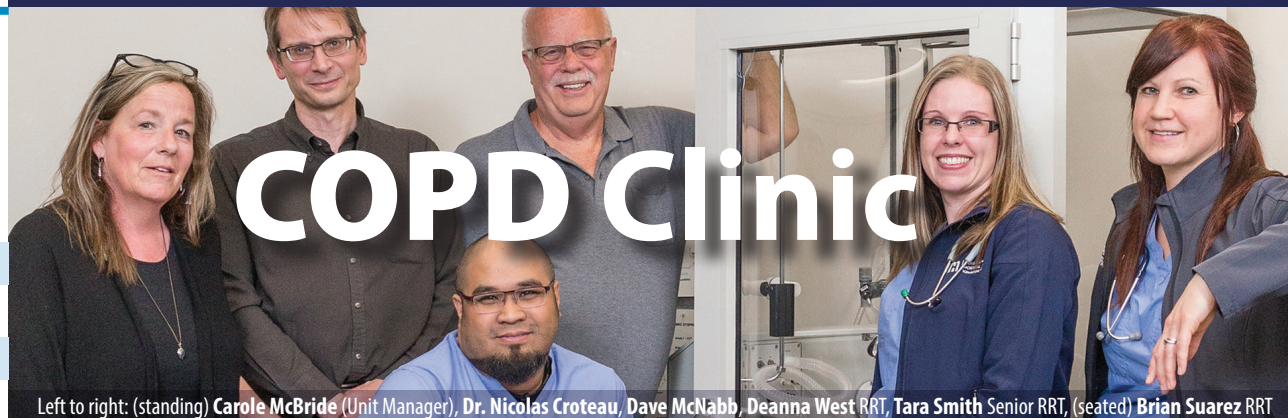




Highlights from our 2017/18 Annual Report

• Emergency Department Visits	42,135
• Outpatient (Day) Surgery	6,089
• Ambulatory Clinic Visits	41,296
• Admissions	6,501
Acute (Adult/Child)	4,991
Newborn	402
Mental Health	441
Complex Continuing Care	233
General Rehabilitation	300
Palliative Care	134
Total Patient Days	59,834
• Average Length of Stay	9.2 days
• Laboratory Interventions	532,165
• Diagnostic Imaging	71,078



COPD Clinic

Left to right: (standing) Carole McBride (Unit Manager), Dr. Nicolas Croteau, Dave McNabb, Deanna West RRT, Tara Smith Senior RRT, (seated) Brian Suarez RRT

Dave McNabb of Little Britain first met Respiratory Therapist Tara Smith when he was rushed to the Emergency Department with breathing difficulties in February 2018.

"I was at home and couldn't breathe," Dave said. "They got me hooked up to a machine and got me breathing again. Throughout my stay, Tara would stick her head in to see how I was doing."

When it was time to go home, Dave was referred to the Ross Memorial's new Chronic Obstructive Pulmonary Disease (COPD) Clinic. During regular visits, Dave is seen by Internist Dr. Nicolas Croteau and other members of the Respiratory Therapy Team, who monitor Dave's condition and teach him to better manage his health.

"I was a heavy smoker, and stopped ten years ago. The breathing problems are brought on by a number of things."

"They showed me how to use puffers to regulate my breathing, and if there are signs of trouble, I get my butt back in here."

Before the launch of the COPD Clinic in October 2017, the Respiratory Therapy team would see the same patients readmitted to hospital with COPD complications. By providing an opportunity for patients to visit the outpatient clinic and ask questions of Dr. Croteau and the Respiratory Therapists before symptoms become emergencies, they're able to avoid frustrating readmissions to hospital.

"Through the self-management plan, we're educating and empowering the patients to be in charge of their health," said Tara. "If there's trouble, we can have a phone call to check in or bring them back in for follow-up to tweak their plan."

"I'm happy to participate in this multidisciplinary clinic that has had such a significant impact on clinical outcome," said Dr. Croteau. "The feedback from our patients and their families has been overwhelmingly positive."

A new tool is helping patients manage better after leaving RMH

Anne Pitre goes over discharge instructions with Steve Lofkrantz RPN

The new SMART Discharge process makes it easy for patients to keep instructions straight.

"It's very informative," Anne said. "Sometimes when you're talking, you think you've been taking everything in until you get home. This way you have all the information you need at home so you can look back at it and refresh your memory."

Patient Satisfaction is Paramount

Did you know RMH surveys randomly selected patients after they have left the Hospital using a third-party company called NRC Health? The survey is distributed to patients who have visited our Emergency, Medical, Surgical or Rehabilitation Departments. Over the 2017/18 year, there was a significant improvement in the 'Overall Rating' question in which patients are asked to give the Hospital a rating from 0-10. Positive responses are considered a rating of either 9 or 10 out of 10. In the first quarter of 2017/18, RMH was performing 1.5% below the Central East LHIN average. By the fourth quarter, RMH had improved to 15.4% above the LHIN average. That means, throughout the year, we saw a 17% improvement in patients rating their care as 9 or 10 out of 10.

