the Ministry of Health and Long-Term Care to obtain long-term financial stability while maintaining or enhancing the patient care services and programs needed in our community," Gerber concluded.

KPMG's Vicki Leakey presented a positive Auditors' Report, commending the hospital's finance department for its hard work and proactive support during the annual audit. 2016 marks the final year of KPMG's latest five-year engagement, which commenced in 2011. Following an open, competitive procurement process held earlier this spring for the provision of NHH's financial audit services for the next five years—2016/17 through to 2020/21, with an option, at NHH's discretion, to renew for a further two years to fiscal 2022/23—members approved the recommendation of the

Finance and Audit Committee to again appoint KPMG as NHH's external auditors for fiscal year 2016/17.

In place of a keynote speaker the 2016 Annual Meeting featured, instead, a panel discussion between three of the NHH health-care professionals involved in the delivery of the hospital's innovative Assess and Restore pilot.

Hospitalist Dr. Jeff Knackstedt, Nurse Practitioner and geriatric specialist Karen Truter and Geriatric Emergency Management nurse Sarah Gibbens explored a series of questions posed by moderator Jennifer Gillard, NHH's Director of Communications and Community Engagement, to highlight the objectives of Assess and Restore and the successful results shown to date.

With a growing number of frail elderly patients presenting to the NHH Emergency Department with a sudden decline in function and independence and no clear medical reason or cause, the NHH team developed the Assess and Restore model of care which is circumventing the usual acute care bed admission—an admission that can, for a frail senior, result in increased decline—to provide a faster and more fulsome assessment and plan of care and, for the patient, increased likelihood of a successful return home.

Using the example of a 90-year-old man, John, a fictitious but typical Assess and Restore patient, the team discussed how many of the individuals the program is benefiting are brought to the NHH Emergency by ambulance, often following a fall.

Once in the Emergency Department, 'John' was seen by the GEM nurse and the Emergency Department physician and given a complete medical work-up. Though the investigation revealed no infection, no breaks from his fall, no issues with blood work and no clear cause for his sudden functional decline, it was evident to the team that a number of "geriatric syndromes" were present and that he was at risk for another fall. On the recommendation of the GEM nurse John was admitted to Assess and Restore, in a Restorative Care inpatient bed, under the combined care of the NP and the hospitalist, for a more in-depth assessment.

After two weeks in the Restorative Care Unit, John's geriatric syndromes were addressed. He was provided with a walker, and taught how to use it safely; his medications (multiple) were reviewed, updated and, in some cases, reduced, improving his sleep and reducing his risk of a night-time fall; his diabetes was back under control thanks to improved diet; and, following connections with community resources, he was registered for several groups, had a driver arranged to get him back to his church on a regular basis and had home visits set up from a Community Care Access Centre caregiver.

After describing John's journey to and through Assess and Restore, the specific syndromes that were affecting his health, and the solutions developed with the interdisciplinary team of physiotherapy, recreational therapy, dietary, pharmacy and nursing, NP Karen Truter concluded with a snapshot of the pilot program's overall results from the past year.

Of the 323 Assess and Restore patients assessed at NHH this year, 98 per cent had issues, like John, related to poor mobility or falls, she said. Eighty-five per cent of those assessed went home—"a remarkable result for this patient population," according to Truter—and only 16 per cent were readmitted to hospital within 30 days of discharge.

The Chair's report followed the panel discussion. Jack Russell referred attendees to his written message, available in NHH's *2015/16 Report to the Community* released at the meeting, and shared a number of additional comments, including special recognition of outgoing Board Director and former chair John Hudson.

Hudson, whose 10 years of service (nine as a Board director and one as a community committee volunteer) concluded at the June 16th meeting, brought extensive health-care governance expertise to the NHH Board. Having served on the boards of Peel Memorial Hospital, Quinte Health Care and Kingston General Hospital, each of which he also served as chair, Hudson held the role of NHH Board Chair from June 2009 to June 2012.

“As chair during this time,” noted Russell, “John had a front-row seat to massive changes within our health-care system, including the introduction of the Excellent Care for All Act, the Broader Public Sector Accountability Act and Health System Funding Reform.”

At NHH, Hudson played a key role navigating the hospital through its Citizens’ Advisory Panel process in 2009/10—a process still recognized in the province as innovative. “He guided us through the LHIN-approved service adjustments that followed that consultation process to an improved financial position and a renewed focus on meeting our community’s priority of sustaining acute care services, close to home,” said Russell.

“In fact, the Strategic Plan that was developed under John’s watch is still the Plan—in its extended form—that guides us today.”

On a personal note, Russell said “I don’t think it would have been possible to find a better mentor than John Hudson. He is always available for the hospital, always there to support. On behalf of the Board, I thank John for his dedicated service to this hospital and the community we serve.”

Russell also recognized the exceptional support the hospital receives from its community via its two largest volunteer organizations: the NHH Foundation, led by Louise Stevenson, as Chair, and the NHH Auxiliary, led by Pat Page Hoisak.

“The NHH Foundation has provided NHH with a very impressive \$938,902 in community donations in the past year alone,” Russell noted, pointing attendees to the examples provided in the Annual Report. “The NHH Auxiliary—on top of their thousands of hours of volunteer support—provided \$200,000 this year to NHH. The Auxiliary recently tallied up the donations they have contributed to NHH since 2003—the total came to an incredible \$2 million.”

The total dollars contributed to NHH from the NHH Foundation since 2003 amounts to over \$36 million, Russell added. “Absolutely incredible,” he said, thanking both organizations and the community to loud applause from all present.

Thanking his fellow Board members, community committee volunteers and medical staff leaders for their work, Russell recognized the exceptional strength within the NHH team. “We know that the year ahead will also be a daunting one for us, as we work further with our LHIN and the Ministry of Health and Long-Term Care to address our pressures of rising patient needs and inflationary costs, so I thank you in advance for your commitment and your skills, as we work together to ensure a strong stable and sustainable hospital that efficiently provides the highest quality patient care, close to home.”

President and CEO Linda Davis extended her own thanks to the NHH team, and expressed her gratitude for “everyone pulling in the same direction.”

Noting that the team has met many challenges this past year “with strength, determination and exceptional teamwork,” Davis said “patient need in a number of areas has continued to rise, and we have met that need. Further, we have continued to enhance quality of patient care through such initiatives as Assess and Restore and our Critical Care Support Team.”

Referring to the staff profiles highlighted in the Annual Report, Davis encouraged attendees to read about the many individuals “who make NHH the caring organization it is today.”

“The importance of the past year’s External Operational Review in reaffirming the value of all of NHH’s services, and our relative efficiency in delivering those services, cannot be understated,” Davis noted. “The Hay Group confirmed for us that we should not reduce beds or services in coming years, given the growth and aging of our community. We completed our Hospital Improvement Plan and we are now well on our way to implementing it... taking on the work that is ours to do, continually reviewing our processes, changing the way we deliver care, where appropriate, and reducing costs where we can, thanks to extensive work by our front-line staff and physicians to develop workable, sustainable plans.”

Davis specifically thanked the community partners NHH worked with in the past year, many of which were represented at the Annual Meeting.

In her role as CEO for almost three years, Davis said: “I am incredibly proud to be part of this hospital. It is, as local residents so often tell me, a ‘gem’. Together we will continue to polish that gem, even through the friction of our challenges.”

Lynda Kay, Chair of the Board’s Nominating Committee, delivered an update on the call for Community Committee volunteers issued in March of this year.

Thanking the community for the strong response received, Kay said: “Our Committee met to review the upcoming vacancies on NHH’s skills-based Board and to review candidates who had expressed an interest in those vacant positions.”

Two individuals were recommended as new Community Members and commenced their positions at the June 16th Board meeting. Ann Logan and Barry Gutteridge will sit on Board Committees for two-year terms with full Committee voting privileges.

From Ward 2 (Cobourg), Ann Logan—who previously served as the Chair of the NHH Foundation Board (2011-2013) and, in that capacity, as an Ex Officio member of the NHH Board table—is a local family lawyer with an extensive history of volunteerism in the community. A partner at Third Street Law, Logan has served on the boards of directors of the Northumberland County Law Association and the Help Centre of Northumberland, which includes the Northumberland Community Legal Centre.

Also from Ward 2 (Cobourg), Barry Gutteridge brings a unique combination of public service expertise gathered through 32 years in municipal and provincial government. With an academic background that includes an executive MBA and an Honours Degree in Urban Studies and Geography, Gutteridge’s career includes a distinguished term as Commissioner of Works and Emergency Services for the amalgamated City of Toronto, where his responsibilities included a department of over 9,500 employees and annual operating budgets totaling \$1.5 billion. A resident of Cobourg since his retirement in 2004, Gutteridge’s local volunteer activities include the Town of Cobourg Holdings Inc., where he has served as a Director since 2010, and Lakefront Utilities Inc., which he currently chairs. Gutteridge is also a member of the Cobourg Committee of Adjustment (since 2012).

With regard to the one Board of Director vacancy in 2016/17, the Nominating Committee recommended the appointment of Kristy Hook of Ward 1 (Port Hope) for a three-year term.

Previously a Community Committee volunteer on the Board’s Finance and Governance Committees, Hook is Chief Operating Officer for Lett Architects in Peterborough. She holds an Honours degree in Health Science and an Honours degree in Women’s Studies/Political Studies.

Formerly a Registered Midwife, she practiced with the Peterborough Kawartha Community Midwives before becoming a practice partner with the Oshawa/Northumberland Community Care Midwives group (2003 through 2008). Recipient of the Port Hope Civic Award in 2014 for her work as Chair of the Playground Committee for Ganaraska Trail Public School, Hook served as Head Midwife/Member of the Obstetrics Advisory Committee at NHH and holds the distinction of being the first midwife to hold privileges at NHH.

The Nominating Committee further recommended three re-appointments. Catharine Tozer (Ward 1) was re-elected for a three-year term; Linda Davis, Ex Officio Director, was re-elected for a one-year term; and Dr. David Broderick, also an Ex Officio Director, was also re-elected for a one-year term.

Endorsed at the Board's June 2nd meeting, these recommendations, in accordance with the NHH By-Laws, were all approved at the June 16th Annual Meeting.

At the Board meeting immediately following the Annual Meeting, Board Directors unanimously appointed Jack Russell as the Board's Chair for the next year. Also appointed unanimously were Elizabeth Selby, First Vice-Chair, and Catharine Tozer, Second Vice-Chair.

Updates to the NHH Board's full membership listing will be published on nhh.ca in the coming weeks. NHH's 2015/16 Annual Report to the Community, released in hard copy at the meeting, will be [found here](#), in the Document Archive at nhh.ca, in local copies of Northumberland News on Thursday, June 23rd, or on request from the hospital's Communications office (905-377-7757).

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About Northumberland Hills Hospital – Located approximately 100 kilometres east of Toronto, NHH delivers a broad range of acute, post-acute, outpatient and diagnostic services. Acute services include emergency and intensive care, medical/surgical care, obstetrical care and palliative care. Post-acute specialty services (PASS) include restorative care and rehabilitation. Mental health care, chemotherapy, dialysis and 16 other ambulatory care clinics are offered on an outpatient basis through partnerships with regional centres and nearby specialists. NHH offers a full range of diagnostic services, including magnetic resonance imaging (MRI), computed tomography (CT) and mammography. The hospital serves the catchment area of west Northumberland County. A mixed urban and rural population of approximately 60,000 residents, west Northumberland comprises the Town of Cobourg, the Municipality of Port Hope and the townships of Hamilton, Cramahe and Alnwick/Haldimand. NHH employs approximately 600 people and relies on the additional support provided by physicians and volunteers. NHH is an active member of the Central East Local Health Integration Network. For more information, please visit www.nhh.ca or follow us on Twitter [@NorHillsHosp](https://twitter.com/NorHillsHosp).