



# Ambulatory Care

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

The Ambulatory Care program delivers a wide range of outpatient clinic services to local residents by hosting physicians' and other health care professionals' clinics. Both medical and minor surgical appointments are offered. Patients reside in west Northumberland County and neighbouring communities.

### Service

The Ambulatory Care program offers sixteen outpatient clinics (as listed below), including those that support medical, surgical and obstetrical care. In addition, in partnership with Kawartha Cardiology Clinic residents are also provided access to outpatient cardiology services, including cardiologist consults, non-invasive cardiac imaging and coronary procedures.

### Health Care Team

The program is structured in such a manner as to attract a wide variety of specialists, most of whom are onsite from one to four times per month. The program is staffed with numbers that fluctuate day to day based on the type of clinics being held. Registered Nurses, Registered Practical Nurses and ward clerks work in concert with physicians and their offices to ensure seamless patient care.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

Supports the Emergency Department, hematology clinic, diagnostic imaging and laboratory services. The pre-operative clinic liaises closely with Surgical Services in order to provide safe and efficient assessment and evaluation for surgical procedures.

### Internal HSPs

Kawartha Cardiology Clinic.

### External HSPs

Central East Community Care Access Centre (CE CCAC) and private outpatient labs located in Cobourg and Port Hope.

### Resources

The clinic offers services which may be dependent on specialty equipment, including: urodynamics, colposcopy, laser, echocardiology, holter monitors, treadmills for stress tests, and cystoscopes.

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## OTHER HEALTH SERVICE PROVIDERS

Physicians and other health care providers come from within NHH's catchment (e.g., surgery, gynecology) and from outside (e.g., cardiology, rheumatology, and orthopedics). Ambulatory Care programs are offered at most hospitals, including: Peterborough Regional Health Centre, Quinte Health Care, Kingston General Hospital and Lakeridge Health Corporation.

## OTHER RELEVANT INFORMATION

Many of the services are associated with Ministry of Health and Long-Term Care and the Central East LHIN programs and strategies, including: Chronic Disease Management (prostate cancer, breast cancer, cervical cancer, skin cancer, arthritis, diabetes, cardiac care), and Wait Time Reduction Strategy (cataracts). The Ambulatory Clinic accepts referrals from area family physicians and other specialists. The clinic refers out to other hospital facilities for additional services, as required by the patient.



# Ambulatory Care

| <b>PATIENT ACTIVITY INDICATORS</b>         | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>               | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| General medicine clinic visits             | 3,298          | 3,102          | 3,419          | 3,189          | 2,627          |
| General surgery clinic visits              | 280            | 371            | 336            | 319            | 268            |
| Minor surgery clinic visits                | 900            | 1,013          | 963            | 1,046          | 1,023          |
| Preoperative clinic visits                 | 1,940          | 2,047          | 1,885          | 2,033          | 2,163          |
| Ears, nose and throat clinic visits        | 1,545          | 1,057          | 914            | 930            | 1,001          |
| Urology clinic visits                      | 1,234          | 2,221          | 2,686          | 2,739          | 2,593          |
| General gynecology clinic visits           | 495            | 611            | 662            | 612            | 661            |
| Colposcopy clinic visits                   | 1              | 142            | 192            | 229            | 151            |
| General antepartum clinic visits           | 492            | 504            | 514            | 571            | 543            |
| General pediatric clinic visits            | 910            | 908            | 958            | 917            | 913            |
| General orthopedic clinic visits           | 181            | 176            | 196            | 137            | 166            |
| General plastics clinic visits             | 401            | 473            | 371            | 445            | 507            |
| Ophthalmology clinic visits                | 157            | 168            | 138            | 178            | 191            |
| General rheumatology clinic visits         | 417            | 415            | 444            | 468            | 472            |
| Obstetrics clinic visits                   | 11             | 2              | 0              | 0              | 1              |
| Day/night obstetrics clinic visits         | 915            | 968            | 972            | 855            | 847            |
| <i>Total ambulatory care clinic visits</i> | <i>13,177</i>  | <i>14,178</i>  | <i>14,650</i>  | <i>14,668</i>  | <i>14,127</i>  |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$415,966      | \$481,960      | \$475,735      | \$502,905      | \$473,104      |
| Revenues directly attributed to service    | \$4,804        | \$5,754        | \$3,281        | \$17,348       | \$13,310       |
| Total net operating expense                | \$411,162      | \$476,206      | \$472,454      | \$485,557      | \$459,794      |
| Staffing complement (full-time equivalent) | 4.92           | 5.58           | 5.17           | 5.07           | 5.06           |

**Notes**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude depreciation, overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information**

Program is funded through global base funding provided by the Central East LHIN.



# Community Mental Health Program

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

The NHH Community Mental Health Program serves individuals age 14 years or older who are experiencing a serious mental illness. The program provides outpatient treatment and support for individuals experiencing: schizophrenia, bipolar disorder, crisis, depression, anxiety, post traumatic stress disorder, panic, phobias and personality disorders.

The program works collaboratively with community agencies to provide services in Cobourg, Port Hope and Brighton, as well as the townships of Hamilton, Alnwick/Haldimand, Cramahe and the Alderville First Nation. The Assertive Community Treatment Team (ACTT) and the Housing Support programs serve all of Northumberland County.

### Service

Clients admitted to the Community Mental Health Program are assessed and a treatment plan is developed which may include: psychiatry, case management, individual or group therapy, ACTT services, early psychosis intervention, and Housing Support.

### Health Care Team

The Mental Health team is comprised of registered professionals in the disciplines of psychiatry, psychology, social work, nursing, addictions, occupational therapy and vocational rehabilitation.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

FourCast Addiction Services, Canadian Mental Health Association FourCounty Crisis Program, Campbellford Memorial Hospital, Peterborough Regional Health Centre Psychiatric Assessment Services for the Elderly and Northumberland County Housing. NHH also partners with Ontario Shores Centre for Mental Health Sciences in Whitby.

### Internal HSPs

Emergency Department Crisis Worker.

### External HSPs

Port Hope Community Health Centre, The Help Centre, Watton Employment, Salvation Army, Northumberland Services for Women, Northumberland County Community and Social Services, Transition House, Children's Aid Society, Community Access, Northumberland Community Legal Centre.

### Resources

Ontario Telemedicine Network for remote clinical and medical assessments and treatment from other locations.

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## OTHER HEALTH SERVICE PROVIDERS

Inpatient Mental Health Programs include: Peterborough Regional Health Centre, Lakeridge Health Corporation – Oshawa site, Ontario Shores Centre for Mental Health Sciences in Whitby.

Outpatient Mental Health Programs include: Canadian Mental Health Association Peterborough, Lindsay and Durham Branches, Campbellford Mental Health, Lakeridge Health Corporation – Oshawa site; Northumberland Community Counseling provides fee for service individual and group counseling.



## Community Mental Health Program

| <b>PATIENT ACTIVITY INDICATORS</b> | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|------------------------------------|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>       | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Face to face visits                | 12,776         | 14,453         | 17,558         | 20,700         | 18,731         |
| Telephone visits                   | 2,521          | 4,300          | 11,248         | 13,390         | 14,002         |
| Group sessions                     | 290            | 427            | 892            | 851            | 839            |
| Individuals served                 | 1,100          | 1,612          | 1,744          | 1,990          | 1,876          |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$2,084,819    | \$2,415,274    | \$2,269,590    | \$2,596,030    | \$2,679,260    |
| Revenues directly attributed to service    | \$11,606       | \$11,682       | \$12,090       | \$7,135        | \$21,263       |
| Total net operating expense                | \$2,073,213    | \$2,403,592    | \$2,257,500    | \$2,588,895    | \$2,657,997    |
| Staffing complement (full-time equivalent) | 19.51          | 19.52          | 20.80          | 20.79          | 20.68          |

### Notes:

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. Overhead and administrative costs, such as housekeeping and utilities, are also included for this program.

### Other funding/revenue information:

- Program is funded through special program funding envelope (referred to as “other votes”) provided by the Central East LHIN; unspent funding is recoverable by the Central East LHIN
- Requires a separate Multi-sector Service Accountability Agreement (M-SAA) with the Central East LHIN
- Sessional funding for Psychiatrists from the Ministry of Health and Long-Term Care
- Early Psychosis Intervention, Crisis and Supportive Housing funding from Canadian Mental Health Association Peterborough. Revenues directly attributed to this service are primarily from rent to third parties and property tax rebates



# Diagnostic Imaging Bone Mineral Densitometry

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Provides Bone Mineral Densitometry (BMD) services for in-patients and outpatients from west Northumberland County and neighbouring communities.

### Service

The Diagnostic Imaging Department is fully digital (filmless), meaning that all patient images are captured, viewed, assessed and stored electronically on computer technology. BMD scanning is an enhanced form of x-ray technology that is used to measure the strength of bones. A BMD scan is used to diagnose osteoporosis, a condition that causes the bones to become thinner, more fragile and more likely to break. The BMD service at NHH has been accredited by the Ontario Association of Radiologists (OAR), which confirms that the BMD service meets or exceeds the standards set by the OAR.

### Health Care Team

Medical Radiation Technologists (MRTs) are specially trained personnel. All MRTs are registered members of the College of Medical Radiation Technologists of Ontario (CMRTO), which is a requirement to be eligible to work in Ontario. In order for the BMD program to remain accredited, the MRTs and Radiologists must participate in ongoing continuing education related to BMD.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### External HSPs

Physicians who refer their patients to NHH for BMD procedures rely on the test results to enable them to develop treatment plans for patients who are found to have osteopenia or osteoporosis. A physician's order is required for all BMD examinations.

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### OTHER HEALTH SERVICE PROVIDERS

Bluewater Imaging (Port Hope Clinic) Monday through Friday; Campbellford Memorial Hospital; Peterborough Regional Health Centre; Pineridge X-ray Clinic, Peterborough; Lakeridge Health Corporation; Rouge Valley Health System; The Scarborough Hospital; Ross Memorial Hospital.



## Diagnostic Imaging Bone Mineral Densitometry

| <b>PATIENT ACTIVITY INDICATORS</b>       | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>             | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Bone mineral density exams – inpatients  | 34             | 35             | 16             | 8              | 13             |
| Bone mineral density exams – outpatients | 2,359          | 2,274          | 2,423          | 1,968          | 2,007          |
| Total bone mineral density exams         | 2,393          | 2,309          | 2,439          | 1,976          | 2,020          |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$70,532       | \$87,135       | \$73,111       | \$71,006       | \$64,438       |
| Revenues directly attributed to service    | \$133,827      | \$137,763      | \$147,766      | \$119,800      | \$120,675      |
| Total net operating revenue                | \$63,295       | \$50,628       | \$74,655       | \$48,794       | \$56,237       |
| Staffing complement (full-time equivalent) | 0.77           | 0.76           | 0.74           | 0.70           | 0.61           |

### Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

### Other funding/revenue information

- Services provided for inpatients are funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service are for outpatients, which primarily include fees charged to the Ontario Health Insurance Plan (OHIP) for the Hospital (technical fees).

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## Northumberland Hills Hospital / Service Data Sheet

# Diagnostic Imaging – Computed Tomography

### SERVICE DESCRIPTION AND POPULATION SERVED

#### Population

Provides CT Scan (often referred to as CAT Scan) services for inpatients and outpatients from west Northumberland County and neighbouring communities.

#### Service

CT is a non-invasive test that helps physicians to diagnose and treat a variety of medical conditions. CT uses x-rays to produce two-dimensional, three-dimensional and virtual images of a patient's body. The CT scanner at NHH was upgraded in March 2009 and this new generation scanner has allowed NHH to further reduce the radiation exposure to patients. CT is an essential service for emergency medicine for trauma cases and for the timely diagnoses of diseases for patients presenting with such symptoms as abdominal pain and potential stroke. CT is essential for diagnosing and staging of cancer. In addition, the CT scanner at NHH is capable of performing advanced specialized examinations that includes cardiac scanning (imaging of the heart and visualization of coronary arteries) and colonography (imaging of the abdomen with virtual visualization of the inner lumen of the colon looking for polyps). NHH provides CT services 365 days per year.

#### Health Care Team

Medical Radiation Technologists (MRTs) are specially trained personnel. All MRTs are registered members of the College of Medical Radiation Technologists of Ontario (CMRTO), which is a requirement to be eligible to work in Ontario. MRTs perform the CT examination(s) and the test results are interpreted by a radiologist. Also, the Hospital laboratory supports the CT service for specific tests (e.g., STAT creatinine tests before CT exams).

### INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

#### Other Programs

All medical programs within the Hospital rely on the CT service. Emergency physicians and surgeons rely on the CT service to assist in assessing and diagnosing acutely ill or critically injured patients. CT guidance is used to perform needle biopsies of lesions within the lung and abdomen.

#### External HSPs

Physicians who refer their patients for CT procedures rely on the test results when developing treatment plans. A physician's order is required for all CT examinations.

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### OTHER HEALTH SERVICE PROVIDERS

Peterborough Regional Health Centre; Lakeridge Health Corporation; Rouge Valley Health System; The Scarborough Hospital; Ross Memorial Hospital; Campbellford Memorial Hospital.



# Diagnostic Imaging – Computed Tomography

| <b>PATIENT ACTIVITY INDICATORS</b>             | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>                   | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| CT exams – inpatients                          | 1,160          | 1,256          | 1,274          | 1,361          | 1,607          |
| CT exams – outpatients                         | 8,254          | 8,403          | 8,319          | 7,364          | 6,922          |
| CT exams – referred in                         | 79             | 19             | 0              | 0              | 0              |
| CT exams – emergency                           | 956            | 856            | 937            | 1,042          | 1,629          |
| <i>Total computed tomography exams</i>         | <i>10,449</i>  | <i>10,534</i>  | <i>10,530</i>  | <i>9,767</i>   | <i>10,158</i>  |
| Annual hours of operation – base               | 3,500          | 3,500          | 3,500          | 3,500          | 3,500          |
| Annual hours of operation – wait times funding | 266            | 460            | 335            | 453            | 453            |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$661,474      | \$693,540      | \$737,062      | \$745,976      | \$795,645      |
| Revenues directly attributed to service    | \$96,560       | \$163,437      | \$120,728      | \$137,229      | \$139,448      |
| Total net operating expense                | \$564,914      | \$530,103      | \$616,334      | \$608,747      | \$656,197      |
| Staffing complement (full-time equivalent) | 4.42           | 4.49           | 4.53           | 4.38           | 4.57           |

## Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other funding/revenue information

- Services provided are funded through global base funding provided by the Central East LHIN. This funding covers the hospital costs for both inpatient and outpatient services.
- Revenues directly attributed to this service are primarily from one-time funding for provincial Wait-Time priority services. This funding is to operate the CT for incremental hours over the base hours funded through the global funding. This funding is received from the Central East LHIN.

## OTHER RELEVANT INFORMATION

CT wait time performance (results for the period April 2011 to March 2012):

| Provincial Target | Provincial Actual | LHIN Actual | NHH Actual |
|-------------------|-------------------|-------------|------------|
| 28 days           | 33 days           | 23 days     | 12 days    |





# Diagnostic Imaging — Magnetic Resonance Imaging

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Provides Magnetic Resonance Imaging (MRI) services for patients from the Hospital's Emergency Department, Intensive Care Unit, inpatients and outpatients. Patients reside in west Northumberland County and neighbouring communities.

### Service

MRI is a non-invasive diagnostic tool that uses a magnetic field and radio frequencies to capture detailed images of the body's internal organs and tissues. MRI is used to visualize internal organs, blood vessels and is particularly useful for assessing the brain and joints (knees, shoulders etc.). MRI is an invaluable tool in the diagnosis of complex diseases and ailments including multiple sclerosis, strokes, back pain and joint pain. The MRI service also includes imaging of the breast. The MRI service is capable of performing needle biopsies of lesions within the breast; NHH is one of a few sites offering this service.

### Health Care Team

Medical Radiation Technologists (MRTs) are specially trained personnel. All MRTs are registered members of the College of Medical Radiation Technologists of Ontario (CMRTO), which is a requirement to be eligible to work in Ontario. MRTs perform the MR examinations and the test results are interpreted by a radiologist.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### External HSPs

Physicians who refer their patients for MRI procedures rely on the test results when developing treatment plans. A physician's order is required for all MR examinations.

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### OTHER HEALTH SERVICE PROVIDERS

Peterborough Regional Health Centre; Rouge Valley Health System; the Scarborough Hospital; Ross Memorial Hospital.



# Diagnostic Imaging — Magnetic Resonance Imaging

| <b>PATIENT ACTIVITY INDICATORS</b>            | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>                  | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| MRI exams – inpatients                        | 39             | 93             | 94             | 103            | 142            |
| MRI exams – outpatients                       | 1,551          | 5,388          | 5,772          | 7,255          | 7,732          |
| MRI exams – referred in                       | 2              | 10             | 0              | 0              | 0              |
| MRI exams – emergency                         | 2              | 16             | 12             | 8              | 18             |
| <i>Total MRI exams</i>                        | <i>1,594</i>   | <i>5,507</i>   | <i>5,878</i>   | <i>7,366</i>   | <i>7,892</i>   |
| Annual hours of operation – base              | 1,020          | 2,080          | 2,080          | 2,080          | 2,080          |
| Annual hours of operation – wait time funding | NIL            | 1,295          | 1,503          | 1,341          | 2,718          |

| <b>FINANCIAL OVERVIEW</b>                   | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                          | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense               | \$146,245      | \$467,392      | \$570,745      | \$633,316      | \$714,035      |
| Revenues directly attributed to service     | \$383,433      | \$1,306,988    | \$1,296,494    | \$1,223,641    | \$1,563,735    |
| Total net operating revenue before overhead | \$237,188      | \$839,596      | \$725,749      | \$590,325      | \$849,700      |
| Staffing complement (full-time equivalent)  | 2.07           | 3.85           | 4.01           | 4.53           | 4.89           |

## Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other Funding/Revenue Information

- Services provided are funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service:
  - Base funding of \$800,000 per annum, which covers the hospital costs for both inpatient and outpatients services, and it also covers overhead and equipment depreciation costs;
  - One-time funding for provincial Wait-Time priority services. This funding is to operate the MRI for incremental hours over the base hours funded through the global funding. This funding is received from the Central East LHIN.

## OTHER RELEVANT INFORMATION

MRI wait time performance (results for the period April 2011 to March 2012):

| Provincial Target | Provincial Actual | LHIN Actual | NHH Actual |
|-------------------|-------------------|-------------|------------|
| 28 days           | 92 days           | 82 days     | 50 days    |



# Diagnostic Imaging — Mammography/OBSP

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Provides mammography services on an outpatient basis to individuals from west Northumberland County and neighbouring communities.

### Service

Mammography is an imaging technology that uses low dose x-rays to provide pictures of the internal structures of the breast. The mammography and ultrasound services provide a method for investigating possible breast abnormalities including breast cancer. The mammography service is an integral part of the breast assessment service offered at NHH. The digital mammography units and the program have been accredited by the Canadian Association of Radiologists (CAR).

The breast assessment service at NHH is a specialized program that utilizes mammography, ultrasound and possibly MRI to further investigate areas of interest within the breast. The mammography MRT, and sonographer with guidance from the attending radiologist, work as a team to ensure that areas of interest within the breast are examined thoroughly.

The Ontario Breast Screening Program (OBSP) was implemented at NHH in the fall 2009. The OBSP program provides routine screening mammography services to patients who qualify for the program. The OBSP program also permits patients to self-refer, which will benefit those individuals that do not have a family doctor.

### Health Care Team

Medical Radiation Technologists (MRTs) are specially trained personnel. All MRTs are registered members of the College of Medical Radiation Technologists of Ontario (CMRTO), which is a requirement to be eligible to work in Ontario. MRTs perform the mammography examination(s) and the test results are interpreted by a radiologist. In order for the mammography program to remain accredited, the MRTs and radiologists must participate in ongoing continuing education related to mammography.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

The mammography service provides screening mammography and is utilized in conjunction with ultrasound for follow-up breast assessment. Breast lesion localization is performed with mammography guidance prior to scheduled operative procedures (same day service). The localization aids the surgeon in finding the lesion during the operative procedure.

### External HSPs

Physicians who refer their patients for mammography procedures rely on the test results when developing treatment plans. The breast assessment program at NHH offers in-depth follow-up for patients whose mammography examination has demonstrated suspected abnormalities within the breast. The radiologist, mammography technologist and ultrasound sonographer work as a team to assess the areas of concern. Pathology testing (biopsy specimens, for example) is referred to a regional centre.

## OTHER HEALTH SERVICE PROVIDERS

Bluewater Imaging (Port Hope Clinic) Monday through Friday;  
Campbellford Memorial Hospital; Peterborough Regional Health Centre; Lakeridge Health Corporation; Rouge Valley Health System; The Scarborough Hospital; Ross Memorial Hospital; Haliburton Highlands Health Services.

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## Northumberland Hills Hospital / Service Data Sheet

# Diagnostic Imaging — Mammography/OBSP

| <b>PATIENT ACTIVITY INDICATORS</b>     | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>           | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Mammography exams – inpatients         | 8              | 6              | 3              | 6              | 5              |
| Mammography exams – outpatients        | 5,180          | 4,952          | 5,282          | 3,338          | 3,145          |
| <i>Total mammography exams</i>         | <i>5,188</i>   | <i>4,958</i>   | <i>5,285</i>   | <i>3,344</i>   | <i>3,150</i>   |
| Ontario Breast Screening – inpatients  | N/A            | N/A            | 0              | 0              | 0              |
| Ontario Breast Screening – outpatients | N/A            | N/A            | 962            | 2,506          | 3,316          |
| <i>Total OBSP exams</i>                | <i>N/A</i>     | <i>N/A</i>     | <i>962</i>     | <i>2,506</i>   | <i>3,316</i>   |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$208,907      | \$196,337      | \$340,153      | \$403,800      | \$444,056      |
| Revenues directly attributed to service    | \$185,183      | \$184,737      | \$272,075      | \$329,694      | \$396,729      |
| Total net operating expense                | \$23,724       | \$11,600       | \$68,078       | \$74,106       | \$47,327       |
| Staffing complement (full-time equivalent) | 1.92           | 2.01           | 2.86           | 3.09           | 3.24           |

## Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other Funding/Revenue Information

- Services provided for inpatients are funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service are for outpatients, which primarily include:
  - Fees charged to the Ontario Health Insurance Plan (OHIP) for the Hospital (technical fees); and,
  - Funding from Cancer Care Ontario for the Ontario Breast Screening Program (OBSP).



## Diagnostic Imaging – Nuclear Medicine

### SERVICE DESCRIPTION AND POPULATION SERVED

#### Population

Provides nuclear medicine services for patients from the Hospital's Emergency Department, Intensive Care Unit, inpatients and outpatients. Patients reside in west Northumberland County and neighbouring communities.

#### Service

Nuclear Medicine is used to take pictures of a variety of organs within the body including the brain, heart, kidneys, lungs, thyroid, sentinel node and bones. Tumours and infections and other disorders are diagnosed through the use of a radioactive tracer that is injected into the body. The pictures of the tracer are obtained by use of a special gamma camera. The pictures help physicians evaluate internal organ function. Nuclear cardiac scanning is performed to assess blood perfusion to the heart and is a vital service for cardiac patients. Pre-operative procedures for sentinel node studies are also completed in Nuclear Medicine. This procedure assists the surgeons in locating lymph nodes for biopsy for patients who have been diagnosed with breast cancer or melanoma.

#### Health Care Team

Medical Radiation Technologists (MRTs) are specially trained personnel. All MRTs are registered members of the College of Medical Radiation Technologists of Ontario (CMRTO), which is a requirement to be eligible to work in Ontario. MRTs perform the Nuclear Medicine examinations and the test results are interpreted by an imaging specialist (a radiologist, internist or cardiologist). The Nuclear Medicine MRTs are specially trained to handle radioactive materials.

### INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

#### Other Programs

The Nuclear Medicine service supports the medical programs within the Hospital.

#### Internal HSPs

The NHH nuclear cardiac service works in partnership with NHH's internal medicine physicians and cardiologists from the Kawartha Cardiology Clinic located onsite at NHH.

#### External HSPs

Physicians who refer their patients for Nuclear Medicine procedures rely on the test results when developing treatment plans. A physician's order is required for all Nuclear Medicine examinations.

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### OTHER HEALTH SERVICE PROVIDERS

The NHH Clinic is the only provider of nuclear cardiac scanning in Northumberland County. Other providers outside of the Hospital's catchment area include: Peterborough Regional Health Centre; Peterborough Clinic; Lakeridge Health Corporation; Rouge Valley Health System; The Scarborough Hospital; and, an independent health facility offers Nuclear medicine in Lindsay.



## Diagnostic Imaging – Nuclear Medicine

| <b>PATIENT ACTIVITY INDICATORS</b>   | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--------------------------------------|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Nuclear medicine exams – inpatients  | 164            | 173            | 141            | 186            | 115            |
| Nuclear medicine exams – outpatients | 2,227          | 2,611          | 2,620          | 2,520          | 1,876          |
| Nuclear medicine exams – referred in | 2              | 0              | 0              | 0              | 0              |
| Nuclear medicine exams – emergency   | 1              | 3              | 9              | 2              | 1              |
| <i>Total nuclear medicine exams</i>  | <i>2,394</i>   | <i>2,787</i>   | <i>2,770</i>   | <i>2,708</i>   | <i>1,992</i>   |

| <b>FINANCIAL OVERVIEW</b>                   | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                          | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense               | \$280,139      | \$336,328      | \$337,864      | \$345,371      | \$373,769      |
| Revenues directly attributed to service     | \$409,464      | \$470,828      | \$499,044      | \$534,074      | \$592,459      |
| Total net operating revenue before overhead | \$129,325      | \$134,500      | \$161,180      | \$188,703      | \$218,690      |
| Staffing complement (full-time equivalent)  | 1.52           | 1.75           | 1.65           | 1.58           | 1.77           |

### Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

### Other funding/revenue information

- Services provided for inpatients are funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service are for outpatients, which primarily include fees charged to the Ontario Health Insurance Plan (OHIP) for the Hospital (technical fees).



# Diagnostic Imaging – Radiology (X-Ray)

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Provides x-ray services for patients from the Hospital's Emergency Department, Intensive Care Unit, inpatients and outpatients. Patients reside in west Northumberland County and neighbouring communities.

### Service

The Diagnostic Imaging Department is fully digital (filmless), meaning that all patient images are captured, viewed, assessed and stored electronically on computer technology. The department offers a full range of x-ray procedures including interventional procedures that include PICC line insertions (intravenous access for medications, antibiotics, chemotherapy, etc.) and needle biopsies. Tissue samples are obtained as the result of a needle biopsy. Various interventional procedures are used to ease the suffering of terminally ill, palliative patients.

### Health Care Team

Medical Radiation Technologists (MRTs) are specially trained personnel. All MRTs are registered members of the College of Medical Radiation Technologists of Ontario (CMRTO), which is a requirement to be eligible to work in Ontario.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

All medical programs within the Hospital rely on the radiology services provided by Diagnostic imaging.

### Internal HSPs

Swallowing assessment examinations are done in conjunction with the Hospital's Speech Language Therapist (examination to evaluate the swallowing mechanism for patients who have suffered a stroke).

### External HSPs

Physicians who refer their patients for radiology procedures rely on the test results when developing treatment plans. A physician's order is required for all radiology examinations.

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## OTHER HEALTH SERVICE PROVIDERS

Bluewater Imaging (Port Hope Clinic) Monday through Friday;  
Campbellford Memorial Hospital; Peterborough Regional Health Centre; Lakeridge Health Corporation; Rouge Valley Health System; The Scarborough Hospital; Ross Memorial Hospital; Haliburton Highlands Health Services.



# Diagnostic Imaging – Radiology (X-Ray)

| <b>PATIENT ACTIVITY INDICATORS</b> | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|------------------------------------|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>       | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Radiology exams – inpatients       | 3,874          | 3,926          | 3,708          | 3,815          | 4,033          |
| Radiology exams – outpatients      | 8,054          | 8,088          | 8,299          | 8,307          | 8,635          |
| Radiology exams – emergency        | 10,197         | 9,696          | 9,396          | 9,418          | 9,339          |
| <i>Total radiology exams</i>       | <i>22,125</i>  | <i>21,710</i>  | <i>21,403</i>  | <i>21,540</i>  | <i>22,007</i>  |
| Interventional exams – inpatients  | 112            | 127            | 166            | 158            | 149            |
| Interventional exams – outpatients | 687            | 694            | 828            | 909            | 883            |
| Interventional exams – emergency   | 3              | 3              | 13             | 14             | 25             |
| <i>Total interventional exams</i>  | <i>802</i>     | <i>824</i>     | <i>1,007</i>   | <i>1,081</i>   | <i>1,057</i>   |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$1,633,960    | \$1,733,414    | \$1,797,009    | \$1,782,470    | \$1,954,724    |
| Revenues directly attributed to service    | \$414,691      | \$483,147      | \$469,200      | \$499,888      | \$531,478      |
| Total net operating expense                | \$1,219,269    | \$1,250,267    | \$1,327,809    | \$1,282,582    | \$1,423,246    |
| Staffing complement (full-time equivalent) | 14.22          | 14.45          | 14.62          | 14.85          | 15.50          |

## Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other funding/revenue information

- Services provided for inpatients are funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service are for outpatients, which primarily include fees charged to the Ontario Health Insurance Plan (OHIP) for the Hospital (technical fees).





# Diagnostic Imaging – Ultrasound

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Provides ultrasound services for inpatients and outpatients from west Northumberland County and neighbouring communities.

### Service

Ultrasound involves exposing parts of the body to high-frequency sound waves to produce pictures of internal body organs and structures. Ultrasound is a useful way of examining many of the body's internal organs, blood vessels, the liver, the breast, and in pregnant women, the fetus. Ultrasound and digital mammography are essential for investigating possible breast abnormalities including breast cancer. The ultrasound service is an integral part of the breast assessment service offered at NHH. Ultrasound guidance is also used to perform needle biopsies of breast lesions and/or cyst aspirations.

### Health Care Team

Medical Radiation Technologists (MRTs) are specially trained personnel. All MRTs are registered members of the College of Medical Radiation Technologists of Ontario (CMRTO), which is a requirement to be eligible to work in Ontario.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

All medical programs within the Hospital rely on the ultrasound services provided by Diagnostic imaging.

### Internal HSPs

Swallowing assessment examinations are done in conjunction with the Hospital's Speech Language Therapist (examination to evaluate the swallowing mechanism for patients who have suffered a stroke).

### External HSPs

Physicians who refer their patients for ultrasound procedures rely on the test results when developing treatment plans. A physician's order is required for all ultrasound examinations.

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## OTHER HEALTH SERVICE PROVIDERS

Bluewater Imaging (Port Hope Clinic) Monday through Friday;  
Campbellford Memorial Hospital; Peterborough Regional Health Centre; Lakeridge Health Corporation; Rouge Valley Health System; The Scarborough Hospital; Ross Memorial Hospital; Haliburton Highlands Health Services.



## Diagnostic Imaging – Ultrasound

| <b>PATIENT ACTIVITY INDICATORS</b> | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|------------------------------------|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>       | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Ultrasound exams – inpatients      | 424            | 450            | 365            | 404            | 434            |
| Ultrasound exams – outpatients     | 7,517          | 7,996          | 9,078          | 9,148          | 9,323          |
| Ultrasound exams – emergency       | 357            | 368            | 348            | 393            | 588            |
| <i>Total ultrasound exams</i>      | <i>8,298</i>   | <i>8,814</i>   | <i>9,791</i>   | <i>9,945</i>   | <i>10,345</i>  |

| <b>FINANCIAL OVERVIEW</b>                   | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                          | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense               | \$204,777      | \$203,821      | \$246,697      | \$262,755      | \$266,598      |
| Revenues directly attributed to service     | \$324,776      | \$344,619      | \$411,872      | \$432,813      | \$458,411      |
| Total net operating revenue before overhead | \$119,999      | \$140,798      | \$165,175      | \$170,058      | \$191,813      |
| Staffing complement (full-time equivalent)  | 1.68           | 1.54           | 1.97           | 2.18           | 2.28           |

### Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

### Other funding/revenue information

- Services provided for inpatients are funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service are for outpatients, which primarily include fees charged to the Ontario Health Insurance Plan (OHIP) for the Hospital (technical fees).



# Emergency Department

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

As the only Emergency Department in west Northumberland County, NHH ED acts as a gateway to urgent and emergent, surgical and medical care. Close proximity to the 401 corridor, surrounding farming communities and tourist destinations, results in NHH ED providing emergency care to numerous motor vehicle, farming and recreational accidents.

### Service

The ED is a 22-bay multi-treatment facility, housing a 2-bed resuscitation unit, 16 stretchers complete with cardiac monitors, fracture, suture, gynecology rooms and a specially designed mental health crisis room with onsite access to Ontario Telemedicine Network to support timely mental health assessments. In January 2009 the ED introduced the “Blue Zone”, which assists with the flow and treatment of less acute patients. A separate decontamination room provides safe care for patients arriving with exposure to chemicals. A negative air flow room provides for the care of patients with possible infectious diseases. Approximately eighty percent of admissions to the Hospital come through the ED.

### Health Care Team

The ED is staffed by specialty trained Registered Nurses, many who hold the Canadian Nurses Association Emergency Nursing Certification. The ED team includes Registered Nurses, Crisis Intervention Worker, Geriatric Emergency Management Nurse, Physicians, Respiratory Therapists, Speech Language Therapist, Physiotherapist, Lab Technicians, and a Nurse Practitioner.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other programs

Northumberland Hills Hospital’s Community Mental Health Services provide outpatient services for patients assessed in the ED, requiring continuation of care. Kingston General Hospital and St. Michael’s Hospital (Toronto) provides access to angiography for patients arriving to the ED with chest pain. Peterborough Regional Health Centre provides NHH patients access to stroke care, complicated dialysis, and psychiatric patients.

### Internal HSPs

The Diagnostic Imaging Department supports the ED by a full range of imaging services, including X-rays, CT Scans and MRI. Ambulatory Care program facilitates booking of ED patients for specialty services for medical, surgical and obstetrical care. The Chemotherapy Clinic facilitates blood transfusion for ED patients requiring blood. Respiratory Therapists support the ED patients by performing pulmonary function testing and cardiac stress testing.

### External HSPs

Central East CCAC has a dedicated case worker for the ED to facilitate care at home for discharged patients. Critically, a provincial coordinating agency for critical care services, is accessed for the transfer of critically ill patients. The ED relies on collaborative support from Peterborough Regional Health Centre for a number of services including, stroke, orthopedics and urology. The ED works very closely with regional health care partners including local physicians, EMS, community nursing homes and homes for the aged, other regional and referring health care facilities, and local municipalities responsible for emergency preparedness planning. Haliburton Kawartha Pine Ridge (HKPR) District Health Unit assists the ED and the Hospital for disease outbreaks or communicable disease issues.

### Resources

24-hour physician staffing of the ED is maintained by a combination of full-time and part time emergency physicians and experienced family physicians, in addition to assistance from physicians supplied through Health Force Ontario and a private placement agency.

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## OTHER HEALTH SERVICE PROVIDERS

Quinte Health Care – Trenton site; Campbellford Memorial Hospital; Lakeridge Health Corporation – Bowmanville site, and Peterborough Regional Health Centre.



# Emergency Department

**PATIENT ACTIVITY INDICATORS**

| Indicator Description                                  | Actual<br>2007/08 | Actual<br>2008/09 | Actual<br>2009/10 | Actual<br>2010/11 | Actual<br>2011/12 |
|--|-------------------|-------------------|-------------------|-------------------|-------------------|
| Emergency Visits                                       | 32,581            | 31,764            | 32,587            | 31,770            | 31,619            |
| Inpatient admissions through ED                        | 2,150             | 2,092             | 2,179             | 2,191             | 2,380             |
| Inpatient admissions through ED % of acute admissions* | 82%               | 82%               | 83%               | 83%               | 84%               |

\*excludes admissions for obstetrics, newborn and palliative care

**FINANCIAL OVERVIEW**

| Description                                | Actual<br>2007/08 | Actual<br>2008/09 | Actual<br>2009/10 | Actual<br>2010/11 | Actual<br>2011/12 |
|--|-------------------|-------------------|-------------------|-------------------|-------------------|
| Total gross operating expense              | \$3,770,325       | \$3,907,439       | \$4,176,658       | \$4,577,824       | \$4,838,949       |
| Revenues directly attributed to service    | \$178,652         | \$207,002         | \$336,556         | \$841,504         | \$748,536         |
| Total net operating expense                | \$3,591,673       | \$3,700,437       | \$3,840,102       | \$3,736,320       | \$4,090,413       |
| Staffing complement (full-time equivalent) | 31.67             | 32.97             | 33.16             | 35.02             | 38.37             |

**Notes:**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information:**

- Program is funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service are primarily from:
  - Workplace Safety Insurance Board (WSIB) and fees charged for non-Ontario residents.
  - Separate base funding by the Central East LHIN of \$145,000 received annually beginning 2009/10 for a new Geriatric Emergency Management (GEM) nurse.
  - Separate one-time funding by the Ministry of Health and Long-Term Care received in 2010/11 and 2011/12 for Emergency Pay for Results initiatives.
- ED physician remuneration is through Ontario's ED Workload Alternative Funding Agreement.

**OTHER RELEVANT INFORMATION**

Emergency Department wait time performance (results for April 2011 to March 2012), measured at the 90th percentile:

| Category    | Provincial Target | Provincial Actual | LHIN Actual | NHH Actual |
|-------------|-------------------|-------------------|-------------|------------|
| High acuity | 8 hours           | 11.1 hours        | 11.1 hours  | 7.8 hours  |
| Low acuity  | 4 hours           | 4.3 hours         | 4.3 hours   | 4.7 hours  |



# Inpatient Rehabilitation

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

NHH's 18-bed Inpatient Rehabilitation unit is designed to assist patients with achieving individualized goals following a stroke, major surgery, or traumatic injury such as fractured hip or trauma sustained in a motor vehicle accident, management of chronic disability such as chronic bronchitis and emphysema (or COPD – chronic obstructive pulmonary disease), and congestive heart failure.

### Service

Dedicated services within the Inpatient Rehabilitation unit include physiotherapy, occupational therapy, and speech language therapy. With a satellite gymnasium for rehabilitation patients, a dining room, and access to the Hospital's therapeutic gardens, the Inpatient Rehabilitation unit is fully devoted to patient recovery. Patients must be able to participate in an acute rehabilitation program including 2 to 3 hours of therapy daily, frequent ambulation when possible and socialization with other patients including taking three meals per day in the communal dining room.

### Health Care Team

The Inpatient Rehabilitation team consists of nursing staff, rehabilitation therapists, physicians, social worker, and dietitian. The staff are trained with specialization in rehabilitation therapies. Many of the nursing staff have a certificate in Rehabilitation Nursing.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

Occupational therapists on the Inpatient Rehabilitation unit provide "Assistive Devices Program" assessments for patients in other parts of the Hospital when it is necessary to purchase equipment (e.g. wheelchairs and walkers) for patients who are being discharged.

### Internal HSPs

The therapists provide vacation relief for other hospital programs. Physiotherapists and occupational therapists provide services to the Palliative Care Program. Speech language therapy, Recreation therapy and social work are services that are shared with other Hospital programs.

### External HSPs

Central East CCAC provides services and equipment to patients upon discharge. Services provided by Northumberland Community Care are used to help discharge patients from Hospital by ensuring adequate supports are available at home.

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## OTHER HEALTH SERVICE PROVIDERS

There are Inpatient Rehabilitation units at Peterborough Regional Health Centre (PRHC) and Lakeridge Health Corporation. Referrals are received from all hospitals in the region, particularly from PRHC being a major referrer of orthopedic patients.



# Inpatient Rehabilitation

| <b>PATIENT ACTIVITY INDICATORS</b>      | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>            | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Number of beds staffed and in operation | 18             | 18             | 18             | 18             | 18             |
| Admissions                              | 222            | 230            | 238            | 272            | 270            |
| Patient days                            | 6,112          | 6,044          | 6,122          | 5,489          | 5505           |
| Occupancy rate                          | 93%            | 92%            | 93%            | 84%            | 84%            |
| Average length of stay (days)           | 27.91          | 26.28          | 25.72          | 20.18          | 19.9           |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$1,491,377    | \$1,519,066    | \$1,509,969    | \$1,579,410    | \$1,619,862    |
| Revenues directly attributed to service    | \$0            | \$0            | \$0            | \$0            | \$0            |
| Total net operating expense                | \$1,491,377    | \$1,519,066    | \$1,509,969    | \$1,579,410    | \$1,619,862    |
| Staffing complement (full-time equivalent) | 16.51          | 16.38          | 15.73          | 16.08          | 16.71          |

## Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other funding/revenue information

- Program is funded through global base funding provided by the Central East LHIN.
- Preferred accommodation revenue for private/semi-private rooms not included above.

## OTHER RELEVANT INFORMATION

Patients admitted to an acute care bed are transferred to the Inpatient Rehabilitation unit to prepare them to go home after they have sustained major trauma, been in hospital for a prolonged period of time or need specific therapy to learn to talk, swallow, walk or perform activities of daily living. This frees up an acute care bed allowing the Hospital to admit patients from the Emergency Department who require admission to an acute care bed.



# Intensive Care Unit

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

The 6-bed Level 2 Intensive Care Unit (ICU) provides advanced and highly specialized care to medical or surgical patients whose conditions are life-threatening and require comprehensive care and constant monitoring. There are also times when the focus is on the end-of-life care (palliative care) and helping patients and families make decisions regarding life-sustaining treatment. The categories of diseases and disorders include disorders of the cardiac, pulmonary, and endocrine (hormonal) systems, together with post-surgical care and medication monitoring for drug ingestion or overdose. Cardiac problems can include heart attacks, shock, abnormal heart rhythm, heart failure (congestive heart failure), and unstable angina (chest pain). Lung disorders can include respiratory failure and blood clots. Patients are admitted to ICU through the Emergency Department, surgical program, and other inpatient units; some are repatriated from other hospitals.

### Service

While in the Intensive Care Unit, patients may require: continuous cardiac, respiratory and blood pressure monitoring; the administration of intravenous medications that require 1:1 monitoring; and, the insertion of chest tubes, arterial and central lines, oxygen therapy, invasive ventilation (ventilator) / bi-level positive airway pressure (BiPAP) to assist with breathing. The ICU patients have access to the Hospital's range of diagnostic and therapeutic services, including laboratory, pharmacy and diagnostic imaging services.

### Health Care Team

The ICU team includes registered nurses specially trained in critical care, specialists in internal medicine, general surgeons, anesthesiologists, family physicians, respiratory therapists, pharmacists, dietitians, physiotherapists, occupational therapists, social workers, ward clerks and volunteers. Patients and families play key roles in the planning and decision-making process.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

The ICU has interdependencies with the emergency department, the medical / surgical program and other inpatient units.

### Internal HSPs

ICU staff monitor the patients requiring telemetry (cardiac monitoring) on the 6 telemetry beds on the medical / surgical inpatient unit. The anesthesia and respiratory therapy services provide acute pain and symptom management, respiratory management and invasive (ventilator) and non-invasive ventilator support (BiPAP) for patients. Patients have access to the Hospital's full range of diagnostic and therapeutic services, including laboratory, pharmacy and diagnostic imaging services.

### External HSPs

Critically ill patients are transferred to other health centres by land or air ambulance, Emergency Medical Service (EMS) or ORNGE (helicopter) respectively. Patient transfers are arranged through Criticall Ontario, which is a provincial support system that coordinates access to critical care beds and provides timely medical support from on-call specialists. NHH has a service agreement with a non-urgent transport service to provide the transportation of stable patients to other health care facilities for clinical tests, procedures or follow-up appointments.

### Resources

Medical care and on-call services for the ICU are provided by a core team of physicians, comprised of internists, surgeons, anesthesiologists, and family physicians.

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## OTHER HEALTH SERVICE PROVIDERS

Patients that require a Level 3 ICU service or tertiary care (e.g. multiple system support, cardiac surgery) are transferred to Peterborough Regional Health Centre (PRHC), Lakeridge Health Corporation, Kingston General Hospital, St. Michael's Hospital, Scarborough Hospital and Sunnybrook Health Sciences.



# Intensive Care Unit

| <b>PATIENT ACTIVITY INDICATORS</b>      | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>            | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Number of beds staffed and in operation | 6              | 6              | 6              | 6              | 6              |
| Admissions                              | 513            | 499            | 431            | 391            | 452            |
| Patient days                            | 1,279          | 1,283          | 1,259          | 1,175          | 1456           |
| Occupancy rate                          | 58%            | 59%            | 57%            | 54%            | 66%            |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$1,934,337    | \$2,114,261    | \$2,233,618    | \$2,237,412    | \$2,464,989    |
| Revenues directly attributed to service    | \$125,010      | \$23,012       | \$500          | \$0            | \$18,000       |
| Total net operating expense                | \$1,809,327    | \$2,091,249    | \$2,233,118    | \$2,237,412    | \$2,446,989    |
| Staffing complement (full-time equivalent) | 16.08          | 15.83          | 17.41          | 16.76          | 18.13          |

## Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other funding/revenue information

- Program is funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service include one-time Critical Care Training funding provided by the Central East LHIN.

## OTHER RELEVANT INFORMATION

The NHH ICU is part of the Central East LHIN Critical Care Regional Network. This Network's priority is to build critical care surge capacity in the region and to align the organizations' pandemic plans.





# Laboratory Services

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

The Laboratory Department at Northumberland Hills Hospital is an integral part of the health care team. The staff is dedicated to providing quality diagnostic testing services to physicians and the public of the surrounding communities, in accordance with generally accepted laboratory practice and Ministry of Health and Long Term Care Laboratory Licensing Regulations.

### Service

The Laboratory Department supports the emergency department, inpatient nursing units and the outpatient clinics. The services include Biochemistry, Hematology, Microbiology, Transfusion Medicine, Phlebotomy and Electrocardiography. These services are available 24 hours a day from staff on site. Pulmonary Function and Stress Testing is available by appointment only. Reference laboratories are utilized for services not performed on site such as pathology. The Laboratory also supports the Infection Prevention and Control (IPAC) program for the facility.

The Laboratory is accredited through the Ontario Laboratory Accreditation program which requires recertification every four years.

### Health Care Team

Medical Laboratory Technologists (MLTs) are specially trained personnel. All MLTs are registered members of the College of Medical Laboratory Technologists of Ontario (CMLTO), which is a requirement to be eligible to work in Ontario. In order to maintain competency, MLTs must participate in ongoing continuing education related to laboratory medicine and perform a variety of competency assessments throughout the year. The staff is complimented by Laboratory Assistants (LAs) or phlebotomists who take patients' blood for processing and perform electrocardiograms (ECGs).

The Infection Control Practitioners are certified by the Certification Board of Infection Control and Epidemiology.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

The Laboratory Department supports the Emergency Department, hematology and oncology clinic, dialysis, ambulatory clinic and diagnostic imaging. The laboratory also liaises closely with the pre-operative clinic and Surgical Services in order to provide safe and efficient assessment and evaluation for surgical procedures.

### Internal HSPs

Stress Testing and Pulmonary Function Testing services.

### External HSPs

Peterborough Regional Health Centre for pathology services; Campbellford Memorial Hospital; Ross Memorial Hospital; Lakeridge Health Corporation; nursing homes; Regional Infection Control Network (RICN).

### Resources

The laboratory requires a variety of specialized equipment to provide accurate and precise test results for all diagnostic tests offered at NHH.

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# Laboratory Services

| <b>PATIENT ACTIVITY INDICATORS</b> | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|------------------------------------|----------------|----------------|----------------|----------------|----------------|
| <b>Annual Volumes</b>              | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Specimen Procurements              | 67,834         | 69,056         | 73,280         | 73,994         | 115,418        |
| Chemistry                          | 198,502        | 199,964        | 215,820        | 235,953        | 172,678        |
| Hematology                         | 50,342         | 52,013         | 49,483         | 47,165         | 40,643         |
| Transfusion Medicine               | 10,102         | 11,412         | 12,773         | 16,657         | 21,822         |
| Cytopathology                      | 135            | 236            | 107            | 14             | 43             |
| Microbiology                       | 57,976         | 68,306         | 64,856         | 64,998         | 58,706         |
| ECG                                | 9,826          | 9,779          | 9,819          | 10,332         | 10,538         |
| Stress Test                        | 279            | 206            | 192            | 181            | 114            |
| Pulmonary Function Test            | 584            | 501            | 977            | 930            | 956            |
| <i>Total Volumes</i>               | <i>395,580</i> | <i>411,473</i> | <i>427,307</i> | <i>450,224</i> | <i>420,918</i> |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$2,244,231    | \$2,398,383    | \$2,533,718    | \$2,644,571    | \$2,667,583    |
| Revenues directly attributed to service    | \$199,598      | \$197,541      | \$253,776      | \$276,002      | \$271,581      |
| Total net operating expense                | \$2,044,633    | \$2,200,842    | \$2,279,942    | \$2,368,569    | \$2,396,002    |
| Staffing complement (full-time equivalent) | 17.74          | 17.83          | 17.82          | 18.17          | 18.03          |

**Notes**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information**

- Program is funded through global base funding provided by the Central East LHIN.
- Revenues are generated through Pulmonary Function Testing, Stress Testing and Electrocardiograms through fees charged to the Ontario Health Insurance Plan (OHIP) for both Hospital and physicians.



# Maternal Child Care

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

The Maternal Child Care program provides low risk obstetrics care (Level 1). The majority of the patients served reside in the Hospital's prime catchment area of west Northumberland County.

### Service

The inpatient birthing unit is a family centered environment that is equipped with six labour and delivery beds – each with their own private and home-like suite, four overflow beds, a Caesarean-section (C-section) operating room, and advanced fetal and patient monitoring system. A baby safety system provides 24-hour surveillance. The program includes access to the Pre-Natal Admission Clinic, which extends the relationship with the patients and families. The program also provides lactation (breastfeeding) support.

### Health Care Team

The Maternal Child Care team consists of registered nurses specifically trained in obstetrical care, obstetricians, family physicians, midwives, anesthesiologists, respiratory therapists, pharmacy staff, dietitians, support staff, ward clerks and volunteers. This team is committed to and embraces Quality Patient care and is involved in MoreOB risk management program and follows the Society of Obstetricians and Gynecologists guidelines.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other programs

The Maternal Child Care program has interdependencies with emergency, surgery, anesthesiology, gynecology and ambulatory care services.

### Internal HSPs

Anesthesiologists provide 24/7 epidural service. Staff are trained to administer pain relief, both non-pharmacological and pharmacological. The anesthesia and respiratory therapy services provide acute pain and symptom management and respiratory management for both the mother and newborn. Patients have access to the Hospital's full range of diagnostic and therapeutic services, including diagnostic imaging services, laboratory and pharmacy.

### External HSPs

The program has linkages with HKPR District Health Unit and the Central East CCAC for continuity of care, including prenatal education, postpartum follow-up, home care, and breastfeeding support. The program also participates in an integrated program with Markham Stouffville Hospital to provide an infant hearing-screening program.

### Resources

The Maternal Child Care team consists of obstetricians, family physicians, anesthesiologists, itinerate pediatrician, and two midwifery groups. The obstetricians and family physicians provide on-call service 24/7 with locum support for temporary assistance as required.

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## OTHER HEALTH SERVICE PROVIDERS

Level II Maternal Child Care programs exist in Peterborough, Belleville and Oshawa.



# Maternal Child Care

| <b>PATIENT ACTIVITY INDICATORS</b>      | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>            | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Number of beds staffed and in operation | 6              | 6              | 6              | 6              | 6              |
| Admissions – obstetrics                 | 590            | 621            | 606            | 561            | 540            |
| Admissions – newborn                    | 541            | 595            | 597            | 550            | 527            |
| Patient days – obstetrics               | 1,246          | 1,363          | 1,283          | 1,236          | 1,237          |
| Occupancy rate                          | 57%            | 62%            | 59%            | 56%            | 56%            |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$1,422,704    | \$1,467,586    | \$1,538,294    | \$1,614,821    | \$1,711,001    |
| Revenues directly attributed to service    | \$25,851       | \$19,397       | \$19,750       | \$17,623       | \$18,410       |
| Total net operating expense                | \$1,396,853    | \$1,448,189    | \$1,518,544    | \$1,597,198    | \$1,692,591    |
| Staffing complement (full-time equivalent) | 12.17          | 12.70          | 12.16          | 12.31          | 12.63          |

**Notes:**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information:**

- Program is funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service include circumcisions and hearing testing.
- Preferred accommodation revenue for private/semi-private rooms not included above.



# Medical / Surgical Inpatient Acute Care

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Provides care for adult, geriatric and pediatric medical/ surgical patients with a wide variety of clinical conditions, including those who are recovering from surgeries, those hospitalized for acute conditions, and others who may be in the final stages of a progressive and chronic disease.

### Service

This 40-bed medical / surgical program houses six beds equipped for continuous cardiac monitoring (telemetry), and two pediatric beds; three rooms have negative pressure isolation capabilities. The most frequent medical diagnoses include: stroke, chronic obstructive pulmonary disease (COPD), pneumonia, complications of diabetes, wound care, cardiac problems (including heart attacks, abnormal heart rhythm, heart failure, chest pain) and fractured hip. Surgical procedures may require admission for post-operative care, including appendectomy, major bowel surgery, gynecological surgery (hysterectomy), and cancer surgery. Patients are admitted to the units through the Emergency Department, surgical services, other inpatient units, or direct from local family physicians' offices; some are transferred from other hospitals.

### Health Care Team

The medical / surgical team includes nurses, family physicians, general surgeons, anesthesiologists, specialist in internal medicine, respiratory therapists, pharmacists, dietitians, physiotherapists, occupational therapists, speech language pathologist, social workers, Central East CCAC staff, ward clerks, support service workers, Clinical nurse specialists, Professional Practice Leaders and volunteers. Patients and families play key roles in the planning and decision-making process.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other programs

The medical/surgical program supports most other clinical programs at the Hospital. Other Hospital services such as outpatient mental health provide patient consultation to this program. The pharmacy and palliative care staff provide pain and symptom management support.

### Internal HSPs

Patients have access to the Hospital's full range of diagnostic and therapeutic services, including diagnostic imaging services, laboratory and pharmacy. Pharmacy services include medication reconciliation, clinical consultation, pain and symptom management, drug admixture program and management of the drug administration system to name a few. Intensive Care Unit staff monitors all patients that require telemetry.

### External HSPs

Central East CCAC case managers are on site Monday to Friday to assist patients and their families in the proactive coordination of homecare supports necessary for discharge from NHH or assist with the application for long-term care placement. NHH has a service agreement with Northumberland Community Care for the Home at Last Program (HAL), among other support services. This transition service from the Hospital to the home may include: driving and accompanying a patient home, picking up medications and groceries, preparing a small meal, homemaking services and a follow up phone call or visit to check on the patient's well-being. Patients are transferred to Peterborough Regional Health Centre for the following same day procedures: endoscopic procedures, angiograms, pacemaker insertions and follow-up visits to the orthopedic clinic. Patients who require emergency cardiac care (CODE STEMI), or stroke care receive urgent service and are then transferred back to Northumberland Hills Hospital.

### Resources

The patients are admitted to the program under the care of a family physician or a specialist (e.g., surgeon or internist). Patients without a family physician are admitted under the care of a member of NHH's town-call physician group – this group of family physicians assumes care for orphan patients during their hospitalization. In 2012, NHH introduced a hospitalist program. Hospitalists are physicians who are dedicated to provide hospital care to inpatients not covered by GPs.

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### OTHER HEALTH SERVICE PROVIDERS

Peterborough Regional Health Centre, Lakeridge Health Corporation, St. Michael's Hospital, Quinte Health Care and Kingston General Hospital.



# Medical / Surgical Inpatient Acute Care

| <b>PATIENT ACTIVITY INDICATORS</b>             | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>                   | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| # of beds staffed and in operation – adult     | 55             | 55             | 55             | 50             | 38             |
| # of beds staffed and in operation - pediatric | 2              | 2              | 2              | 2              | 2              |
| Admissions – adult                             | 1,926          | 2,031          | 2,130          | 2,180          | 2,308          |
| Admissions – pediatric                         | 117            | 97             | 71             | 78             | 90             |
| Patient days – adult                           | 18,364         | 18,797         | 18,458         | 16,552         | 13,371         |
| Patient days – pediatric                       | 221            | 172            | 116            | 181            | 177            |
| Occupancy rate – adult                         | 93%            | 94%            | 92%            | 91%            | 96%            |
| Occupancy rate – pediatric                     | 30%            | 24%            | 16%            | 25%            | 24%            |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$5,622,634    | \$5,760,430    | \$6,373,667    | \$5,993,309    | \$5,226,755    |
| Revenues directly attributed to service    | \$305          | \$537          | \$278          | \$258          | \$101          |
| Total net operating expense                | \$5,622,329    | \$5,759,893    | \$6,373,389    | \$5,993,051    | \$5,226,654    |
| Staffing complement (full-time equivalent) | 58.91          | 61.80          | 61.62          | 60.77          | 51.90          |

**Notes:**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information:**

- Program is funded through global base funding provided by the Central East LHIN.
- Preferred accommodation revenue for private/semi-private rooms not included above.



# Outpatient Chemotherapy Clinic

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

In an environment that is both respectful, and friendly the outpatient Chemotherapy Clinic provides oncology care for cancer patients living in Northumberland County. The program works in partnership with the Durham Regional Cancer Center (Lakeridge Health Centre, Oshawa) and is committed to providing the best quality of care close to home.

### Service

The outpatient Chemotherapy Clinic provides ambulatory cancer care treatments such as biotherapy, chemotherapy, supportive treatments, education, palliative care and pain management to help support our patients and their families with the diagnosis, treatments and follow up for cancer.

The Clinic is also dedicated to providing benign hematology care for non-cancerous conditions of the blood and bone marrow. Treatments provided include iron, blood and platelet infusions or injectable medications and phlebotomies.

### Health Care Team

Patients benefit from the expertise of the many different professionals that make up your health care team at the Clinic. Some professionals like the oncology nurses patients meet at every visit but there are many others working behind the scenes. The clinic's physicians include an oncologist and hematologist from the Durham Regional Cancer Centre, and two local internists. The Oncology nurses all have achieved recognized oncology and biotherapy educational certification and experience. The Clinic clerk is committed to family centered care, helping patients schedule and coordinate medical appointments for blood work, diagnostic tests, physician visits and treatments, and our supportive staff are relied upon to provide an environment with a high standard of cleanliness.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

There is an interdepartmental team of allied health professionals at NHH that work collaboratively to assess, plan and deliver personalized care for our clinic patients. These include laboratory, pharmacy, diagnostic imaging, social workers, hospice coordinators, respiratory technicians, wound specialists, access center, dietician, and pastoral care.

Some patients may require a referral to surgical or inpatient services at Northumberland Hills Hospital or to another hospital for additional services like radiation, clinical trials or in-patient chemotherapy and treatment. The outpatient Chemotherapy Clinic will assist in linking the patient to those services for all stages of their disease management.

### Internal HSPs

Some patients may receive cancer surgery (for example, for tumor removal) from the NHH Surgical Services as part of their treatment plan.

### External HSPs

The outpatient Chemotherapy Clinic provides a link to community support services including the Central East CCAC, Hospice Northumberland, and cancer support groups (Look Good, Feel Good program, hat donations program, and support group referrals to the Hearth Place Cancer Center in Oshawa, and the Canadian Cancer Society). The Clinic receives referrals from primary care physicians for hematology consults, medication and blood product transfusions.

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## OTHER HEALTH SERVICE PROVIDERS

Peterborough Regional Health Centre, Lakeridge Health Corporation and various Toronto hospitals.



# Outpatient Chemotherapy Clinic

| <b>PATIENT ACTIVITY INDICATORS</b> | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|------------------------------------|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>       | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Number of operating stations       | 6              | 6              | 6              | 6              | 6              |
| Chemotherapy visits*               | 2,119          | 946            | 1,187          | 1,746          | 2,687          |
| Hematology visits                  | Included above | 1,676          | 1,575          | 1,083          | 984            |

*\*including systemic chemotherapy*

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$831,110      | \$939,585      | \$970,753      | \$1,251,282    | \$1,368,683    |
| Revenues directly attributed to service    | \$572,221      | \$596,110      | \$588,547      | \$786,459      | \$958,288      |
| Total net operating expense                | \$258,889      | \$343,475      | \$ 382,206     | \$464,823      | \$410,395      |
| Staffing complement (full-time equivalent) | 1.97           | 2.09           | 2.14           | 2.69           | 3.65           |

## Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other funding/revenue information

- Program is funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service primarily relate to the reimbursement of chemotherapy drug costs from Cancer Care Ontario.





# Outpatient Dialysis Clinic

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Northumberland Hills Hospital's 12-station Outpatient Dialysis Clinic is a satellite of the Regional Renal Program located at Peterborough Regional Health Centre (PRHC). Care can be provided to approximately 72 patients living with chronic kidney disease who require hemodialysis treatments to sustain their life. Additionally, the program hosts an outreach Pre-Dialysis and Nephrology Clinic as part of the Regional Renal Program for individuals who have reduced kidney function. The Outpatient Dialysis Clinic catchment area extends to the entire Northumberland County boundary.

### Service

Patients who have insufficient kidney function receive life sustaining hemodialysis treatments three times weekly, for an average of four hours per treatment. Individuals living with reduced kidney function where the Glomerular Filtration Rate (GFR) is between 30-60% are seen in the Nephrology Clinic. Here patients receive medical management, treatment and support; while those pre-dialysis patients with a GFR of between 15-30% are seen in the Pre-Dialysis Clinic and receive support from the Interdisciplinary team (physician, nursing, pharmacy, dietitian and social work). The focus of the Pre-Dialysis Clinic is to provide care which aides in the assessment, medical management, treatment and support. The goal is to delay the progression of kidney disease.

### Health Care Team

This Outpatient Dialysis Clinic relies on highly experienced Registered Nurses (RNs), who receive in-depth orientation. Nurses are also required to complete courses which are part of the Nephrology Nursing certificate. Nurses are also encouraged and supported in achieving the Nephrology Certification with the Canadian Nurses Association. The patients are supported medically by PRHC nephrologists, who are onsite at NHH twice per month. The Dialysis Attendants are invaluable members of the team who also complete specialized training and certification in order to support the clinic's needs. Additional team members include dietitians, social worker, pharmacy personnel and rehabilitation therapy team.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other programs

The Outpatient Dialysis Clinic works closely with the Emergency Department, Palliative Care program, Diagnostic Imaging, Pharmacy, Laboratory and Occupational Therapy.

### External HSPs

PRHC Regional Renal Program; Vascular Surgery at regional centres; Vascular Access Nurse; Canadian Blood Services; Central East Community Care Access Centre; Northumberland Community Care (volunteer drivers).

### Resources

Highly dependent on capital intense dialysis equipment and reverse osmosis water purification system.

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## OTHER HEALTH SERVICE PROVIDERS

Lakeridge Health Corporation in Oshawa to the west, Kingston General Hospital (with satellites in Belleville and Picton) to the east, and PRHC to the north (which also includes a satellite Dialysis clinic at Ross Memorial Hospital in Lindsay).



# Outpatient Dialysis Clinic

| <b>PATIENT ACTIVITY INDICATORS</b>                              | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>                                    | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Hemodialysis treatments – Level I                               | 5,575          | 4,085          | 3,173          | 2,978          | 3,166          |
| Hemodialysis treatments – Level II                              | 2,767          | 3,161          | 3,898          | 3,905          | 3,829          |
| Total hemodialysis treatments                                   | 8,342          | 7,246          | 7,071          | 6,883          | 6,995          |
| Number of operating stations                                    | 12             | 12             | 12             | 12             | 12             |
| Nephrology clinic visits  | 389            | 437            | 385            | 417            | 530            |
| Number of patients at fiscal year-end (March 31 <sup>st</sup> ) | 48             | 45             | 43             | 48             | 44             |
| Number of shifts per day (Monday to Saturday)                   | 2              | 2              | 2              | 2              | 2              |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$2,706,205    | \$2,396,827    | \$2,277,471    | \$2,266,950    | \$2,344,368    |
| Revenues directly attributed to service    | \$2,482,022    | \$2,296,907    | \$2,243,332    | \$2,211,027    | \$2,257,295    |
| Total net operating expense                | \$224,183      | \$99,920       | \$34,139       | \$55,923       | \$87,073       |
| Staffing complement (full-time equivalent) | 18.63          | 17.02          | 16.06          | 15.40          | 16.19          |

**Notes:**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information:**

- Program is funded by volume and infrastructure priority program funding provided by the Ministry of Health and Long Term Care (Cancer Care Ontario) through PRHC.

**OTHER RELEVANT INFORMATION**

Conventional hemodialysis treatments must be done every other day (3 times per week). Most patients are of senior age that experience disabilities due to their disease.



# Palliative Care Program

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Northumberland Hills Hospital's Palliative Care Program is designed to accommodate patients and their families who are living with a terminal illness when disease is not responsive to curative treatment. Patients come from west Northumberland and neighbouring communities.

### Service

Patients are admitted to the Palliative Care unit for pain and symptom management and/or for end of life care. Some stay for the duration of their illness while others go home with support from community partners. In the Palliative Care unit, care is designed to respond to the need for active, specialized intervention to relieve pain or other distressing symptoms such as nausea and vomiting, or shortness of breath. There is also a specialization in meeting the psychosocial and spiritual needs of the patients and their family. The Palliative Care Program provides short-term care, but usually no more than three months.

### Health Care Team

The Palliative Care unit is staffed by Registered Nurses who have participated in specialized education and hold certificates in Palliative Care Nursing. The Registered Nurses have all achieved the Canadian Nurses Association Certification in Palliative and Hospice Nursing and act as a resource to staff and patients throughout the Hospital and the greater community.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

The Palliative Care Program depends heavily on the pharmacy services at NHH. The pharmacists are leaders in pain and symptom management and play a significant role in the development of care plans and strategy development for each patient on the Palliative Care unit.

### Internal HSPs

Rehabilitation services are provided by the therapy staff on the Inpatient Rehabilitation Service and the Complex Care Unit. Nursing staff from the Complex Care/Long Term Care Unit provide support and back up to the staff on the Palliative Care Unit. Social work and discharge planning are other services that are shared hospital-wide.

### External HSPs

There is a strong connection between the Hospice Northumberland (Community Care Northumberland) and the NHH Palliative Care Program. Volunteers from Hospice are paired with patients on the Palliative Care unit. The Hospice volunteer provides support to the patient and their family while they are in hospital and will continue to work with them once the patient has been discharged. Families are able to participate in the many support programs offered by Hospice. Central East CCAC provides services to patients if discharge home.

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## OTHER HEALTH SERVICE PROVIDERS

Hospice Northumberland (Community Care Northumberland); Campbellford & District Palliative Care Service; and, physicians that specialize in palliative care and provide support to patients living in the greater Northumberland region. There is a small residential hospital located in Warkworth.



# Palliative Care Program

**PATIENT ACTIVITY INDICATORS**

| Indicator Description                   | Actual<br>2007/08 | Actual<br>2008/09 | Actual<br>2009/10 | Actual<br>2010/11 | Actual<br>2011/12 |
|---|-------------------|-------------------|-------------------|-------------------|-------------------|
| Number of beds staffed and in operation | 6                 | 6                 | 6                 | 6                 | 6                 |
| Admissions                              | 112               | 103               | 104               | 142               | 145               |
| Patient days                            | 2,310             | 2,348             | 2,185             | 1,841             | 1,879             |
| Occupancy rate*                         | 105%              | 107%              | 100%              | 84%               | 86%               |
| Average length of stay (days)           | 12.62             | 13.34             | 21                | 13                | 13                |

**FINANCIAL OVERVIEW**

| Description                                | Actual<br>2007/08 | Actual<br>2008/09 | Actual<br>2009/10 | Actual<br>2010/11 | Actual<br>2011/12 |
|--|-------------------|-------------------|-------------------|-------------------|-------------------|
| Total gross operating expense              | \$915,130         | \$968,465         | \$966,394         | \$1,048,623       | \$1,001,873       |
| Revenues directly attributed to service    | \$0               | \$0               | \$0               | \$0               | \$0               |
| Total net operating expense                | \$915,130         | \$968,465         | \$966,394         | \$1,048,623       | \$1,001,873       |
| Staffing complement (full-time equivalent) | 8.77              | 9.01              | 8.64              | 9.11              | 9.02              |

**Notes:**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information:**

- Program is funded through global base funding provided by the Central East LHIN.
- Preferred accommodation revenue for private/semi-private rooms not included above.

**OTHER RELEVANT INFORMATION**

\*The Palliative Care Program at NHH has an occupancy rate of greater than 100%. There are often patients in other parts of the Hospital awaiting admission to the Palliative Care unit.



# Pharmacy Services

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

The Northumberland Hills Hospital Pharmacy provides service to the interdisciplinary team and patients receiving care at the Hospital, both as inpatients and outpatients through clinics and the Emergency Department.

### Service

The NHH Pharmacy offers a comprehensive program that includes clinical consultation, pain and symptom management, chemotherapy and management of the Hospital's medication administration systems including the Pyxis automated dispensing machines. With a focus on patient safety, the pharmacy team are leaders in a number of initiatives such as medication reconciliation and integration of leading edge technology into medication administration.

### Health Care Team

The pharmacy team is comprised of pharmacists and registered pharmacy technicians with expertise in the hospital practice setting.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

Northumberland Hills Hospital's Pharmacy provides clinical consultation, pain and symptom management and patient safety initiatives such as medication reconciliation for inpatient programs as well as ambulatory programs such as the Emergency department and Ambulatory clinics. The program works closely with the Outpatient Dialysis Clinic and Outpatient Chemotherapy Clinic.

### Internal HSPs

The Pharmacy service works closely with all members of the health care team. The clinical dietitian and pharmacists work closely when providing enteral support to clients in the hospital.

### External HSPs

The NHH Pharmacy service has close partnerships with the Outpatient Dialysis Clinic, working with the nephrologists and interdisciplinary team to provide service to patients receiving dialysis at the NHH satellite. The NHH Pharmacy works in collaboration with the Outpatient Chemotherapy Clinic and the interdisciplinary team to provide clinical consultation and chemotherapy to patients through the satellite chemotherapy clinic on-site at NHH.

### Resources

The Pharmacy service has Pharmacists and Registered Pharmacy Technicians on staff providing clinical consultation and medication delivery on site 13 hours a day Monday to Friday and 7.5 hours per day over the weekend. Pharmacists are on-call after hours to provide ongoing clinical support for the interdisciplinary team. The pharmacy service is highly automated, including Pyxis automated dispensing machines, electronic medication administration record, and bedside verification using barcode technology.

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### OTHER HEALTH SERVICE PROVIDERS:

Pharmacy services and clinical consultation is provided in the community by a variety of community based pharmacies.



# Pharmacy Services

| <b>PATIENT ACTIVITY INDICATORS</b> | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|------------------------------------|----------------|----------------|----------------|----------------|----------------|
| <b>Annual Volumes</b>              | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Medication doses                   | 557,426        | 602,703        | 628,885        | 644,483        | 634,974        |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | \$685,147      | \$693,961      | \$724,660      | \$809,251      | \$821,698      |
| Revenues directly attributed to service    | \$54,557       | \$48,924       | \$33,252       | \$55,287       | \$35,158       |
| Total net operating expense                | \$603,590      | \$645,037      | \$691,408      | \$753,964      | \$786,540      |
| Staffing complement (full-time equivalent) | 7.08           | 6.88           | 7.67           | 8.25           | 8.16           |

**Notes**

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

**Other funding/revenue information**

- Program is funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to this service include funding from Ontario Drug Benefit Program, Cancer Care Ontario, Kingston and Durham Regional Cancer Centers, and Renal Insufficiency (ESRD) Program for dialysis.



# Restorative Care

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

The Restorative Care program supports a “Home First” philosophy and is intended for those individuals who have been assessed and deemed unable to return directly home but require and will benefit from a short period of inpatient transitional care to improve strength, endurance, or functioning so that they may safely return home. The primary client population serviced by the Restorative Care program is the frail elderly. The program is also intended for individuals who may require a short period of restorative care prior to being eligible for a more intensive rehabilitation program.

### Service

Opened in March 2011, dedicated services within the Restorative Care unit include physiotherapy, occupational therapy, and speech language therapy. With dedicated therapy space for restorative care patients, a dining room, and access to the Hospital’s therapeutic gardens, the Restorative Care unit is fully devoted to patient recovery. Restorative Care is a planned, comprehensive program that provides low intensity specialized care after an acute care illness, injury or de-conditioning. Restorative care focuses on optimizing an individual’s capacity to maximize their level of independence to enable them to return home to the community. Home may include their own home, a retirement home, or supportive housing.

### Health Care Team

The Restorative Care team consists of nursing staff, a Physiotherapist, Occupational Therapist, Recreation Therapist, Rehabilitation Assistants, physicians, social worker and dietitian. The staff are trained with specialization in rehabilitation therapies.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other Programs

Referrals are received from internal acute care programs. Occupational therapists on the Restorative Care unit provide “Assistive Devices Program” assessments for patients in other parts of the Hospital when it is necessary to purchase equipment (e.g. wheelchairs and walkers) for patients who are being discharged.

### Internal HSPs

The therapists provide vacation relief for other hospital programs. Physiotherapists and Occupational Therapists provide services to the Palliative Care Program. Speech language therapy, recreation therapy and social work are services that are shared with other Hospital programs.

### External HSPs

Central East CCAC provides services and equipment to patients upon discharge. The services provided by Community Care Northumberland are used to help discharge patients from Hospital by ensuring adequate supports are available at home.

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## OTHER HEALTH SERVICE PROVIDERS

Restorative Care unit at Campbellford Memorial Hospitals.



## Restorative Care

| <b>PATIENT ACTIVITY INDICATORS</b>      | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|---|----------------|----------------|----------------|----------------|----------------|
| <b>Indicator Description</b>            | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Number of beds staffed and in operation | N/A            | N/A            | N/A            | 16             | 16             |
| Admissions                              | N/A            | N/A            | N/A            | 22             | 202            |
| Patient days                            | N/A            | N/A            | N/A            | 305            | 4,795          |
| Occupancy rate                          | N/A            | N/A            | N/A            | N/A            | 82%            |
| Average length of stay (days)           | N/A            | N/A            | N/A            | N/A            | 25             |

| <b>FINANCIAL OVERVIEW</b>                  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  | <b>Actual</b>  |
|--|----------------|----------------|----------------|----------------|----------------|
| <b>Description</b>                         | <b>2007/08</b> | <b>2008/09</b> | <b>2009/10</b> | <b>2010/11</b> | <b>2011/12</b> |
| Total gross operating expense              | N/A            | N/A            | N/A            | \$97,469       | \$1,208,580    |
| Revenues directly attributed to service    | N/A            | N/A            | N/A            | \$50,125       | \$601,520      |
| Total net operating expense                | N/A            | N/A            | N/A            | \$47,344       | \$607,060      |
| Staffing complement (full-time equivalent) | N/A            | N/A            | N/A            | 1.12           | 14.00          |

### Notes

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

### Other funding/revenue information

- Program is funded through global base funding provided by the Central East LHIN.
- Preferred accommodation revenue for private/semi-private rooms not included above.





# Surgical Services

(Operating Room, Day Surgery, Recovery)

## SERVICE DESCRIPTION AND POPULATION SERVED

### Population

Surgical Services include general surgery, gynecology, ophthalmology, orthopedics, otolaryngology (ear, nose, throat), plastics, and dental/oral surgery. Day surgery and inpatient surgery is provided for adult and pediatric patients. Eighty-seven percent of the surgical procedures are elective same day surgery cases. Patients undergoing the following surgical procedures may require admission to Hospital for post-operative care: appendectomy, major bowel surgery (colectomy), gynecological surgery (hysterectomy), and cancer surgery (mastectomies).

### Service

Surgical care is provided in three operating rooms and two recovery areas with state-of-the-art medical equipment. Preoperative consultations are available as required for patients who will be undergoing an operative procedure; these include a nursing consultation, a telephone consultation, and an anesthesiologist consultation. The general surgeons, anesthesiologists and perioperative nurses provide emergency on-call coverage 24/7.

### Health Care Team

The Surgical Services team includes registered nurses specifically trained in operative and perioperative care, general surgeons, obstetrician/gynecologists, an ophthalmologist, anesthesiologists, visiting surgeons (ear/nose/throat, plastic, dental/oral, and orthopedic), respiratory therapists, appointment booking service, Central Supply Reprocessing (instrument cleaning, sterilization), pharmacy, diagnostic imaging, laboratory, support staff and volunteers.

## INTERDEPENDENCIES WITH OTHER PROGRAMS / HEALTH SERVICE PROVIDERS (HSPs) / RESOURCES

### Other programs

Interdependencies with the emergency department, diagnostic imaging (for example, patients undergoing liver and lung biopsies are recovered in day surgery), and inpatient units. The Surgical Service has a strong interdependency with the Central Supply Reprocessing department that is responsible for cleaning, disinfecting, reprocessing and sterilizing all surgical instruments and endoscopes according to manufacturers' instructions and regulatory standards. A fourth operating room for Caesarian-sections (C-sections) is located in the birthing suites unit of the Maternal Child program.

### Internal HSPs

Access to the Hospital's full range of diagnostic and therapeutic services, including diagnostic imaging services, laboratory and pharmacy.

### External HSPs

Surgical specimens are sent to the pathology laboratory at a regional centre for analyses.

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## OTHER HEALTH SERVICE PROVIDERS

These services are also provided at Peterborough Regional Health Centre, Lakeridge Health Corporation, Quinte Health Care and Kingston General Hospital.



# Surgical Services

(Operating Room, Day Surgery, Recovery)

| PATIENT ACTIVITY INDICATORS                    | Actual       | Actual       | Actual       | Actual       | Actual       |
|--|--------------|--------------|--------------|--------------|--------------|
| Indicator Description                          | 2007/08      | 2008/09      | 2009/10      | 2010/11      | 2011/12      |
| Cataract surgeries                             | 669          | 719          | 608          | 1,013        | 1,060        |
| Colonoscopies (including colorectal screening) | 1,642        | 1,997        | 1,747        | 1,705        | 1,560        |
| Cancer surgeries                               | 173          | 198          | 75           | 73           | 96           |
| General surgeries (funded only)                | 242          | 231          | 292          | 256          | 216          |
| Other surgeries                                | 2,113        | 1,853        | 2,019        | 2,060        | 1,921        |
| <i>Total surgical cases</i>                    | <i>4,839</i> | <i>4,998</i> | <i>4,741</i> | <i>5,107</i> | <i>4,853</i> |
| Total inpatient cases                          | 534 (11%)    | 671 (13%)    | 651 (14%)    | 620 (12%)    | 631 (13%)    |
| Total day surgery cases                        | 4,305 (89%)  | 4,327 (87%)  | 4,090 (86%)  | 4,487 (88%)  | 4,222 (87%)  |

| FINANCIAL OVERVIEW                         | Actual      | Actual      | Actual      | Actual      | Actual      |
|--|-------------|-------------|-------------|-------------|-------------|
| Description                                | 2007/08     | 2008/09     | 2009/10     | 2010/11     | 2011/12     |
| Total gross operating expense              | \$2,324,360 | \$2,399,162 | \$2,506,950 | \$2,799,681 | \$2,808,968 |
| Revenues directly attributed to service    | \$329,511   | \$276,033   | \$288,018   | \$476,772   | \$499,630   |
| Total net operating expense                | \$1,994,849 | \$2,123,129 | \$2,218,932 | \$2,322,909 | \$2,309,338 |
| Staffing complement (full-time equivalent) | 15.51       | 15.78       | 15.63       | 16.05       | 15.83       |

## Notes:

Gross and net operating costs only reflect direct operating costs, including: salaries and wages, employee benefits, medical / surgical supplies, drugs, etc. The figures exclude overhead and administrative costs, such as housekeeping and utilities.

## Other funding/revenue information:

- Program is funded through global base funding provided by the Central East LHIN.
- Revenues directly attributed to the Surgical Service relate primarily to one-time funding for provincial Wait-Time priority services. This funding is for incremental cases over the base volumes funded through the global base funding. Wait-Time funding is currently received for the following surgical cases: cataracts, colonoscopies, general surgeries and cancer surgeries. The funding is received from the Central East LHIN and Cancer Care Ontario.

## OTHER RELEVANT INFORMATION

Surgical wait time performance (results for the period April 1, 2011 to March 31, 2012)

| Type of surgery  | Provincial Target | Provincial Actual | LHIN Actual | NHH Actual |
|------------------|-------------------|-------------------|-------------|------------|
| General Surgery  | 182 days          | 108 days          | 83 days     | 53 days    |
| Cataract Surgery | 182 days          | 125 days          | 114 days    | 33 days    |
| Cancer Surgery   | 48 days           | 73 days           | 56 days     | 40 days    |