



Cornwall Community Hospital  
Hôpital communautaire de Cornwall

Our Passion for  
*Excellence*

# Our Passion for *Excellence*

## MESSAGE FROM THE BOARD CHAIR AND CHIEF EXECUTIVE OFFICER



*2009 marked the fifth year of our current Strategic Directions and the beginning of the process to consider our directions and priorities for the next five years. Throughout these first five years of operations our focus has remained clear: to ensure quality and safety, to be fiscally responsible, to become a workplace of choice and to be an active participant in the Champlain Local Health Integrated Network.*

*Our Passion for Excellence continues with participation in Accreditation Canada, the MORE<sup>OB</sup> Program, the national Safer Healthcare Now campaign and our commitment to leading practices and improvements. The entire team of staff, physicians and volunteers at Cornwall Community Hospital are committed to ensuring that our community receives consistent access to the highest quality of care.*



*The challenges of the past year were significant as the Board and leadership team negotiated appropriate funding to maintain the current level of hospital services to our community. The goal to become a high performing hospital had been realized and a funding adjustment was critical to maintain services. The responsiveness of the Ministry of Health and Long-Term Care as well as the Champlain Local Health Integration Network is essential to the future of health care in our local area. In partnership with other providers we will continue to work to strengthen the delivery of health care to the population.*

*The construction of our new and renovated facility is well underway. Phase I of the project is nearing completion as the contractor makes way for the demolition and new construction on the west side of the existing building. The disruptions associated with a large construction project while continuing to meet patient needs are tremendous but to all of us – signs and sounds of progress!*

*As our public health system continues its transformation we know we will be challenged to respond. We are committed to address every challenge and opportunity with the highest level of commitment and dedication needed to succeed.*

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Fernand Hamelin ,  
Chairperson, Board of Directors

Jeanette Despatie,  
Chief Executive Officer

## ETHICS

It has been a busy and productive year for the Ethics Committee. Education around the topic of ethics has been an important focus. The Committee has participated in educational telehealth and teleconference sessions that were provided by Ottawa-based ethicists. This has allowed the Committee to gain a greater level of confidence, especially in their ability to lead consultations aimed at guiding staff through some of their more challenging ethical dilemmas. Promotion of this referral service remains a goal of the Committee, and brochures have been produced that are aimed at expanding the use of the ethical dilemma referral process for all of our stakeholders, including patients and their families. The Committee also hosted, “The Ethics Educational Series” that included four different sessions offered to staff and physicians. These sessions were extremely well received and attended.

Our human and fiscal resources are stretched to their greatest lengths in the current healthcare environment. This leads to an increasing level of distress that is felt at all levels within the organization, from frontline staff to the Board members who ultimately guide the decision-making for our organization. Educational sessions have brought awareness to the concept of moral distress – which is how a healthcare provider feels when constraints do not allow him or her to provide the level of care that one’s core values deem as right. The Ethics Committee has gained an increased awareness of this phenomenon in past year, as well as an understanding of the important role it needs to play in ensuring that adequate support is provided to deal with this issue. It is critical to acknowledge that our healthcare providers know that every day they will be faced with difficult choices in the provision of quality care, and that this is a stress in and of itself. As this situation of fiscal restraint is likely to continue, we have a responsibility to look at new ways of helping our valued staff and physicians deal with this ongoing stress; the Ethics Committee is up for the challenge.

The reason such emphasis is being put on ethics is clear. It is acknowledged that in the end, ethical care translates into quality care. Choices must have their foundations firmly based in ethical principles. From this perspective, the work of the Ethics Committee will always remain a key quality initiative within the organization, and its role will continue to expand to meet this ever-increasing challenge.



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### DISTRIBUTION OF OPERATING REVENUES

1.6%	Preferred Accommodation
6.8%	Community Mental Health Programs
5.8%	Other Revenues
16.2%	Other Patient Care
69.6%	Ministry of Health Funding

### DISTRIBUTION OF OPERATING EXPENSES

4%	Building and Grounds
2.5%	Amortization
6.7%	Community Mental Health Programs
6.9%	Medical Supplies and Drugs
11.6%	Other Supplies
71.9%	Compensation

# Ethics





## ACCREDITATION

On April 7<sup>th</sup>, Cornwall Community Hospital received notification from Accreditation Canada that all conditions have been met and accreditation status had been granted.

Accreditation Canada is a not-for-profit, independent organization that provides health organizations with review processes to assess and improve the services they provide to their patients and clients based on standards of excellence. Accreditation Canada’s programs and guidance helps organizations to promote and excel in quality health care.

The process involves Accreditation Canada sending in a group of surveyors to the organization requesting ‘accreditation’. Organizations are assessed on how they perform in a number of Required Organizational Practices (ROP). An ROP is an essential practice that organizations must have in place to enhance patient safety and minimize risk. There are seven (7) ROP’s; Communication, Culture, Medication Use, Worklife/Workforce, Infection Control, Falls Prevention and Risk Assessment.

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*Jeanette Despatie*

“We are very pleased to have successfully achieved our accreditation status,” said hospital Chief Executive Officer Jeanette Despatie. “This process is voluntary and requires commitment to excellence. We are very proud of our staff for all of their hard work and dedication to patient safety.”

To maintain accreditation status organizations are required to complete the reassessment process every three years.

This is an amazing achievement that demonstrates how strong leadership makes or breaks a project. Congratulations to the team!

## INFECTION CONTROL

It is often said that “old habits die hard” and this is true, both in terms of how healthcare is practiced and what is expected from patients in relation to treatment. For example, the scientific literature has demonstrated for some time that it is safer for everyone and equally effective, if instead of treating patients with mask and medicine (as is commonly seen as a treatment for asthma attacks and referred to as a nebulized treatment) we use medicines that can be delivered through an inhaler (sometimes referred to as a puffer). The reason for this is there is a greater chance of spreading germs when someone has an infection and they receive a mask with medicine. This became very important during the SARS outbreak and raised a concern recently with the concerns that H1N1 may pose a serious contagious threat.

Our Emergency Department Chief, Dr. Scharf, along with our Infection Control Practitioner, Nancy-Ann Bush, and a team of professionals set out to remedy this situation. Their goal was to reduce the number of masks used to treat symptoms of respiratory problems by 90%. It was a huge challenge that required the leadership of this team to not only educate the patients but the healthcare professionals as well. It is very pleasing to know that not only did we meet the 90% reduction but that we actually demonstrated 95% reduction. This is an amazing achievement that demonstrates how strong leadership makes or breaks a project. Congratulations to the team!



## RISK MANAGEMENT

We have been participating in a Risk Management Program offered through our insurer Healthcare Insurance Reciprocal of Canada (HIROC). The benefit of this program is multifaceted because everyone benefits when exposure to liability is limited. The Program provides the Hospital with a substantial reduction in premium costs while simultaneously allowing us to identify areas where risks exist. The process involved an organization-wide risk inspection. The report that resulted from the analysis has allowed us to focus our efforts to better ensure that our patients, staff and physicians are provided with a safe environment.

A cornerstone of any risk management program is the reporting of unusual occurrences. We have begun the implementation of an electronic incident reporting system that will facilitate that process. This system was installed in May and will allow staff and physicians to report events that have resulted, or could have resulted, in a negative outcome. The system is user-friendly and available on all computers throughout the Hospital, and it will be fully functional by mid-July. The reporting capacity of this new software will enable us to quickly identify trends, so we can quickly see any hot spots – the areas that need extra attention. It will also allow us to report back quickly to those that have taken the time to submit an incident report. The software will enhance our ability to know what in the system may not be working so that it can be fixed in a more timely fashion than was possible through a paper-based incident reporting system. The understanding that, for the most part, system changes can result in the prevention of negative outcomes is key to the success of this new system and paramount to increasing the culture of safety through a blame-free approach to healthcare error. Contrary to popular thinking – the more incident reports the better!



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# Quality

### Medical Advisory Committee 2010

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Dr. Cook

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Dr. Marie-France Levac

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