



ATIKOKAN HEALTH AND COMMUNITY SERVICES

Annual Report
2023 - 2024



*Inclusive, Compassionate,
Quality Care*

Introducing our team...

<u>Board Members 2023 – 2024</u>	<u>Management Team</u>
Beth Fairfield, Chair	Jennifer Learning, CEO
Stacey O’Sullivan, Vice Chair	Stacey Wood, CNO
Gord Knowles, Town Representative	Blake Homer, CFO & Corporate Services
Kirt Pfeifer	Dr. Sara Van Der Loo, Chief of Staff
Jody Labossiere	Cheryl Maki, Nurse Manager
Barb Wiens	Bridget Davidson, Family Health Team manager; Privacy Officer
Dawn Lessard	Robert Herrmann, Diagnostic Imaging Manager
Sylvia Parker	Kristy Matichuk, Lab Manager
	Alan Poelman, Manager, Community Counselling
	Sarah Robertson, Occupational Health and Infection Control
	Jessica Rowlands, Rehabilitation Manager
	Laura Thibodeau, Dietary Manager, Dietitian
	Bonnie Clairmont, Executive Assistant

Executive Summary

When I reflect back on the year of April 1, 2023 to March 31, 2024 I am incredibly proud of the teamwork and tenacity that all our staff demonstrated throughout this past very difficult year which was full of change. Winston Churchill said “To improve is to change; to be perfect is to change often”. Our organization must be working towards perfection judging by the amount of change we all experienced this past year.

I became the new President and CEO of Atikokan Health and Community Services (AHCS) on March 27, 2023 and Stacey Wood became the new Chief Nursing Officer that same day. Blake Homer had been in the role of Chief Financial Officer for a little over two months so our Senior Management Team was very new to their roles. As well as a new Senior team we also had a new Nurse Manager (Cheryl Maki), a new Long-Term Care Coordinator (Kristy Larocque), a new Occupational Health/Infection Control Manager (Sarah Robertson) a new HR Generalist (Jill Labossiere) and new manager for the Atikokan Family Health Team (Bridget Davidson). This meant that almost everyone employed with AHCS would go through the experience of getting a new manager which can be a very stressful event in and of itself but then we continued with further changes which increased the stress.

One of the other big changes that took place this year was taking on a new name. We have been working all year with a committee to create a new logo and sort out a new website that

encompasses all that we do under the new name. I think to many people in Atikokan, this hospital will always be AGH and a pillar of our community. We remain AGH but this is now part of an overarching organization and the new name reflects the growth of our health care system in Atikokan.

We did strategic planning this year with our staff and our board which consists of mostly new members. I would like to thank the board for their tremendous support this past year as we went through the strategic planning process led by Amanda Bjorn who is also leading the Rainy River District OHT strategic plan. I would like to acknowledge the very hard work that the board put in this year as we tackled so many changes, fiscal challenges and built a new strategic plan that will guide us through the next five years. Through the strategic plan we developed an Operational Plan and then each department developed workplans that feed up into the Operational Plan. This is a whole new process for us but tackling all the changes this year has pushed us to set clear goals and targets for the upcoming years so we have a clear guide of what we are working on over the coming years.

This entire year has been fraught with financial uncertainty. Our MPP Kevin Holland was very helpful throughout the year in providing support and advocacy for our small remote northern hospital so we could keep our doors open. The financial impact of having to hire so many agency staff as well as the reversal of Bill 124 meant we had to take a loan from the government in case we could not make payroll. Thankfully, through the hard work of the Finance office and the CFO, we were always able to pay our staff as well as all our bills but the support of knowing we had the loan helped us sleep at night.

Starting last November, all the CEO's of the small, rural and northern hospitals came together to advocate for our unique needs to the Ministry of Health with the help of the Ontario Hospital Association. They heard how the challenges we face in the north are so different from Southern Ontario's challenges including things like isolation, transportation, access to services etc. The Ministry heard us and have been working with us to help keep our doors open this year. There were a few times last summer that we were not certain we could keep the ER open due to nursing shortages but thankfully the nurses found the energy to come in for some extra shifts even though they were completely exhausted and experiencing burnout. Their dedication over this past year has been phenomenal.

Some other activities that occurred this year were:

- ✓ implementing electronic scheduling throughout the entire organization.
- ✓ submitting the remaining criteria that was needed in order to maintain our Accredited with Commendation,
- ✓ merging all the Family Health team's payroll and expenditures into our accounting systems
- ✓ providing home care nursing services through the Family Health Team nurses as part of the overflow contract
- ✓ offering group exercise programs for patient living with chronic diseases at the Wellness Centre which has dramatically reduced our wait times for our rehab department

- ✓ implementing a new electronic risk management system that was easier to use for the staff
- ✓ implanted a complaints process that tracks complaints easier than before as well as implementing a phone number that patients can call to register complaints anonymously
- ✓ settling past union contracts and payouts for Bill 124
- ✓ sending out quarterly Inpatient and Emergency room patient experience surveys
- ✓ starting up the Quality Improvement Committee as well as the Quality Council meetings again so our quality and risk initiatives are being reviewed and analyzed regularly.
- ✓ Replacing the sewage pipes which were 35 years old
- ✓ Ending the Transition House program

We also had a change in leadership with our Chief of Staff Dr. Van Der Loo. Her contract came to an end on March 31st, 2024 after 6 years of being in the role. We valued her experience and knowledge over this past year as she helped to lead a very new team through the pitfalls of managing a hospital. She also showed incredible dedication and willingness to help during the entire pandemic and she was instrumental in assisting us to navigate our way through Covid-19. I want to thank her for all her help and hard work over the last several years and we look forward to working with Dr. John Fotheringham as our new Chief of Staff.

Finally, I wish to acknowledge our staff who have been through so much over the last few years due to the pandemic and then dealing with the many changes that hit our organization at the end of the last fiscal year. Those changes had rippling effects for many months but everyone worked together and learned how to deal with the changes and embraced them as best they could. If we are to believe Winston Churchill we must be close to perfection due to all the change. Throughout the year our staff continued to provide great patient care no matter what new process they were learning and that shows great resilience and strength. I look forward to the future of this organization as we continue to grow and evolve with the support of the board, the staff, our patients and our community.

Jennifer Learning
President and CEO of Atikokan Health and Community
Services



Board Chair Report

During a year punctuated with fiscal and staffing challenges in the healthcare sector, the staff at Atikokan Health and Community Services (AHCS) continued to provide high quality care to its patients and clients.

First and foremost, the staff and front-line workers are recognized and appreciated for their dedication and commitment to care and a desire for constant improvement. Consistent high praise from clients and patients on feedback surveys serves as a testament to the resilience and dedication of staff as they navigated their way through staffing shortages, staff turnover, and change brought about by a shifting workforce landscape and restructuring within the organization. I would characterize this year at AHCS as a rebuilding year, with a focus on reflecting on changes to the long-standing structure of the organization and to refining the implementation of this restructuring.

Under the leadership of CEO, Jennifer Learning, many thanks are extended to the senior team, Stacey Wood (CNO), Blake Homer (CFO), and Sarah Van Der Loo (CoS). The team navigated the integration of the Atikokan Family Health Team under the AHCS umbrella, in addition to the daily work of running and maintaining a variety of health care services in our community. As well, AHCS is a member of the Rainy River District Ontario Health Team which is in its infancy and as a member AHCS will be well represented by CEO Jennifer Learning, ensuring the voice of Atikokan is heard when decisions are made. Stable fiscal security for hospitals has been an ongoing area of concern across Ontario, and our senior team under the leadership of Jennifer has advocated directly with MPP Kevin Holland to ensure the needs of our hospital and physician complement in our community were understood by the government. Blake Homer should be commended for his ongoing and steadfast commitment to ensuring AHCS is in a sound fiscal position ensuring we are well positioned to provide care to the community of Atikokan and surrounding areas. CNO, Stacey Wood, has done the heavy lifting during significant nursing shortages to ensure the hospital is staffed and many thanks are extended to the front-line workers who accepted shifts and worked overtime to maintain the operations at the hospital and long-term care.

I would like to thank Dr. Van Der Loo for her many years of service as Chief of Staff at the hospital. Always an advocate for small northern hospitals, Dr. Van Der Loo ensured that the voice and needs of Atikokan were heard during regional discussions and decisions that would impact small communities. She has a way of keeping the main thing, and does not back down when the going gets tough. The Board welcomes Dr. John Fotheringham as incoming COS and looks forward to working with him.

A major undertaking this year was the work to complete the multi-year strategic plan. This plan provides the vision and direction for the organization. Through a consultation process, the senior team and managers at Atikokan Health and Community Services worked with Board members to develop the plan. I would like to thank all the staff throughout the organization who provided input and thoughtful comments which contributed to the develop of a plan that will guide our work over the coming years. Foundational to the plan were the key tenets of empowerment, professionalism, teamwork, trust and optimism to ensure accessible, quality

health care within the town of Atikokan. As well, ensuring we continue to support a community of care not only for clients, but also for staff is foundational in the plan.

The Atikokan Foundation and its many donors are thanked and recognized for their ongoing support of the hospital through the purchase of much needed equipment that not only improves the lives of patients and clients, but also improves the safe quality of service the staff are able to provide.

Finally, I would like to thank the Board for their commitment to AHCS and their desire to support the fulfillment of the multi-year strategic plan – Caring for patients, Caring for staff, Caring for the organization.

Beth Fairfield
Board Chair



AGH Foundation Annual Report 2023/24

The AGH Foundation is pleased to report on another successful year as the community continues to support the Foundations work with many generous donations. All donations received are used for important purchases that benefit patient care.

Total revenue for the year stands at \$72,974.04 which includes:
General Donations \$ 13,552.12, In Memoriam Donations \$29,235.55, Special Projects \$5,096.00, Christmas Campaign \$7,972.50, Extended Care Donations \$1,138.50, and Interest Income \$15,637.60.

Last fall the Foundation honored the late Dr. Kristjanson with a dedication plaque in the hallway leading to Acute Care. Dr. Kristjanson was a physician in Atikokan from 1951 until 1992.

Also new this year, we are participating in the Split the Pot Hospital Lottery with 50 other Ontario Hospitals. The first draw cycle was held in Feb and March and was very successful as a portion of each ticket sold on behalf of AGH is distributed to our Foundation. We look forward to continuing our partnership in this Lottery and 3 more draw cycles are planned for 2024. Tickets are available at www.splitthepot.ca.



We ran two fundraising campaigns this year, the first was our summer campaign where funds were used towards the purchase of 2 air bed mattresses and 3 IV pumps (we are awaiting arrival) and the second was our Christmas Campaign with funds directed to purchase 4 Long term Care Beds.

Our capital purchases this year amounted to \$49,859 and included the following: Emergency Doppler, 3 Hoyer Patient Lifts and slings, Patient Scale, 4 Transport chairs, Pharmacy Computer, 3 Ophthalmoscopes, 2 LTC air bed mattresses, Pacs (Picture Archiving) monitors for Xray department and 2 TVs for the Extended Care Lounges. These purchases would not have been possible without the generosity of our donors.

In addition to all the fundraising the Foundation Committee hosted the Annual Extended Care Wing Tea the first week of December and committee members have been reviewing our ByLaws to meet the new ONCA (Ontario Non-Profit Corporations Act) legislation and this work will continue into the fall of 2024.



**In 2023 – 2024 we received
donations from
226 Individuals and
6 organizations.**

In closing, I would like to thank our entire Board (Pat Martin, Shelby Davidson, Marie Cornell, Stacey O’Sullivan, Blake Homer) and Support Staff Bonnie Clairmont and business office staff for their valuable work and dedication to our mission “to provide financial support to the Atikokan General Hospital for the purchase of medical equipment or facility improvements to meet the healthcare needs of our community.”

Sincerely,
Kim Cross, AGH Foundation Chair



Chief Nursing Officer Annual Report

This past year has come with a lot of change! There have been many people move into new positions over the last year, including myself, as the new Chief Nursing Officer (CNO). I transitioned into my new role as the CNO in late March 2023 after Jennifer Learning left the position and took on the role of Chief Executive Officer. After seven years as Director of Care for the Extended Care Wing, I felt I was ready for a change and excited for the opportunity to lead and support our patient service departments and focus on enhancing the healthcare services offered in our community. Around the same time of my transition we also hired a new Long-Term Care Coordinator RN, Kristy Larocque, as a team lead for the Extended Care Wing, a new Nurse Manager, Cheryl Maki, to manage the Extended Care, Acute Care, and the ER, as well as a new Occupational Health and Infection Control Coordinator, Sarah Robertson (RN).

Throughout the last year Atikokan General Hospital (AGH) has struggled with maintaining adequate staffing in many of our departments in the hospital. The Health Human Resources crisis has not only affected many regional hospitals, but also AGH as well. Over the last few years the staffing issue has been greater than AGH has ever experienced before driving us to hire more and more agency / contract staff in Nursing, Rehab, and the Laboratory department. Although we continue to utilize contract & agency services currently, this seems to slowly be improving as we have been able to fill some of our vacancies near the end of the fiscal year. We are hopeful that this continues on in 2024!

We continue to support and partner with Confederation College Registered Practical Nursing Program with on-site placement opportunities, space and equipment for their classes and labs. This past year they experienced a 6-week placement on the Extended Care Wing (Long-Term Care), which was a great learning experience for them and our staff appreciated the extra set of hands! We are hopeful that this program will help recruit some additional nursing staff in the future as they are expected to have a small graduating class in 2025.

As the CNO, my role is to oversee all of the patient service departments in our hospital and although the annual report will provide you with more detailed reports of each department's accomplishments and challenges over the last year, I would like to highlight a few things from our patient service departments:

- Our ER department received some funding from Ontario Health which allowed us to purchase a portable ultrasound machine for the ER. The physicians have undergone training and are able to utilize this during patient assessments in ER– the benefits we've seen since this purchase have been tremendous and have assisted in timely diagnosis, treatment, and at times preventing or sometimes expediting patient transfers. The funding also allowed us to hire a ward clerk position in the ER to help register patients, assist with flow of the ER, transfers, and inputting doctors' orders.
- Although we've had a Full-time physiotherapy vacancy for half of the year, our Rehab manager was able to secure a physiotherapist through St. Josephs' RCCOP team to help fill our gaps and be able to continue to provide PT services in Atikokan. This has been working out really well and the Rehab department was able to reduce their wait times dramatically over the last year.

- The Diagnostic Imaging department secured a part-time X-Ray technician to assist with coverage during holidays and to ensure the department is fully staffed Monday to Friday.
- The laboratory department had a tough year with staffing shortages, but the team pulled together and managed to see 3621 patients total in 2023. Although there were times where we were concerned we may have to close lab services, the staff worked tirelessly and pulled together to keep services running all year. We have recently hired two new MLAs in temporary positions (covering permanent positions) as well as an agency MLT.
- The Pharmacy department successfully passed the Ontario College of Pharmacists – Hospital Operations Assessment in June 2023!
- The HVAC project in Long-Term Care was completed this year as well as upgrades to the plumbing system in the “older” section of Extended Care, replacing old cast iron piping with new PVC piping.

Although the last year has brought about a lot of changes and challenges, the patient service departments have done an excellent job at continuing to provide quality health care to our patients and residents as evident from our outpatient and inpatient surveys. AGH is thankful to those who complete our patient/resident surveys as these help us measure our successes and provide us areas of focus for improvement in the future.

Stacey Wood
Chief Nursing Officer



Chief Financial Officer Annual Report

Atikokan Health and Community Services has had many changes this year – to say this year has been eventful would be an understatement! AHCS has experienced another unprecedented year of changes and challenges, both financially and operationally. Fiscal 2023/2024 marks my first full year with AHCS, being hired just prior in late January of 2023. It would be fair to characterize this year as a crash course in adaptability and teamwork.

The departments at AHCS that support the clinical services under my purview include Maintenance, Information Systems, Human Resources, Health Records, Procurements, Stores, and the Business Office. While hospitals have had troubles in recruiting for clinical positions, fortunately we have been largely successful in hiring non-clinical staff for some key positions during the year. Of the departments listed, every service department has had a significant staffing change during the year, or one or more major projects which have impacted the whole of the hospital. I am very proud of each of the departments as while the year was challenging and eventful, each department has had positive outcomes for our projects. We are extremely fortunate for the hardworking staff at AHCS who regularly go above and beyond for the betterment of the organization. It is my belief that each department has seen a significant improvement in efficiency and teamwork, and I expect this to continue as change starts to slow down and processes can become more refined.

To highlight a few (of the many) changes and projects which have impacted the financial and support services at the hospital during the year:

- We had received funding for a few major projects relating to our infrastructure at the hospital during the year. The first was to replace the Long-Term Care (LTC) Waste Piping which was past its useful life and was in desperate need of replacement. I am very happy to report this project was completed ahead of schedule with no complications or major outages on the system. This was a personal point of stress, as I will leave it to your imagination the possible complications surrounding an outage in sanitary and waste plumbing for our many LTC residents! The second major project which was kicked off in the year was the replacement of our electrical panels in the hospital. While this is still ongoing, however we are off to a good start on the project, and this should be completed during fiscal 2024/2025.
- Another major project which was complete in the fall of 2023 was the addition of a new scheduling system for the organization. This scheduling system impacts every single department at the AHCS, including significant changes to the payroll process. This was a source of significant work for payroll, and the staff who manage and act as schedulers to get set up during the year. While the implementation of any new system has some issues to iron out – overall the system has been working well.
- The Family Health Team (FHT) amalgamation and integration was a significant administrative project during the year. With the FHT coming into the fold, significant work surrounding accounting, payroll, procurement, networking, and general IT had to be completed. At this point, the Family Health Team administration work has been largely completed. We are continuing to refine our process around the management of this portion of the organization to better utilize our resources ultimately to better serve our community.
- During the year we were able to deploy some Information System upgrades relating to our disaster recovery. IT will continue to be a significant area of focus in the upcoming few years as we prepare for the replacement of our current Medical Records System to Meditech Expanse. We have been working with our partners to ensure that our IT standards and procedures are compliant and compatible to ensure co-operation with the regional IT efforts. We are hopeful to recruit another member of our IT team in 2024 to assist with the volume of changes to come.
- We have made significant improvements to our Human Resources department during the year through hiring of a full time HR Generalist (Jillian Labossiere), which has been instrumental in bringing our hiring policies, procedures and recruitment up to date. The hope for 2024/2025 is to significantly reduce our reliance on Agency staff, which comes with a significant financial cost to the organization.

Financially, fiscal 2023/2024 was a year of uncertainty. It was a year of high inflation, increasing the costs of everything across the board for the hospital. With Covid-19 funding and programs starting to be reduced and removed, we experienced significantly less one-time funding for Covid-19 specific programs than we have seen the past few years.

As Bill 124, which historically capped wages at a 1% increase, was repealed we saw many changes in the year for salaries across the organization. With this came a significant amount of work for the Business office in calculating and managing multiple rounds of retro-payments. With bringing wages to a fair and equitable position, this has caused significant financial implications. With great relief, the Ministry of Health through the assistance of Ontario Health has supported to a large degree this significant financial cost for FY 23/24 through one-time funding. Salaries represent most of the expenses at AHCS (around 75% of our operating costs depending on the year) so an increase relating to this has a massive impact on the financial health for AHCS.

For our overall financial results for the fiscal year ending March 31st, 2024, we have a deficit of \$209,649 for ordinary business (this excludes the one-time gain due to amalgamation – including this amount due to the net transfer of assets we have a gain of \$27,698). This marks an improvement from the prior year of a deficit of \$542,781 however we are still in an operating deficit. This is largely due to the Bill 124 retro costs, agency expenses and the increase costs of regular goods. Funding for in year pressures were provided by the Ministry during the year. We were fortunate to have received \$300,000 in additional funding in March to assist with the additional costs during the year. This funding was on top of the one-time funding we received to help with the cost of Retro payment for wages. We hope to see the trend toward a balanced budget moving forward continue as we return to normalcy in operations. The full financial results can be found in our Audited Financial Statements which are available on our website.



Blake Homer
Chief Financial and Corporate Services Officer

Atikokan General Hospital – Statement of Operations		
For the year ended March 31	2024	2023
Revenue		
Ministry of Health and Long-Term Care Base Allocation	\$8,880,835	\$8,621,511
Ministry of Health and Long-Term Care One-Time Payments	1,831,870	787,585
Hospital On-Call Coverage	95,781	96,720
Visiting Specialist Funding	21,512	21,512
Other Revenue	1,544,010	1,530,583
Amortization of Equipment Grants/Donations	129,150	126,617

Provision for Recoveries	-100,895	-162,030
Total Revenue	12,402,263	11,022,498
Expenses		
Salaries and Wages	7,603,155	6,479,090
Employee Benefits	1,700,665	1,540,922
Employee Benefits Future Costs	-24,000	-26,400
Medical Staff Remuneration	495,413	439,947
Supplies and Other Expenses	1,973,741	2,292,792
Drugs and Medical Gases	70,382	71,436
Medical and Surgical Supplies	318,894	311,709
Bad Debts	1,505	1,106
Amortization of Software Licenses	71,100	64,481
Amortization of Equipment	309,012	298,552
Total Expenses	12,519,867	11,473,635
Deficiency of Revenue over Expenses from Hospital Operations	-117,604	-451,137
Other Items		
Amortization of Building Grants/Donations	481,842	412,236
Amortization of Land Improvements and Building	-588,634	-498,654
Gain (Loss) on Disposal of Capital Asset	-3,352	-5,226
	-110,144	-91,644
Other Votes and Programs - Revenues	2,061,107	672,382
Other Votes and Programs – Expenses	-1,886,439	-572,532
Other Votes and Programs – Provisions for Recovery	-156,569	-99,850
Surplus of Revenue over Expenses for the Year - Ordinary Business	-209,649	-542,781
Gain on Family Health Team Amalgamation	237,347	0
Deficiency of Revenue over Expenses for the Year	27,698	-542,781

DEPARTMENTAL REPORTS

Here is what happened in the various departments over the past year.

ACUTE CARE, EMERGENCY AND EXTENDED CARE WING***Acute/Emergency Department:***

I started in my position in April which was a big change for the staff. Another tremendous change for the nursing department was Staff Schedule Care electronic staff scheduling system, and while it posed many challenges, most of the staff adapted quickly and it had helped us with scheduling immensely.

Staffing shortages were a huge challenge for RN, RPN and PSWS. We brought in agency staff in all classes and they remain.

In the Emergency department we implemented a new scheduling system in the ER for outpatient treatments (wound care/infusions/procedures) to help the RN plan their day and decrease wait times and unpredictability for our community when they require these types of services. The CARE Course came to Atikokan and our nurses and physicians participated in a very intense 2-day training program aimed at Rural ER Care. The scenarios were all based on real life situations that have occurred in other rural hospitals.

We added the Ward Clerk Position to the ER to assist with scheduling and registrations in the ER and Lab.

Extended Care Wing:

Our resident level of complexity continues to rise, which brings challenges to daily staffing and plans of care. We unfortunately have been unable to fill the Behavioural Support Lead position again after it became vacant. This position was a great support to staff in finding ways to provide the best care for some of the residents that required additional assessment and management due to responsive behaviours.

We implemented the BOOMR admission program that is offered by CareRX. This program eliminates the need for the RNs to transcribe orders to the pharmacy, by having the pharmacist complete the Medication Reconciliation and work directly with the physician to ensure accuracy of the resident's medication on admission.

The Long-Term Care Coordinator (which is a new position put in place around the same time I started) was trained in completing and submitting the RAI Assessments. We began some cosmetic upgrades in the dining room and chapel, including flooring, painting and new wainscoting this spring.

We have been working on our Palliative Care program in conjunction with CLRI. This included training for nursing staff on both Acute Care and ECW. The goal is to move to a more

resident/patient focused interdisciplinary approach that begins at the time of admission, and includes a more resident/patient led plan of care.

Kristy Larocque the Long-Term Care Coordinator, and I were so fortunate to attend the AdvantAGE Provincial Conference this spring. This was an amazing experience for both of us. We made many contacts with other LTC leaders throughout the province, and participated in workshops geared towards small long-term care homes, as well as conflict management, updates from the MLTC, caring for residents with mental health needs, and different long-term care home designs and models of care. This was such a valuable experience.

Cheryl Maki, RN
Nurse Manager, Acute Care/ER & ECW



NURSES ATTEND ICN CONGRESS IN MONTREAL

WOW! I would like to start off by saying thank you so much for this wonderful, once in a lifetime opportunity to be a part of the ICN Congress held in Montreal July 2023. It was such a great experience to attend a room filled with 5000 nurses from all over the world.

We learned about nursing in several different countries and several different cultures. We learned that no matter where in the country nurses are from, we all pretty much share the same problems and concerns, although some are worse than others depending on the country. One by one these issues are slowly being addressed.

We learned a lot about what nurses go through and ideas of how to cope with such a stressful title, so we can deliver the best care to our patients while looking after our own mental health as well.

We talked about the nursing shortages at length and what an impact that has on nurses in the work force. Each day we spent at a beautiful conference building with thousands of nurses and speakers just learning about our profession and what nurses are dealing with under these stressful times. They talked a lot about the role nurses played during Covid. We learned a lot of new education.

We learned about nursing leaders and the important role they play to make each organization a better place for nurses. Without nurses at the bedside, there would be no Hospitals, and that was drilled into our heads by several different speakers. On the last day of the conference we had a guest speaker. We got a text at 10pm saying there would be a surprise speaker at 9am and announced what room to attend. The guest speaker was Justin Trudeau! It was amazing to be so close to him. He delivered an excellent speech regarding nurses and made us all feel very special and important. It was amazing to see and hear 5000 nurses clapping and shouting for joy as he praised nurses from all over the country.

Although we learned a lot and attended 6-8 sessions a day, we did have some time for sightseeing, and we were encouraged by the ICN to partake in all the sights. We experienced the jazz festival, which happened to be there, and did play for all the nurses, we seen the botanical gardens, which was amazing, we went on a double decker bus tour of the city, which was also amazing, and of course the big mall, and tried several different restaurants, and several new foods, which were all amazing! The conference was top notch and very inspiring and we are so blessed we had that opportunity to attend. Thank you 😊

Kim Sportak, RPN
Angel Young, RN



BUSINESS OFFICE

The business office during 2023/2024 has had several changes. The department is currently staffed by Cyndy Ellek, Brianna Coulson, Nadine Johnson, Nicole Bergen, and Twila Smitsnuk (who is now working for our Risk and Quality process). Nadine and Nicole are new additions to the business office during the year, with Nadine coming over through the amalgamation of the Family Health Team, and Nicole joining the team in the new year. We are very happy to have them both on our team! With Blake Homer (CFO) joining just prior to the fiscal year, the business office has had a large adjustment throughout the year as the process have been reviewed and worked through:

- Onboarding of multiple new employees as well as the change in management.
- Successfully completed Audit of both the Family Health team and AHCS during the summer of 2023, while this process is annual - the last year has been challenging due to staffing, Covid 19 and Bill 124 which added significant complication.
- Dealing with payroll retroactive payments relating to Bill 124 for our multiple unions and non-unionized staff.
- Implementation of electronic scheduling system, which impacted all aspects of the payroll process
- Incorporating the payable and receivable process, as well as payroll for the Family Health Team integration.
- Reviewing and improving working procedures and processes.

The business office is expected to remain busy throughout the next year with a few projects relating to our billing, accounting system upgrade, and employee benefits are scheduled, however we are looking forward to a return to a normalcy as the significant projects conclude.



ATIKOKAN COMMUNITY COUNSELLING SERVICES

Here's a quick overview of some of the things that have been happening in the Community Counselling department.

- Ongoing support for clients via referrals from the community and the Rainy River district.
- Transition of the transition house to the hospital.
- Organizing and additions to the mental health resource library we have internally.
- Ongoing psychiatric sessional support via Dr. Haggarty and KRRMHAN.
- Ongoing education for staff via self development topics, 'education days,' and other education as needed.

Alan Poelman, BscN, BSW, RSW | Manager/Therapist
Manager, Atikokan Community Counselling Services



**Community Counselling
saw a total of
249 clients in
2023/2024.**

DIAGNOSTIC IMAGING

- On March 27, 2023 Chelsey Rusnick started part-time in DI to replace Emily's departure.
- 2023 was first year with BCL covering *all* our diagnostic equipment PMs. Much faster service response times than GE
- June - *Ocean* electronic referrals went live
- PACS Workstation monitors got replaced with even better units; old ones went into doctors' lounge
- Jan 19 - Part-time U/S tech Amanda DeCorte went on maternity leave
- Got our lead radiologist to sign on as Radiation Protection Officer for our facility (first radiologist to be our RPO since late nineties), to satisfy Accreditation requirement.
- Worked out some of the bugs in report generation created by CTS' new Voice Recognition reporting system. Turn-around-time for reports has improved.
- Upgraded office computers.



Total # of Patient Visits
in 2023/2024 = 1661:
ECG/Holter = 236
Ultrasound = 716
X-Ray = 710

DIETARY

We continue to work on process improvements to continue to offer high quality meals to patients, residents, Meals On Wheels clients and staff. Janice Kitchen and I have worked to update and strengthen our auditing processes, with more work to do. We also have worked to update and create more complete procedures so that there is a set standard for staff to follow- something that has lacked previously. We have also worked to refine our catering policy for organizational meetings.

Like many departments, we have struggled with understaffing. Our solution of offering to cross train dietary and housekeeping staff has not gained much traction this year.

We continue to see good patient, resident and client satisfaction with our meals.

In the next year, my goals include:

- Replacing our very outdated diet software with Sysco Meal Suite which will interface with our Sysco ordering software. This will improve nutrition analysis, menu development, and provide resources such as new recipes, more accurate food costing, forecasting and inventory management. This stops us from having to “reinvent the wheel”.
- Utilize Surge Learning for auditing, continue to develop an auditing schedule
- Make improvements to our dietary schedule by working with the union to create a new full- time dietary aide/ cook position
- Generally to get staff more on board with organization wide policies and procedures

I would like to recognize all dietary staff for their hard work and dedication in picking up shifts, staying late to ensure work gets done and patients are fed. Dietary staff care personally about our residents which is evident in their work.

In my clinical role, I had the pleasure of attending the Obesity and Hypertension in Canada conference, held by Obesity Canada and Hypertension Canada. We are working to build and improve our Obesity Management program through the Family Health Team. This is crucial as so many chronic diseases are impacted by obesity. On a societal level, there is a lot of work to be done to dispel misinformation about weight. These pervasive and harmful attitudes toward obesity manifest as weight stigma. This can exist as healthcare bias towards those with obesity, as well as internalized weight bias, which are two huge and overlooked barriers to significant progress in obesity management.

Laura Thibodeau
Dietitian and Foodservice Manager



FAMILY HEALTH TEAM

The staff at the AFHT underwent numerous changes in the past year as a result of the amalgamation in becoming part of Atikokan Health and Community Services (AHCS).

- Learning AHCS information systems for policies, education, health and safety, incident reporting, payroll, email and network, to name a few
- Nursing staff becoming part of unions, ONA and Unifor
- Administrative Assistant moving over the hospital.
- Adjusting to a 7.5 hour work day
- Reorganizing offices to create a treatment room, and maximize storage space
- Converting the Collaborative Care Committee to a Primary Care Committee
- Taking on the Home and Community Care overflow nursing contract
- Collaboration with Rainy River District Ontario Health Team, with increased direction from Ontario Health in regards to Programming priorities
- Hiring of Bridget Davidson, Manager, effective April 1, 2024. She had been interim manager since June 2023.
- Hiring of Kendall Coulson, Registered Nurse, to started in June 2024.
-

Through all the challenges and changes, the AFHT staff have continued to provide excellent care to our patients and have shown resilience during the transition to becoming part of Atikokan Health and Community Services

Administrative Staff:

Bridget Davidson, Manager: Atikokan Palliative Care Team/Caregivers Committee

Shannon Strom, Program Assistant: Health and Safety Rep, Interagency Meeting

Paige Burgstaler, Clerical Assistant

Nadine Johnson, Administrative Assistant



Clinical Staff: Programs, Services and Committee/Community Involvement

Clinical Staff	Programs/Services	Committee and Community Involvement
Alexa Legree, NP	Primary Care Episodic Care Same Day/Next Day appts	Atikokan Next Generation Coalition RRDOHT Primary Care Committee RRDOHT-Mental Health & Addictions Comm
Kristin St. Pierre, RN	Diabetes Health Smoking Cessation Hospital Discharge Program Overflow Home Care Patients	RROHT – Diabetes Committee
Kendall Coulson, RN <i>Starting June 24/24</i>	COPD Overflow Home Care Patients	
Ashley McEvoy, RPN	Anticoagulation Integrated Cancer Screening Telederm Overflow Home Care Patients	
Ashley Fournel, RPN	Cardiovascular Health Blood Pressure Management Prenatal Well-Baby Overflow Home Care Patients	AHCS Wellness Committee Atikokan Next Generation Coalition
Lorraine Gauthier-Stromberg, Registered Social Worker	Mental Health Counselling	SEAC RRDSB NWDCSB-Special Ed Advisory Comm RRDOHT-Mental Health & Addictions Comm
Laura Thibodeau, Registered Dietician	Nutrition Counselling My Best Weight Program Home Care Patients	

Bridget Davidson

Manager, Atikokan Family Health Team



HEALTH RECORDS

Staffing: The Health Records department is staffed with 3 full-time staff members, Bridget Davidson, Department Manager, Amber Horricks and Emily Butts, both Certified Health Records Technicians. With the amalgamation of the FHT into Atikokan Health and Community Services, Bridget Davidson stepped in as interim manager at FHT June 2023. Amber and Emily also stepped up to take on some additional tasks in the department. In September 2023, Jillian Labossiere, Human Resources Generalist, was hired fulltime in the Human Resources Department and the role of Physician Recruitment and Retention was moved from the Health Records Manager role to Human Resources. Finally, after recruitment for the AFHT Manager position was completed, Bridget was the successful candidate, and recruitment for the Health Records Manager began.



Clinical data submitted by Health Records to Canadian Institute for Health Information (CIHI) for Fiscal 2023 included:

Emergency room records = 4743 (↑ by 31 records compared to Fiscal 2022)

Acute care discharges = 200 (↓ by 51 records compared to Fiscal 2022)

AGH's clinical data submitted to CIHI is available to the public at

<https://yourhealthsystem.cihi.ca/hsp/?lang=en>. The interactive website allows users to view specific hospital data, as well as regional and provincial, and has the ability to do comparisons as well.

Under the Personal Health Information and Protection of Privacy Act (PHIPPA), there were 45 access requests for personal health information processed (↑ 7 compared to fiscal 2022), resulting in \$1,359.25 fees collected (↑ \$282.75 compared to fiscal 2022) for processing the requests.

For the calendar year 2022, to date, 228 professional staff credentialing applications have been processed and approved by the Board.

Bridget Davidson

Health Records Manager

HOUSEKEEPING/LAUNDRY

It seems like staffing has been a continuous battle for the Housekeeping department. It's been difficult to hire new quality members for casual positions when multiple people are off sick at once. Things have finally gone back to 'normal' in terms of permanent staff returning to work, and we are hiring a couple good quality workers in permanent positions. The Dietary manager and I have come up with a plan to cross-train part-time/casual Housekeeping staff into the kitchen and vice-versa in order to maintain an adequate casual pool between both departments.

In terms of equipment, we are still waiting on funding to replace our defective floor cleaning machine, and I have also been looking into the replacement of all our heavy manual mops to be inline with other facilities. I have also been developing a better orientation/training package for new hires. This is still in the trial process.

Sarah Robertson
Environmental Services Manager

HUMAN RESOURCES

Our HR department is now staffed by two employees, Chelsey Rusnick (HR Coordinator), and in September we hired a HR generalist (Jillian Labossiere), who has come on board to assist us with our massive workload for our Human Resources. With the staffing shortage, especially around nursing and the workload to manage agency staff, we have seen more HR demands than historically.

- We have been working hard to revamp employee hiring and onboarding policies and procedures
- Massively increased effort on recruitments, including attending convention and employment fairs.
- Revamping of operating HR policies and procedures
- Supporting management during the difficult staffing shortages across many departments.

Looking forward, we are hoping to reduce our need for agency staff as we are able to hire more permanent staff. Our HR team is hard at work to support our existing employees and management while also helping the organization to run more smoothly. They are helping to provide some much-needed consistency across the organization as many changes surrounding leadership has occurred, and this continues to be a focus for 2024/2025.

**Atikokan Health and
Community Services
employs 134 staff.**

**19 new staff
were hired
in 2023/2024.**

INFORMATION SYSTEMS

Our IT department is currently staffed by Krys Cain, who has done all of the heavy lifting over the last year. There have been many IT projects and upgrades throughout the year. We are hoping to hire another staff in 2024/2025 to assist in the many changes coming to the region as we prepare for our Medical Record system upgrade. These projects occurred on top of the regular IT support and troubleshooting for AHCS.

Some key events for the year:

- We purchased and moved disaster recovery servers offsite. This is a big step towards having a robust IT system which is capable of recovery in the event of adverse events.
- Installed and assisted with the setup of the new electronic scheduling system.
- Moved all Family Health Team staff and resources onto our computer systems.
- Performed risk assessments and planning with our regional partners in the first steps of upgrading our IT environment to meeting requirements for our new Medical Records System expected to be implemented in the upcoming few years.
- Worked with Management to plan our migration to more cloud-based providers, upgrade our windows licenses and capabilities, as well as increasing our security and functionality drastically. This is expected to occur in 2024/2025. We will be working with external vendors to assist in this process.

We are aiming to hire an additional IT support staff in 2024/2025 to assist with the projects and day to day IT requirements of AHCS. We are expecting projects and workload to increase for the next few years as IT is regional effort to improve.

LABORATORY

We have been running short staffed since April 2023 with a full time MLT position open. We have been supplementing with Agency MLTs since January 2024. One of our long-time, full-time MLAs is on a maternity leave and we offer her congratulations on her new baby. One of our other long-time, full-time MLAs has taken a part-time position as an ER ward clerk. To help with these vacancies we hired temporary/contract MLAs to help cover with the short staffing situation; one part-time and one full-time.

We have been running under two separate Lab directors with Interim Lab Director Dr. Martha Lyon in 2023 and in January 2024 we made the switch to a more permanent solution with Dr. Mazzulli of UHN. Lab is actively working on cost saving solutions as we know we are an expensive department.

We have replaced some equipment including the glucometers and the hematology analyzer – both pieces requiring validations, training and approval. We participated in the lab internal audit in 2023 which is part of accreditation however, no assessment is made from ACDx but an employee of KRRRLP did an assessment. We participated in all required EQA testing both from IQMH/ACDx and One World Accuracy in 2023 with a 97% pass rate in Chemistry, 100% pass rate

in hematology, 100% pass rate in Virology (Infectious Mononucleosis and Covid, flu and RSV testing).

We began the work of switching to the new web based, environmental monitoring program called Smart Vue Pro and we participated in the KRRRLP Lab Symposium in September 2023 which we thoroughly enjoyed.

Kristy Matichuk
Lab Manager

MAINTENANCE

Our hardworking and dedicated maintenance staff continue to work extremely hard to ensure all our facilities are well maintained and safe. Our maintenance department is continued to be staffed with our three full-time staff members: Corey Lavallee, Greg Armstrong, and Richard Bowes. This year was a year of many upgrades and replacement projects to keep the facility running. Throughout the year our staff has responded to hundreds of maintenance requests from all departments and locations.

Some changes and duties for the year:

- Corey Lavallee accepted the position of lead hand for Maintenance during the year.
- Assisted in the planning and oversight of the many capital projects that occurred during the year or still are ongoing (Electrical Panels, LTC Sewage piping replacement, Sprinkler System Retrofit, HVAC work for the LTC).
- In addition to maintaining the Atikokan General Hospital, they also maintained Haarala Lane house, Rawn Road house, our ambulance base, and other offsite rented locations when needed.
- Oversaw a co-op student from the High School.

We anticipate another year of major projects in the upcoming year as we continue to improve our aging facilities, our maintenance staff will continue to work hard to literally the keep the lights on for us!

**Our Maintenance Department
responded to 962 general
issues reported through
Maintenance Care.**



OCCUPATIONAL HEALTH & INFECTION CONTROL

This is a new role for me, therefore it's been 7 months of a steep learning curve. My major focus in these departments have been to learn all important aspects of my role, reorganize documentation into a electronic format, employee wellness (employee flu and Covid vaccination programs, mask-fit programs, WSIB claims, medical absences), ensuring proper employee health documentation, reviewing and updating policies and procedures for all my departments, reviewing new infections of staff and inpatients, ongoing infection surveillance, hand-hygiene surveillance, outbreak prevention and management on LTC and active units. I have not been able to put a lot of focus on a singular project this past year as everything is very new to me, but as things settle I plan to improve several things in these areas.

Sarah Robertson
Occupational Health & Infection Control Coordinator



**91 Hand Hygiene
Compliance Audits were
conducted in 2023/2024**

PATIENT AND FAMILY ADVISORY COUNCIL

The Patient and Family Advisory Council (PFAC) had several meetings over the past year as they tried to sort out what their role would be in our newly formed organization. The PFAC committee reviewed the terms of reference and also reviewed documentation that outlined the original purpose for Patient and Family Advisory Councils in hospitals. They determined that their main purpose was to ensure that there is a voice for patients so they feel comfortable registering their complaints within our organization. With that focus in mind we looked at ways we could improve patient care, access to patient care and how we can evaluate the care that they receive.

We revamped the complaints policy and procedure, adding in a phone number people could call if they want to register a complaint anonymously and we added in about the importance of considering cultural norms when helping a patient or family member fill out a complaint form. The council also reviewed what they wanted to achieve over the next few years which includes translation of many of our documents as our community becomes more multi-cultural. Lisa Belanger was the chair of the PFAC and we want to thank her for all her hard work on this council as she helped to define the purpose and mandate. Following her resignation in the fall, the council voted in a new chair, Brian Stimson, who attends our board meetings as well as our Quality Council meetings.

As part of their work on the council, they regularly review our in-patient and emergency room survey results as well as the new out-patient survey results. They also review the results of our scorecard; our quality improvement plans and any complaints that the organization receives.

The council is always looking to add new members so we are working on a new website page as well as pamphlets and ideas to promote the PFAC in the community.

Jennifer Learning
President & CEO

PHARMACY

- Another year of navigating through numerous drug shortages. Drug shortages had spiked during 2020/2021 but have continued through into 2023. Drug shortages occur when there is not enough supply to meet the demand. Some shortages are more complex and longer lasting than others. These shortages can occur for various reasons (i.e. manufacturing problems or delays, difficulty obtaining raw materials or ingredients, sudden increase in demand, discontinuation of a drug, and natural disasters or pandemics), impacting patients, healthcare providers, and the overall healthcare system. Most shortages are successfully managed before they significantly affect patients. Health Canada collaborates with various stakeholders to prevent, mitigate, and resolve shortages.
- March 2023: Accreditation Canada site visit
- June 2023: Ontario College of Pharmacist – Hospital Operations Assessment was successfully completed onsite with a pass. These OCP assessments are completed every 2 years and they provide recommendations and areas where actions for improvement may be needed. All hospitals operating and providing medication management services to patients in public and private hospitals in Ontario must be accredited and undergo routine assessments by the College. During a hospital pharmacy assessment, a College hospital operations advisor reviews the hospital pharmacy's operations. The assessment is designed to ensure the hospital pharmacy is adhering to hospital operations standards and has the proper processes and procedures in place.
- December 2023: TBRHSC has hired a full time Clinical Informatics Pharmacist Specialist for our region. The role of this position will be working towards the implementing of Meditech Expanse across the 12 hospital sites within our region. The Meditech Expanse Implementation Project is a significant initiative aimed at standardizing processes and enhancing efficiency in our healthcare delivery. As we work towards this goal, it is crucial to gather valuable insights from each site to ensure a smooth and successful implementation.
- The pharmacy technician student (T. Manduca) started her Structured Practical Training (SPT) on January 8, 2024. This training is to be completed part time over 18 weeks (three days per week) and will be completed on May 10, 2024. The SPT program is completed under the supervision of a qualified preceptor. The Pharmacy RPN (onsite) and the Regional Pharmacist (remote) are working together as co-preceptors for the duration of the training.
- The Pharmacy lead has been planning and preparing to initiate the second phase of barcoding for medications within the Pharmacy department and automated dispensing cabinets within the hospital. This is a big project that we look forward to implementing

and completing in the coming year. We have had all oral solid and liquid medications that are repackaged in house barcoded for many years. The next phase to be completed is the barcoding of all injectables, multidose/bulk, topicals, drops, and inhaler medications. The barcoding of all medications will work towards safer practices for pharmacy when restocking medications as well as for nursing when dispensing medications to our patients. This will be working towards a “closed-loop” medication system which allows for all medications to be audible and traceable from the time of repackaging through to the administration to the patient.

Corina White, RPN
Pharmacy Assistant



PROCUREMENT AND STORES

Our procurement and stores staff work tirelessly to ensure our departments have the goods and equipment available to them to provide our services. Our departments have two employees. During the year Holly Mosbeck started as our stores staff. She also assists our procurement agent MaryAnne Blanchard when needed. 2023/2024 was a year of reinvestment into our equipment and facilities. Much of which were handled by our procurement and stores team. This team is critical for the efficient and cost-effective operation of our hospital, as they deal with our supply contracts.

- All Foundation purchased goods are overseen by our procurement team, ensuring that the goods that are approved for purchase arrive and are in working condition. This year we purchased over \$49,000 of equipment just from the Foundation alone, not including the hospital purchased goods.
- Assisted in purchasing major equipment such as an ultrasound machine for our Emergency Room.
- Oversaw the integration of the Family Health Team’s purchase process into the AHCS workflow.
- Assisted management in assessment of policies and procedures to be reviewed and revamped for the future.

2023/2024 was a year of significant change, which also saw additional work and process adjustments for our procurement and stores team. We are expecting this to continue into 2024 and 2025 as we look to improve existing processes and try to use our resources effectively.

QUALITY IMPROVEMENT

Quality Improvement looked a little different this year than it has in past years. We formed a Quality Improvement Committee that is dedicated to working on our quality improvement plans. We reinstated the Quality Council which reviews quality and risk quarterly and we sorted out how the Quality Committee of the Board would review documents at the board level.

As part of our quality improvement initiatives we began sending out patient surveys. The surveys go to everybody who was an inpatient in our hospital as well as a number of people who attended our emergency room for care. This last year we sent out 123 In-patient surveys and received 34 responses and we sent out 506 Emergency department surveys and received 163 responses. We also received many positive comments which were shared with the staff regularly. All the surveys are anonymous so we don't know who made the comments but many of them were very good.

We also sent out an annual resident survey for LTC residents and from that feedback we determined we needed to focus more on recreation and the activities that were being planned. We plan to do surveys of the residents more often to see if things are improving over the year. The Quality Improvement Committee is made up of representatives from Acute, Long Term Care and the Family Health team and working across the different sectors has helped us create ways to improve patient care in all three areas.

REHABILITATION

Staffing: The Physiotherapist position has been vacant since September 2023, as our physio is taking a year long parental leave. We were able to fill the position with the St. Joseph's Care Group RRCOP- a physio who travels to assist with hospital vacancies- since November 2023 for 1 week in person and 1 week virtual.

We were allotted funding through FHT for a second Rehab Assistant, however that funding opportunity ended with the fiscal year.

Our Staffing ratio was 1 Full time Rehab Clerk, 2 full time Rehab Assistants (one permanent and one temp), 1 Full time Physiotherapist, 1 Full time Temp Kinesiologist, and 1 Full time Occupational Therapist/Rehab Manager.

Our current staffing ratio is 1 Full time Rehab Clerk, 1 full time Rehab Assistants, 1 Full time Physiotherapist; half virtual/half in person (contracted by St. Joes), 1 .7 FTE Temp Kinesiologist, and 1 Full time Occupational Therapist/Rehab Manager.

As of July/August the Occupational Therapist/Rehab manager will be going on 18 month of maternity leave and therefore we are at risk for a vacancy in this position which is something we are actively working to fill through various means.

There will likely be changes to service provision in the case that we have more unfilled full-time positions.

Our waitlist for outpatient services has improved remarkably- thanks for our whole team working hard to treat our community members in a timely manner.

Jessica Rowlands OT Reg. (Ont.), HBKin, MScOT
Occupational Therapist, Manager of Rehabilitation

Total # of Patient Visits in 2023/2024:

Occupational Therapy = 956

Physiotherapy = 477

Kinesiologist = 1553

Rehab fun facts:

- 482 individual patients were seen, with 695 unique incidents (meaning many patients were seen multiple times for different events such as new acute admissions or multiple outpatient referrals).
- 4973 patient visits were completed.
- Rehab staff spend approximately 5898 hours completing patient related activity.

Outpatient Waitlist:

Comparing March 2023 with March 2024: Waitlist has reduced by 49.

- Priority 3 (Acute conditions) reduced wait time by 94 days;
- Priority 4 (sub-acute conditions) reduced wait time by 158 days;
- Priority 5 (chronic conditions) reduced wait times by 117 days.

Staff Service Awards 2023

5 Years:

Alyson Allen
Richard Bowes
Emily Butts
Samantha Cupp
Sheila Ferguson
Kristy Larocque
Corey Lavallee
Melissa Lesperance
Brenna Nephin
Twila Smitsnuk
Shannon Strom

Ten Years:

Brette Cain
Carol Sampson

Fifteen Years:

Krystal Bain
Sarah Howells
Jackie Kerr
Stacey Wood

Twenty Years:

Greg Armstrong
Melissa Caron
Carol Coulson
Mindy Cross



Staff Retirements 2023 – 2024

Shelly Hrynuk – Dietary Department – almost 20 years of service

Kelly Taggart – RN – almost six years of service

Candia Anderson – MDR/Stores – 14 years of service

Carol Sampson – Housekeeping – 10 years of service

