



# ANNUAL REPORT



Weeneebayko Area Health Authority  
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## WEENEEBAYKO AREA HEALTH AUTHORITY



FISCAL  
2013-2014



## **Vision Statement**

Weeneebayko Area Health Authority will distinguish itself as a provider of quality health services with a holistic approach that reflects the distinct needs of all peoples in the Weeneebayko region

## **Mission Statement**

WAHA is a regional, community-focused organization, committed to providing optimum health care as close to home as possible

## **Table of Contents**

1. Joint Message from Board Chair and CEO
2. Report from Chief of Staff
3. Highlights of the Year
  - a. Our Patients
  - b. Our People
  - c. Our Structures and Systems
4. Accountability
  - a. Financial Summary
  - b. Quality
5. Acknowledgements

## Joint Message from the Board Chair and Chief Executive Officer



This has been a very exciting year for WAHA. We began our year with a very extensive Community Consultation Process and visited all the First Nation Communities and the Municipality of Moosonee. Our Health Services Survey proved to be very popular and has provided us with significant feedback, suggestions and support to WAHA. The most overwhelming message from our people was a clear desire to have the new Regional Hospital located in Moosonee and a new Health Centre on Moose Factory Island to replace the existing Hospital. Taking into account all of the information we received, and after thoughtful deliberation, the WAHA Board endorsed and approved the recommendation to site the new Regional Hospital in Moosonee. The Board approval, along with extensive planning and architectural documentation, were all submitted to the Capital Planning Branch of the Ministry of Health & Long Term Care in October 2013 for review and approval. Final approval to move to stage 2 of the Capital Planning Process will result in a planning grant that will enable WAHA to move one step closer to realizing the vision of the new Regional Health Care Campus. We are still waiting for the approval from the Ministry.

The Moosonee Clinic restoration has been an unnecessarily complicated process in dealing with the Capital Planning Branch. This has resulted in our "temporary location" becoming almost permanent and has created significant frustration for our staff and the patients whom we serve. We are extremely grateful for the cooperation and understanding extended by the citizens of Moosonee and to our staff, who have been heroic in their efforts to maintain safe, quality care in an environment not suited for the extended provision of health care services. The good news is we believe we have successfully cleared the final hurdles and the heating and ventilation work can finally begin. We are anticipating moving back into the Clinic Building by late November 2014.

We have begun the process to establish the review of the WAHIFA agreement in 2015.

Our goal is to achieve the intent of WAHIFA and the ultimate programs and services intended for our people on the James and Hudson Bay Coast. We anticipate meetings with the Province as well, before the tri-partite discussions begin.

Bringing the North Eastern Ontario Network (NEON) to WAHA and integrating our IT infrastructure through Meditech this year has been a great step for WAHA in enhancing patient care, improving access to care and avoiding costly duplication. NEON is an electronic health records system that is part of e-health and represents 22 hospitals. Doctors and clinicians now can share e-health services such as diagnostic and clinical information in real time. This allows patients to have the best health care regardless of where they live.

Our website continues to be revamped and improved. We have supplemented the existing link for people to contact WAHA with an additional link, as a result of our recently revised Patient Satisfaction and Complaints policies. If people choose not to connect directly with the Quality Department or Public Relations they can submit their concerns through the new link: [patientsatisfaction@weeneebaykohealth.ca](mailto:patientsatisfaction@weeneebaykohealth.ca)

We have enjoyed working with our people, in the region we serve, to continually improve the programs and services offered by WAHA and the ongoing implementation of WAHIFA. Meegwetch.



Leo Loone, Chairman

Bernie D. Schmidt, President & CEO

## Report from the Chief of Staff



At the time of the annual general report, we are given the opportunity to look back over the past year, and look ahead to the coming year.

Any discussion of the care provided by the family physicians (FP) and nurse practitioners within WAHA begins with numbers. While there have been some change in the individual members of these groups, the provision of these services appears to be stable for the coming 12 months.

It's been some time since WAHA has been fully staffed with FP's. Over this past year, we have had significant turnover in our staff. Through the efforts of many people, our effective recruiting and retention should result in a full complement of 12 by early September 2014. Between February and September of 2014, we will have been joined by 6 additional FP's. Congratulations to all those who have enthusiastically participated in the recruitment process!

WAHA is a teaching hospital. We have strong relationships with the Medical Schools' of Queen's University, NOSM, the University of Toronto, and the University of Ottawa. At any time, we have 6 to 8 Residents and Medical Students within WAHA. These "slots" are valued by the "learners". The learners' feedback consistently describes their time here as one of their best experiences during their training. As much as our learners gain from their time here, our patients and our staff gain too. The learners bring information about the latest medical techniques being used in their respective hospitals, connections with their faculty which advances patient flow, and their enthusiasm. On their return to their medical school home, these learners educate their staff and colleagues about the difficulties that our limited resources and our remote geography create for our patients. These learners are a very important pool for future recruiting. Of our expected 12 FP's in September 2014, 10 of us were exposed to WAHA through the training programs.

Our "core services" include ER, OB, and Hospitalist. WAHA also provides primary (out-patient) care in all our communities. When staffing levels fall, our ability to provide primary care within our six communities is reduced. With regular primary care clinics in all our communities, we have the potential to control health issues while they are at their most

manageable stages. Our goal for the coming year is to ensure the level of primary care in each of our communities is at an effective level.



Drs Rounds - Drs. Banayan, Dahl, Kraulis, Leong, Waddell & Bond + Med Students & Residents

The need for Mental Health has resulted in new initiatives being pursued throughout the coast. Prevention, improved access, and more effective use of resources are our goals. Improving the links between the many agencies within our communities is being explored. Timmins and District Hospital and the North Bay Regional Health Center are working to develop strategies that will result in enhanced care here. Effective treatment that is as close to home as possible is our objective.

Thank you for your support over the last year.



Gordon Green, M.D., F.C.F.P., Chief of Staff



### OUR PATIENTS

#### Cancer Screening Project

The focus of WAHA Under-Never Screened Cancer Screening Project was to increase colorectal and breast cancer screening within the aboriginal populations of NE Ontario by targeting First Nations people living in the remote communities of Moosonee and in the James Bay coast. The pilot was funded from February 2012 to March 2014 as a partnership through the support of the Northeast Cancer Centre (NECC) in Sudbury. Participating hospitals and health centres in the WAHA region include WGH, Ft. Albany Hospital, Attawapiskat Hospital, Moosonee Health Centre, Kashechewan and Peawanuck Health Canada Nursing Stations.

The project targeted women and men between ages of 50-74 years who were eligible or deemed higher risk. The project was a success with 73 people participating in the Colon Cancer Check (CCC) program between November 1 2012 and March 24, 2014. Over 100 women participated in the Breast Screening program in F2013-14. WAHA continues to promote cancer screening to eligible men and women.

#### Geriatric Clinic

In January 2014, a team of visiting health care providers from the Northeast Specialized Geriatric Services (NESGS), the medical lead for seniors from Health Sciences North, Ontario's Seniors Strategy Lead and the Red Cross collaborated with WAHA and Peetabeck Health Services (PHS) to conduct patient-focused clinics assessing 27 elders in Fort Albany First Nation. Some of the assessments were done in-home with others completed at the Fort Albany Hospital.

During the clinic, patients were seen by a Geriatrician who provided specialized treatment geared to elders. The aims of the assessments were to improve the overall health and quality of life for the elders. From there, specialized care plans were

developed for each individual based on their needs. Due to the success of this pilot, WAHA in partnership with the NESGS is looking to expand the geriatric clinic model, providing clinics to all communities located with the region.



Geriatric Clinic Team

#### Telemedicine

Telemedicine was expanded over the past year. Tele-dermatology program was installed and working in Attawapiskat and Fort Albany in June. Retinal screening training was completed for 3 telemedicine nurses in Moose Factory and Moosonee and clinics were up and running in the fall of 2013. In November, the telemedicine system was installed at our Mental Health Office and they were able to host telemedicine consultations through that program. Through the year, WAHA saw significant growth in the use of telemedicine in the region. In F2013-14, there were over 4,000 clinical consultations and a significant number of education sessions over the Ontario Telemedicine Network.

#### Mental Health

Through a number of community consultations, WAHA was able to map programs and referral patterns and select an approach including a shared plan of care for suicide prevention.

## HIGHLIGHTS OF THE YEAR FISCAL 2013-14



A working group was established with representatives from police services, schools, Payukotayno Victims Support program, traditional healing and NNADAP. Prevention will be the focus for both patients and families.

### Ambulance Services

May of 2013 brought to us one of those times we never wish with the Line of Duty Death of 4 Emergency Services Co-workers and we were taught the powerful lesson that as much as we are there for the communities we serve, they are there for us as well and the tremendous outpouring of support for the grief we faced was truly humbling. No words can convey our grateful sentiment in those hours.



Born of every tragedy is some good however and the long serving vessel for Marine Transfers was replaced with a new Ministry purchased Boat to serve our needs well into the future. Similar in purpose the new vessel is more stable with more patient and escort capacity as well as being fuel and eco-friendly. The vessel is powered by two 225 HP outboard Jet drives and we have an additional two spare engines to ensure uninterrupted service for the long term.



Ambulance Boat

We have also for the first time in almost 15 years reverted to the modular style ambulance vehicle departing from the Typical Van style which traditionally was more maneuverable and stable on our icy roads. New technology and design has improved the vehicles which are appreciated greatly by the staff and clients for their comfortable ride and expansive workspace. We have a long standing relationship with Demers Ambulance Conversions and expect to have the fleet renewed to the new style over the next four years.



WMP. Fort Albany Paramedic

In all things, the service continues to grow and adapt to the ever changing pre-hospital care needs of our communities and is keeping pace with the technological changes that are facing all services in the country. We have the extreme good fortune to work with a dedicated group from the Emergency Health Services Branch of the Ministry of Health and Long Term Care, who have listened to our needs and advocated strongly to ensure that we are heard and that we, as any service, are held accountable for excellence in service delivery.

### Medical Travel

Initially at the beginning of the year, it was planned that Health Canada would take over the travel charter in October but this did not take place and our NIHB group continue to manage this important function of coordinating medical travel from the communities to WGH as well as to hospitals in Kingston and Timmins.



### OUR PEOPLE

#### Recruitment and Retention

Recruiting and retaining our team members is the key to our success as a health care organization. Without each and every one of our employees, we would not be able to deliver health care to the clients we serve across the region. Recruitment and retention forms a significant part of our Strategic Plan and recruiting and retaining talent that will stay and contribute to the health care of our communities is important and supported by our WAHA teams. We continue to strive for a strong talent pool and to ensuring we get the right team members in the right places. Always a work in progress, we look forward to continuing to define our program and to increasing the talent representation from our communities. Partnering with schools, colleges and universities to provide support and experience to students is one of the ways in which we are encouraging our young people to pursue health careers and return home to work with our people. We are excited that some of our youth are now pursuing health careers and are committed to returning to the region upon completion of their programs. We remain committed to attracting a strong and healthy employee workforce and to delivering health care services as close to home as possible.

#### Labour Relations

After more than three years of collective bargaining, mediation and arbitration, WAHA and the Ontario Nurses Association achieved a first round Collective Agreement in January 2014. This is the first Collective Agreement for WAHA and brings together the former Professional Institute of the Public Service (PIPSC) WHA bargaining unit members and the former James Bay General Hospital ONA members into one union.

#### Education and Training

WAHA has been concentrating on developing an extensive training plan and schedule to support our

staff in the work that they do. Under the leadership of the Director of Professional Practice, the Staff Educator is defining and planning WAHA's education strategy and using resources as close to home as possible in delivering the programs. Not without its' challenges in delivering the complex menu of programs required, education and training are key to supporting health care providers in this complex and constantly changing environment. Staff engagement and feedback is important and forms part of our education continuum.

Cultural competency is important at WAHA. While we live and work in a predominantly First Nations region, our organization attracts employees from around the world and we are a very diverse organization. It is important that we are all aware of the unique cultural backgrounds of our patients and workers so that we are inclusive and respectful of those backgrounds. Our cultural competency program is delivered to staff at orientation and remains a work in progress under the leadership of the Director of Communications. Our program continues to adapt as we more fully understand and appreciate the very talented, multi-dimensional and multi-cultural workforce and environment within which we work.

#### Occupational Health and Safety

The health and safety of our employees is very important. We are in the process of redefining our Health and Safety Committee structures and to ensuring that our workplaces are inspected regularly and that action is taken to correct areas that require attention. We all have a role to play in ensuring that our work areas, work practices and reporting systems are strengthened so that all employees know their rights and more importantly, responsibilities in ensuring we are all safe. Our various health and safety committees are working cohesively and training is being organized for these committees so that they are fully functioning and contributing to the Internal Responsibility System, which is the most effective response to ensuring safe and healthy workplaces. We look forward to continuing to work together because the health and safety of our workers is the guiding direction for all our work practices.



**OUR STRUCTURES AND SYSTEMS**

This year has been busy with a number of successful completed projects and improvements across WAHA sites.

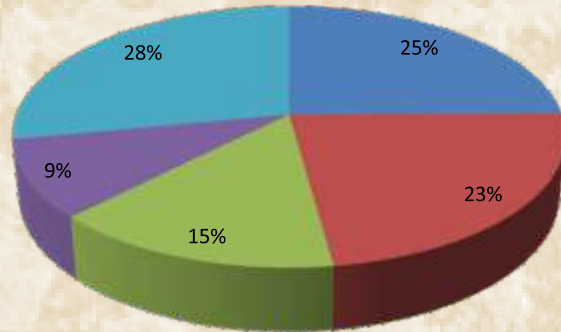
WAHA would like to thank its funders for their continued support in the James and Hudson Bay Region. Team work gets the job done.

**Capital Projects of F2013-14**

- ã **Fort Albany**
  - New Domestic Hot Water System
  - New Emergency Generator System
  - Upgraded Computer Server Room
  - New Oil Tank Farm and Supply System
  
- ã **Attawapiskat**
  - New Oil Tank Farm and Supply System
  - Upgraded Computer Server Room
  - Upgraded Glycol Heating Loop
  - Heating Units replaced in Residences
  - Housing Residence repaired due to spring flooding
  
- ã **Peawanuck**
  - New Radio Communication System installed
  
- ã **Moosonee**
  - New Oil Tank Farm and Supply System
  - Health Centre repairs due to 2012 fire
  - Generator upgrade at M.H.C
  - New Mental Health Vehicle Purchased
  - Upgraded Computer Server Room
  
- ã **Moose Factory**
  - New Heating Boilers Installed
  - New Emergency Generator System
  - Soil Remediation project
  - Asbestos Survey Report Upgrade
  - Maintenance Building Flooding Restoration
  - New Fleet Vehicle
  - New Front Entrance and Canopy
  - Upgraded Steam Lines
  - Upgraded Computer Server Room

**Capital Investment Source of Funding**

- Province
- Health Canada
- MOHLTC
- LHIN
- WAHA



**CAPITAL INVESTMENT For Year Ending March 31, 2014 \$ 000**

Source Of Funding	\$000
Province	1,272
Health Canada	1,175
MOHLTC	748
LHIN	488
WAHA	1,434
<b>Total</b>	<b>5,117</b>

**Facility Support**

Support Services on a daily basis continues to take care of the day to day operations at WAHA sites. These staff members are dedicated and loyal to providing Patient Centered Service. Thank you to the staff in Laundry, Housekeeping, Kitchen, Maintenance, Housing, and the Supervisors for being a key part the team. All of our jobs are part of the circle of Health Care Services and Quality - Improvement. Support Services is committed to continuing and building on this year's success.



## System Enhancement

Early in 2013, WAHA decided to access the one-time \$1 million plus of e-Health Ontario funding and join the North Eastern Ontario Network (NEON) family of 20 plus hospitals through the implementation of the meditech system, an integrated hospital information system. With the assistance from Health Science North, meditech was implemented successfully in November 2013 for most modules with the final module implemented in January 2014. The applications included both clinical applications such as Lab, Imaging, Pharmacy, order entry, Electronic Medical Records (EMR), patient scheduling and financial applications such as billing, accounts payable, payroll and general ledger. Special thanks goes to all the WAHA and NEON project team leads who made this happen.



Weeneebayko Area Health Authority

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Meditech WAHA Project Leads

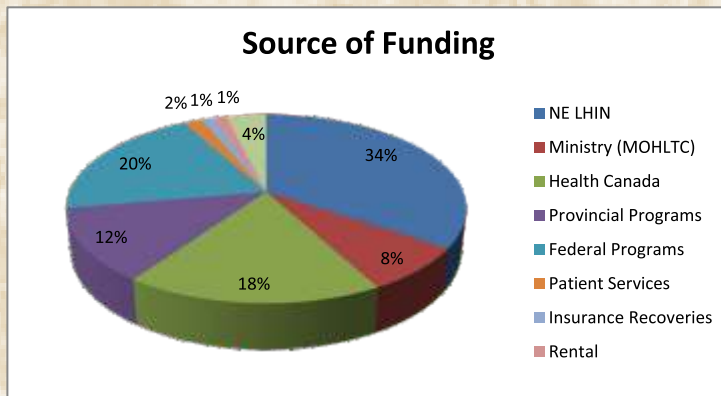


## Financial Summary

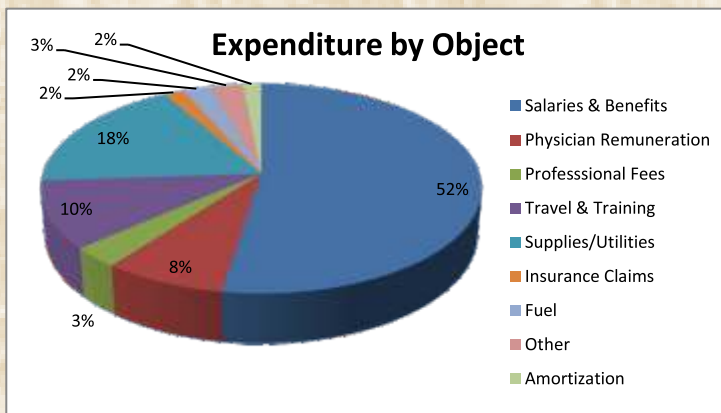
WAHA budgeted a deficit of \$3.7 million for Fiscal 2013-14 and the deficit came in at \$4.0 million before building amortization. This is an improvement from F2012-13, however it is not sustainable for a health authority to continue to run deficits. As such WAHA developed a Hospital Improvement Plan (HIP) with the aim of revenue optimization and greater cost effectiveness. The HIP greatly assisted WAHA in the development of a balanced budget for 2014-15. Below are the highlights of WAHA financial for F2013-14

### REVENUE AND EXPENSES

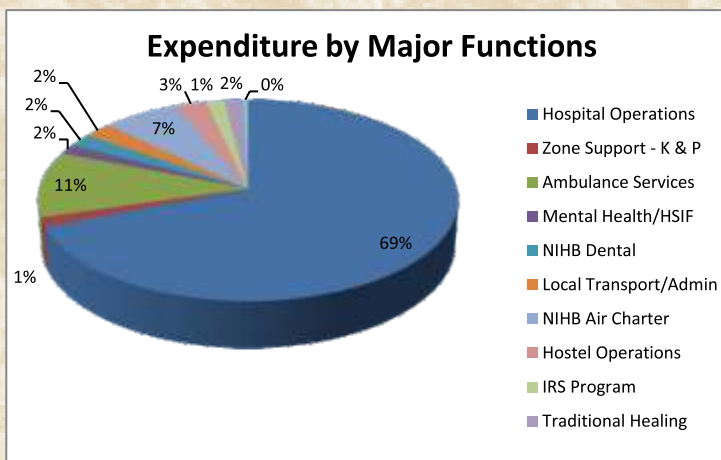
### For Year Ending March 31, 2014



Revenue	\$000
NE LHIN	23,221
Ministry (MOHLTC)	5,208
Health Canada	12,000
Provincial Programs	8,432
Federal Programs	13,294
Patient Services	1,198
Insurance Recoveries	857
Rental	810
Other	2,587
<b>Total</b>	<b>67,607</b>



Expenditure by Object	\$000
Salaries & Benefits	37,575
Physicians	5,639
Professional Fees	2,248
Travel & Training	7,456
Supplies/Utilities	12,698
Insurance Claims	1,203
Fuel	1,715
Other	1,939
Amortization	1,102
<b>Total</b>	<b>71,575</b>



Expenditure By Program	\$000
Hospital Operations	49,393
Zone Support - K & P	1,049
Ambulance Services	7,563
Mental Health/HSIF	1,157
NIHB Dental	1,482
Local Transport/Admin	1,674
NIHB Air Charter	4,822
Hostel Operations	1,840
IRS Program	1,117
Traditional Healing	1,199
Other Small Programs	279
<b>Total</b>	<b>71,575</b>



**Quality**

Our organization is committed to ensuring that the health authority fulfils its obligation to deliver high quality standards in every aspect of health care that engages patients, community members, allied partners and WAHA staff. The quality framework systematically assesses, evaluates and improves the structures, processes and outcomes related to activities in care and services.

We recently revised WAHA's Patient Satisfaction and Complaints policies. If people choose not to connect directly with the Quality Department or Public Relations they can submit their concerns through the new link: [patientsatisfaction@weeneebaykohealth.ca](mailto:patientsatisfaction@weeneebaykohealth.ca)

**WAHA Fundraising**

This year, WAHA re-established their fundraising activities. An initial campaign, **Renewing for Health** began late in 2013. We invite you to be part of Weeneebayko history and help us in creating healthier futures for the communities along James and Hudson's Bay by donating to WAHA so we can upgrade our equipment and treatment areas. You can donate on-line through our web-site – [www.weeneebaykohealth.ca](http://www.weeneebaykohealth.ca) (under About Us tab and under Donations). We would like to thank all those that made donations in F2013-14.

**Acknowledgements**

Special thanks for the following employees who contributed to this annual report:

Bernie D. Schmidt  
Dr Gordon Green  
Caroline Lidstone-Jones  
Robert Gagnon  
Kelly Reuben  
Paul Gray

Leo Loone  
John McIntosh  
Greg Spence  
Janice Soltys  
Jaime Kapashesit  
Robert Adolph

Special thanks to the following donors:

Detour Gold  
Davidson de Laplante Insurance Brokers  
Paul Davis Systems  
Air Creebec Inc.  
Innlink Concrete



Weeneebayko Area Health Authority

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## List of Board Members – F2013-14

Leo Loone	Chair	Fort Albany First Nation
Shannon MacGillivray	Vice Chair	Town of Moosonee
George Small Jr.	Treasurer	MoCreebec Council of the Cree Nation
Bernie D. Schmidt	Secretary / Ex-Officio	WAHA - President & CEO
Christina Nielsen	Member	Town of Moosonee
Dorothy Wynne	Member	MoCreebec Council of the Cree Nation
Gisele Kataquapit	Member	Fort Albany First Nation
Mike Okimaw	Member	Attawapiskat First Nation
Christine Koostachin	Member	Attawapiskat First Nation
Sophia Lazarus	Member	Kashechewan First Nation
Archie Wesley	Member	Kashechewan First Nation
Luke Gull	Member	Weenusk First Nation
Mike Wabano	Member	Weenusk First Nation
Rachel Cull	Ex-Officio	WAHA - VP, Patient Care / CNE
Gordon Green	Ex-Officio	WAHA - Chief of Staff
Arnold Hill	Ex-Officio	WAHA - President of medical staff
Jean Wesley	Observer	Moose Cree First Nation
Joe Cheechoo	Observer	Moose Cree First Nation

## Executive - F2013-14:

Bernie D. Schmidt	President and CEO
Gordon Green	Chief of Staff
Robert Adolph	Vice President, Corporate Service & CFO
Rachel Cull	Vice President, Patient Care & CNE
Paul Gray	Vice President, Support Services
Kelly Reuben	Vice President, Human Resources
Caroline Lidstone-Jones	Chief Quality Officer
Greg Spence	Director of Community Relations
Jaime Kapashesit	Executive Assistant/Board Liaison

## Contact Information:

Weeneebayko Area Health Authority  
Telephone: 705-658-4544

[www.weeneebaykohealth.ca](http://www.weeneebaykohealth.ca)