

Everything Matters

Norfolk General Hospital
The Norfolk Hospital Nursing Home
Norfolk General Hospital Foundation

2008/2009 Annual Reports to The Community





J. William C. Lewis
President and C.E.O.

At the most unexpected moment you may find you need to place your health or your life in the hands of others.

Or hard decisions that affect the ones you love may rest in your hands.

At those times, you need to trust in the skill and experience of others and...

at those times "everything matters."

A Message from the President and C.E.O.

Through this Report we hope to give you a glimpse into this past year and what matters at Norfolk General Hospital. This is our way of being accountable to the community about what is happening at the hospital and what it means to you.

You may already be aware that by far the biggest challenge that Norfolk General Hospital faces is a financial crisis.

To give you a glimpse into this situation, this past fiscal year Norfolk General Hospital had an operating deficit of \$1.1 million dollars. This current year our Local Health Integration Network requires that we recover this deficit and have a balanced budget. This will erode our resources and means we will have limited ability to purchase or replace capital equipment.

Like other smaller hospitals in Ontario, we are in this situation because the funding we receive from the government isn't keeping up with inflation. This year government funding increased by 2.2% but the cost to operate our hospital increased by about 5% due in part to inflation and to a growing and aging population that is demanding more from our facility.

To address our financial crisis we have developed a recovery plan which we are implementing. This recovery plan has several parts including:

- Generating some additional revenue
- Enhancing energy conservation
- Retendering various contracts for supplies
- Improving efficiency
- Improving utilization management activities

In addition to the financial challenges, one of the biggest hurdles we face on a daily basis is the number of alternate level of care patients

in the hospital. These are typically patients who would be transferred out of the hospital if there was a place available for them in a nursing home or hospice, etc. These people need what is called "alternate level of care" or ALC. Many of these people wait in the hospital, sometimes for months, because there is no other place for them to go.

At 30%, Norfolk General Hospital has one of the highest percentages in Ontario of beds occupied by patients waiting for alternate care.

This is not a good situation for the people waiting in these beds or for the hospital. The acute care units of a hospital can be noisy, privacy isn't always optimum and daily exercise and attention is limited.

In the hospital the rising number of alternate level of care patients is causing a bed crisis, disruption and bed shortage for new admissions in the Emergency Department and elsewhere. Sometimes people complain and are frustrated.

We want you to know that we understand your frustration and that this is a provincial wide problem in Ontario hospitals. The government has introduced some strategies to address the issue and we are expecting more announcements in the near future.

In the meantime, at Norfolk General Hospital we have daily bed meetings at 10:00am to talk about how we are going to manage the admissions coming in for that day. We also have a team in the Emergency Department that helps keep patient flow moving as quickly and efficiently as possible.

Although the past year has had its challenges there is also good news to report. Our people remain our strength at Norfolk

General Hospital and at The Norfolk Hospital Nursing Home. We are proud of the level of skill and commitment of our entire team.

In fact others are also recognizing our team's skill level. NGH is now a designated teaching site for providing Emergency Department rotations for medical students from McMaster University. The University places medical students at our hospital for training.

It is our hope that these students may eventually return to become future doctors in our community.

This past year we have placed further emphasis on patient safety and have significantly enhanced the safety culture at NGH in all departments. We've implemented a host of new safety initiatives. This includes an increased emphasis on hand hygiene for all healthcare workers as well as those visiting the hospital.

I am continually grateful to our medical staff, employees and volunteers who are highly skilled and compassionate caregivers. These individuals rise above and beyond to care for you, your families and your communities. I also want to thank our committed Donors and Board of Directors who give personally and financially throughout the year.

"Everything matters." This is the theme of this Report. These two words renew our commitment to you to try harder even in tough times, because having quality, local healthcare matters!

Respectfully,

J. William C. Lewis, President and C.E.O.

Everything Matters

NGH, NHHH, NGH, 2008/09 Annual Reports to the community



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THIS REPORT IS PUBLISHED BECAUSE

as a publicly-funded health care institution, Norfolk General Hospital is accountable to the province and to the communities we serve including the Hamilton Niagara Haldimand Brant Local Health Integration Network.

THIS REPORT is part of our efforts to improve information-sharing. Our Board of Directors is committed to practicing good governance, improving the transparency around how Norfolk General Hospital's Board and leaders are addressing our significant challenges, and demonstrating our accountability to you, the public we serve.

WE INVITE your feedback on the Annual Report. For questions or comments, contact Bill Lewis President and C.E.O. at 519-429-6976.

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Highlights

- 2. Message from the President and C.E.O.**
 - 12. Year-end message from the Leadership**
 - 21. Recognition of Committed Donors**
 - 30. Financial Report**
-
- 4 Patient Safety Matters**
Creating a culture of safety to protect lives.
 - 7 Emergency Care Matters**
The inside scoop on what's happening in our Emergency Department.
 - 8 New Technology Matters**
More people are making the trip to NGH to have laparoscopic surgery.
 - 10 Skill Matters**
Facing the challenge of bringing skilled healthcare professionals to Norfolk.
-
- 14 Kindness Matters**
Growing stronger to meet the care of our residents.
 - 16 Volunteering Matters**
In spite of the challenging times, we continue to be blessed.
 - 18 Community Matters**
Our committed donors continue to play a vital role at NGH.
 - 30 Accountability Matters**
Balancing the budget and revealing the bottom line.

Cover: Dr. Tim Bard and his family enjoying Wellington Park in Simcoe. Originally from Vancouver, Dr. Bard moved to Norfolk and is now an internist at Norfolk General Hospital.

Cover photography: Thank you to Cindy Pichette of Silver Parrot Studio for her contribution.



Patient Safety Matters

Creating a culture of safety to protect lives

Report on Patient Safety

Patient safety continues to be a very high priority at Norfolk General Hospital especially as we face an increase in elderly patients, resource limitations and a shortage of healthcare professionals. We want the community to know that patient safety matters and we will be open and transparent during these challenging times.

Norfolk General Hospital is demonstrating our continued commitment to patient safety by developing a host of new initiatives. This past year we gave particular attention to developing action plans for six key areas of patient safety. These areas include:

1. **Infection Control** - we've implemented routine audits and a host of patient safety indicators that are continually monitored to help control infections.
2. **Hand Hygiene** - we're improving our hand hygiene culture throughout the hospital through a multi-faceted hand hygiene program - "Just clean your hands."
3. **Patient Falls** - we're decreasing harmful falls by implementing a falls assessment and intervention strategy.
4. **Medication Reconciliation** - we've added an extra level of protection to ensure that a patient's medications are consistent even when they are admitted or when they are being transferred or discharged.
5. **Staff Immunization** - we're increasing staff immunization rates. This past year the immunization average rate for staff was 65.5% which is above the average rate for the hospital sector.
6. **Patient Monitoring** - we've enhanced the monitoring and safety surveillance system throughout the hospital.

A revolution in hand hygiene culture

Proper hand hygiene is one of the best ways to prevent the spread of infections and improve patient safety. That's why this past year we implemented a hospital wide effort to improve hand hygiene with the "Just clean your hands" program. The goal of this program is to educate staff, patients and visitors to the hospital on the importance of personal hand hygiene.

As part of this program, posters and other visual hand hygiene reminders have been placed throughout the hospital. We've installed 360 alcohol hand sanitizing stations throughout the hospital to make hand washing easy. In fact, there is a hand sanitizing unit within three feet of every one of the 121 beds in the hospital. The program also includes a step-by-step guide, training sessions for hospital staff, online training modules and an audit tool to help us measure how well we are performing at hand hygiene.

J. William C. Lewis, President and C.E.O. of Norfolk General Hospital

NGH has consistently achieved accreditation status which means every three years we have met nationally recognized standards for quality healthcare.

As of April 30, 2009, all Ontario hospitals are required to annually post their hand hygiene compliance rates to further promote accountability and transparency within the health system. We post our hand hygiene compliance rates on our website at www.ngh.on.ca.

We strongly support the public reporting of patient safety indicators because we believe it will inspire improved performance, enhance patient safety, and provide greater transparency to this community.

Receiving accreditation stamp of approval

Thanks to the hard work of our entire team at NGH our hospital was well prepared for the accreditation review on March 23-25, 2009.

Accreditation Canada is a voluntary assessment process that hospitals across Canada use to evaluate and improve the quality of their services. Accreditation gives NGH the opportunity to evaluate our hospital against national standards. The accreditation process lasts three days and includes on site review and intense scrutiny of 1,361 standards including patient safety. Accreditation occurs every three years.

NGH has consistently achieved accreditation status which means every three years we have met nationally recognized standards for quality healthcare.

Currently, NGH is working towards accreditation in 2009. The accreditation team surveyed the hospital in March 2009 and as of the printing of this Report we have received the preliminary report. The final Accreditation Report will be received in October 2009. Continued accreditation demonstrates our commitment to patient safety and quality care.

You can find information on how we're doing by visiting websites that promote public access to hospital performance. These sites include: www.oha.com, www.myhospitalcare.ca and our website, www.ngh.on.ca.





"I can't tell you enough how important it is to have a hospital in our town."

Baby Kye is safe and in good hands on Good Friday

The staff at NGH were put to the test when Steven and Sara Cooper arrived in the emergency with a difficult situation.

It was Good Friday and Sara was in labour with contractions a minute and a half apart. The baby was not in a good position and things were serious. There was no time to waste. Sara would need to have an emergency C-section.

Dr. Olsson was quickly called in to ensure that Sara and her baby would be okay. Dr. Olsson performed the C-section.

During the operation the staff at NGH took every precaution to make sure that Sara and her baby would be safe. The Laboratory Technologist took blood to determine Sara's blood type in case she would need a blood transfusion. The surgery went smoothly and without complications.

Kye's mom, Sara Cooper, lives in Simcoe and is a nurse at Norfolk General Hospital.

Sara's husband, Steven, provided support to her as he remained by her side during the entire time.

Sara is pleased with the care she received at NGH. When the operation was over she was happy and surprised to find out the baby was a boy. Sara and Steven named their baby, Kye Shaune Nicolas Cooper.

Sara believes, it's important to have a hospital in Norfolk because the emergency services are life saving. Sara said, "if Norfolk General Hospital wasn't here and I had to drive further away, I don't know what would have happened to baby Kye. I can't tell you enough how important it is to have a hospital in our town."

Although an emergency C-section was required for baby Kye's birth, he is now gaining weight and settling in nicely to home life.



Performing as clowns provided some relief for Doug and Karen Sibbett who are not unfamiliar with the trials and pain life brings or the need for a community hospital to be there for them.

Norfolk General Hospital is always here for us when we need it

After losing two sons in two different car accidents, Doug and Karen Sibbett have learned to live with pain every day. Whenever someone asks about their children the pain comes surging to the surface once again.

In 1995 their son Aaron was 22 years old when the brakes on his car failed while going through an intersection. He suffered severe head trauma and was brought to Norfolk General Hospital where he was placed on life support. He was then transferred to a tertiary care hospital where his organs could be harvested to help others. His death occurred a mere four years after the death of their first son, Doug, also to a car accident.

Doug and Karen understand that the time factor of any emergency can mean life or death. Doug is sure that, "by our hospital being here and the staff in the emergency room, it gave our son Aaron more of a chance to stay alive. It gave us more time to be with him which we truly appreciated."

Following the loss of their two sons, both Doug and Karen learned to deal with the pain and in small ways Norfolk General Hospital was there to help them.

Doug became a spokesperson for the CHAT - Community Health Awareness Taskforce Program at NGH. This program helped Doug in

the grieving process by giving him a way to educate and help others drive safer.



Doug and Karen Sibbett are committed donors and supporters of Norfolk General Hospital Foundation.

Later both Doug and Karen became involved in the Caring Clowns Program where they visited NGH patients and nursing home residents. Although now they no longer perform as clowns Karen says, "It felt good to laugh and to make others laugh too. It was good therapy at the time."

Throughout their lives Norfolk General Hospital has always been there for Doug and Karen. Through the years they have experienced a broken leg, minor and major surgery, the loss of their two young sons and the birth of two beautiful grandchildren from their daughter, Jennifer and son-in-law Kevin. And in 2003 once again NGH was there for them when Karen found out she had breast cancer and faced surgery.

"We need our community hospital," says Karen. "Someone once asked me, why I didn't have my breast cancer surgery elsewhere. I told them that we're comfortable with the staff and physicians here. Local people work at NGH. They know Doug and myself. I prefer to drive a few minutes to go to NGH than travel a long distance and go somewhere else. Dr. Olsson, who was my surgeon, gave me assurance that I could get through the cancer and I was confident that I was in good hands."

Emergency Care Matters

The inside scoop on what's happening in our Emergency Department

Report from the Emergency Department

The Emergency Department at Norfolk General Hospital is open 24 hours a day, seven days a week. During that time we see between 70 and 80 unscheduled people in one 24-hour period. During that time we also face uncertainty. We could face anything from a baby being born, a car accident victim with severe trauma or a sore throat. At any time several ambulances could pull up to our door with individuals who need immediate medical attention.

This uncertainty can cause some frustration for people waiting in the Emergency Department. That's why it's important to know what to expect when you come to the Emergency Department.

When you arrive you undergo a brief "triage" or sorting. In triage a nurse interviews you and determines the nature and severity of your illness. Individuals with more serious illnesses are seen by a physician sooner than those with less severe symptoms or injuries. Sometimes the severely ill patients tie up our emergency resources and other people have to wait.

The Emergency Department operates differently than most other places. It's about a larger society and community and helping those who need help the most first.

Even though wait times in the Emergency Department may add up to two or four hours, this wait time is less than some other hospitals in our area. We know this because the government publicly posts data about local wait times online at www.ontariowaittimes.com.

One of the biggest challenges over the past year in our Emergency Department is staffing. People who come here also wonder why we don't hire more nurses and doctors. This is a complicated issue since the number of staff in the Emergency Department is primarily determined by the number of patients that visit the Emergency Department and our overall capacity. Based on this type of information the Norfolk General Hospital is funded for one physician on site 24 hours a day, seven days a week.

"Sometimes a little understanding goes a long way. I'm asking you now, if you have two minutes and if you've had a good experience in the Emergency Department please support our staff through a note or a simple thank you."



Our Emergency Department is now an accredited medical teaching site

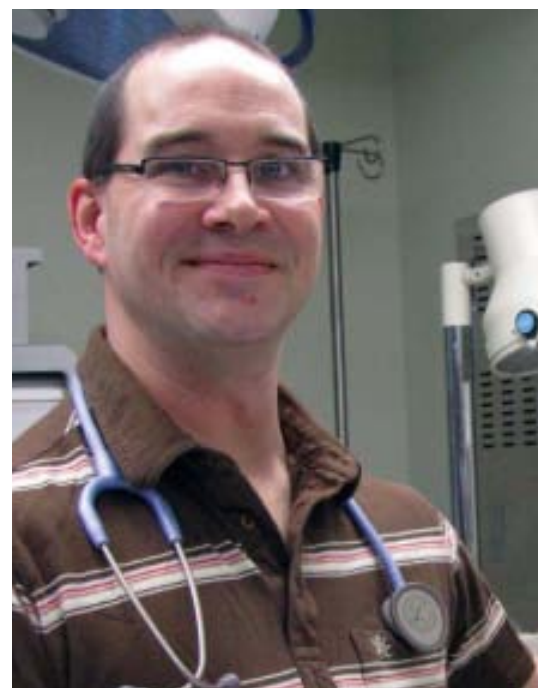
Over this past year there has been some exciting things happening in our Emergency Department. I am proud of our link to the Rural Ontario Medical Program (ROMP) and the Mac-CARE Program. Both of these programs offer educational rotations at NGH to medical school students. Through these programs we are developing leads and contacts throughout the province for future nurses and doctors.

Another major accomplishment is that our Emergency Department has received accreditation by McMaster University as an official emergency medicine teaching site. McMaster University now sends us students for core emergency electives. Our goal in the future is to develop a rural emergency residency program as well.

Having these high quality medical students in the Emergency Department is a great help to our staff and department with little or no expense to the hospital.

If you are visiting the Emergency Department and there is a medical student present, please remember that they are not there to intimidate you or make you feel uncomfortable. We are hoping to give these students a good experience in our community and our Department so they come back and work here some day.

Our Emergency Department has a very dedicated group of physicians, nurses and support staff that care about our community - they care about our hospital. But their job is not an easy one. It's a stressful environment. People are sick and aren't in a good spirits. Often the nurses and staff bear the bulk of the stress. They don't get pats on the back very often and receive more negatives than positives. Sometimes a little understanding goes a long way.



Dr. Hitchcock, MDCCFP
Dr. Hitchcock is one of the physicians working in the Emergency Department at Norfolk General Hospital.
Dr. Hitchcock has been working at NGH since 2000.

New Technology Matters

More people are making the trip to NGH to have laparoscopic surgery

Report on New Technology

Today a patient from Tillsonburg will travel to Norfolk General Hospital to have laparoscopic stomach surgery. In fact, patients from other communities in our area are travelling here not only because of our laparoscopic equipment but because of the exceptional skills of our team who performs the surgery.

Recently a man even travelled from Calgary to have his laparoscopic surgery done at NGH. This man's brother happens to live in Simcoe and had laparoscopic surgery at NGH. He was very happy about his surgery. So pleased in fact that he told his brother in Calgary, who chose to make the trip here.

As a specialist in minimally invasive surgery, I'm very pleased that I could come to NGH and perform this level of surgery. We are fortunate to have the required equipment for this new technology plus a dedicated and skilled team that can do this type of surgery safely and to the standards needed.

Usually laparoscopic operations are only done at major health centers in the country. Yet, our community hospital has a dedicated operating team, nursing staff, anesthesiologists and surgeons that are proficient in using this type of equipment so that we can accomplish advanced minimally invasive surgeries right here.

At NGH we are capable of performing a wide variety of laparoscopic surgeries including:

- Anti-reflux surgery
- Stomach surgery
- Colon resection surgery
- Gastric surgery
- Ventral and groin hernia repair
- Pelvic surgery
- Abdominal surgery
- Appendectomy surgery
- Gall bladder surgery
- Splenectomy

Over the past year, we have seen an increasing number of local people requesting this type of surgery as people are becoming much more informed about their options and are choosing this approach. On average, we perform between five and ten cases of laparoscopic surgeries a week. About 60% of these surgeries are same day surgeries where the patient goes home after the procedure.

For the people in this community the benefits of using the laparoscopic technique include:

- Less pain after the surgery
- Shorter hospital stay
- Quicker return to normal activities
- Less scaring
- Less chance for wound complications and infections
- Return of normal bowel function sooner

Today I met with a patient as a follow up visit for a bowel resection surgery that I did for him by laparoscopic approach. He commented, "Well doctor, I didn't have much pain after the surgery and my recovery was fast. I was able to walk and do things normally very quickly. And even the scaring is minimal." These types of comments underline what makes this type of surgery so valuable.

In the future, my hope is that NGH will one day have a special MIS endo-suite that will be equipped specifically for laparoscopic surgeries. This will include less bulky equipment which floats from booms on the ceiling.

As always, the challenge to acquire our new technology is limited by funding. Investing in new technology isn't cheap and government funding is limited. In fact, the laparoscopic equipment at NGH was purchased largely through the donations given by individuals, businesses and organizations within the Norfolk community.

We are fortunate to live in a community and to have a hospital like this where new technology matters.



Dr. Aqeel I. Al-Aqeel,
General and Laparoscopic Surgery, MD, FRCSC

Dr. Al-Aqeel has unique laparoscopic surgery skills. He completed his Fellowship in minimally invasive surgery at McMaster University's Centre for Minimal Access Surgery (CMAS) in 2002 and has been at NGH since June 2007.



"It's really terrific that we can have this kind of surgery and the quality of surgeons here."

Laparoscopic bowel surgery at NGH is amazing

To be honest, I didn't know what to expect when I was scheduled to have laparoscopic bowel surgery.

But Dr. Al-Aqeel discussed the surgery with my wife and I and it seemed that the recovery would be much shorter than normal. Dr. Al-Aqeel was responsible for scheduling and performing the surgery and took every precaution to ensure I was ready for the surgery. He is a wonderful, patient man and was very good at explaining the details of the surgery. I appreciated everything he did for me.

Now that the surgery is completed I can't say enough good things about it. I went in to the Operating Room at Norfolk General Hospital at about 10:30am. That same night in ICU recovery, I was able to sit up on the side of my bed for a few minutes.

By the next day, I was standing and even walking down to the end of the corridor and back. Within six weeks I played a round of golf. The recovery time was amazing!

Ron Kowalsky was born at Norfolk General and is a life long Simcoe resident. His wife Judy was a dedicated nurse at NGH for 30 years.

Overall, I believe that laparoscopic surgery is an incredible surgical technique.

But the truly terrific part is that we are able to have this type of surgery here.

I feel by having this type of surgery - and the quality of surgeons such as Dr. Al-Aqeel - available at NGH means we have the medical facilities where we need and want them. But it also means we are more able to attract top doctors to NGH. It's a win/win situation for everyone.

Norfolk has such a wonderful history of having a community hospital. It's unfortunate that we're spread kind of thin right now financially but I would really hate to see us lose any of the facilities that we already have.

If anything I want to see our community hospital continue and go forward.

It's better for all of us.

Skill Matters

Facing the challenge of bringing skilled healthcare professionals to NGH

Report on The Workplace Community

Even in the face of a national crisis and shortage in healthcare professionals, Norfolk General Hospital is attracting skilled healthcare workers who prefer living in a smaller community rather than a larger urban centre.

Being a real community is what sets the Norfolk General Hospital workplace apart from larger hospitals. Many of the people who work here can relate to President and C.E.O. Bill Lewis' comments.

"What I like about Norfolk General Hospital is that we're large enough that we are able to have most of the advances in medical technology available such as our CT scanner and information technology. But we're small enough that most of us know each other by first names. That's what I enjoy about it - you get to know the people you work with and you can't say that about larger hospitals."

To help nurture a community culture we work hard to attract the right people. Our strategy to attract the right people includes the Employee Referral Program that we implemented this past year. Through this program nurses identify their friends who are registered nurses and recommend them for hiring. If their friend is hired they receive a referral incentive of \$500. Our first registered nurse to be hired through this program was the result of Stephanie Varga who works as an Obstetrics Nurse at NGH.

NGH is also actively involved in the healthcare and social services professionals recruitment and retention program that has been started for the larger Norfolk County community.

Through this program a broad-based committee has been created to investigate best practices in other communities. This committee hopes to gather information so they can better understand the local needs, challenges and opportunities that communities are facing in relation to recruitment and retention of healthcare professionals.

After this information has been gathered, the committee plans to develop and implement strategies that can best serve Norfolk County. At this point the committee has begun the information gathering process. In the near future we anticipate more news about the strategies they propose.

Keeping current and developing our skills

Skills and educational development is important at NGH and keeping current about new technology is a continual challenge. To make it easier for our team to continue to improve their skills, NGH implemented on site certification programs. We brought instructors to NGH so staff didn't have to travel to Hamilton or London. Last year we completed 386 certifications and recertifications on site at the hospital.

There is also video conferencing at the hospital to make it easier to access programs for skill development and education. For additional support, we've created a new position for a clinical educator for nurses and staff to help them stay up to date and current.

Accomplishments in recruiting healthcare professionals to NGH

Other good news is that over the course of the past two years, NGH has received approximately \$600,000 in ministry grant funding for the New Graduate Guarantee Initiative (NGGI). This program provides new nursing graduates, registered nurses and registered practical nurses six months full-time employment through full grant sponsorship.

During fiscal year 2008/09, 22 nurses were recruited to NGH through the Provincial New Graduate Nurse Initiative of whom 19 remain employed by NGH in some capacity. The NGGI continues to be one of our most successful recruitment initiatives to date.

In total 70 new clinical and services staff (including those hired through the Provincial New Graduate Nurse Initiative) were hired during the fiscal year 2008/09. This included hiring:


- 17 Registered Nurses
- 18 Registered Practical Nurses
- 2 Laboratory Technologists
- 2 Respiratory Therapists

A special thank you to the entire team of people who work at NGH. Your skills matter and make a difference.



Stephanie Varga, an Obstetrics Nurse at NGH, receiving the first \$500 referral incentive for helping NGH hire a new registered nurse in 2008.





Stephanie Varga enjoys her career at NGH so much so that she's sharing her positive experiences with others.

It all starts with one individual telling another...

Stephanie Varga enjoys her career at NGH so much so that she's sharing her positive experiences with others.

"I get to do a bit of everything", said Varga, who's particularly passionate about being an Obstetrics Nurse (caring for women in childbirth).

After hearing about the Employee Referral Program and reading more about the application process through the hospital intranet, Stephanie was confident she had a good candidate in mind for a nursing position at NGH. The Oakland resident immediately thought of a fellow nursing graduate from McMaster University who also comes from the Norfolk area.

After a successful application and interview process, the hospital was pleased to welcome a new ER Nurse and informed Stephanie that she would be the first to receive the employee referral incentive. Stephanie plans to split her winnings with her friend and newly referred NGH RN, Katie Brown.

Three nurses hired this past year were referred to us by staff.

Year-end message from the leadership

Report from the Leadership of Norfolk General Hospital

On November 5, 2008, the Board of Directors of the Norfolk General Hospital approved the signing of the Hospital Service Accountability Agreement for 2008-2010 which required a balanced operating budget by March 31, 2010.

In response to this situation, the Norfolk General Hospital conducted a comprehensive review of its operations to identify further efficiencies which can be implemented with the least impact on core in-patient and out-patient clinical services. This review was used to produce a recovery plan to eliminate a projected operating deficit of \$1.2 million or 2.8% of the hospital's \$42.8 million budget in fiscal year 2009/2010.

During fiscal year 2008/2009, the Norfolk General Hospital achieved the following successes:

- **On September 15, 2008**, the Norfolk General Hospital was awarded the Healthcare Facilities Management Award of Excellence by the Canadian Healthcare Engineering Society in recognition of the outstanding team approach during the redevelopment and expansion project of the Emergency Department and Department of Diagnostic Imaging.

- **In December 2008**, the Norfolk General Hospital became an accredited University satellite teaching site providing emergency rotations for medical students from McMaster University.

- **In February 2009**, the Norfolk General Hospital was approved as one of the twenty sites selected for the expansion of the Ontario Physician Assistant Pilot Project. The Physician Assistant would work directly with the Emergency Department Team to improve patient care and reduce wait times for a two-year trial basis.

- **On March 19, 2009**, the Norfolk General Hospital received an Energy Wise Financial Incentive of \$30,000 from the Union Gas Energy Efficiency Program for the replacement supply fan which will recycle intake air and promote a healthier environment.

There has been an intensified emphasis at the Norfolk General Hospital on patient safety initiatives over the past twelve months which included the implementation of an automated unit dose drug distribution system; a falls assessment and intervention strategy; medication reconciliation upon admission, transfer and discharge and a transfer of accountability process for all patient interface points. In addition, the infection control surveillance and monitoring system was enhanced, as was the internal security system including an improved infant security system.

In January 2009, the Hamilton Niagara Haldimand Brant Local Health Integration Network outlined the process to develop a clinical services plan for our Local Health Integration Network which will address the following questions:

- What are the health needs of our population in five, ten and fifteen years?
- What services are required to meet those needs?
- Who will provide these services?

The plan will be coordinated by a Steering Committee and various Planning Advisory Groups have been established to provide expert advice on the enablers for best patient outcomes and health system effectiveness. The community engagement process will involve

open houses, newsletters, media releases and follow-up meetings with a variety of stakeholders. The draft Clinical Services Plan will be submitted to the Board of Directors of the Hamilton Niagara Haldimand Brant Local Health Integration Network in November 2009.

The key **issues** and **challenges** which confronted the Norfolk General Hospital in 2008/2009 were as follows:

- There were 13,188 alternate level of care patient days which was 2,164 patient days or 19.6% higher than in 2007/2008. In this regard, there was an average of 36 alternate level of care patients on a daily basis at the Norfolk General Hospital in 2008/2009 occupying 30% of our total bed complement adversely impacting patient flow throughout the organization.

Managing a large number of alternate level of care patients is an ongoing challenge for the hospital sector. In March 2009, the Ontario Hospital Association reported that 19% of the total acute care beds in the Province of Ontario were occupied by patients requiring an alternate level of care. It should be noted that the 2009 Provincial Budget allocated \$225 million to the Aging at Home Strategy to enable seniors and their caregivers to live with independence and to ease alternate level of care pressures.

- Despite the implementation of new recruitment strategies, there continues to be vacancies. Full-time Registered Nurses are working significant over-time hours to cover the unassigned shifts in the time block to meet patient care requirements.

- Hospital funding is not keeping up with the health needs of an aging and growing population or the rising costs for labour, benefits, new technologies, drugs, medical and surgical supplies, utilities and infection control initiatives. As a result of this situation, the Norfolk General Hospital had an operating deficit of \$1.1 million in fiscal year 2008/2009. It is important to note that this is only the second operating deficit incurred by the Norfolk General Hospital since 2000/01.

We would like to express appreciation to the members of the Board of Directors for their leadership and dedication to the Norfolk General Hospital and we acknowledge the ongoing contributions of all staff, physicians, volunteers and Foundation members towards quality patient care.

Jeff Loncke, Chair of the Board of Directors
J. William C. Lewis, President and C.E.O.



Leadership - Board of Directors and Board of Trustees

// Our mission is to assist those we serve to achieve the best possible health outcomes. //

Norfolk General Hospital Board of Directors

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Dr. P. Rich, Chief of Staff
Betty Brooks, President of the Volunteer Association to the Norfolk General Hospital/The Norfolk Hospital Nursing Home
J. William C. Lewis, President and C.E.O.

Tom Thomson, Treasurer

// Our mission is to provide the residents we serve with the best quality of life. //

The Norfolk Hospital Nursing Home Board of Trustees

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J. William C. Lewis, Chief Executive Officer
Lu Ann Crandall, Director of Care
Tom Thomson, Vice President-Finance
Dr. John Hall, Advisory Physician



// Our mission is to invest in Norfolk General Hospital by meeting tomorrow's capital needs today. //

Norfolk General Hospital Foundation Board of Directors

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David Bradshaw, Vice-Chair
Cathy Bauslaugh
Paul Cripps
Betty Goode
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Kindness Matters

Growing stronger to meet the care of our residents

Report from The Norfolk Hospital Nursing Home

The Norfolk Hospital Nursing Home continues to grow stronger in meeting our residents' needs. The more notable achievements during this past year include the following:

- Approval of a three-year \$450,000 capital budget by the Board of Trustees. This budget will address resident safety and care requirements and various infrastructure upgrades. Capital equipment acquisitions during 2008/2009 included a Wanderguard system, the purchase of five electric beds and a portable electronic vital signs monitor and the completion of the resident room upgrades (new bedside units, closets and lighting) on the main floor.
- Implementation of an assessment process to ensure that the recreation programs at the home are meeting the needs of the residents.
- Expanded activities and programs as a result of 2,222 student and adult volunteer hours.
- Implementation of a medication packaging system (Pac Med) including two new medication carts and the development of a medication reconciliation process.
- Implementation of a weekly email and letter writing program by the volunteers to help residents write to their families.
- Continued expansion of the Montessori Program which is a rehabilitation approach for residents with a cognitive impairment.
- Increased staff education through 23 education sessions covering a wide range of topics including lifting techniques, infection control practices, communication, medication administration and dementia care.
- A resident satisfaction survey was completed in the summer of 2008 and we received ratings greater than 90% "as good or excellent" for the following areas:
 1. Customer service in addressing the interpersonal side of resident care
 2. Recreation and leisure services
 3. Nursing care



Changes in the long-term care sector across Ontario

During fiscal year 2008/2009, there were important developments in the long-term care sector in Ontario that affects The Norfolk Hospital Nursing Home.

During the fall of each year, The Ministry of Health and Long-Term Care undertakes an assessment of the healthcare and personal support needs of the residents in nursing homes in Ontario to determine the acuity based funding for each nursing home in the following fiscal year. In 2009, a new resident classification system will be implemented to determine this funding allocation.

In March 2007, Mr. George Smitherman, the Minister of Health and Long-Term Care announced that the Provincial Government will redevelop the older nursing homes over a ten year period. In March 2009, the phase one requests for proposals was issued to redevelop 7,000 beds. This is the first of five releases over ten years to redevelop approximately 35,000 beds. The funding will depend on the size of the nursing home and various other factors. The first redeveloped beds are projected to open in 2010/2011.

NHNH Director of Care retires after 11 years

Other news includes the retirement of Mrs. Lu Ann Crandall, Director of Care on June 30, 2009. Her retirement follows eleven years of dedicated care and service to The Norfolk Hospital Nursing Home. We all wish Lu Ann a happy and healthy retirement.

Mrs. Vicky Florio will be joining the team at The Norfolk Hospital Nursing Home as the new Director of Care. Vicky has ample experience in the long-term care sector and will make a significant contribution to our organization.

We would like to express appreciation to the Board of Trustees for their ongoing support of The Norfolk Hospital Nursing Home. The significant contribution of staff, physicians and volunteers who provide quality care for our residents is also acknowledged and sincerely appreciated.



Dottie Smith, Chair of the Board of Trustees of NHNH
J. William C. Lewis, Chief Executive Officer, NHNH





Georgia Goodfellow NHHH resident and her daughter Jacklynn Nesbitt

NHHH Staff & Family:
Thank you for everything you did,
seen & unseen for our mother, Maisie
(Mary Jane) Smith. This truly is not
Norfolk Hospital Nursing Home it is
a very Nice Home because home it is
where the heart is. Your heart is in
caring for people and you are excellent
at it. Thank you a million times.

The Smith Families -
Ana & Al, Kevin & Eleanor, Peter
& Daphne, Gerald & Sue and the
Grand-kids

I am so glad staff shared that story with me...

When it was almost time for my mom to enter a nursing home, I looked into all the homes available in Norfolk. My first choice was The Norfolk Hospital Nursing Home and the main reason was THE STAFF. I listened, observed and noted how the staff interacted with the residents. And I was very pleased!

Now, after three years, I am still pleased. My mom has dementia and is not able to share with me any of the activities she takes part in throughout the week. And this is where the staff are helpful. I appreciate any piece of information they can share with me about what mom has done.

Mom's roommate is the most marvelous 96-year old I know. She is kind and patient with my mom, and is able to calm her when she is agitated. Staff told me that when mom's roommate was offered a bed on another floor, she declined, saying that my mom needed her. I am so glad staff shared that story with me.

My mom won a spelling bee and I discovered her certificate in her room. When I asked staff, I was given great details about the event, and how she had won handily. I am so glad staff shared that story with me.

One evening, while talking with staff at a Family Fun Night, I discovered that my mom was still able to read. The staff member took time to show me the Montessori books available for folks with dementia. I was then able to purchase some new books for mom as a Christmas gift. I am so glad staff shared that story with me.

One afternoon my mom was ready to attend church, but appeared to be very agitated. An activity staff took her aside, and working one on one with her, they read a book and had a meaningful discussion about the story. And mom calmed down. I am so glad that staff shared that story with me.

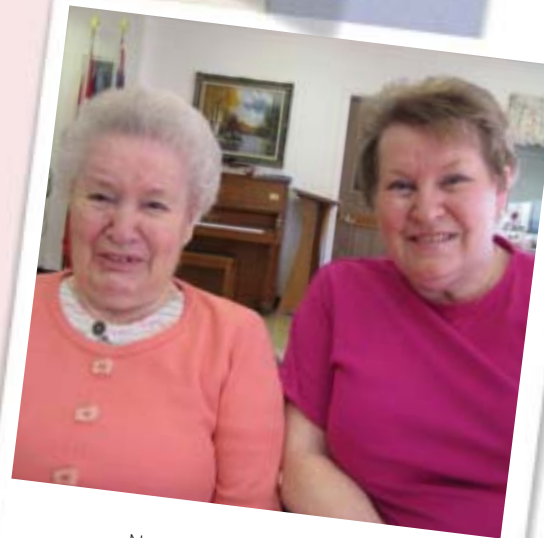
Apparently my mom is quite humorous and the Personal Support Worker staff often recall things she has said that gave them a smile.

I am glad staff share those stories with me.

And I am still glad I chose The Norfolk Hospital Nursing Home for my mom's place of residence.

Sincerely,

Jacklynn Nesbitt Daughter of
Nursing Home Resident Georgia Goodfellow



Nursing Home resident
Frances MacLaughlin and her daughter
Linda Bauer at "Family Fun Night"

My mom has been a resident at
NHHH since 2005.

I have found that ALL the staff -
Administration, Nursing,
Activities and Housekeeping -
have been very helpful and kind to her.

Mom especially enjoys
"Family Fun Night" because
there is lots of music, singing,
dancing and snacks!
"KEEP ON DANCING MOM!"

- Linda Bauer daughter of
Nursing Home resident
Frances MacLaughlin



Volunteering Matters

The Kokus family donates more than their share of time to our Volunteer Association with the involvement of all three generations. In the picture from left to right are Madeline Kokus, her daughter-in-law Mary and her granddaughter Heather (absent is Heather's sister Kelly who also volunteers when she is home from University).

In spite of the challenging times, we continue to be blessed

Report from the Volunteer Association to NGH and NHHH

2008-2009 has proven to be another successful year for the Volunteer Association to Norfolk General Hospital and The Norfolk Hospital Nursing Home.

In spite of the challenging times we're facing with volunteers being in high demand for all community projects and events, we continue to be blessed with a slow but steady influx of new volunteers. We have not only met our financial pledges this past year but in some categories were actually able to exceed our targets. This allowed us to donate more money to NGH to be used for the purchase of medical equipment.

Volunteer services and businesses at NGH and NHHH also continue to thrive and have made changes to their routines as needed to accommodate the ever-changing health care environment. Over the past year, 375 adult and 55 junior volunteers gave their time in our volunteer services, businesses and fundraising events.



Several volunteers received awards over the past year and all volunteer events, both social and fundraising, have been well attended.

The Volunteer Association would like to thank the many community members who continue to support our fundraising events throughout the year and we encourage you to consider joining our team!

You might choose to get involved in one of our many services, participate in our fundraising events, help out in one of our businesses or perhaps even assist with the governance of our Association.

Regardless of how you volunteer, we can guarantee you that the role you play in our success will be rewarded by the satisfaction and joy it will bring to your life!

Sherri Schira-Ladosz, Director of Volunteers

Volunteering helps make tough career choices easier

In a previous volunteer assignment Ali McClung was working on a project for Norfolk General Hospital when it occurred to her that she might like to volunteer at our Nursing Home. She set up an interview with the Director of Volunteers in March 2008 and sat down to discuss what opportunities were available. Ali quickly decided that she would like to try it. It wasn't long before Ali was comfortable at The Norfolk Hospital Nursing Home and she was overjoyed at the level of satisfaction she felt while she was there.

Here is a excerpt taken from a recent letter that Ali sent to the Volunteer Association:

I would like to thank you and everyone for giving me the first start in the direction of Developmental Service Worker. I will be going back to College to get my D.S.W. certificate, and have everyone at the Nursing Home to thank for giving me the greatest opportunity to get my feet in the door and get some great experience, which led me into the new direction that I am going. Without your great help and acceptance, I would probably still be trying to figure out my next career move.

I am sad to have to say goodbye, but very very grateful to all of you for giving me the opportunity I needed to figure out my true career for life! I have and will miss working with all of you and hope that the future is happy and bright for all that have helped me be a part of the wonderful volunteer committee at The Norfolk Hospital Nursing Home.

Sincerely and forever grateful,
Ali McClung



“Without your great help and acceptance, I would probably still be trying to figure out my next career move.”



How to become a volunteer

If you are interested in becoming a volunteer the first step is to fill out a volunteer application. To obtain a volunteer application you can:

1. Call Sherri Schira-Ladosz at 519-426-0130 ext 2100. Sherri can mail you an application package or answer any of your questions.
2. Stop by the information desk at the Hospital entrance and pick up an application package.
3. Visit our website at www.ngh.on.ca and go to the volunteer section where you can fill out an application and submit it directly online.

The next step after filling out an application is to have an interview with Sherri followed by the common screening steps including such things as a police check and immunization check.

You can make a difference

We have volunteer opportunities to suit a variety of skill levels and are able to accommodate all scheduling challenges.

We especially need volunteers who are willing to take on leadership roles as well as talking with patients and families in our Emergency Department waiting area or assisting with activities in our Nursing Home.



Jack Unger
helping as
a volunteer
escort

Volunteering accomplishments in 2008/2009

- \$102,650 raised for NGH and NHH
- Dulcie Crone was awarded a Provincial Life Membership in the Hospital Auxiliaries Association of Ontario
- Five NGH/NHH volunteers received Ontario Volunteer Service awards in June 2008 along with one of our junior volunteers
- Created a “New” Treasure Mart with a new location and many new ideas
- 39,158 total volunteering hours for 2008-2009

Community Matters

Committed donors continue to play a vital role at NGH

Report from the Norfolk General Hospital Foundation

What can you say about a dedicated community of people who care so much?

I can only say that I am always amazed and most appreciative of the generosity of donors who give to our hospital - Norfolk General Hospital. The Foundation Board of Directors and Foundation Staff are truly grateful for the support that has been given over the past year, and indeed for all the many years past.

Now when times are tough it's even more evident that caring for our hospital rests in the hands of this community. It's up to all of us.

Many pieces of equipment are old and unable to be repaired, or they are simply not able to be used any longer. The Ministry of Health and Long-Term Care provides limited funding for hospital replacement equipment. This is why the Norfolk General Hospital relies on the support of the Foundation to fund equipment purchases to ensure our community has access to modern and up to date medical technology.

The Foundation Board remains confident that our community will continue to support our local hospital so that we can help our friends and neighbours when they need us most.

Digital mammography fundraising project success

In spring 2008, we launched "The Sooner, The Better" fundraising project. The goal of this project is to raise \$600,000 to purchase a new digital mammography unit for Norfolk and replace a unit that is now ten years old.

By spring 2009, with the help of the community, we reached over 80% of our goal. We've now extended the project past our anticipated closing date and we're hopeful that by the fall of 2009 we will reach our goal. We've ordered the new mammography equipment and soon women in the area will be able to access state-of-the-art digital breast screening.

A special thank you to the many volunteers who have helped us and our donors including individuals, organizations and businesses. We are grateful and value your help with this fundraising project. Every dollar is making a difference.

Help us reach our goal.

The Norfolk General Hospital Foundation needs to raise \$600,000 for the new digital mammography equipment. If you can help, please call the Foundation at 519-426-0130 extension 2456.

Karen L. Oakes, Chair -NGH Foundation Board of Directors

Annual events and letters keep donors and the community informed

Throughout the 2008/09 year, we continued to raise awareness in the community of the hospital's current funding needs and fundraising initiatives. In the fall we hosted a day long radiothon event that included many guest speakers from the community and the hospital.

During the radiothon our focus on breast cancer awareness and the importance of having a mammogram drew attention and support. People graciously gave and we raised over \$126,000 for the new digital mammography unit. We followed the radiothon event with a special reminder and request for donations in the local hydro bill and received just over \$22,000 as a result.

To keep the community and our donors informed we continue to keep in touch via letters and a newsletter in the mail. At Christmas we sent a special letter to our committed donors who blessed us with their gifts and sent in almost \$90,000. Even during these tough economic times people care and are making a difference.

To find out more about the Foundation and our current activities please go to our website at www.ngh.on.ca.

The NGH Foundation Board of Directors takes their roll very seriously in governing the NGH Foundation and managing your donations prudently.

Thank you for your trust and confidence in our leadership. We value your continued support. Thank YOU!



Now when times are tough it's even more evident that caring for our hospital rests in the hands of this community. It's up to all of us.





"The new microscope is used 24 hours a day, 7 days a week and we are thrilled to have this advanced technology at NGH."

Helping more people because of our new microscope

Thanks to NGH Foundation donors, the hospital Laboratory now has a new microscope. Laboratory Technologists use the new microscope to examine blood cells for infections and other abnormal cells.

"Our previous microscope was purchased in the 1970s and we were no longer able to get parts to fix it," explains Brenda Cutting, Senior Medical Laboratory Technologist. "The new microscope has two sets of eye pieces so two technologists can look at the image at the same time to discuss and compare opinions on what they see. We can also use it for teaching or demonstrating our findings with other technologists or doctors."

The new microscope, which was installed in April 2009, has a sharper image and is also ergonomically designed to ease the strain on technologists.

"On behalf of our Laboratory team, we wanted to express our appreciation to the donors and show how their support is benefiting so many people," says Barry Vermeersch, Director of Laboratory Medicine and Cardiac Diagnostics.

The equipment is used 24 hours a day, seven days a week and we are thrilled to have this advanced technology at NGH.

Thank you!



Brenda Cutting, Senior Medical Laboratory Technologist and Arlene Evoy, Medical Laboratory Technologist use the new microscope that conveniently has two eye pieces.



Simcoe Kinsmen are turning sod for the new addition to Norfolk General Hospital, 1952.

Back row: unknown, Brock Smith, C. C. Collver, Alfred Judd, Bill Chapman, Fred Grigg.

Front row: Leo O'Connor, Brian Bell, Chuck Baskerville, Lloyd Biaron, Doug Edge, Dudley Darby, Russ Sturgeon.

Kneeling, front row: Fraser Abbey

Because they cared and made the effort to look after each other...

When brothers, sisters, friends and neighbours began to fall ill during the horrible influenza epidemic of 1918, the people who lived in this community refused to stand still. They came together and decided to build a local hospital that could care for them when they were sick.

Even though they had no government funding to begin this project of building a hospital, they had faith and they believed it was the right thing to do. It's not too much to say that it is because of the faith, hope and sacrifice of this small group we have the hospital we do today.

Initially there were generous monetary donations made by James Allgeo and William P. Innes, but the hospital project struggled to gain momentum. It wasn't until 1923 that Mr. Innes' son, William L. Innes, pushed the project forward. On Christmas Eve of 1923, he donated five acres of his own property to the Corporation of Simcoe so that a hospital could be built.

Mr. Innes took this step because he believed in the project to build a local hospital that would serve and care for his community.

Mr. Innes was not alone. Others joined Mr. Innes by donating their own money and time to see the hospital project succeed. Finally on May 20th, 1925, the hospital opened its doors for the first time.

But individuals did not abandon this project. They continued to care and take action as they saw a hospital that needed their help if it was to survive. In 1926, an anonymous donor made a gift that helped purchase and install the first X-ray machine in the area.

By 1929, the hospital had roots and was growing. Even Toronto

residents were making the long journey to this community because they preferred to visit the hospital in Simcoe for their medical care and treatment.

There is no doubt that this community had a strong spirit of caring. If someone was sick, the neighbours would help to bring in the crops. They took turns boarding the local school teacher.

They gave of themselves to their community.

Because our community cared enough to act, we now have a local hospital. But the project of building a hospital and providing quality healthcare is not complete. Upgrading equipment on an ongoing basis is a necessity and renovations are vital if we are to continue to enjoy a progressive local hospital and quality care.

Today, the project of maintaining our hospital rests in the hands of our generation. A tradition of giving and a spirit of caring is entrusted to us.

That's why it is extremely gratifying to know that this past year over 2000 individuals, businesses and organizations continued the tradition of caring and gave money to help the Norfolk General Hospital. Today there is still an exceptional group of people who are committed to building a stronger local hospital where we can go and receive the care we need. This exceptional group of neighbours and friends are listed on the following pages.

If your name is on this list please accept our appreciation. On behalf of the entire Norfolk community, we are truly grateful and value your help in raising funds for the hospital. Because of your donations we can make a real difference in people's lives.

Thank you.



The Board of Directors of the Norfolk General Hospital Foundation extends sincere appreciation to the following individuals, corporations, foundations and organizations for their support in fiscal year 2008/2009 from April 1, 2008 to March 31, 2009.

The following donors have made gifts of \$100 or more to the Norfolk General Hospital Foundation.

A

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A photograph of George and Lynn Cornfield. George is on the left, wearing a dark suit, a light-colored shirt, and a patterned tie. Lynn is on the right, wearing a blue top and glasses. Both are smiling and have a gold lapel pin on their jackets. The background is dark and out of focus.

George and Lynn Cornfield were present at the Donor Celebration and inducted into the Legacy Circle with a gold lapel pin signifying their commitment of a charitable bequest to the Norfolk General Hospital Foundation.

Reminders to plan ahead happen when you least expect it.

“While sitting on a plane ready for take off to Hawaii, I grabbed the magazine in the seat pocket in front of me and began to read as I was settling in for the beginning of a wonderful restful vacation. At the top of the page were bold letters “Do you have a Will?” And I thought to myself, what would happen if the plane crashed at the end of the runway knowing I didn’t have one.

Upon return from our trip Lynn and I made an appointment to see our lawyer and draw up a Will. When we decided how we would divvy things up we decided that one of the most important charities to give to would be Norfolk General Hospital because we all need healthcare at some time in our life.

We are content knowing that we have made plans for our estate and included charity in the Will planning knowing it will benefit others when we pass on.”

George and Lynn Cornfield are committed donors who recently joined the Legacy Circle by including the Norfolk General Hospital Foundation in their Will. Their gift will ensure that the needs of the Norfolk General Hospital and our community are met. It is a gift that is a lasting gesture and legacy to local healthcare. Thank you.

Richard Duwyn & Katherine Dennis-Duwyn
John & Sharon Dyck

E

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This past March I was in the Emergency Department at Norfolk General Hospital with a case of blood poisoning and I had to wait a couple of hours before I could see a physician. While I was waiting, I saw the ambulances come in a couple of times. I could also hear a younger child crying in a room somewhere. I could hear a doctor talking with the parents who were also in the room. Although I couldn't hear the exact words, I could tell there was a concern with the child and it was serious.

Sitting there, it was understandable that the child behind closed doors needed to go before me because that situation was more serious. I also realize that the Emergency Department operates on a priority basis and people are seen according to the greatest urgent need. Some people don't always understand this.

I'm happy that I live in a community that has an emergency service available.

Sue Downs- March 2009

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I was born at NGH in 1978, and all three of my kids were born there as well, the nurses are great, I also had to have minor surgery this January and I was a little scared and the one nurse in day surgery was great, she assured me everything would be ok, she was super nice and stayed with me all the way, she is a godsend!!!!!!

Tanya Ryerse-Rocheleau
 Posted on Facebook - March 16th, 2009

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"I have been to Norfolk General Hospital a few too many times and have almost always had friendly bedside manner. I have to say Dr. Hitchcock and Dr. Rosati are both the most amazing doctors. Also this hospital has the best maternity nurses. I had my 2nd and 3rd daughters here. Both times my labour was so fast the nurses did most of the work alone. The doctor literally walked in the room just in time to catch."

Sarah Fowler-Bishop
 Posted on Facebook - March 22nd, 2009

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* New donors who have included a bequest in their Will to the Norfolk General Hospital Foundation.



Every effort has been made to ensure the accuracy and completeness of these important lists. If we have erred, please accept our sincere apologies. Please notify us of any errors or omissions by calling 519-426-0130 ext. 2456.

To learn more about ways to support Norfolk General Hospital or to make a donation to the Foundation please call us or visit us online at www.ngh.on.ca.

The Norfolk General Hospital Foundation endorses ethical fundraising standards. We ensure the right of privacy and respect for our donors.

Accountability Matters

Financial Accountability - Norfolk General Hospital

On November 5, 2008, the Board of Directors of the Norfolk General Hospital approved the signing of the Hospital Service Accountability Agreement for 2008-2010 which required a balanced operating budget by March 31, 2010.

In response to this situation, the Norfolk General Hospital conducted a comprehensive review of its operations to identify further efficiencies which can be implemented with the least

impact on core in-patient and out-patient clinical services. This review was used to produce a recovery plan to eliminate a projected operating deficit of \$1.2 million or 2.8% of the hospital's \$42.8 million budget in fiscal year 2009/2010.

The hospital ended 2008/2009 with a \$1.1 million operating deficit. The breakdown of revenues and expenses is illustrated below.

General Information Summary for 2008/2009

3,726	Hospital In-patients	2,833	Surgical Procedures (note 1)
39,063	Patient Days (number of days patients were in the hospital)	3,179	Endoscopy Procedures (note 1)
29,087	Emergency Department Visits	39,158	Volunteer Hours
354	Newborns		

Distribution of Beds in 2008/2009

Medical	43
Surgical	16
Combined Medical and Surgical	8
Obstetrics	5
Paediatrics	2
Intensive Care	6
Complex Continuing Care	41 (note 2)

Total **121**

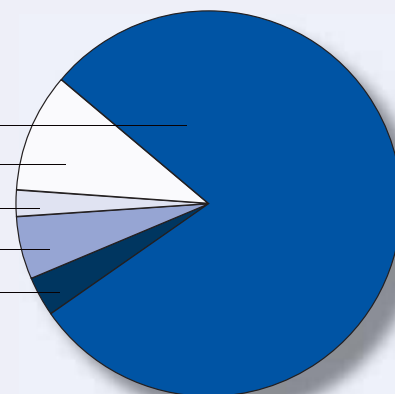
Note 1: The number of surgical and endoscopy procedures have increased by 41.7% over a five year period.

Note 2: By accommodating our alternate level of care patients in the complex continuing care unit, beds are freed up for acute care admissions.

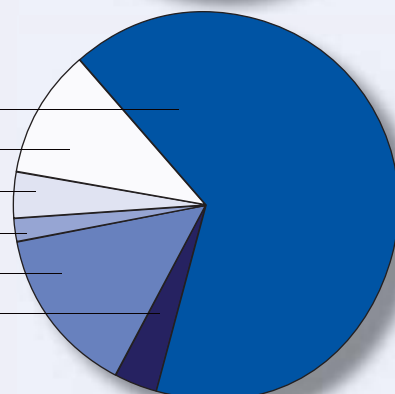
Norfolk General Hospital Statement of Operations (Amounts expressed in millions of dollars)

The chart below represents sources of operating revenues and expenses as reported in the Norfolk General Hospital's Audited Financial Statements for the period of April 1, 2008 to March 31, 2009.

	2008/2009	
Revenues	\$Millions	% of Total Revenues
Ministry of Health and Long-Term Care	33.7	79.3%
OHIP and Patient Services	4.2	9.9%
Differential and Co-Payments	1.0	2.3%
Recoveries and Other	2.3	5.4%
Amortization of Donations and Grants	1.3	3.1%
Total Revenues	42.5	100.0%



Expenses	\$Millions	% of Total Expenses
Salaries, Wages and Benefits	28.7	65.8%
Medical Staff Remuneration	4.7	10.8%
Medical and Surgical Supplies	1.6	3.7%
Drugs	0.9	2.1%
Other Supplies and Expenses	6.2	14.2%
Amortization	1.5	3.4%
Total Expenses	43.6	100.0%
Excess of Expenses over Revenues	(1.1)	



Financial Accountability - Norfolk General Hospital Foundation

In 2008/2009, the proud tradition of community support for Norfolk General Hospital continued as donors generously contributed an incredible \$898,000 to the Foundation. Those funds were used to purchase much needed equipment.

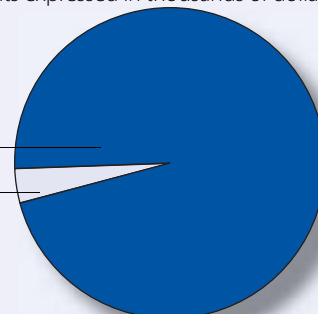
That ongoing support has helped ensure that our healthcare

team has the most advanced medical equipment and up-to-date facilities to provide the best care possible to our community.

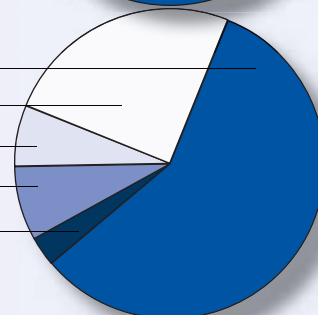
The chart below represents all sources of income and expenses as reported in the Foundation's Audited Financial Statements for the period of April 1, 2008 to March 31, 2009.

Norfolk General Hospital Foundation Statement of Operations (Amounts expressed in thousands of dollars)

2008/2009		
Revenues	\$Thousands	% of Total Revenues
Donations	898	96.6%
Investment Income	32	3.4%
Total Revenues	930	100.0%



Expenses	\$Thousands	% of Total Expenses
Purchased Services (salaries, wages and benefits)	229	58.0%
Campaign and Fundraising	98	24.8%
Advertising and Public Relations	26	6.6%
Administration	30	7.6%
Other	12	3.0%
Total Expenses	395	100.0%



Excess of Revenues over Expenses (prior to disbursements) \$535,000

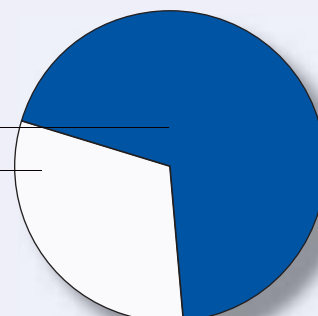
Financial Accountability - The Norfolk Hospital Nursing Home

The Norfolk Hospital Nursing Home ended the 2008/2009 year with a \$95,000 operating deficit. The breakdown of revenues and expenses is illustrated below.

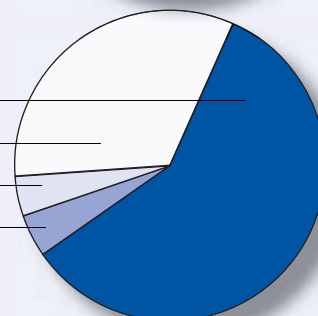
The charts below illustrate all sources of income and expenses as reported in The Norfolk Hospital Nursing Home's Audited Financial Statements for the period of April 1, 2008 to March 31, 2009.

The Norfolk Hospital Nursing Home Statement of Operations (Amounts expressed in millions of dollars)

2008/2009		
Revenues	\$Millions	% of Total Revenues
Ministry of Health and Long-Term Care	3.1	68.9%
Resident Co-payment and Other	1.4	31.1%
Total Revenues	4.5	100.0%



Expenses	\$Millions	% of Total Expenses
Nursing and Personal Care	2.7	58.7%
Food and Accommodation	1.5	32.7%
Program and Support	0.2	4.3%
Other	0.2	4.3%
Total Expenses	4.6	100.0%



Excess of Expenses over Revenues (\$95,000)

What Matters to You?

Throughout this Report, we have shared stories about some of the things that really matter to us at Norfolk General Hospital, The Norfolk Hospital Nursing Home and Norfolk General Hospital Foundation.

Now we'd like to hear from you!

Please take a few moments to share a story about the things that matter most in your life. You can use the space below to send us your story. If you would like to make a donation to the Norfolk General Hospital Foundation use the Donor Reply Form below or go to www.ngh.on.ca.

Help Us Help You



Share what matters to you by using our comment box on the web.

Go to www.ngh.on.ca. Under "Contacts" on the right side of our home page, click on "Share your experience."

Donor Reply Form

You can make a difference in the lives of patients at Norfolk General Hospital with a contribution to the Norfolk General Hospital Foundation. Your donation funds vital equipment and patient care enhancements at Norfolk General Hospital. Please support the Norfolk General Hospital Foundation and help us help you.

Please return this form with your donation to the following address:
Norfolk General Hospital Foundation, 365 West Street, Simcoe, ON N3Y 1T7



I am contributing a gift of: \$35 \$50 \$100 \$250 \$_____

Name: _____

Address: _____

Postal Code: _____ Phone Number: _____

I have enclosed a cheque made payable to "Norfolk General Hospital Foundation"

I wish to pay by credit card: Visa Mastercard Amex

Card Number: _____ Expiry Date: _____

Signature: _____

Your financial support of \$1000 or more will be publicly recognized on our Donor Wall.

I wish to remain anonymous.

I would like more information on making a gift to the Norfolk General Hospital Foundation through my Will?

Thank you for your generous support of the Norfolk General Hospital Foundation. A charitable tax receipt will be sent to you. Charitable Registration #11 905 8709 RR 0001

Questions?



Call us at 519-426-0130 ext. 2456.



Visit our website at www.ngh.on.ca. You can make a donation by clicking on the "Donate Now" button.



Mail the Donor Reply Form to:
Norfolk General Hospital Foundation
365 West Street,
Simcoe, ON
N3Y 1T7