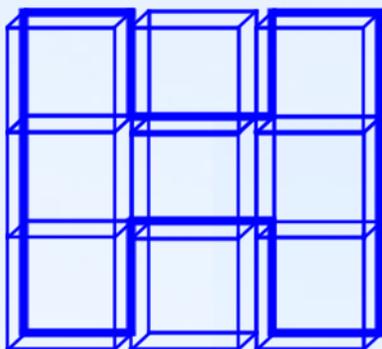


LAKE OF THE WOODS DISTRICT HOSPITAL

Annual Report 2015-2016



“Quality Care from a Quality Team . . . Looking Well into the Future”



Mission

**Lake of the Woods District Hospital exists so that:
The people we serve receive optimal health care
for a justifiable use of public resources.**

This End is further interpreted to include, but not limited to:

- ◆ People with illness or injury achieve optimum outcomes.
- ◆ Those we serve have information to make positive lifestyle choices.
- ◆ People have access to an integrated health care system.

Vision

- ◆ State of the art new facility.
- ◆ Effective E-Health system.
- ◆ Appropriate sufficient workforce.
- ◆ Well governed sustainable funding.
- ◆ Healthy lifestyle choices.
- ◆ Timely access to primary health care.
- ◆ Seamless continuum of collaborative services.
- ◆ Visible health care system inspiring confidence.

Values

- ◆ Publicly Funded - Publicly funded system.
- ◆ Sustainable - Sustainability with resources and people for the future.
- ◆ Accountable - Accountability to the public.
- ◆ Inclusive Care - A level of care that is inclusive.
- ◆ Shared Support - Health care is a shared responsibility of the individual, community and government.
- ◆ Personal Responsibility - People are responsible for their own health.
- ◆ Continuous quality improvement and innovation.

Message from the Board Chair



The Board of Directors of the Lake of the Woods District Hospital is incredibly proud of its employees, volunteers, and the privileged health professionals who care for our patients. In spite of the many challenges we faced in 2015-16, these dedicated individuals did their utmost to help our patients achieve optimal health outcomes and we cannot thank them enough.

One of the challenges we face is the health system funding reform initiative which has impacted our revenues severely and despite our efforts to innovate and adapt, we have run successive deficits. Unless changes to the funding model are made and soon, our long term viability is in jeopardy. A solution must be found in the coming year that will enable us to continue to offer the services our residents need and prefer to receive close to home.

Another challenge is the recruitment of health care professionals to the community. This past year saw the emergence of a grassroots organization, the Kenora Area Healthcare Working Group. Its two short-term objectives are to improve recruitment efforts and to increase access to Manitoba health services for residents of area First Nations and municipalities. As a member of the working group the hospital has committed a share of the funds needed to hire a full time recruiter for at least the next three years.

A third challenge concerns the governance of health care. The Northwest Local Health Integration Network (LHIN) continues to implement its Health Services Blueprint which is intended to create an integrated health system in the region. Concepts such as Integrated District Networks, District Health Campuses, and Local Health Hubs and how they will affect the role of the hospital board and the hospital's operations are not yet well understood by many stakeholders.

The final challenge to mention in this report is the condition and functionality of our hospital building. We expect to undertake a major retrofit of our suite of operating rooms and central sterilization room in the coming year. While the funding for this project is welcome, we know that this

represents another stop-gap measure while we continue to advocate for a new hospital within a health services campus.

Accreditation Canada completed its assessment of the hospital's operations and governance in 2015-16. We were pleased to receive "Accreditation with Commendation" and as directors we look forward to enhancing our governance processes in response to the recommendations received.

Board members participated in a number of activities to increase their effectiveness within the Policy Governance model. This included a governance workshop in November, orientation for new members, attendance at conferences, and regular education on various aspects of hospital operations at the start of every board meeting.

We were fortunate to welcome 3 new volunteer board members in 2015-16. David Schwartz returned to the board after a number of years away, while Jacqueline Diamond and Wendy Cuthbert are first-timers who are quickly grasping the issues we face. Continuing their volunteer service to the board were Sherry Moreau, Darlene Paypompee, Joan Reid and Theresa Stevens. I thank them all for their support and contributions to board discussions and decision-making.

Mention must be made of the incredible support we receive from donors through the efforts of the Hospital Foundation, Hospital Auxiliary, and Retired Railroaders. Much of the modern equipment available to patients and staff is a direct result of the donations of area residents and visitors. I attended my first Lifesavers Dinner last August and was astounded at the generosity I witnessed.

In closing, I want to give thanks to Drs. Brad Kyle and Stephane Foidart for representing the medical staff association on the board of directors, to Kaila Stepanik and Kaitlin Myles for their logistical and administrative support, and of course the members of the senior team who provide the board with wise counsel and their staff with leadership and advocacy: CEO and President Mark Balcaen, Chief of Staff Dr. Kerry McDonald, Vice President of Patient Services Kathy Dawe, Vice President of Corporate Services Cindy Gasparini, and Vice President of Mental Health and Addiction Programs Bruce Siciliano.

Respectfully Submitted,
Dean Carrie
Chair, LWDH Board of Directors



Message from the President and CEO

“To improve is to change; to be perfect is to change often.” - Winston Churchill

“There is nothing permanent except change.” - Heraclitus

2015-16 was a year of significant change at the Lake of the Woods District Hospital. While it may be remembered most for the moving, integration, and renovation of the Obstetrical Unit with the Medical/Pediatrics Unit, or the integration of community mental health and addiction services within the rest of the hospital units, many other major changes were undertaken. The hospital has been planning or implementing over 40 separate projects and initiatives during the year in addition to our usual operations. These projects and initiatives include: a number of significant renovation projects, rural and northern hospital funding initiatives, proposals for a hospitalist and internal medicine service, privacy related initiatives, service accreditation activities, major medical equipment research and purchasing, a Workplace Violence Prevention and Management Committee, Ambulatory Day Clinic services, Alternate Level of Care (ALC) Crisis Designation, and staff/medical staff recruitment to name a few. These tasks have consumed a tremendous amount of staff, management, and professional staff time over and above the regular activities associated with operating a hospital. I wish to acknowledge and thank all managers, staff, and professional staff who have contributed to these and many other initiatives.

During the past year, our hospital has been reviewed and evaluated by six (6) external independent agencies. LWDH passed the tests for compliance, or was recognized with distinction, by all of the following agencies:

1. Accreditation Canada, which reviewed all hospital services;
2. Kenora Rainy River Regional Laboratory Program;
3. Ontario College of Pharmacists;
4. Health Care Insurance Reciprocal of Canada (HIROC); and
5. The Ontario Hospital Association and the Ministry of Health and Long-Term Care for the Quality Healthcare Workplace Award.

In November, our hospital was again recognized with a “Gold” Quality Healthcare Workplace Award from the Ontario Hospital Association and the Ministry of Health and Long-term Care. This award recognizes the hospital as a leader in Ontario in creating a healthy workplace for our staff.

Once again our patients, through our annual Patient Satisfaction Survey, have indicated their satisfaction with the care and support they received. Over the five months the survey was conducted, 96% of all patients who responded to the question: “If I needed to be in hospital again I would feel comfortable to return to this hospital” answered “definitely yes.” Over 95% of respondents an-

swered “definitely yes” to the question: “I would recommend this hospital to a friend or family member.” Over 91% percent of all patients who responded rated their “overall satisfaction with their experience with the hospital” as very satisfied or satisfied.

In February, the hospital created a Workplace Violence Prevention and Management Committee in response to the increasing frequency of violent incidents being seen in the hospital. The Task Force has a number of sub-committees looking at many different aspects of workplace violence and a range of solutions that will create a safer workplace for our staff and hospital for our patients and their family members. The Task Force is expected to report on its recommendations to Senior Management this summer.

The Lake of the Woods District Hospital Foundation continues its excellent work in fundraising and promoting the hospital through its highly successful community fundraising events. This past year’s four events: Boobie Nights, The MNP/Hospital Foundation Charity Golf Classic, the Lifesavers Dinner and Auction, and the Tree of Life Campaign raised over \$357,000, which will be used for equipment purchases and renovations. In total, the Lake of the Woods District Hospital Foundation provided \$812,000 to the hospital in 2015-16. We are also very grateful to the Lake of the Woods District Hospital Auxiliary and the Retired Railroaders who, in addition to providing patient comfort through the gift shop and other volunteer services within the hospital, jointly raised over \$73,000.00 for needed medical equipment.

During the past year, our hospital met ten out of eleven quality improvement targets as set out in our Quality Improvement Plan (QIP) for 2015-16. The one missed target was a balanced budget. This is an improvement over the previous year where we met seven out of ten quality improvement targets.

It is through the collective and coordinated efforts of all our Board members, managers, staff, medical staff, foundation, auxiliary, and patients and their family and friends that we are able to provide high quality healthcare. I want to express my sincere thanks to all of our staff, managers, and medical staff for the excellent care they provide to our community. I also want to thank our volunteer Board members who dedicate their time and energy into advancing the quality, safety, and caring we all strive to provide each day to our community.

I would like to thank and recognize my Senior Managers: Cindy Gasparini, Bruce Siciliano, Kathy Dawe, and Dr. Kerry MacDonald whose commitment, caring, and work ethic are deeply appreciated and recognized. Mrs. Dawe will be retiring this June after a career spanning over 26 years at LWDH. I would like to express my gratitude to her for her professionalism, caring, and excellent leadership during her exemplary career.

Respectfully Submitted,

Mark Balcaen, M.H.Sc., CHE, FACHE
President and Chief Executive Officer



Message from the Chief of Staff

Dear Board Members, Colleagues, and Members of the Public,

This year I wish to highlight the cooperation between some branches of the Ministry of Health and Long-term Care (MOHLTC) and the Lake of the Woods District Hospital (LWDH). Health care human resources remain an ongoing concern with a significant amount of our ER shifts being covered by locum MDs through the HealthForceOntario (HFO) Program. It is unlikely the ER would stay open 24/7/365 without this help and to ensure this requires a large administrative effort both from the MOHLTC and the LWDH. I wish to acknowledge the efforts of our administration secretaries, Dr. Sean Moore, Dr. Mandy Spencer, and Mr. Mark Balcaen for their efforts. It is unlikely the LWDH will be able to cover all, or even most, ER shifts for some time yet.

Additional assistance for the MOHLTC supports a local mentorship program to orientate and train local MDs to ER practice/skills, and helps to ensure some local MDs are able to work here. Currently one full-time local MD is in this mentorship program and this requires support of qualified senior MDs from our own staff. The LWDH continues to petition the MOHLTC for ongoing support of this program.

Further joint work with the MOHLTC is devoted toward recruitment of multiple skill sets of MDs including: family MDs, GP anesthetists, pediatricians, internal medicine, and MDs to assume inpatient care duties. Although less than completely successful the joint effort has provided some

MD support via locums, but does not yet promise to fill all positions. I anticipate this will improve once a community recruiter is added to the current efforts. Unfortunately, the MD labour pool does not see Kenora as the desirable community we do.

I would also like to highlight the cooperation of the LWDH and the Winnipeg Regional Health Authority (WRHA). Although there is great local concern regarding the Manitoba border, and difficulty getting some patients to Winnipeg services, on the whole we get significant service. The relationship between the WRHA service administration and the LWDH is good. Communication problems do exist with individual services/wards and the “bed doctors” that are responding to the pressure within the Manitoba system. I would point out the well published over-capacity/crowding of the WRHA hospitals creates a real bed pressure, which is similar to the closures at the Thunder Bay Regional Health Sciences Centre (TBRHSC).

Ongoing efforts continue with our MOHLTC and WRHA partners in these times of tough fiscal resources, but mostly the cooperation is productive and positive.

Respectfully submitted,

J.K. MacDonald, MD, FRCP

Chief of Staff



Message from the Vice President of Patient Services and Chief Nursing Officer

It is with mixed emotions that I submit this summary for the 2015-16 fiscal year. Once again, the patient experience and patient journey are reflected in the stories included in this year's Annual Report. There are so many positive stories, and so many challenges. It has been a year of difficult decisions for managers and for staff. It is important that we now take time to evaluate those changes and stay or change the course as needed. I will be leaving the patient care team and retiring in June of 2016. Donna Makowsky will take over this leadership role. I wish to thank the entire Senior Management, Management and hospital staff for their support and resilience in championing patient care as the highest priority.

2015-16 patient care highlights include:

- Integration of Obstetrics program with 2E Adult Medicine/ Pediatrics Unit.
- New partnership with Mental Health & Addictions program to support interprofessional holistic care for patients.
- Accreditation with Commendation
- Continued succession planning to replace key manager & patient care positions
- Progress towards a comprehensive Electronic Patient Record (EMR) continues. The Meditech project team successfully implemented electronic Physician Progress Note and continues progress to add departments to Community Wide Scheduling module. The Surgical Services department is the first out-patient department to use the Patient Care System to docu-

ment patient care. These projects support a LHIN wide EMR and support patient safety initiatives.

- OR/MDR (Medical Devices Reprocessing) Capital Renovation Project: We continue to move towards making the renovation project a reality. Phase 1 is set to begin in October 2016. Completion will bring our current surgical services and MDR departments' greater functional ability, staff and patient safety features, and capacity to care for our patients in a modern and safe environment.

It is acknowledged that the LWDH continues to move through difficult times. The Ontario government's HSFR (Health System Funding Reform) has placed severe pressures on our team; management and frontline staff alike. There are continued challenges ahead. We continue to work with our partners to ensure our patients' needs are met. We also continue to lobby the government to fund our hospital appropriately. We respect and acknowledge that this must be done in a fiscally responsible and efficient manner.

The LWDH greatest resource is our staff - all of our staff. We are required however, to examine how we deliver care and where we deliver care to utilize available resources efficiently and responsibly. Change and challenge are inevitable. Working together, we can continue to provide excellent care to our patients, their families, and the communities we serve.

Respectfully Submitted,

Kathy Dawe, RN, BHScN, CHE
Vice President Patient Services & Chief Nursing Officer



Message from the Vice President of Corporate Services and Chief Financial Officer

The 2015-16 year was a period of significant evolution and change for our Hospital. We continue to be challenged by Health System Funding Reform, which has resulted in a significant loss of funding for our Hospital.

We commend our hard working staff in their dedicated efforts to implement the many measures identified in our Hospital Improvement Plan in an attempt to move toward balancing our budget. Although we ended the year with a \$841,329 deficit, we have made positive ongoing changes to our processes and have maintained all services for our patients. We continue to work with the LHIN and MOHLTC to strive toward a solution to restructure the funding methodology to recognize our unique needs as a smaller community hospital.

The Support Services departments continue to provide a solid supporting foundation for the provision of front line services. One of the highlights of our year was the implementation of "Room Service", a new patient food delivery system whereby eligible patients are able to order meals, from a menu based system, at the time of their choosing. Food and nutrition are an important part of medical treatment and this program has been extremely well received by patients and has resulted in increased patient satisfaction.

Through our affiliation with the North West Supply Chain, we have integrated access, along with all hospitals in our region, to shared purchasing initiatives, expanded supply chain expertise and enhanced technological tools. This partnership has resulted in annualized savings of over \$400,000 for LWDH.....money which can now be reinvested back into front line patient care. Our Information Technology department has spent the year upgrading much of our technological infrastructure and continues to provide excellent support to our ever growing information network.

Through the Healthcare Infrastructure Renewal Fund (HIRF) we were fortunate to undergo the implementation of several much needed infrastructure projects. A complete replacement of the Reverse Osmosis system will ensure

the continued safety of water treatment for our Dialysis patients. Four new refrigeration cooler replaced the aged and deteriorated units in our Morgue, which provides autopsy services for the entire district. A fully accessible/ bariatric patient room, including an open concept shower and accessible washroom facilities has been developed on our 3rd floor Medical Unit. All citizens of Kenora and passing visitors will be guided by the new illuminated "Big H" sign which has replaced the previously damaged signage. After six years of lobbying, planning and design we at last have received approval to go to tender of the complete redevelopment of our Surgical Services and MDR Departments. We are looking forward to proceeding with this exciting project which will bring our Surgical Services physical facilities into the modern age. Construction is projected to commence in the fall of this year. The maintenance crew has continued to patch and renovate our aging infrastructure as we await the attainment of our long term goal of a new healthcare campus.

Our Central Ambulance Communication Centre continues to develop and strengthen partnerships with local public security departments as well as with district services. Their work with strengthening interoperability with Manitoba Medical Transport Communications and cross border planning with Minnesota EMS continues.

In closing I would like to thank all our of staff for their hard work, dedication and patience over the past year. It has been a challenging one and your efforts to help ensure that excellent services are maintained for our patients are appreciated and commended. To the LWDH Foundation and LWDH Auxiliary, thank you from the bottom of our hearts for the support you provide in ensuring that our Hospital has the much needed equipment to treat our patients. A sincere thank you to the Board of Directors and my Senior Management colleagues, my Support Services management team and all of our great staff who play such an important role in providing support and care for our patients.

Cindy Gasparini, CPA, CA
VP Corporate Services & CFO



Message from the VP of Mental Health & Addictions Programs

It is my pleasure to address you in this 2015/16 Annual Report. I wish to wholeheartedly thank the Mental Health and Addictions Programs staff for the very important work that they do in our hospital, in the community, and within the Kenora / Rainy River District. Additionally, I wish to thank the LWDH Board of Directors,

Senior Management, and Middle Management Staff for their tremendous support of our patients /clients, and programs. This collective team effort has resulted in marked improvements to service quality, quantity, response-time, and integration. As per the five (5) Strategic Directions of the LWDH Board of Directors, I am excited to report the following:

1. Promote and Support an Effective and Seamless Health Care System (To develop voluntary collaboration, partnerships, knowledge sharing, and amalgamations with health care organizations)

- CMHAFF complete co-location of their Kenora-based services within the hospital campus
- OPP / LWDH Transfer of Care Protocol
- OPP Situation Table
- Enhanced integration of mental health, addiction, and social work services into episodes of hospital acute patient care has resulted in more comprehensive episodes of patient care from admission through to patient discharge

2. Ensure Effective Stewardship of Resources (To optimize patient services by providing the right care, by the right staff provider, in the right place, at the right time through the responsible and efficient use of human and fiscal resources)

- Implementation and further refinement of Mental Health Therapist Staff within related hospital inpatient and outpatient departments has resulted in approximate savings of \$300,000 to the hospital's base budget

3. Achieve Excellence in Clinical Care (To ensure that those we serve receive quality care that incorporates evidence-based practice, patient safety principles, and cultural sensitivity from a highly skilled inter-professional team)

- Along with all other programs and services of LWDH, the Mental Health & Addictions Programs also participated in having its operations audited via the Accreditation Canada survey. The Mental Health & Addictions Programs received an award of Accreditation with Commendation.
- The suicide assessment, intervention, and related policies and practices of LWDH also received recognition as a leading practice with the Hospital's Insurance Reciprocal of Canada

4. Enhance Use of Technology (To augment the use of technology to enhance patient care and safety)

- LWDH Mental Health & Addiction's Programs were chosen as the clinical lead agency and trainer of the GAIN Q addiction assessment tool for the district. Plans are currently in progress for LWDH management to roll out the training of this tool across the district.
- A standardized clinical counselling, case management, and therapist management support process was implemented within the LWDH Mental Health & Addiction Programs during the 2015 / 16 fiscal year. The process includes the following technologies of practice:
 - i) Ontario Common Assessment of Need (OCAN)
 - ii) Inter-professional Plan of Collaborative Care (IPCC)
 - iii) Session Rating Scale / Outcome Rating Scale (SRS \ ORS)
 - iv) Best Possible Medication History (BPMH)
 - v) Columbia Suicide Risk Assessment Scale (CSSR)
 - vi) The Global Appraisal of Individual Needs-Quick (GAIN-Q)
 - vii) Clinical Supervision
 - viii) The Patient Registration Process

In combining the above standardized clinical process with the more deliberate integration of mental health and addiction services into episodes of patient care, the following indicators of quality care have been measured:

- i) An increase in individual and group interventions to patients on Schedule 1 and the Challenge Club
- ii) An increase in the measurements of social determinants of health via the OCAN which has resulted in improved service planning for patients, as well as real-time data for the Northwest Local Health Integration Network
- iii) An increase in the number of completed transfer notes between the Morningstar Centre and the LWDH Emergency Department, which has resulted in more streamlined communication for professionals engaged in patient service across that continuum of care
- iv) Decrease in wait-time for office-based and hospital-based counselling appointments

5. Optimize Infrastructure (To maximize functionality, effectiveness, and safety of the physical environment)

- In order to enhance staff and patient safety the following infrastructure changes were made within the mental health and addiction programs:
 - i) New flooring for the reception area of the Morningstar Centre
 - ii) A new washroom facility with the 4 North Seclusion Room
 - iii) New concrete stairs for the St. Joseph's Health Centre.

Respectfully Submitted by:

Bruce Siciliano

Bruce Siciliano, SSW, BSW, RSW

Vice President Mental Health & Addiction Programs

LWDH Foundation Board Chair Report

“The Lake of the Woods District Hospital Foundation is dedicated to fundraising in partnership with our community to help meet the medical equipment and facility needs of the Lake of the Woods District Hospital.”

On behalf of the Hospital Foundation Board of Directors and staff I am very pleased to report another extremely successful year for the Foundation. Thanks to the overwhelming generosity of our community, the Foundation was able to transfer to the Hospital **over \$812,000.00** this fiscal year!

Each of our annual fundraising events were again a big success, with our MNP Charity Golf Classic raising \$52,000.00, Century 21's Boobie Nights raising \$80,500.00, and Lifesavers Dinner & Auction raising a staggering \$275,000.00.

The Foundation was strongly supported this year as well by individuals and community partners donating over \$470,000.00 in monthly donations, bequests and general donations in response to our newsletters and Tree of Life campaign.

Every donation, big or small, contributes to the overall success of the Foundation and our ability to provide funds to the Lake of the Woods District Hospital for equipment and capital expenditures. We thank each and every local resident, summer resident, service group and business who has helped this year and we look forward to your continuing support.

A few of the pieces of equipment the Hospital was able to purchase with the help of Foundation funding this year were ICU and ER Central Monitoring Systems (\$400,000.00), Operating Room Table (\$84,460.00), six

Patient Controlled Pain Management Pumps (\$30,000.00), three Neonatal Monitors (\$13,000.00) and a Meal Delivery System (\$10,000.00).

It would not be possible to achieve the results we have had without the hard work and dedication we have been fortunate to have from our Managing Director, Jess Rheault, and Marketing and Administrative Assistant, Lindsay Whitaker, and we thank them greatly for this!

The Foundation continues to look for new opportunities to raise funds to meet our Hospital's capital needs and so this year we undertook a strategic planning workshop to help us identify and focus on ways we can best achieve our goals. I am excited to report that, after careful consideration, we have begun the process of creating a major gift program which we feel confident will lead to even greater success for the Foundation in the coming years.

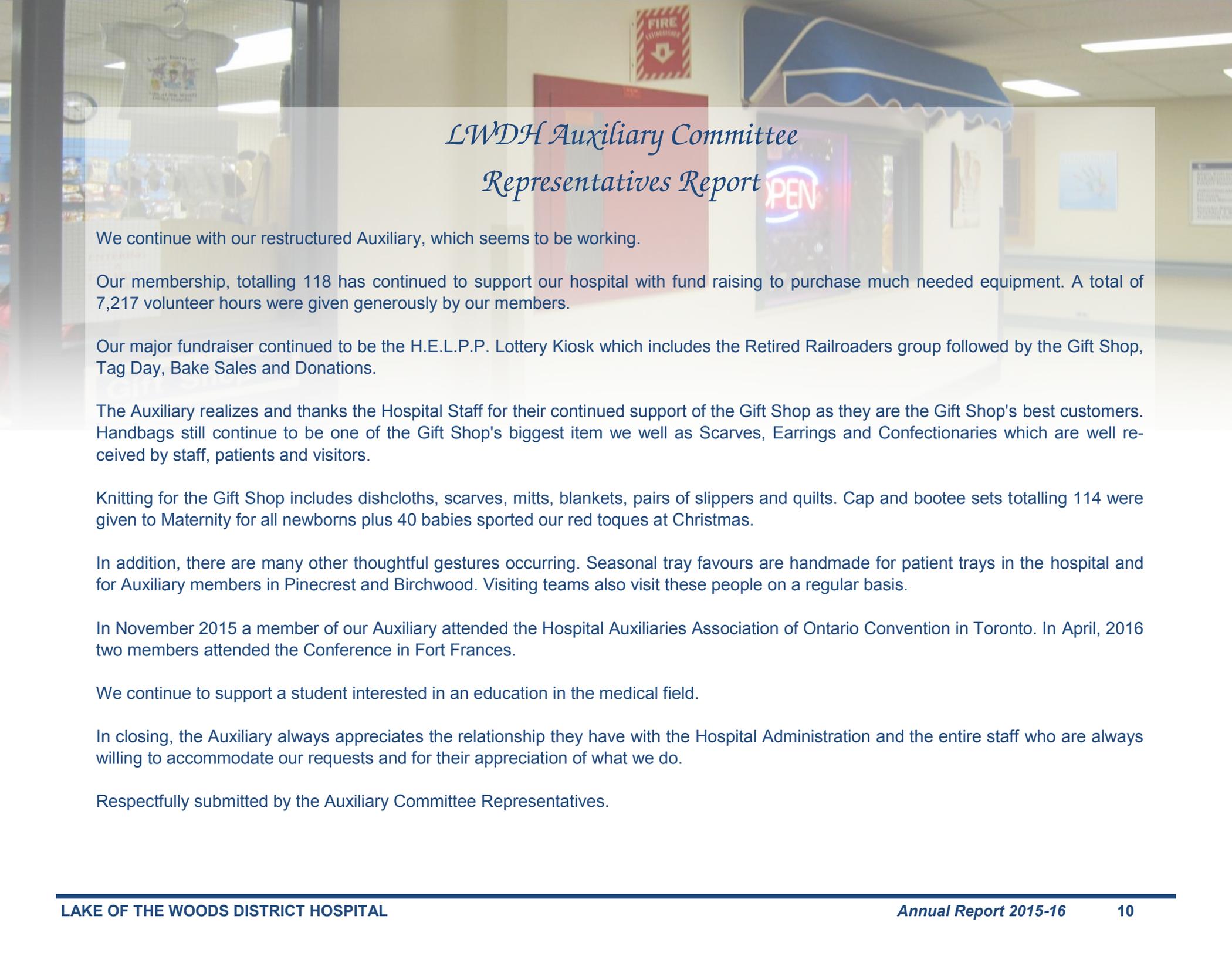
Once again, thank you very much to all who have supported the Foundation! All of your contributions stay local and lead directly to quality medical care for our community.

Yours truly,



Stephen Lundin
2015/2016 LWDHF Chair





LWDH Auxiliary Committee Representatives Report

We continue with our restructured Auxiliary, which seems to be working.

Our membership, totalling 118 has continued to support our hospital with fund raising to purchase much needed equipment. A total of 7,217 volunteer hours were given generously by our members.

Our major fundraiser continued to be the H.E.L.P.P. Lottery Kiosk which includes the Retired Railroaders group followed by the Gift Shop, Tag Day, Bake Sales and Donations.

The Auxiliary realizes and thanks the Hospital Staff for their continued support of the Gift Shop as they are the Gift Shop's best customers. Handbags still continue to be one of the Gift Shop's biggest item we well as Scarves, Earrings and Confectionaries which are well received by staff, patients and visitors.

Knitting for the Gift Shop includes dishcloths, scarves, mitts, blankets, pairs of slippers and quilts. Cap and bootee sets totalling 114 were given to Maternity for all newborns plus 40 babies sported our red toques at Christmas.

In addition, there are many other thoughtful gestures occurring. Seasonal tray favours are handmade for patient trays in the hospital and for Auxiliary members in Pinecrest and Birchwood. Visiting teams also visit these people on a regular basis.

In November 2015 a member of our Auxiliary attended the Hospital Auxiliaries Association of Ontario Convention in Toronto. In April, 2016 two members attended the Conference in Fort Frances.

We continue to support a student interested in an education in the medical field.

In closing, the Auxiliary always appreciates the relationship they have with the Hospital Administration and the entire staff who are always willing to accommodate our requests and for their appreciation of what we do.

Respectfully submitted by the Auxiliary Committee Representatives.

Creation of Educational Television Interview on Hemodialysis

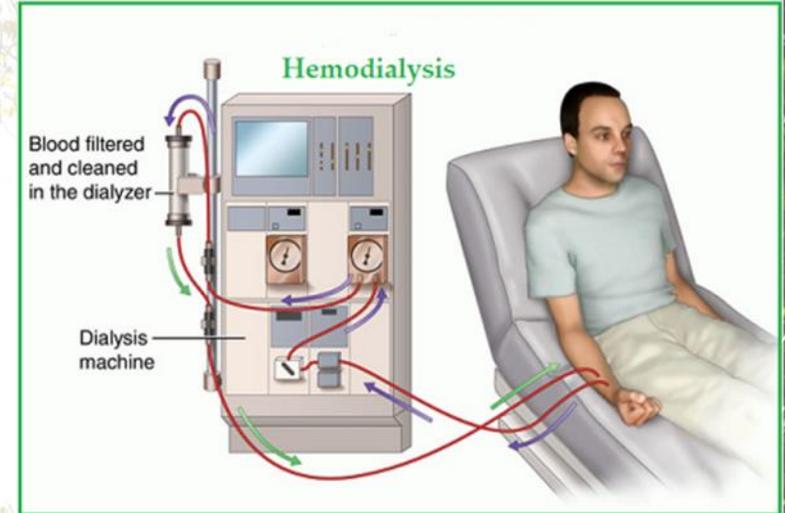
Lake of the Woods District Hospital Hemodialysis nurse Stephanie Preston joined with one of our dialysis patients in a conversation with Sallie on Shaw Television.

This educational discussion is an excellent introduction to kidney disease and a high level discussion of the process of hemodialysis. Stephanie goes on to discuss physiological and metabolic symptoms and explains other dialysis options such as peritoneal dialysis.

A copy of the interview was provided by Shaw and is now played in the waiting area on the days that the Kidney Health Clinic is held. This is an excellent teaching tool for both staff and patients.

Stephanie is currently on maternity leave and she took part in this interview on her own time. Thank you Stephanie for giving us such a fabulous educational program!

To view the full interview, log on to : <http://shaw.ca/ShawTV/Kenora/>



Medical Grade Refrigerator Upgrades

Medical grade refrigerators were purchased for all nursing units and the pharmacy department.

The fridges are equipped with temperature alarms, digital temperature display and a microprocessor to maintain precise settings of temperature cycles.

These features help ensure that all refrigerated medications stocked in the Hospital are stored at the correct temperature.

Funding for the refrigerators was provided by the Regional Pharmacy Program which is funded by the Northwest LHIN.



The Story of Client X

Client X became a client of mine through the withdrawal management facility the Morningstar in February of 2013. Client X was a long time user of the facility, his age at first encounter was 65 years old, and he is a status Indian and a Residential School survivor. Client X attended the Morningstar to withdrawal from alcohol, stabilize physically and to fill out Treatment Applications. Client X lasted 5 days in the facility before he left and again attended the down town streets of Kenora during the days and slept his nights at the Withdrawal Management Facility the Morningstar.

Client X was a frequent user of the ER department; Client X had multiple bone fractures a broken hip and severe arthritis. As well Client X frequented the OPP cells and spent a period of time incarcerated in 2014.

His family was able to support the client to change. He received residential school money.

From 2013 until 2016 Client X had times where he would stay for periods of withdrawal and stabilization at the Morningstar. During this time staff and I would engage him to attend treatment, apply to the half-way house Delart Manor or apply for Long Term Care as his physical health was failing and his alcoholism was increasing.

I had previously had success in supporting three of my clients to attend Birchwood Terrace, a Long Term Care Facility located in Kenora ON, and would explain to Client X during his stays at the Morningstar Centre that he would have friends in Birchwood if he went to live there, that he would also have medical support, activities to attend and be a safe environment to live.

In January of 2016 Client X attended the Morningstar Centre and engaged for the first time in wanting to know more about Birchwood Terrace and wanted to apply for a bed at the Long Term Care Facility. We started the process of intake; although there was a long wait, Client X stayed focused on his goal of a safe supported living environment free from alcohol. Client X had only one incident where he went off track for a period of 3 days. His granddaughter and brother in law passed away with in a week of each other, Client X stated clearly he just needed to leave for a few days but would be back. Within 3 days he was back at the Morningstar and back on track. This in itself is a huge change as Client X would normally leave the facility and not return to the care side for months.

In April 2016 Client X received an offer of a bed at Birchwood Terrace and has been there since. He is thriving and loving all of the support and structure of the facility as well as enjoying the time with his now sober friends that have gone there before him. I continue to support him and take him shopping and for outings as needed.

It has been a pleasure and gift to work with a client and to see them change and move on to a better life.

Second East Integration

Although this year has had many challenges for the staff, many changes have occurred throughout the year. The merging of the stand alone obstetrical unit and the 2E Adult Medicine/Pediatric units has been one of the most significant changes. Having the operating room on the same floor as maternity has increased patient safety, especially for obstetrical patients requiring emergency interventions. Combining these two units has provided obstetrical staff with back-up staff in emergent and urgent situations, where before these two separate units had limited staff to assist in these situations. We have had the opportunity to cross train 13 of the 21 registered nurses to obstetrics, and there is an expressed interest for the registered practical nurses to cross train in obstetrical nursing. Having a combined unit that offers pediatric, adult medicine and obstetrical nursing is a tool for recruitment of new staff as it provides them with a great opportunity to use multiple skills and gain a broad knowledge base that new nurses are looking for. I have watched as this group of nurses work and grow together as a team, they have pulled together during hard times, and really leaned on each other and helped each other along. It has been my pleasure to see them develop into a team and move forward through any challenges that they face.

Sincerely, Elizabeth McGogy, Patient Unit Manager 2E



Pharmacy Department Update

The Pharmacy Department implemented a Hazardous Medication Policy in October 2015.

A “cold packaging” system was purchased to prepare hazardous medications in a unit dose format with proper warning labels. The policy outlines the special labeling and handling requirements to ensure that all staff are protected from exposure to any potential toxicities from these compounds.



Surgical Services and Medical Device Reprocessing (Previously CSR)

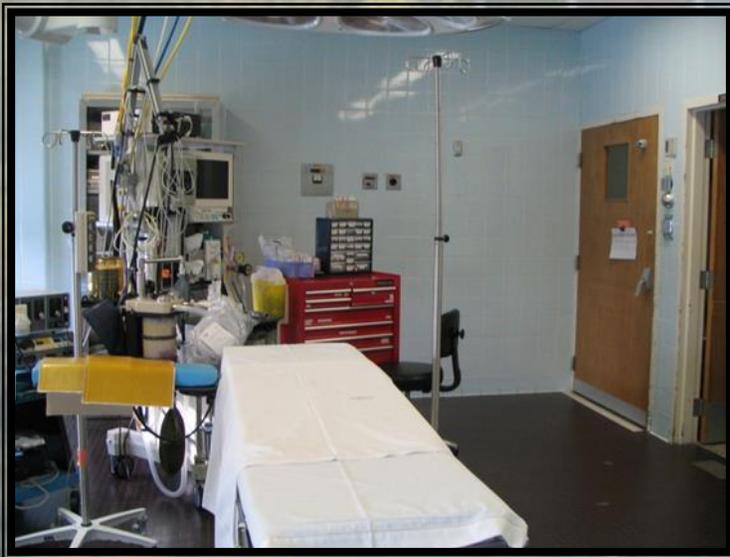
The Ministry of Health and Long Term Care (MOHLTC) has approved a much needed repair to the Surgical Services Department (operating room and recovery areas) and the Medical Device Reprocessing Department (MDR), which service the entire hospital with sterile supplies.

A surgical patient at LWDH will be assured they receive the highest standard of service and supplies to meet their surgical care needs. Improvements to the mechanical and functional design will reflect a move from working in 1960 designed surgery and MDR suites to units that will meet and exceed the upcoming Accreditation standards for years to come.

“This project has remained “tight” while internal planning reflects requisite needs. Like a ‘Swiss Watch’, this project assumes an opportunity to be the best that it can be, including technology, equipment and infrastructure systems, while offering an environment where patients and families feel welcomed and confident; where staff have the right environment to professionally work as a team toward the best patient experiences while feeling that they too are in a respectful and appropriate place of work” - Susan Black, Perkins Eastman Black Architects.

All within the exciting footprint, these two units will soon have new heating, cooling, ventilation, humidification, plumbing, electrical and HVAC systems. Once the ‘vital organs’ of our structure get established, the upgrade to the visible environment will be phased in. Without missing a heart-beat, it will be business as usual by providing continued surgical and supply service to the hospital.

It is anticipated that the final product will be completed by spring of 2018.



Good News from Nutrition and Food Services

It has been a very busy year in Nutrition & Food Services (NFS); we implemented Room Service in May 2015, purchased 2 Rationale Combi Ovens and we were the lucky recipients of a new Tray Delivery System graciously provided by Mr. & Mrs. Bryce Douglas.

Room Service has been providing great results with both an increase in patient satisfaction and tremendous decrease in waste. Our last waste audit showed a monthly total waste of \$49.78 or the equivalent of \$0.05 per day per patient for room service trays and our batch tray waste is \$2992.94 a month or the equivalent to \$1.05 per patient per day. We are constantly looking for ways to increase patient eligibility with Room Service and have included diabetic patients on the program. Our next goal will be to include patients with language, reading or hearing barriers. Patients are very happy with the Room Service program and the kitchen staff has developed a great rapport with them. It is very gratifying to see a patient enjoying their meals and expressing great satisfaction with the meals. They can be very creative when customizing their meals!

All of our cooks are enjoying the wonderful value of the combi ovens and we benefit from less labour intensive production of cooking meals. The time to cook items is cut virtually in half and we now have the capability of overnight cooking. These ovens are truly remarkable and cutting edge in technology.

With the generous donation by Mr. & Mrs. Bryce Douglas we purchased new insulated tray tops and bottoms as well as china dishes for patients. These replaced the older tray tops and bottoms that we have had since the late 80's. It provides a more updated look and optimal temperature holding. The china dishes are much more appealing and easier to clean and maintain. The overall presentation of meals is much more appealing when served on china dishes.



With so many exciting changes in the food industry, our kitchen staff can be proud to say we are leading the way with new and innovative ideas that the patients of LWDH can experience.

With our Clinical Nutrition involvement I am very proud to announce that both Dietitians are now faculty appointed members of NOSM. Tanya Laewetz received her appointment in 2013 and Lori Romas received her appointment this year. Both dietitians are committed to mentoring interns and sharing their vast experience and wealth of knowledge to staff and students. Tanya Laewetz also received the Northern Ambassador award at the NOSM Conference in Thunder Bay this past April. This award is presented to a preceptor who learners/colleagues recognize for being a strong ambassador for their learners; making efforts to connect them to the community, and create a welcoming environment for learners.

LWDH Quality Improvement Achievements from the Past Year

In the fall of 2015, LWDH was surveyed by Accreditation Canada and we were awarded Accreditation with Commendation. The organization is very proud of this award. It gives evidence that the LWDH staff and its leadership are committed to quality and patient safety. Accreditation Canada is an independent organization that provides health care organizations with an external peer review to assess the quality of their services based on standards of practice. LWDH participates in the Accreditation process because we believe that meeting national best practice standards helps us provide safe quality care to all of our patients.



LWDH is also very proud to have been granted the 2015 Quality Healthcare Workplace Award (QHWA) - Gold Designation. Participating in this program allows for LWDH to self-evaluate, learn, and improve efforts in ways that contribute to the providers' quality of work life, care, and services they deliver. This model integrates healthy workplace, human resources, and quality and patient safety goals within a performance-focused framework. One of the key practical insights is that factors related to people's job, work environments, and organizational contexts can influence their overall well-being and their capacity to provide high-quality patient care or client services. A quality team means quality care!



This year, LWDH has also received a token of appreciation from the Trillium Gift of Life Network. This memento recognizes the excellent work performed by the entire LWDH Organ and Tissue Donation Committee and the staff in their contributions in giving hope and opportunity to all Ontarians waiting for transplants.



LWDH will continue our journey towards optimum quality and patient and staff safety!

Above & Beyond Leading Excellence (A.B.L.E.) Staff Award

Lake of the Woods District Hospital recognizes leadership and excellence in our staff through the Above & Beyond Leading Excellence Staff Award. For the 2015-16 year, the award was presented to Erin Mudry, Staff Health Physiotherapist; Brigitte Loeppky, Manager of Quality/Risk/Education/Telemedicine; Karla Smith, Ward Clerk, Psychiatry/Maternity; Catherine Patzel, Recovery Support Worker, Mental Health & Addictions; and, Sean Hailstone, MRT, Diagnostic Imaging.

The award is given semi-monthly to one hospital staff member who demonstrates exceptional leadership qualities and a commitment to improve the quality of care and work life at Lake of the Woods District Hospital. Each A.B.L.E. winner receives a gift certificate and is formally recognized on our "Thank You" bulletin board in the main ER/DI hallway. This is just one way that we can recognize and appreciate the excellent staff we have at LWDH.



Erin Mudry

Erin is a positive role model for all staff- she is an effective and creative leader as shown in her role with the Staff Wellness Program and her care provided to our staff. Erin is a true example of leadership at its best!



Brigitte Loeppky

Brig is a positive role model for all staff- she has the ability to make projects and work fun as well. A true example of leadership at its best! She is always ready to participate, lead and demonstrates a positive and encouraging way with all staff, students she interacts with.



Karla Smith

Karla by example as she balances the needs of two very different departments. She has excellent communication and conflict resolution skills. Karla is solution focused and takes active steps to enhance workplace efficiency. Karla is committed to providing high quality patient care and exemplifies the qualities of an exceptional employee.



Catherine Patzel

Catherine is a positive role model- she is a strong team player & demonstrates throughout her work day a strong work ethic, compassion and respectful clinical practice. Catherine was nominated by her peers at Mental Health & Addictions Programs.



Sean Hailstone

Sean is a positive role model- he motivates and inspires his peers and students in the department. Sean is always looking for ways to improve the quality of work, patient safety and morale in the department.

Workplace Wellness Committee Update

The Workplace Wellness Committee has been in operation since May 2009. Since its formation, the committee has been striving to meet its mission of promoting a thriving and vibrant workplace where employees take personal responsibility for their own health and wellbeing.

The committee has continued on with a number of popular initiatives. The Passport to Healthy Living was extremely successful again this past year. This year the month of October was highlighted as workplace wellness month. During the week of October different activities and events were held. 81 staff completed their Passport. The committee partnered with the Kenora Recreation Center again this year to offer corporate rate to LWDH staff. Staff that completed the Passport to Health were given an option to utilize the funds towards a yearly gym membership, which the recreation center matched. Again we saw several staff take advantage of the savings. This year the committee also highlighted various community events in the Newsletter and all user emails to encourage staff to connect to community based events.



The committee has continued to offer regular lunch and learns. This year's topics including Mindfulness, Gratitude and Self Compassion to support with stress management. The committee also hosts a weekly yoga class where equipment is made available for staff. The Committee continues to educate staff about the availability of the 4 North gym and access to professional staff services such as EAP, the staff dietitian, nurse, and physiotherapist. The committee attempts to regularly solicit feedback and suggestions from staff to assist with event planning. Feedback has consistently indicated high satisfaction for large wellness events. The committee communicates upcoming activities and events through emails, and quarterly newsletter that is sent out to all staff. To reach shift workers, and staff unable to attend lunch and learn sessions, the committee with the permission of the presenters are recording sessions and putting them on the hospital intranet. We have continued to plan events and make them accessible to more staff both on and offsite.

Some of the feedback received this year:

- ◆ *Thank you Wellness people! Just what I needed!*
- ◆ *Just wanted to send you guys a pat on the back for a job well done. Thank you for keeping the staff healthy mind, body and spirit.*
- ◆ *Ever exciting :) thanks guys!*
- ◆ *Cool idea! Thanks!*

What do YOU
do to stay well?

The committee has continued to focus on hosting more “family friendly” events, the committee expanded the family friendly events to include a Wellness Pool Party in addition to continuing staff favorites such as family bowling night and staff and family ski night. All events were extremely well attended and the committee received many positive responses from staff.

The committee is happy to report that participation in wellness events and initiatives continues to grow. The committee again secured support from multiple hospital unions. With these additional funds, the committee has been able to continue to offer large scale events, such as the staff ski night and family bowling night, which would not have been possible otherwise. The committee would like to thank the hospital and hospital unions for their ongoing support.

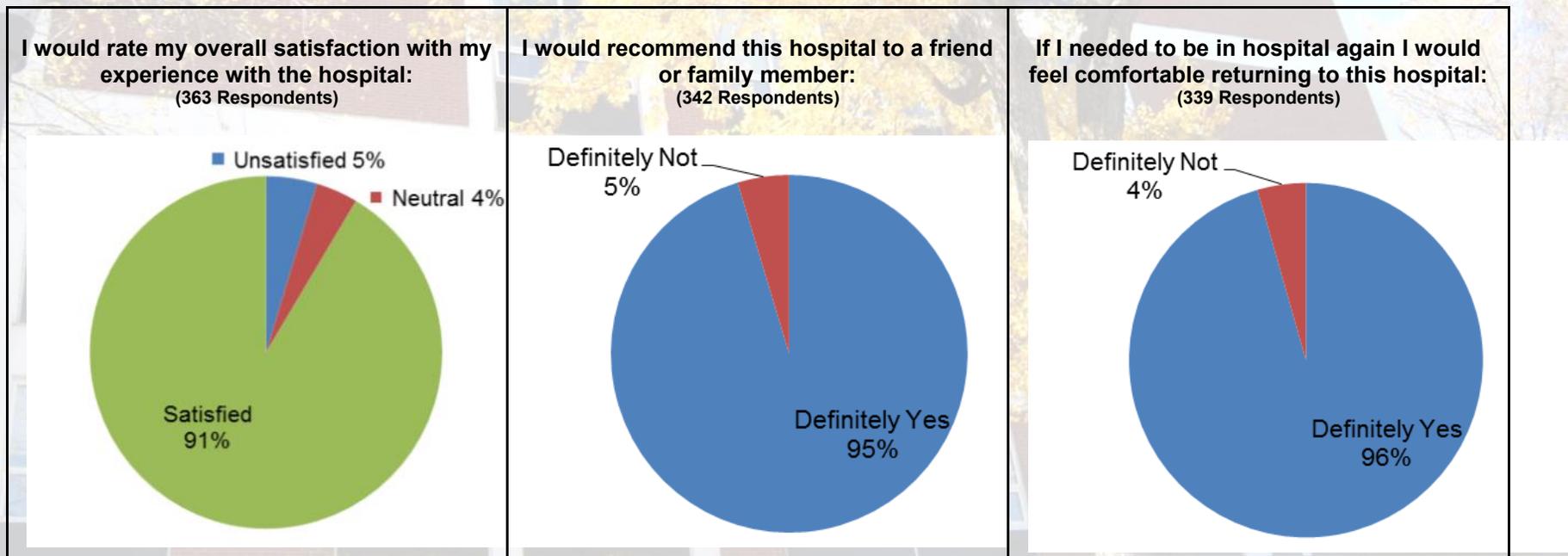
Moving forward, the committee is investigating new ways to foster mental health in the workplace. The committee is interested in tapping into the resources through Excellence Canada's Mental Health at Work® program. This program is linked to certification and recognition through Canada Awards for Excellence, and enables the organization to demonstrate adoption of the new National Standard for Psychological Health and Safety in the Workplace. The committee will be seeking support from senior management to proceed with this initiative.

Sincerely,

The LWDH Wellness Committee

Patients tell us about the care they receive

The Lake of the Woods District Hospital regularly surveys our patients about the care they receive. The feedback received from the surveys is used to help improve the care we give to patients. This year's survey was held from June 17, 2015 – September 30, 2015. Highlights from our 2015 Patient Satisfaction Survey were:



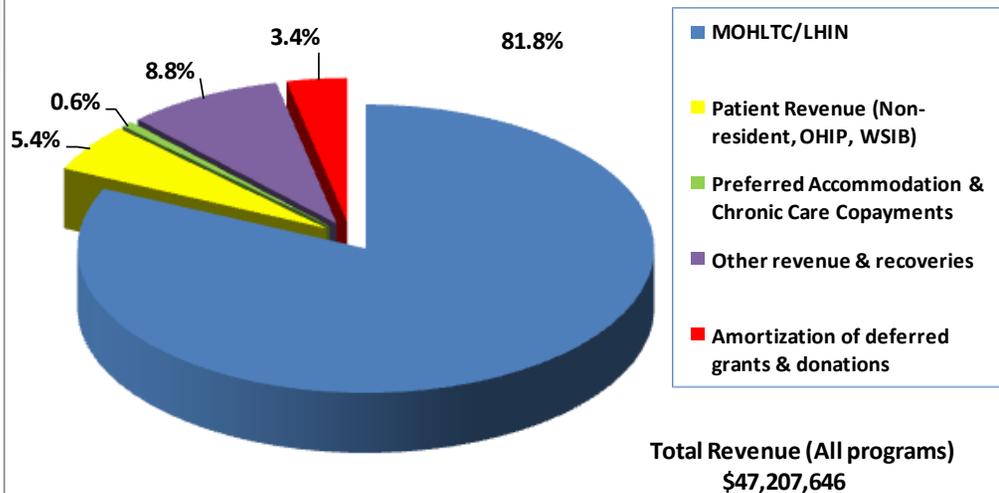
Summary of Operating Results:

For the Period Ended March 31, 2016		
	2016	2015
REVENUE		
Ministry of Health and Long-Term Care/LHIN	32,515,260	33,018,280
Patient revenue from other payors	2,551,461	2,580,774
Preferred accommodation and co-payment revenue	305,396	338,780
Other revenue and recoveries	3,111,058	3,310,737
Amortization of grants & donations for equipment	745,141	736,568
Total Hospital Operating Revenue	\$39,228,316	\$39,985,139
Other programs administered by the Hospital	7,131,707	6,790,850
	\$46,360,023	\$46,775,989
EXPENSES		
Salaries, wages and employee benefits	25,746,250	26,631,631
Medical staff remuneration	5,018,275	5,173,031
Supplies and other expenses	5,515,085	5,562,185
Medical and surgical supplies	1,157,169	1,137,871
Drugs	1,358,780	1,509,257
Amortization of Equipment	895,225	889,166
Bad Debts	28,489	29,282
Total Hospital Operating Expenses	\$39,719,273	\$40,932,423
Other programs administered by the Hospital	7,131,707	6,790,850
	\$46,850,980	\$47,723,272
Surplus (deficit) before amortization related to buildings	(490,957)	(947,284)
Amortization of buildings	(1,197,995)	(1,090,008)
Amortization of deferred contributions for buildings	847,623	727,006
Surplus (deficit) for the year	(\$841,329)	(\$1,310,286)
<p>The audited financial statements are available in their entirety on the Lake of the Woods District Hospital website at www.lwdh.on.ca</p>		

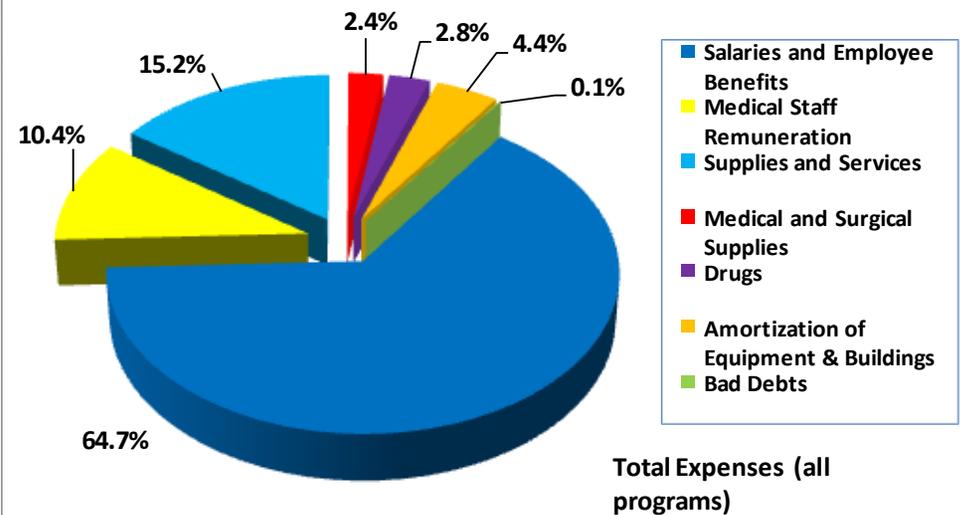


Financial Facts at a Glance

2015-16 Operating Funding Sources



2015-16 Operating Expenses



Hospital Admission and Treatment Statistics:

	2015/16	2014/15	2013/14	2012/13	2011/12	2010/11
Adults & Children Admitted During the Year	2,270	2,280	2,307	2,584	2,633	2,600
Babies Born in the Hospital	235	207	179	240	227	242
Days of Hospital Care - Adults & Children	16,786	19,021	17,216	18,330	20,554	21,655
Days of Hospital Care - Newborns	446	369	384	469	473	502
Ambulatory Day Clinic Visits	2,215	2,872	1,610	1,936	1,634	1,585
Out-Patient Visits	19,081	17,891	18,576	18,739	18,780	19,256
Paid Hours of Work	691,383	719,352	704,765	705,604	708,932	712,503
Beds in Service	71	84	84	84	84	84
Emergency Visits	18,693	18,111	19,020	20,430	21,384	21,516
Operations Performed - Inpatient	399	333	335	340	348	326
Operations Performed - Outpatient	2,034	1,940	2,026	2,073	2,153	2,014
X-Ray Examinations	13,353	18,072	14,119	14,477	19,354	16,292
Ultrasound Examinations	5,633	4,385	4,862	6,003	6,939	6,135
Mammograms	2,189	2,419	1,155	1,525	1,746	1,738
Computed Tomography Exams	4,341	4,018	3,937	3,084	3,473	3,645
Electrocardiographic Examinations	6,062	5,839	5,972	5,609	6,195	4,859
Laboratory Procedures	677,257	586,846	303,201	279,942	329,637	423,360
Physiotherapy - Patient Attendances	11,880	12,241	12,097	10,351	10,346	11,249
Chemotherapy Treatments	484	451	581	309	401	267
Dialysis Treatments	2,784	2,966	2,893	3,048	2,815	2,647
# Kgs. Laundry	194,991	208,983	171,213	185,046	193,888	176,341



Board of Directors

Mark Balcaen	Secretary/Treasurer/ Ex-officio Director
Dean Carrie	Board Chair
Wendy Cuthbert	Director
Jacalyn Diamond	Director
Kathy Dawe	Ex-officio Director
Dr. Stephane Foidart	Ex-officio Director
Dr. Brad Kyle	Ex-officio Director
Dr. J.K. MacDonald	Ex-officio Director
Sherry Moreau	Director
Darlene Paypompee	Director
Joan Reid	Board Vice-Chair
David Schwartz	Director
Theresa Stevens	Director

Senior Management

Mark Balcaen	President and Chief Executive Officer
Kathy Dawe	Vice President Patient Services and Chief Nursing Officer
Cindy Gasparini	Vice President Corporate Services and Chief Financial Officer
Bruce Siciliano	Vice President Mental Health and Addictions Programs
Dr. J. Kerry MacDonald	Chief of Staff



Department Managers

- | | |
|------------------------|--|
| Katrina Belair | Manager, Purchasing |
| Richard Bootsveld | Manager, Information Systems and Biomed |
| Brock Chisholm | Manager, Rehabilitation |
| Judy Cottam | Manager, Human Resources |
| Patti Dryden-Holmstrom | Manager, Youth Addictions, Gambling, Youth and Adult, Post Custody Enhancement Program, Recovery Support Program, Morningstar Centre and MECCA |
| Brad Edie | Manager, Pharmacy |
| Kathleen Fitzgerald | Manager, Ambulatory Care/Chemotherapy/Sexual Assault/Domestic Violence/Privacy/Nurse Resource Team/Stroke Strategy |
| Denise Forsyth | Manager, Schedule 1 Psychiatry/Social Work/Challenge Club |
| Mary Hall | Manager, Environmental Services/Plant Services |
| Sonia June Green | Manager, Surgical Services/MDR/Dialysis (Interim) |
| Lori Hoppe | Manager, Laboratory |
| Brigitte Loeppky | Manager, Quality/Risk/Education/Telemedicine |
| Donna Makowsky | Manager, Medical/Surgical/ICU/Respiratory/Emergency (Interim) |
| Craig Marek | Manager, Central Ambulance Communications Centre (CCAC) |
| Elizabeth McGogy | Manager, Adult Medicine/Pediatrics/Maternity |
| Cheryl O'Flaherty | Manager, Finance/Health Records/Patient Registration/Visiting Specialist Clinics |
| Angela Schussler | Manager, Diagnostic Imaging/EKG |
| Daniel Smith | Manager, Adult Mental Health & Addictions Programs |
| Jodie Saarinen | Manager, Nutrition & Food Services |



Medical Staff

Dr. R. Bains	Dr. H. Hristov	Dr. S. Pedersen	Dr. Dana Walters
Dr. J.E. Beveridge	Dr. M. Kowal	Dr. S. Reed-Walkiewicz	Dr. T. Wehner
Dr. B. Bowerman	Dr. J. Kroeker	Dr. J. Retson	Dr. J. Wesley
Dr. M. Carlisle	Dr. B. Kyle	Dr. S. Sas	Dr. S. Wiebe
Dr. B. Daly	Dr. D. Kyle	Dr. C. Scaife	Dr. C.M. Workman
Dr. R. Diamond	Dr. R. Lass	Dr. L. Snyder	Dr. U. Zahlan
Dr. S. Foidart	Dr. J. Kelly MacDonald	Dr. M. Spencer	K. Graff, Registered Midwife
Dr. S. Ghazali	Dr. J. Kerry MacDonald	Dr. J. Spielman	B. Vineberg, Registered Midwife
Dr. C. Hammett	Dr. S. Moore	Dr. J. Vaudry	
Dr. J. Hammett	Dr. L. Noack	Dr. Dan Walters	

Dental Staff

Dr. L. Armstrong	Dr. D. Kozak
Dr. M. Christensen	Dr. D. McDermid
Dr. C. Foster	Dr. D. Riediger
Dr. N. Hoshwa	

Regional Ordering Staff

127 Regional Ordering Professional Staff

Locum Tenens

Dr. A. Affleck	Emergency Department	Ms. M. Fish	Registered Midwife	Dr. B. Patel	Emergency Department
Dr. A. Alsadoon	Emergency Department	Dr. J. Fuss	Emergency Department	Dr. R. Perera	Emergency Department
Dr. B. Anderson	General Surgery	Dr. P. Garces	Radiology	Dr. W. Posloski	Emergency Department
Dr. R. Arbeau	Emergency Department	Dr. D. Golev	Radiology	Dr. R. Scatliff	Anesthesia
Dr. D. Barton	Emergency Department	Dr. P. Hassan	Emergency Department	Dr. F. Sem	Emergency Department
Dr. M. Bhimani	Emergency Department	Dr. J. Heringer	Emergency Department	Dr. A. Shaikh	Radiology
Dr. S. Bryan	Anesthesia	Dr. J. Illman	Radiology	Dr. L. Shan	Family Medicine
Dr. N. Carrier	Emergency Department	Dr. N. Incardona	Family Medicine	Dr. N. Sidky	Emergency Department
Dr. K. Carter	Emergency Department	Dr. S. Issley	Emergency Department	Dr. C. Simpson	Emergency Department
Dr. P. Chand	Emergency Department	Dr. A. Jeffery	Emergency Department	Dr. A. Swedan	Emergency Department
Dr. K. Chapman	Emergency Department	Dr. D. Jokinen	Emergency Department	Dr. K. Thacker	Emergency Department
Dr. M. Curtis	Emergency Department	Dr. R. Kiz	Emergency Department	Dr. P. Thamilvaanan	Emergency Department
Dr. R. Dan	Radiology	Dr. R. LeBlanc	Emergency Department	Dr. C. Turner	Emergency Department
Dr. D. Denver	Emergency Department	Dr. C. McQuarrie	Emergency Department	Dr. M. Varsava	Emergency Department
Dr. A. Devraj	Internal Medicine	Dr. W. Milne	Emergency Department	Dr. M. Vivian	Radiology
Dr. D. Ebert	Emergency Department	Dr. R. Momin	Emergency Department	Dr. J. Ward	Emergency Department
Dr. A. El Jaoudi	Emergency Department	Dr. L. Moore	Radiology	Dr. P. Watson	Internal Medicine
Dr. K. Evans	Emergency Department	Dr. J. Nadarajah	Internal Medicine	Dr. S. Yazdani	Emergency Medicine
Dr. N. Feroze	Emergency Department	Dr. V. Ng	Emergency Department	Dr. F. Youssef	Emergency Department

Visiting Specialists/Courtesy Privileges

Dr. K. Anderson	Family Physician	Dr. L. Hurst	Dermatology	Dr. D. Puskas	Orthopedics
Dr. M. Aubrey	Rheumatology	Dr. W. Loewen	Family Physician	Dr. G. Rabbat	General Surgery
Ms. T. Bennett	Nurse Practitioner	Dr. T. McGregor	Urology	Ms. J. Roberts	Nurse Practitioner
Dr. K. Bozyk	Family Physician	Dr. K. Meyers	Family Physician	Ms. H. Rose	Nurse Practitioner
Dr. K. Droll	Surgery	Dr. L. Mozzon	Internal Medicine	Mr. C. Ross	Nurse Practitioner
Ms. E. Duggan	Nurse Practitioner	Dr. P. Orth	Family Physician	Dr. N. Sturwold	Family Physician
Dr. M. Fast	Neurology	Dr. R. Parker	Family Physician	Dr. M. Thomas	Family Physician
Dr. Y. Gagnon	Family Physician	Ms. K. Patrick	Nurse Practitioner	Dr. J. Van der Zweep	Ophthalmology
Dr. B. Gillespie	Ophthalmology	Ms. A. Peplinskie	Nurse Practitioner	Dr. S. Viherjoki	Family Physician
Dr. P. Harland	Pediatrician	Ms. B. Pernsky	Nurse Practitioner	Ms. C. Wilson	Nurse Practitioner
Dr. D. Henderson	Radiology	Dr. M. Polle	Family Physician	Dr. D. Zielke	Family Physician