New Board Member Orientation
October 10, 2025 at 8:00 am
Board Room, La Verendrye General Hospital

Board and Governance	TIME
Introduction to the Board – Meeting Format & Expectations - Agendas - Policy – Board Surveys– Diane Clifford	8:00 - 8:45 am
Credentialing Process for Physicians and Medical Advisory Committee – Chief of Staff	8:45 – 9:15 am
The Organization	**TIME**
Operations Services – Senior Team Pg 2	9:15 - 9:45 am
BREAK	9:45 – 10:00 am
Clinical Services – Stacy Patey Pg 14	10:00 - 10:25 am
Long Term Care – Tara Morelli Pg 34	10:25 – 10:50 am
Emo & Rainy River Health Centres – Rebecca Brooks/Diana Harris Pg 49	10:50 – 11:15 am
Community Services – Kelly Bolen Pg 74 Housing & Transportation - David Black Mental Health & Addictions - Joanne Ogden/Victoria Skovrlj/Tom Glaeser/Michelle Tighe	11:15 – 11:50 am
Board - Code of Conduct – Ontario Health – Governance & Board Process – Accreditation – Diane Clifford	11:50 – 12:15 pm
LUNCH	12:15 – 1:15 pm
QSR (incl. Patient/Resident Safety) / Accreditation / Confidentiality & Privacy – Cindy Cole / Simone LeBlanc/ Joanne Ogden Pg 102	1:15 – 2:00 pm
Key Stakeholders and External Relationships	**TIME**
BLG Board Governance Education Sessions – Q&A Education Overview – Diane Clifford / Henry Gauthier	2:00 – 2:20 pm
BREAK	2:20 – 2:40 pm
Tour LVGH	2:40 – 3:40 pm
Windup / Evaluation	3:40 – 4:00 pm

Organizational Overview

Riverside Health Care

Program and Services Map

FORT FRANCES

- LaVerendrye General Hospital
  - 24 Hour Emergency Services
  - Diagnostic Imaging
    - X-Ray
    - Mamograms
    - CT Scans
    - Ultrasound
  - Laboratory
  - Chemotherapy/Oncology
  - Acute Care
    - Palliative Hospice Care
    - Obstetrics
    - Intermediate Care Unit
    - Pediatrics
    - Covid Unit
  - Cardiac Stress Testing
  - Surgical Services
    - Day Surgery
      - such as: Colonoscopy, Gastroscopy, Dental procedures, Laparoscopy, Hernia repairs, Breast Biopsy/Lumpectomy
    - Orthopedic Surgery
    - Gynecological Surgery
- Rehabilitation Services
  - Occupational Therapy
  - Physiotherapy
  - Speech-Language Pathology
  - Moving on After Stroke
- Corporate Office
- Mental Health & Addictions
- Rainycrest Long Term Care Home
- Riverside Breast Health Program
- Riverside Valley Diabetes Education Centre
- Telemedicine
- Community Support Services & Assisted Living
  - Non-Profit Supportive Housing
  - Transitional Housing
  - Transportation
- Registered Dietitian
- Patient Navigator
- Cafeteria Services

RAINY RIVER

- Rainy River Health Centre
  - 24 Hour Emergency Services
  - Acute Care
  - Diagnostic Imaging
    - X-Ray
    - Ultrasound
- Eldcap
- Rehabilitation Services
  - Occupational Therapy
  - Physiotherapy
  - Speech-Language Pathology
  - Moving on After Stroke
- Riverside Valley Diabetes Education Programming
- Mental Health & Addictions
- Community Services
- Telemedicine

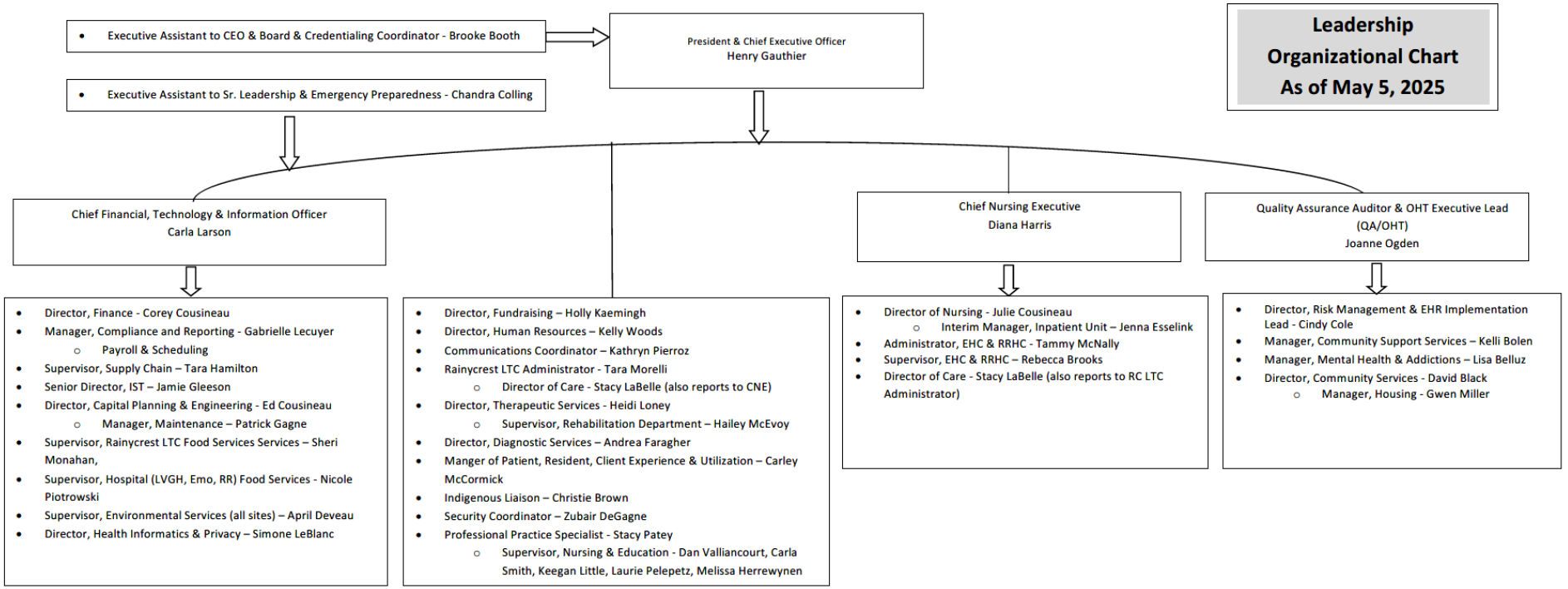
EMO

- Emo Health Centre
  - Urgent Care
  - Acute Care
- Eldcap
- Community Support Services
- Mental Health & Addictions
- Rehabilitation Services
  - Occupational Therapy
  - Physiotherapy
- Telemedicine
- Riverside Valley Diabetes Education Programming
- Community Support Services
- Cafeteria Services

ATIKOKAN

- Community Support Services & Assisted Living
- Riverside Valley Diabetes Education Programming

Leadership Organizational Chart



Corporate Services

- Centralized Back Office Service and Centralized Leadership located for all of Riverside Health Care (RHC) on 2nd floor of LaVerendrye General Hospital in Fort Frances.
- Support all sites and services for RHC, LaVerendrye Non-Profit Supportive Housing, Riverside Foundation for Health Care and Physician Recruitment Committee.
- Corporate services is responsible for all of RHC and any entities we support to ensure we meet our fiduciary responsibilities for the safe guarding and appropriate use of resources. Resources include: funding, bank accounts & investments, buildings, equipment, technology, people, data/information, etc.
- The Audit & Resources Committee provides oversight for Resources on behalf of the Board of Directors.
- This is accomplished through review of financial, human and capital resource information combined with Senior Management engagement and attestations.
- The Committee is involved in matters pertaining to policy/protocol, resource allocation, financial performance, compliance and risk exposure.
- A focus area starting in 2022 is engaging front line staff in both quality and risk initiatives from early issue identification to outcome assessment of resolutions implemented.

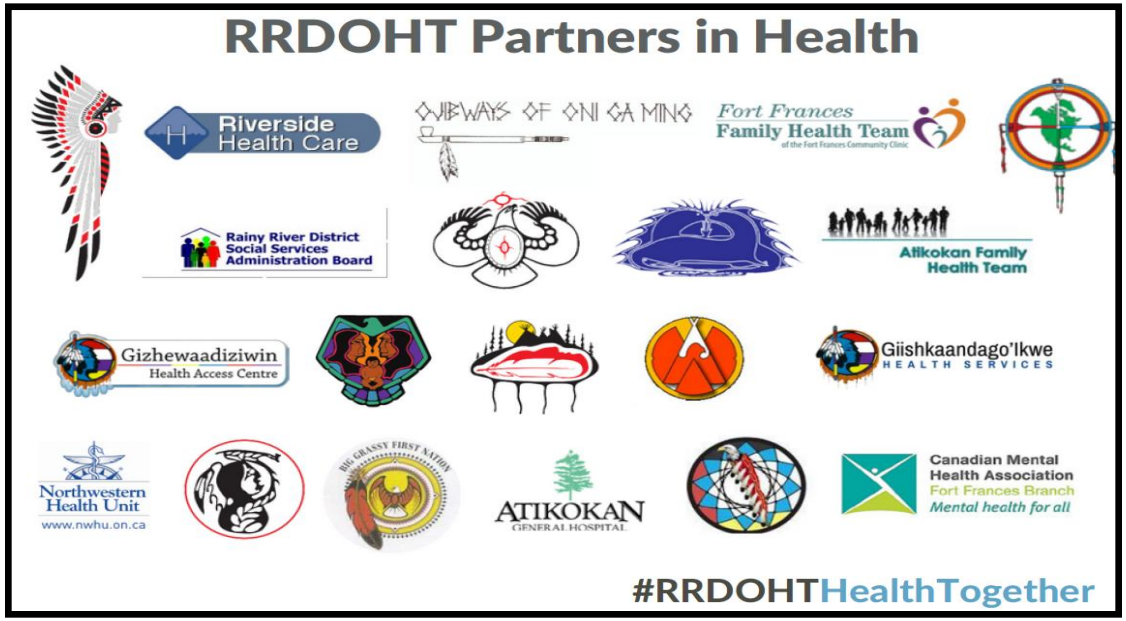
Government Agencies & Health Care

- The largest Ministries in Health Care include the Ministry of Health that oversees hospitals and Ministry of Long Term Care that oversees the Long Term Care sector.
- Eldcap beds, also known as a hospital version of a long term care bed, are subject to long term legislation but funded by the hospital branch.

- An agency created by the Government of Ontario with a mandate to connect and coordinate our province's health care system in ways that have not been done before, to help ensure that Ontarians receive the best possible care.

Ontario

Ontario Health



Ontario Health Teams were introduced to provide a new way of organizing and delivering care that is more connected to patients in their local communities. Under Ontario Health Teams, health care providers (including hospitals, doctors and home and community care providers) work as one coordinated team - no matter where they provide care.

Rainy River District partners are approved as an Ontario Health Team.

Intent is to support better health outcomes, patient experiences, provider experiences and value for health care dollars spent.

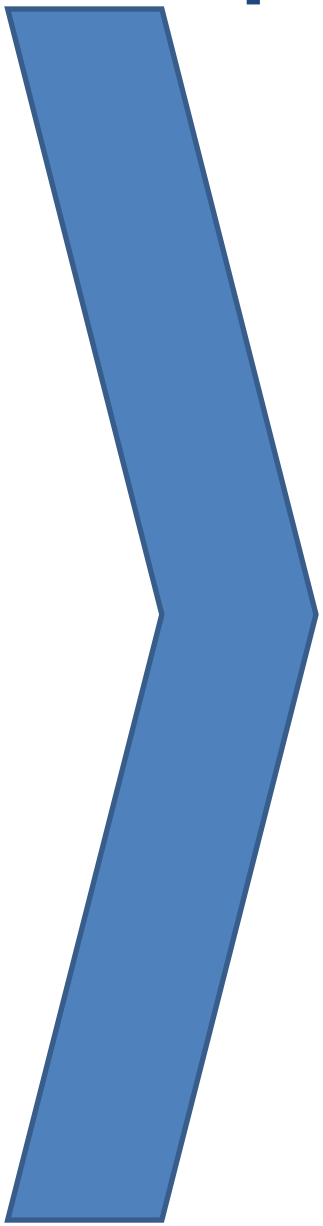
Agreements

- Each year we receive renewed terms and conditions through our funding agreements with the Ministry of Health and Ministry of Long Term Care.
- These agreements focus on accountability, performance and transformational requirements.
- Each Service Accountability Agreement (SAAs) is subject to amendment by Ontario Health.

- We have three SAAs governing our organization:
  - Hospital Service Accountability Agreement (H-SAA)
  - Long Term Care Service Accountability Agreement (L-SAA)
  - Multi-Sectoral Service Accountability Agreement (M-SAA)
- Other specialized funding agreements are received from Ontario Health and the various Ministries outlining specific requirements for One Time or new designated Annualized program funding.

Setting our Corporate Direction

- Strategic Plan -> Goals & Objectives
- Quality Improvement Plan
- Accreditation Priorities
- New initiatives/funding – OHN, Ministry, OHT
- Risk Management Priorities
- Other ?



Aligned Priorities

Regular Progress Updates

Measure Outcomes

Balance Demands vs Resources

Manage Competing Priorities

2023-26 Strategic Plan

Vision

Caring, Together.

Mission

Improving The Health Of Our Communities.

Values

Progressive
Integrity
Caring
Accountable

Strategic Direction & Defining Statement	Objectives
One Riverside - Supporting a consistent and enabling organizational culture	▪ Understand & Respect Roles/Find The Right Door ▪ Build Trusting Relationships ▪ Be Accountable ▪ Be Proactive/Solution Focused
Strategic Investments in 'the People Who Serve' - Creating a plan to Strategically Leverage Human Resources including Staff, Clinicians, Physicians, Volunteers and Community Partners	▪ Joy at Work (work satisfaction) ▪ Promote Growth – education, mentoring, coaching ▪ Evolve Our RHC Team
Tomorrow's RHC, Today - Making investments today, to support RHC, tomorrow	▪ Identify Services Needed Now and In The Future. ▪ Make Strategic Investments. ▪ Make Our Buildings Better. ▪ Make Better Use Of Technology.
Strive to Excel in Equity, Diversity, Inclusion (EDI) - We will support EDI in all we do.	▪ Be A Relationship Builder ▪ Respect Everyone ▪ Support Diversity

2025 - 26

GOALS & OBJECTIVES

Description	Priority
DI Campaign	1
Rainy River Clinic	1
Emo CHC	1
Corporate HHR Stabilization	1
HRIS Development	1
Meditech Expanse Implementation	1
Incident Reporting Update	1
IP Mental Health & Detox Beds	1
Transportation Expansion	1
Budget Management (savings vs funding)	1
Balanced Scorecard	1
Approval Authority Policy Updates	1
Master Plan - LVGH, RC, Emo, Helipad	1
Security Enhancements	1
Focused Quality Audits	1
Scope Redesign - Nursing	1
Implement Enhanced Seniors Care Program, including Elder Care Program	1
Remote Support Monitoring Program	1
RAAM Program Expansion	1
LVGH Clinic	1
Pharmacy Redevelopment	1
LVGH Physician Clinic	1
Meeting Rooms Update	1
MOU with GHAC for ICC Services	1
Indigenous Health Services Table Established	1
MRI & LVGH/RRRadiology Capital Projects	1
Performance Conversations Compliance	1
Mandatory Education Compliance	1
Pendant Alarms (LVGH, Emo, RR, upgrade to RC)	2
Camera System	2
WiFi System	2
Phone System	2
Hospitalist	2
Circle of Heroes	2
Policy Standardization	2
Back Office Staff Developmenmt	2
Management Business Process Training	2
Meeting Technology Expansion	2
Survey Kiosks	2
Backup Internet Services	2
Remote Access	3
Housing Expansion	3

Financial Management

- RHC, the Riverside Foundation for Health Care and LaVerendrye Non Profit Supportive Housing operate on an April 1 to March 31 fiscal year
- Rainycrest Long Term Care is required to report on both a calendar and fiscal year basis (Long Term Care Branch requirement)
- RHC reports under the Canadian Public Sector Accounting Standards.
- Public Auditor (BDO Dunwoody in Fort Frances)
- $80.6 million consolidated actual revenues in 24-25
- Payroll & benefits processed for 640+ employees representing over 70% of our total annual spend
- Considerable expansion in programs (ie. transportation, psychotherapy)

Primary Funding Sources

- Ontario Health (formerly NW LHIN)
  - ✓ Hospitals (LaVerendrye, Emo, Rainy River)
  - ✓ Rainycrest Long Term Care (Nursing & Personal Care , Program & Support Services, Raw Food, Other Accommodation)
  - ✓ Mental Health Counselling, Addictions, Problem Gambling, Case Management
  - ✓ Community Support Services
  - ✓ Assisted Living
  - ✓ LaVerendrye Non Profit Supportive Housing
- Other Ministry Funding Sources
  - ✓ Family Violence (MCSS)
- Other Sources (non-exhaustive list)
  - ✓ Ontario Hospitalization Insurance Plan, WSIB, Private Insurance, Self Pay, Recoveries
  - ✓ Co-payment fees
  - ✓ Client fees
  - ✓ Small Hospital Transformation Fund

Note:

- NW LHIN and Ministry of Health funding types include: global, envelope, activity, performance based and one time.
- Other than global funding all unused funding from the NW LHIN or the MOHLTC is subject to recovery.
- All deficits are the responsibility of RHC and unspent funds in one program may not be used to offset deficits in another.

Human Resources

- 640+ Staff
  - ✓ Hospitals (LaVerendrye, Emo, Rainy River)
  - ✓ Rainycrest Long Term Care (Nursing & Personal Care , Program & Support Services, Raw Food, Other Accommodation)
  - ✓ Mental Health Counselling, Addictions, Problem Gambling, Case Management
  - ✓ Community Support Services
  - ✓ Assisted Living
  - ✓ LaVerendrye Non Profit Supportive Housing

- **Six Collective Agreements**
  - ONA - (1) Hospitals, (2) Rainycrest
  - CUPE – (1) Hospitals, (2) Rainycrest, (3) Home Support, (4) Housing

- **Recruitment Challenges**
  - Aging work force and impact of pandemic on sector
  - Rural environment, M-F competitive employment (ie. mine, community sector), industry wide HHR crisis, agency options, people just leaving health care
  - Health Human Resource Crisis – NPs, RNs, RPNs, PSWs, Back Office, Support Staff, Allied Health, Physicians, etc.
  - Foreign recruits (PSWs) essential to long term stability – recruiting 50+ staff through this process (PSWs, RPNs, RNs).
  - Industry needs to appeal to new generation of health care workers, but has considerable challenges to overcome before this is viable

DIRECTOR OF NURSING

Board Presentation

La Verendrye General Hospital - Nursing

- 60 bed facility
- Intermediate Care Unit (ICU)
- Obstetrics – 2 LDRP suites
- Pediatrics
- Medical/Surgical services
- Designated Palliative/Hospice Care Spaces (2)
- 24-hour emergency services (Telestroke, Teleburn, Regional Critical Care Response, RMHAT, NICU)
- Designated Safe Space in ER for patients presenting with mental health crisis – room is equipped with connectivity to the Regional Mental Health Assessment Team at TBRHSC

- Surgical Program
  - General Surgery & Endoscopy
  - Dental Surgery
  - Orthopedic Surgery
  - Sports Medicine
  - Gynecology – **NEW** Program 2021
  - Urology –**NEW** Program 2022

Fiscal	Total Joints	Sports Medicine	Gynecology	Urology
2021/2022	107	79	48	0
2022/2023	205	100	65	78
2023/2024	277	87	59	161
2024/2025	228	97	71	179

Outpatient Services

- Rehabilitation services (PT, OT, SLP) at our LVGH site, with contracted services for SLP to the Separate School Board
- Outpatient physiotherapy services provided 5 days per week at Emo Health Centre.
- Clinical Nutrition services for in-patients at LVGH with support to residents at Rainycrest, Emo and Rainy River as per the LTC ACT
- Valley Diabetes Education Centre (VDEC), with outreach to Emo and Rainy River sites, once monthly
- Visiting Specialists Clinics (Paeds, ENT, Orthopedics, Gyne, Urology).
- Stroke Prevention Clinic
- Riverside Community Counselling
- Full Chemotherapy services in partnership with Cancer Care Ontario (Satellite sites of TBRHSC)
- Dialysis 6 days/week, covering 2 shifts each day, one in the morning and one in the afternoon (Satellite site of TBRHSC)

Pharmacy Services

- Regional Pharmacy Program (Thunder Bay) provides services 2 days per week Thursday/Friday, with after hours on-call support.
- Northwest Telepharmacy provides services Monday, Tuesday, Wednesday and weekends with after hours on-call support.
- Recruitment efforts in place for Full-time on-site Pharmacist
- Pharmacy technicians 5 days per week on-site
- Contractual agreements are in place with local pharmacies at our Emo and Rainy River sites and for Rainycrest Long Term Care
- Pharmacy infrastructure renovations required at LVGH to meet Ontario College of Pharmacists (OCP) guidelines, particularly to accommodate sterile and non-sterile compounding.

Diagnostic services

X-Ray

(ECHO Accreditation)

Hours of operation

7:30am to 11:30pm weekdays

Services Include:

- Diagnostic mammograms (new digital mammography unit – August 2022)
- Breast Education/Colorectal Screening
- X-Ray (walk-ins M-F, 8-4)
- Ultrasounds
- CT Scans
- **MRI – COMING SOON!**

Laboratory

(ISO Accreditation)

Hours of operation

7am to 11pm weekdays

8am to 4pm weekends

Full laboratory services at LVGH:

- Hematology
- Chemistry
- Coagulation
- Microbiology
- Transfusion Medicine
- POCT – ISTAT, ID Now, Clinitek, AmnioTest, PRO-MComplete

Limited point of Care (POC) testing at Rainy River Health Centre:

- ISTAT, Clinitek, ID NOW

Telemedicine services

- Offered at LVGH, Emo and Rainy River Health Centres, with dedicated nursing support
- Scheduled OTN Programs:
  - Oncology, Orthopaedics consults, Fracture Clinic, Bariatric Program, Gastroenterology, Psychiatry, Pre-anesthetic assessments, Pre-Admit Clinics, Eating Disorders, Ostomy & Wound Care, Gerontology, Genetic Counseling, Cardiac and Nephrology, Neurology, Rheumatology, RMHAT – Regional Mental Health Assessment Team
- TELEDERM program at LVGH, Emo and Rainy River sites
- Emergent Services through OTN:
  - Regional Critical Care Response (RCCR)
  - Neonatal Intensive Care Unit (NICU)
  - TELESTROKE
  - TELEBURN
  - RMHAT

Improving the Patient Experience

- Full time Manager Patient, Client, Resident Experience & Utilization
  - Daily "Bullet Rounds" of the interdisciplinary team and community partners
  - Whiteboards at the bedside as a communication tool for patients and the health care team
  - Patient Information Booklets
  - Patient & Family meetings
  - Discharge Follow-up Phone Calls within 48 hours of discharge, where feedback allows us to make timely, quality improvements in the care we provide
  - Patient Satisfaction Surveys: Inpatients, obstetrical patients, emergency department patients and day surgery patients
- Bedside Shift Reporting to keep patients better informed about their plan of care, medications and progress
- Hourly Rounding to ensure that patient care and safety needs are met
- Full time Health System Navigator (Opioid Strategy)
- Full time Indigenous Liaison (**NEW** 2024)
- Indigenous Care Coordinators – partnership with Gizhewaadiziwin Health Access Centre
- Ceremonial Space (**NEW** 2024)
- Multi-faith Space
- Sunset Country Palliative Care Team – bi-monthly and ad hoc

Riverside's Strategic Pillars

One Riverside

Supporting a consistent and enabling organizational culture.

- Understand & respect roles/find the right door
- Build trusting relationships
- Be accountable
- Be proactive/ solution focused

Investing In The People Who Serve

Creating a plan to Strategically Leverage Human Resources.

- Joy at work (work satisfaction)
- Promote growth – education, mentoring, coaching
- Evolve our RHC Team

Tomorrow's Riverside Today

Making Investments today, to support RHC tomorrow.

- Identify services needed now and in the future.
- Make strategic investments.
- Make our buildings better.
- Make better use of technology

Striving to Excel in Equity, Diversity and Inclusion

We will support EDI in all we do.

- Be A Relationship Builder
- Respect Everyone
- Support Diversity

One Riverside

Supporting a consistent and enabling organizational culture

- RHC Vision, Mission, Values and Strategic Pillars
  - reviewed at start of departmental meetings
- Principles of Conduct – Care, Compassion, Commitment
- Organizational Structure
  - Reviewed with frontline staff to ensure a clear understanding of RHC Leadership roles and responsibilities.
- CEO corner – monthly communication
- Work-life Pulse Surveys – results shared with staff
- Daily Leadership Huddles
- Opportunities for growth – utilizing the unique skills and abilities of Team Members
- Monthly Core Leadership Meetings
  - Builds relationships, promotes teamwork, collaboration and understanding of each department's needs and challenges
  - Solution-focused, rather than problem-focused

Investing in the People Who Serve

Creating a plan to Strategically Leverage Human Resources

- Staff portal – one stop shop for easy access to RHC communication, Newsletters, Policies and Procedures, Email, Service requests, Café menus
- Daily huddles at start of shift in each Nursing Department to identify any safety concerns, plans for the day, resources, etc.
- Regular Departmental Meetings
- Annual Performance Conversations
- Ongoing evaluation of recruitment and retention initiatives for nursing and allied health professionals
- Top scale Health Skills Lab for hands-on simulation/learning
- Education (NRP, ACLS, TNCC, PALS, Acute Care of at-Risk Newborns -ACORN, Learning Essential Approaches to Palliative Care-LEAP)
- MOREOB Plus Program (Managing Obstetrical Risk More Efficiently)
- Monthly Grand Rounds, Sim Labs, Mock Codes, lunch and learns
- Debriefs occur after newborn deliveries, codes, trauma, etc. – safe space to discuss what went well and what could be improved on. Ensure staff are “okay”
- Bursaries, education loans
- Staff appreciation-barbeques, Monthly pop-up treats, themed-weeks (Nurses, Labs, DI, etc.)
- Innovative staffing (Operating Room Assistant – 2022!)

Tomorrow's Riverside, Today

Making Investments today, to support RHC tomorrow

- Hospice Care Funding – improvements to palliative care spaces
- Investments in surgical equipment/training has supported the addition of surgical services for our community (urology, gyne, sports medicine)
- Upgrades to equipment in health skills lab to support education and training for new and existing staff (mannikins, monitors, etc.)
- Education-Obstetrics, neonates, paediatrics, palliative care, ICU, PICC lines, Mental Health First Aid, NVCI training, RCCR Annual Fall Tour
- eReferral and Central Intake for Surgical and DI - allows for streamlined communication and collaboration, improved workflow and reduced errors/missing information, data capture, analytics and reporting (waitlist management based on priority)
- Partner with education system (High school Co-op students, colleges, and universities – clinical experiences and preceptorships)
- NOSM program (summer nursing program)
- Staff input for capital requests – equipment needs prioritized to ensure our ability to provide safe, quality care to our patients.
- 24-hour security services

Striving to Excel in Equity, Diversity and Inclusion

- Accessibility (wheelchair accessible, interpreter services)
- Cultural training and customer service training for staff
- The Patient Experience
  - *Patient, Client, Resident Experience* - patient satisfaction surveys, post-discharge phone calls, family conferences
  - concerns/care/complaint program
  - hourly rounding, patient handbooks, bedside reporting, white boards
- *Health System Navigator*
  - Advocate and navigator for our patients with mental health needs, homelessness and substance misuse disorders
- *Indigenous Liaison and Indigenous Care Coordinators*
  - coordination of care, cultural needs and services for our Indigenous patients/families
- Multi-faith space (chapel)
- Pastoral Care Services
- Ceremonial Space (development in-progress with Elder collaboration for design)
- Seamless MD: 30-day follow-up care for ortho, gyne, urology, colorectal surgeries – reduces ER visits, readmissions and increases patient satisfaction
- Repatriation - Criticall Ontario
- Regional Critical Care Response- Standardization of medications and mechanical ventilation protocols, policies & procedures.
- Regional Pediatric Resource
- Ethics Program
- Sunset County Palliative Care Team
- Police Hospital Transition Committee
- Medical Assistance in Dying (MAID)

Striving to Excel in Equity, Diversity and Inclusion

- **MOREOB - Recognition award for outstanding performance.**
- **Our current goals are Engagement, Ownership and Culturally Sensitive Care.**
- Along with MORE OB, RHC participates in the following programs, which ensures **ALL** new mothers, and their newborns receive quality care and access to follow up services/programs post-discharge:

1. **BORN (Better Outcomes Registration Network)**
   - Ontario's prescribed perinatal, newborn and child registry with the role of facilitating quality care for families across the province.
   - BORN collects, interprets, shares and rigorously protects high-quality data essential to making Ontario one of the safest places in the world to have a baby.
   - Every day newborn screening results travel electronically to the BORN Information System (BIS) where they are cross-referenced with each birth in Ontario. If BORN Ontario finds a baby who has not been screened, we alert the NSO team.
   - The NSO-BORN partnership aims to:
     - reduce the number of missed newborn screens
     - improve care for Ontario newborns through early detection and treatment

2. HBHC (Healthy Baby Healthy Children)

- The program offers access to evidence-informed programs and services that support healthy child development & effective parenting. HBHC works with hospital partners to help families and children have access to the services and supports they need to thrive after discharge from the hospital.
- HBHC postpartum screen is completed by the Maternity nurse and consent is obtained from Mother to share screen and PHI with Public Health/BORN. The HBHC screen is entered into BORN by completing the eHBHC. The HBHC Public Health Nurse receives a copy of the screen and contacts the client by phone within 48 hours of discharge.
- Post Partum HBHC services include breastfeeding education/supports, home visiting, referrals to community programs and Services.

3. **NSO (Newborn Screening Ontario)**

- **Critical Congenital Heart Disease (CCHD) Screening**
  - critical CHD screening using pulse oximetry to allow for early detection and reduces early infant deaths from critical CHD
  - completed on well-baby at 24-48 hours of age or before discharge, if less than 7 days old.
  - Results are documented on newborn record and forwarded to Newborn Screening Ontario.

- **Newborn Screen Blood Test**
  - Using a heel-prick, a small amount of blood is collected from all babies shortly after birth
  - Blood is then sent to NSO to screen babies for 6 groups of diseases. Early diagnosis is the key to effective treatment of the following:
    1. Metabolic Diseases - where the body is unable to break down certain substances in foods, like fats, proteins or sugars
    2. Endocrine Diseases - where the body produces too much or too little of certain hormones
    3. Sickle Cell Disease (SCD) - which affects the movement of oxygen in the blood
    4. Cystic Fibrosis (CF) - which causes problems with breathing and growth
    5. Severe Combined Immune Deficiency (SCID) - which affects the body's ability to fight infections
    6. Spinal Muscular Atrophy (SMA) - which causes muscle weakness and wasting

Biliary Atresia Screening

- Biliary Atresia is a rare but serious disease of the liver and bile ducts and can lead to liver failure. It occurs when bile is unable to pass from the liver to the stool.
- Infant Stood Colour care (ISCC) are provided to the newborn's parents. They are instructed to monitor the colour of the infant's stool for the first month of life. If they detect pale coloured stool, they are advised to contact NSO, using the contact method on the card.
- Early identification and treatment of biliary atresia is key to healthy growth and development

Partnerships

- Canadian Mental Health Association (CMHAFF)
- Giishkaandago'Ikwe Health Services
- Thunder Bay Regional Health Sciences Centre (TBRHSC) and District hospitals
- Rainy River District Social Services Administration Board (RRDSSAB)
- Ontario Health atHome (formally CCAC, LHIN)
- Fort Frances Community Clinic (FHT) & Keffer Medicine
- Regional Surgical Network (RSN)
- Regional Pharmacy Program
- OPP and T3PS
- Rainy Lake Medical Centre
- Regional Surgical Program – Ortho, Gyne, Urology
- Lakehead University/ Confederation College
- Fort Frances High School
- Seven Generations Educational Institute
- Northwestern Public Health Unit (NWHU)
- Northwest Health Alliance (NWHA)
- Northern Ontario School of Medicine (NOSM)
- Gizhewaadiziwin Health Access Centre
- Couchiching Home & Community Care Program
- Kenora/Rainy River Regional Lab Program

Our Clinical Team

- Senior Team:
  - Henry Gauthier, CEO
  - Diana Harris, CNE
  - Carla Larson, CFO
  - Joanne Ogden, Quality Assurance Auditor & OHT Executive Lead
- Julie Cousineau – Director, Nursing
- Stacy Patey – Professional Practice Specialist
- Janine Angus – Inpatient Manager
- Carley McCormick– Manager Patient, Client, Resident Experience & Utilization
- Nursing Supervisors –Carla, Laurie, Dan, Keegan, Melissa
- Heather Wright/Carly Whalen – RNFA Perioperative Team Leads
- Cindy Cole – Director, Risk
- Dave Black – Director, Community Services
- Simone LeBlanc – Director, Quality & Support Services
- Rebecca Brooks – Nursing Supervisor Emo Health Centre & Rainy River Health Centre
- Samantha Keown – ALC Community Nurse
- Michelle Tighe – Health System Navigator
- Heidi Loney – Manager of Therapeutic Services
- Andrea Faragher – Manager of Laboratory and Diagnostic Services

Healthcare has had its fair share of challenges, especially over the past few years with COVID, HHR challenges and financial constraints; however, in the end we need to remind ourselves and our Team of the reason we went into Healthcare.

Our focus lies in creating a meaningful impact on the lives of our patients and their families by providing them with the best possible care, comfort and support to improve their health, well-being and quality of life.

When we put the patients and their families at the forefront, and we will always do the right thing.

Julie Cousineau, Director Nursing

Thank You!

Riverside Health Care Facilities

Long Term Care

Riverside Health Care
Long Term Care Sites

RAINY RIVER HEALTH CARE

"Connecting Communities Committed to Caring"

EMO HEALTH CENTRE

RAINYCREST

Riverside Health Care
Emo / Rainy River LTC Services

Emo Long Term Care (ELCAP)

- 12 ELCAP beds
- 8 private rooms and 2 basic (2 beds) rooms

Rainy River Long Term Care (ELCAP)

- 21 ELCAP beds
- 13 private rooms and 4 basic rooms (2 beds)

**ELCAP-Elderly Capital Assistance Program, globally funded*

Riverside Health Care
Long Term Care–Rainycrest
164 bed facility *(Interim 128 bed capacity)*

153 LONG STAY *BEDS*

(Interim 128 Long Stay Beds, 25 beds in abeyance)

- 3 Units (East-84 beds, West- 59 beds and Special Care Unit 21 beds
- private, semi-private, basic rooms
- 3 Resident dining rooms
- Spacious gym for exercising/ therapy services
- Large Activation Room for gathering, activities and program
- A multi-denominational chapel
- 6 Enclosed courtyards for safe enjoyment of the outdoors – gardening, shaded seating, outdoor activities
- Large auditorium for programs and entertainment/special events

RESPITE (SHORT STAY)

1 Bed

- Designed to provide caregiver relief
- Stay 1 day to maximum 90 days per year
- Private Room located on West wing
- fully furnished
- Includes Cable TV
- All meals provided in Resident Dining Room
- Access to all Activities and Programs
- Minimal cost per day

Riverside Health Care
Rainycrest LTC Services

- Medical and 24 hr Nursing Services
- Physiotherapy Services
- Restorative Care Services
- Pharmacy Services
- Recreational Services
- Spiritual Care Services
- Dietician
- Access to Advanced Foot Care Services
- Nurse Practitioner
- OTN Telehealth Studio
- CMHA – BSO Services
  – Psychogeriatric Resource
- Alzheimer's Society Referral Services

- Active Auxiliary
- Tuck Shop
- Family Council
- Resident Council
- Hairdressing Salon
  Resident Banking/Trust Account
- Volunteers
- Transportation Services – Town of Fort Frances Handi –Van
- Pet Therapy Program

Access to Long Term Care

ELIGIBILITY AND ACCESS

- Home & Community Care operated through the Home & Community Care Support Services North West coordinates all admissions to Long Term Care.
- Rainycrest Long-term care home beds are publicly funded and not-for-profit, on the other hand ELCAP beds at both Emo and Rainy River Health Centres are globally funded. All LTC sites provide health care and services to people whose needs cannot be met in the community.
- Long-term care homes are licensed and regulated by the Ministry of Long-Term Care (MOLTC). The province has specific regulations for admission to long-term care homes that are designed to ensure fairness and equity within the system.
- Long-term care homes can provide a residential alternative for individuals with high care needs and who meet the criteria.

HOME SELECTION

- The long-term care home placement process includes a multi-part assessment, including determination of eligibility for long-term care.
- The wait times for long-term care homes vary widely, so decisions about which homes you are applying to will help determine the amount of time you will wait for long-term care.

Riverside Health Care Strategic Pillars

TOMORROW'S RIVERSIDE TODAY

- LTC/ELCAP facilities are closely regulated and monitored through the MOLTC Compliance Branch- onsite inspections for compliance with Fixing Long term Care Act (FLTCHA) legislation and regulations in Ontario.
- MOLTC Reporting Line -Residents, families, visitors can call the Ministry at any time regarding concerns about care.
- Critical Incident System : Staff obligation to report incidents to the MOLTC that are deemed critical and/or mandatory (defined criteria for reporting) i.e. Resident injury that results in transfer to hospital, Disease Outbreak, Resident Abuse, etc.
- CIHI (Canadian Institute for Health Information) reports on several indicators to drive our quality improvement process.

Riverside Health Care Strategic Pillars

TOMORROW'S RIVERSIDE TODAY cont'd

- Annual Quality Improvement Plan developed and submitted in conjunction with RHC Director of Quality.
- LTC Continuous Quality Improvement Committee (CQI) with Resident and Family advisors.
- Mandatory Quality Committees:
  - -Skin, Wound & Continence Care
  - -Pain & Palliative Care
  - -Falls Prevention & Minimal Restraint
  - -Mental Health & Responsive Behaviours
  - -Restorative Care
- Food Safety Service Inspections from NWHU annually as well as Infection Prevention and Control Inspections.
- Monthly OHS inspections and OHS Topic of the Month education for staff.
- Infection Control Lead as per legislation.
- Minitry funded positions for Full-time Social Worker and Therapeutic Recreationist
- Annual inspection by Fire Department- evacuation/fire, mock emergency code simulations completed annually.
- LSAA (LTC Home Service Accountability Agreement)

Riverside Health Care Strategic Pillars

ONE RIVERSIDE

- **Communication:** Initial Resident Care Conference scheduled at 6 weeks followed by Annual Care Conference with residents/ families to discuss resident plan of care with a multi-disciplinary team. Ongoing communication with Residents, families, Resident & family Council. LTC Record (newsletter) distributed to all Residents and families regarding all Riverside LTC Sites. RHC Communication Lead to ensure families & Residents provided communication in various forms (i.e. social media, corporate website, emails, posters, etc.).
- **Quarterly meetings:** Professional Advisory Committee and Infection, Prevention and Control (IPAC) and Continuous Quality Improvement (CQI)
- **Long Term Care Record:** LTC Resident & Family newsletter sent to all family and Residents monthly along with the calendar of Resident Activities & programs
- **Corporate Organizational Chart**

Riverside Health Care Strategic Pillars

STRIVING TO EXCEL IN EQUITY, DIVERSITY & INCLUSION

- Residents
- Families
- Auxiliary Members
- Volunteers
- Indigenous Liaison, Community Elders
- Northwestern Health Unit
- Home & Community Care Support Services North West
- Canadian Mental Health Association (CMHA) –Older Adult Program, Psychogeriatric Resource Program and Behavioral Supports Outreach.
- Alzheimer's Society –– Mary O'Conner , Kenora and Rainy River District (KRRD) Representative
- Director of Fundraising
- United Native Friendship Centre
- The Family Advisory Council
- Resident Council
- Ontario Association Resident's Councils (OARC)
- Regional Palliative Care Network, LTC Palliative Care Coach
- Centre for Education and Research on Aging & Health (CERAH)

Riverside Health Care Strategic Pillars

INVESTING IN THE PEOPLE WHO SERVE

- **Human Resources:** Assists and coordinates recruitment & retention in all departments (Nursing, Activation, Food services, Environmental Services, etc.)
- **Training/education:** Rainycrest/RHC has an education and training system that includes an annual education schedule provided through online (Surge Learning) and in-person sessions. The annual education addresses regulatory, accreditation standards, policy and best practice requirements.
- **Confederation College –** collaborative relationship to support nursing and PSW student placements
- **Seven Generations Education Institute-** collaborative relationship to support nursing and PSW student placements
- **Extendicare Assist**– hold subscription to policy & procedures for LTC, ad hoc access to specialized LTC consultants such as Dietary, IPAC, Nurse consultants, Skin & wound leads, Environmental Services, etc.)
- **Registered Nurses Association of Ontario (RNAO)-** Access and ongoing collaboration with LTC Educational Consultant
- **AdvantAge Ontario-**resource to LTC Leadership and staff, LTC body of advocacy, provides educational course, conferences and Administrators Course
- **Ontario Long Term Care Clinicians Association (OLTCCA)**—resource to LTC Clinicians, provides Medical Director's course, professional conferences
- **Ministry of Long Term Care (MOLTC)-** provides legislation to clearly outline expectations provided–Fixing Long Term Care Act and regulations

Riverside Health Care
LTC Funding

- The assessment based CMI (Case Mix Index) measures resident acuity and the complexity of care and impacts the Nursing and Personal Care funding per diem.
- Each point that our adjusted CMI falls below the theoretical provincial average of 100% results in lost revenues for our Home.
- Also important to note, surpassing the provincial average does not generate more revenue.
- For our facility we need to achieve 97% occupancy of the 154 (Interim 128) (153 long-stay and 1 respite) beds to retain 100% of our ministry funding; unfortunately anything less than 97% will involve funding claw-backs.

Riverside Health Care
LTC Funding

- The Ministry provides bed funding through four funding envelopes as outlined on next slide and reconciles each envelope independently

- Knowledge of the rules for fund transfer from one envelope to another is important for finance management.

- Total per diem funding is provided to the Home less the value of Basic copayment revenues. Semi-private and private copayments are strictly retained by the home.

Riverside Health Care
LTC Funding

Nursing and Personal Care (NPC): This envelope funds expenditures related to nursing and other direct care staff who assess, plan, provide, assist, evaluate, and document the direct care provided to residents; as well as, supplies and equipment used by staff to provide care to residents. *(Variable CMI, portion is acuity adjusted)*

Program and Support Services (PSS): This envelope funds expenditures related to staff and equipment related to programs and therapies provided to residents.

Raw Food (RF): This envelope funds expenditures related to the purchase of raw food including food materials used to sustain life including supplementary substances such as condiments and prepared therapeutic food supplements ordered by a physician, nurse practitioner, registered dietitian, or registered nurse, as appropriate, for a resident. It excludes costs related to other programs and cost of food preparation.

Other Accommodation (OA): This envelope funds expenditures related to housekeeping services, buildings and property operations and maintenance, dietary services (nutrition/hydration services), laundry and linen, general and administrative services, and costs that will maintain or improve the care environment of the LTC home.

Thank You !

RIVERSIDE HEALTH CARE

Diana Harris, RN BScN, MBA

Interim - Administrator of the Emo and Rainy River Health Centres

Emo Health Centre

Emo Health Centre was renovated in 2000. Emo provides services to surrounding communities.

Emo Health Centre

Services

3 acute care beds. Typically, patients who are admitted are:

waiting for LTC, palliative care, or have a stable condition.

Emo Health Centre

Services

12 EldCap Beds with 8 private rooms and two double rooms.

Emo/Rainy River Health Centres

Definition

The Elderly Capital Assistance Program (ELDCAP) provides services to Long-Term Care residents in units that are collocated within hospitals in small northern communities. ELDCAP beds are subject to the Long-Term Care program requirements but are funded through a hospital's global budget.

Emo Health Centre

Services

Resident Dining / Activity Room

Emo Health Centre

Services

Green Spaces for the Residents

Emo Health Centre

Services

Other Services:

In collaboration with Emo Medical Clinic Outpatient Physiotherapy.

Cafeteria that provides hot lunch meals.

Full time Community Counselling

Emo Medical Clinic and Dental offices in the basement.

Emo Health Centre

Staff

Physician focussed on LTC while supporting Emo Clinic during the day.

- Registered Nurses
- Registered Practical Nurses
- Personal Support Workers

Emo Health Centre

Staff

- Activation/Behavioural Support
- Housekeeping
- Dietary –Maintenance (shared RR)
- Physiotherapy
- Community Counsellor

Rainy River Health Centre

Rainy River Health Centre was built in 1999. The Health Centre provides services to the west end of the district typically from Stratton west and north to Morson including the First Nation communities of Big Grassy and Big island.

Rainy River Health Centre

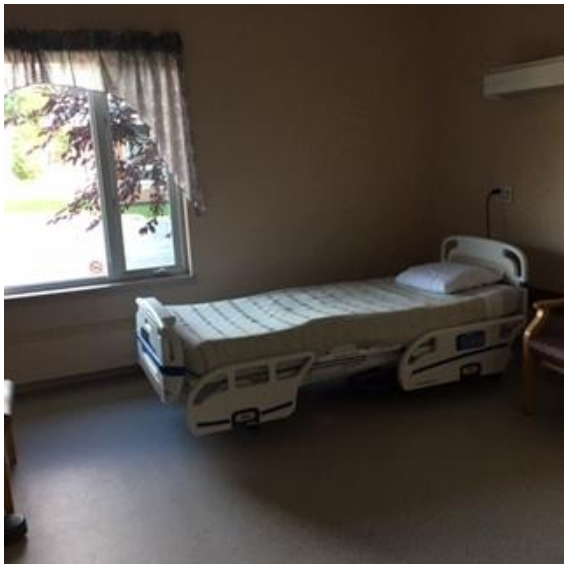
Services

24 hour emergency department.

Rainy River Health Centre

Services

3 acute care beds. In both Emo and Rainy River utilize the MedDispense system. Medications are sent daily from LVGH Pharmacy.



Rainy River Health Centre

Services

The lab room with Point of Care testing. Due to the distance from Fort Frances and the requirement to have blood test results

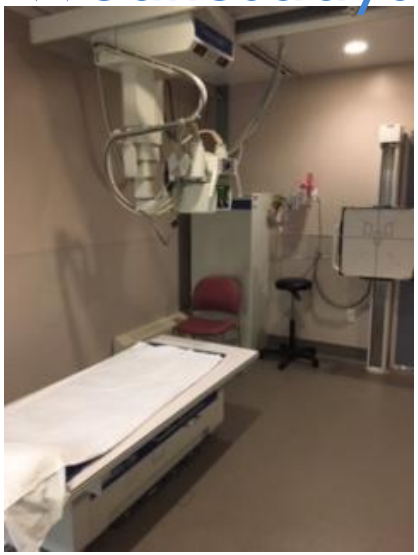
RainyRiver has an

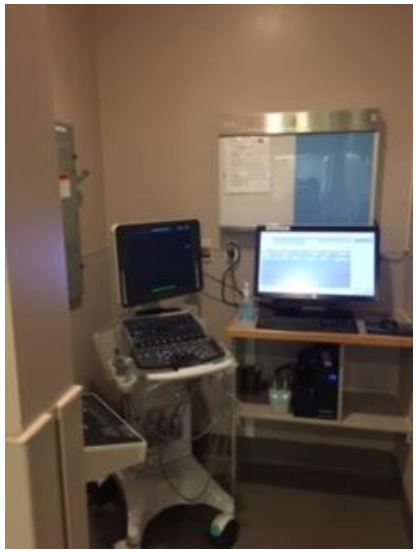
- ISTAT
- Clinitek
- IDNow
- CBC Analyzer

Rainy River Health Centre

Services

X-ray hours 8 am to 4 pm Mon, Tues, and Weds and 10 am to 2 pm on Thurs and Fri. On Monday, Tuesdays and Wednesdays Ultrasounds are also done.



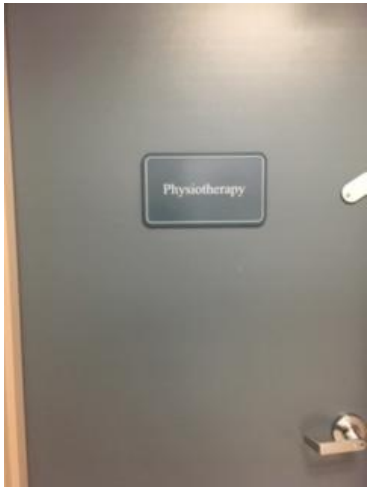


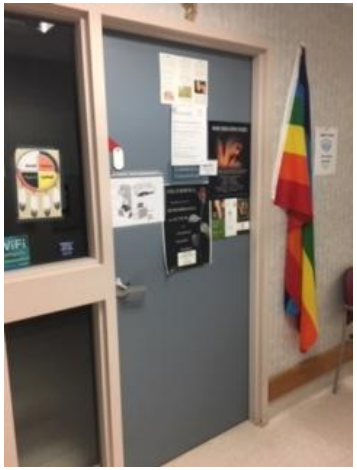
Rainy River Health Centre

Services

Other Services:

Physiotherapy for LTC Residents and Full Time Community Counselling, as well as other visiting specialities such as diabetes education.





Rainy River Health Centre

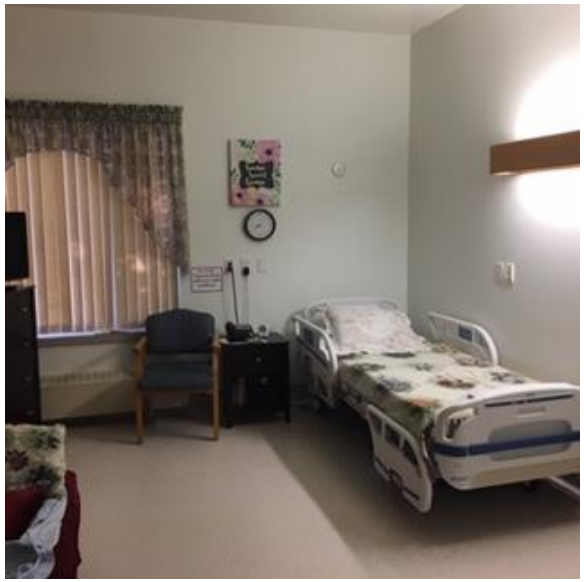
Services

Connected to the Rainy River Clinic

Rainy River Health Centre

Services

21 Long Term Care beds. 13 Private rooms and 8 doubles.



Rainy River Health Centre

Services

Activity Room

Rainy River Health Centre

Services

Green Spaces for the Residents

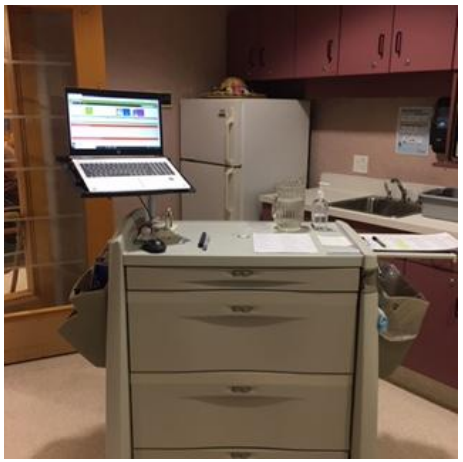
Emo and Rainy River Health Centre

Services

The EldCap Units (LTC attached to a hospital) has implemented an electronic medical record software program called Point Click Care. This includes the Eletronic Medication

Administration.

This is the medication cart.



Rainy River Health Centre

Staff

Physicians: Currently covered by locum physicians on a rotational basis. Virtual appointments available weekly.

- Nurse Practitioner in the Medical Clinic.
- Nurse Practitioner in the Long-Term Care

Rainy River Health Centre

Staff

- Nursing Supervisor/DOC
- Registered Nurses
- Registered Practical Nurses
  Activation/Behavioural Support staff
- Health Care Aides
- Housekeeping –
- Dietary

Rainy River Health Centre

Staff

Maintenance (shared with Emo)

Diagnostic Imaging Technologist

Community Counsellor

Administration Assistant/Medical Records

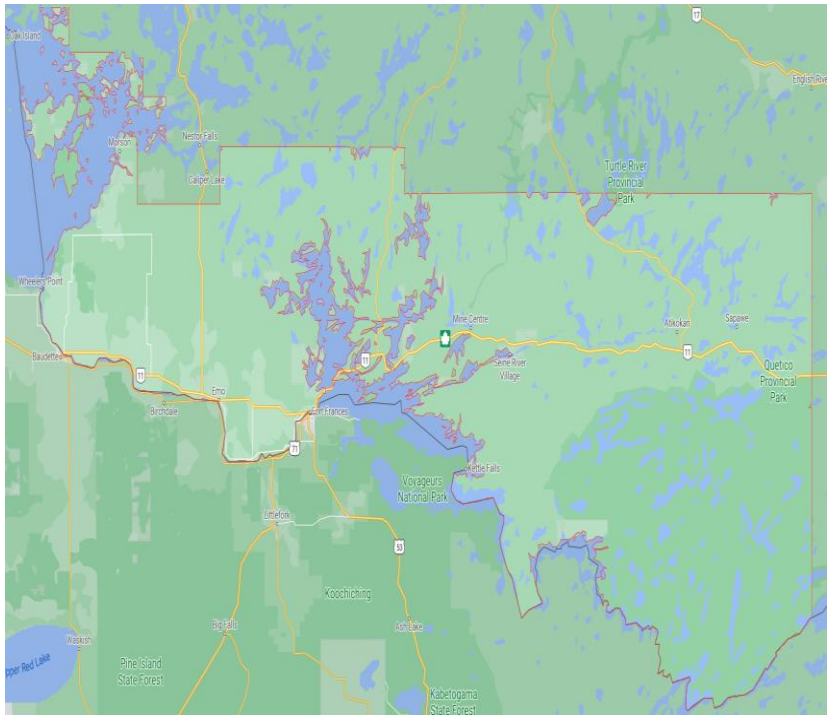
QUESTIONS?

Thank you!

Community Services

- Community Support Services – *Manager, Kelli Bolen*
- Mental Health & Addictions – *Manager, Megan Baskie (May 2026)*
- Riverside Supportive Housing – *Manager, Gwen Miller*
- Transportation – *Coordinator, Lysandra Hector*
- Diabetes Education

Rainy River District



CSS Programs

- Assisted Living Program
- Home Support, Personal Care/Respite
- Adult Day Program
- Meals on Wheels / Congregate Dining
- Transportation (Atikokan)
- Community Nursing

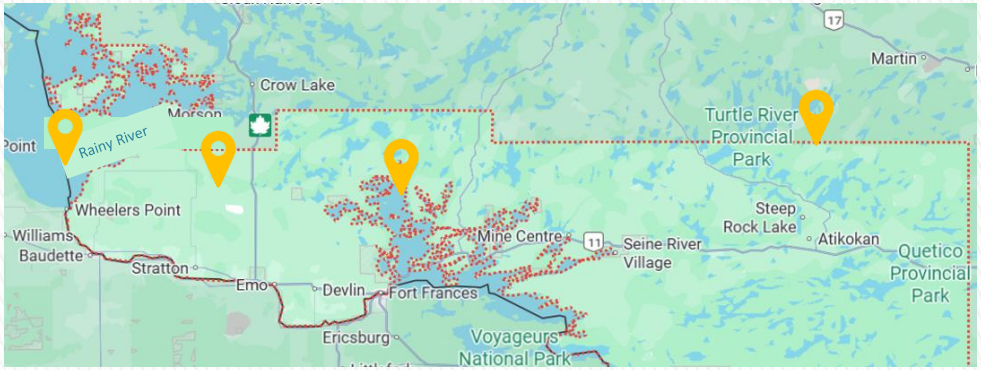
CSS Programs

- Focus on Independence
- Personal Support
- Homemaking
- Emergency Response
- Socialization and Recreation
- Caregiver Respite

Assisted Living Program

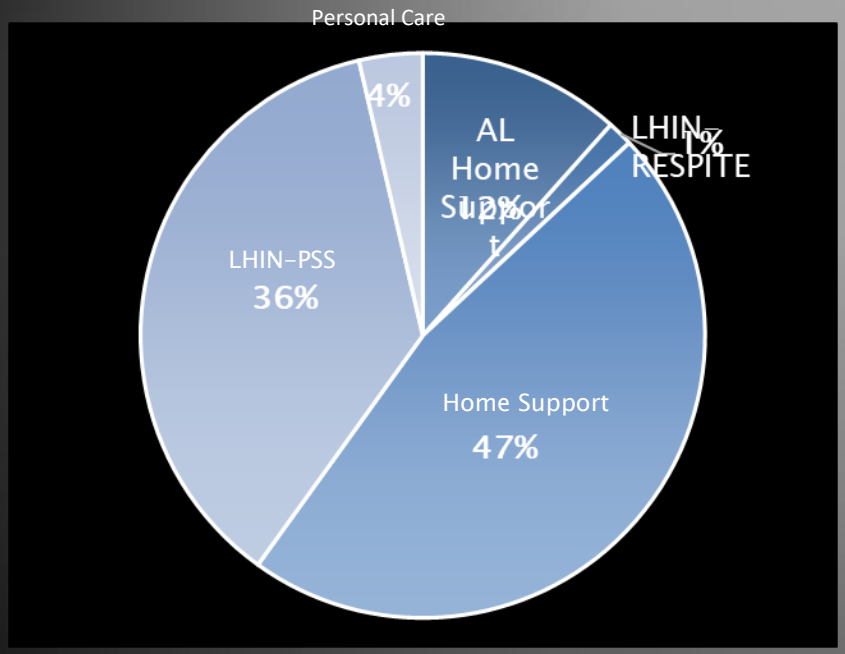
- Fort Frances
  - ✓ Funded for 30 Spaces
  - ✓ 4 FT staff, 5 PT staff, 18 Casual staff
- Atikokan
  - ✓ Funded for 13 Spaces
  - ✓ 2 FT staff, 2 PT Staff, 6 Casual staff
- Emo
  - ✓ Funded for 11 Spaces
  - ✓ 2 FT staff, 1 PT staff, 4 Casual staff
- Rainy River
  - ✓ Funded for 10 Spaces
  - ✓ 2 FT staff, 1 PT staff, 3 Casual staff

The Assisted Living program is actively running in **4** communities across the Rainy River District



Riverside Health Care

Home Support & Personal Care/Respite



There is active HS & Personal Care provided in **6** communities across the Rainy River District

- 158 clients
- 913 individual visits
- 1,168.00 hours
- 26 Casual HS Staff

Home Support, Personal Care / Respite visits

* Stats are from August 2025 *

Riverside Health Care

Adult Day Program

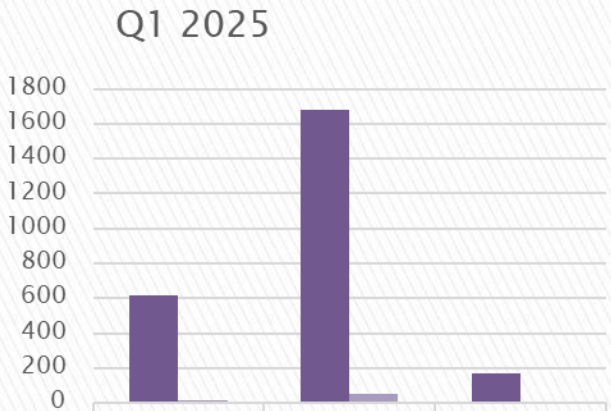
- Atikokan – Tuesday's & Friday's
- Fort Frances – Tuesday's & Friday's
- Emo – Wednesday's
- Rainy River – Thursday's

The Adult Day Program offers a mix of social, recreational, and therapeutic activities designed for individuals who may be living with physical disabilities, memory loss, or other health conditions, and who benefit from a structured environment and social interaction.

Riverside Health Care

Meals on Wheels & Congregate Dining

Meals on Wheels



	Atikokan	Fort Frances	Rainy River
Meals Delivered	616	1683	169
Clients Served	19	49	6

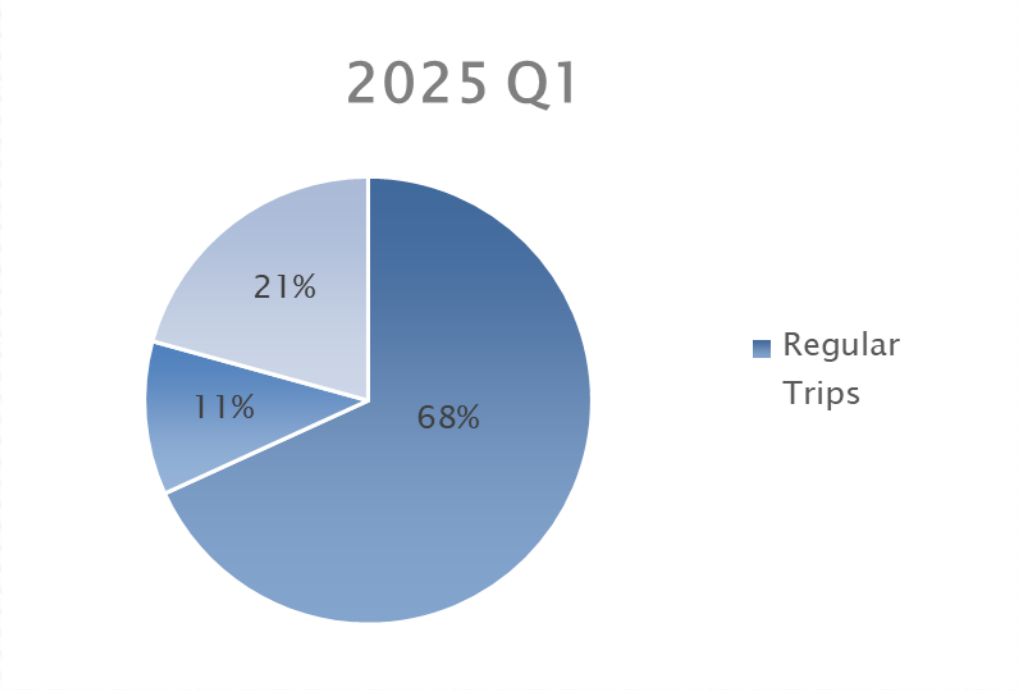
Congregate Dining

Congregate dinning is offered in Atikokan on a biweekly basis Q1 – 13 clients enjoyed the congregate dinning experience with 55 meals being prepared.

Riverside Health Care

Atikokan Handi-Van

- ✓ 6 Days a week
- ✓ After School Program (ASP)
- ✓ Town of Atikokan (TOA)
- ✓ Pre-scheduled Appointments
  - ✓ Physio
  - ✓ Dr.
  - ✓ Dentist
- ✓ Meal on Wheel Deliveries
- ✓ Mail Pick-ups
- ✓ Around town needs
- ✓ 1 FT employee, 5 Casual



Riverside Health Care

Community Nursing

Primary service is providing healthcare services to individuals and families within our community, promoting health, preventing illness, and managing chronic conditions.

Educating clients and families on managing their health conditions while promoting self-management skills.

168 Hours

84 Client visits

3 Nurses (Casual)

* Stats are from August 2025 *

Riverside Community Counselling

Mental Health & Addiction

Where are we?

Fort Frances- 206 Victoria Avenue
Emo- 170 Front Street
Rainy River- 115 4th Street

What do we do?

Connecting clients to programs and services that support them through challenges and barriers to their mental health and functioning. Counsellors with varying specialized training may support clients through specific concerns/issues they may have.

Programs Offered:

Mental Health Counselling

Addictions Counselling

VAW Program, “Violence Against Women” Family Violence Counselling

Mental Health Counselling

Connecting clients to services, supporting them by addressing and working through challenges and barriers to their mental health. Using the incorporation or a variety of therapeutic models, we can help promote recovery goals pertaining to mental illness. Helping clients work through barriers and navigating life stressors impacting their overall functioning. Services are offered in-person and virtually.

Presenting Concerns:

- Anxiety
- Depression
- Grief
- Eating Disorders
- Recent/Historical traumatic events

Addictions Counselling

Offering clients a comprehensive approach to addictions concerns and connecting them to resources and programs that address these issues through community development, treatment and relapse prevention. Clients are offered education promoting awareness for those facing issues with alcohol and/or alcohol. Counselling services and support are also available for family members with loved ones struggling with addiction.

Services Offered:

- Assessment and referrals
- Case management
- Harm reduction
- Aftercare for alcohol addiction and substance use

VAW “Violence Against Women” Family Violence

Addressing all forms of violence with clients, including intimate partner violence, unresolved child and elder abuse and recent or historical sexual assault. Primary target groups include adult women (16 years of age and older) who are victims/survivors of abuse, and family members where violence is an issue. Therapeutic services offer clients an opportunity for a collaborative process to learn about the impact of trauma and violence, addressing ongoing trauma symptoms and responses.

Services Offered:

- Specialized evidence-based therapeutic modalities i.e.) EMDR Therapy
- Secondary and community development activities i.e.) group work, education, consultation/planning
- Addressing various forms of abuse including including physical, sexual, emotional, and/or financial harm, and controlling behaviours.

RAINY RIVER DISTRICT RAAM CLINIC

"CONNECTING COMMUNITY THROUGH DISTRICT AND REGION"

Riverside Health Care Facilities Is in partnership with Giishkaandago ‘Ikwe, CMHA, NWHU, FF Family Health Team, Gizhewaadiziwin Health Access Centre, and St. Joseph’s care group – Thunder Bay.

- RAAM Model of addictions care, rely on community partners to make up the RAAM program. (I.e. – GHAC & FF Health Team give us an allotted time/hours for Dr. Gustafson each week)

- RAAM main site in located in Fort Frances at RHCF Community Counselling building (the old Church rectory site)

- Offer “wrap-around services of care” – Individuals presenting on site will be seen by the RAAM nurse, peer support, addictions counsellor, and the Doctor/physician.

RAAM Clinic Fort Frances also represents/serves the Rainy River District
- connects/referrals to other RAAM sites in the Northwestern Ontario Region.

- Ages 16+

- Low-barrier/no referral needed in some cases. Accept walk-ins if enough capacity there/or given appt time to the next clinic offered (within days).

- if in acute withdrawal and no doctor available– education on presenting to ED (Counsellor can call over to ER and explain no RAAM doc on, support with script from NP or acting locum until seen by next RAAM doctor.

- Doctor/Physician availability – MON or TUES 1-4pm, and THURS 12-2PM

- Counsellor availability Mon – Fri, 8-4PM

Counsellor Role(s)

- Solution-Focused/Brief Counselling

- Motivational Interviewing

- Assess readiness for change (Stages of Change)

- Trauma, Greif & Loss, & Addictions Education/Counselling

- Treatment planning & referrals

- Community Involvement/referrals to community agencies (work alongside CMHA/Safe Bed Program, HOPE Transitional Housing ((RRDSSAB)), MATW Detox/MATW Healing Centre)

- Adheres to College of Social Workers and Social Service Workers & to the Code of Ethics and Standards of Practice from OCSWSSW. Also, continuing education/competency through CTRI (Crisis & Trauma Resource Institute)

SITES & RESOURCES

- META:PHI RAAM Resources https://www.metaphi.ca/resources/?keywords=RAAM&orderby=date&order=DESC&view=grid
- RAAMToolkit.pdf - RAAM Toolkit: Standing Strong Together – Mashkowigaabowidaa
- RAAM Clinic\Model_RAAMClinicBestPractices.pdf
- RAAM Clinic\RAAM and Grief Counselling.pdf

Health Systems Navigator

MICHELLE TIGHE, RSSW

HSN ROLE

- Provide guidance to LVGH Patients navigating the health care system
- This can include:
  - People needing substance use treatment resources such as treatment, RAAM
  - Referrals to community counselling services
  - Referrals to Mental Health programs
  - Referrals to withdrawal management
  - Assistance in completing housing applications
  - Advocacy for patients struggling to understand/navigate the systems with in our community.
  - Advocating for our communities most vulnerable residents.

HSN ROLE

- Majority of work occurs in The ER Supporting staff with patients experiencing situational crisis
- Also work with patients admitted to our acute care unit with connection to services that will ensure a plan for safe discharge
- I have also been asked to assist with patients on Second floor
- New additions to my role now includes seeing youth for SI Risk assessments and supporting families when a loved one is in crisis or seeking support.

HSN ROLE

- As the HSN I also sit on many community committees such as:
- Homelessness
- By name
- Substance Use
- Situation Table
- On my own time, I am a board member for Victim's services.

These are vital committees in our community that allows agencies to come together to work on solving issues such as housing crisis, community members in crisis and families. We are trying to eliminate the silo effect of all resources and come together so make smoother transitions.

Questions?


"
"
MAKE EVERY EFFORT TO CHANGE THINGS YOU DO NOT LIKE. IF YOU CANNOT MAKE A CHANGE, CHANGE THE WAY YOU HAVE BEEN THINKING. YOU MIGHT FIND A NEW SOLUTION.
– MAYA ANGELOU


"Try to be a rainbow in someone's cloud."
MAYA ANGELOU
TODAY

Community Services

Non-Profit Supportive Housing – *Gwen Miller*

Front Street Manor

←24 Units

8th Street complex

← 7 Units

Church Street units

↑ 3 Units

Transitional Housing/ALC Back to Home

↑ 6 ALC, 3 Transitional and 1 Cris Bed Units

Riverside Health Care

Community Services

- Transportation

Fort Frances HandiVan

Medically Stable Patient Transport (MSPT)

Riverside Specialty & Diagnostic Transportation

Community Services

Diabetes Education Program

- >700 Clients
- Registered Dietician (Trisha)
- Registered Nurse (Jody)
- District Presence - Outreach

Community Services

Thank You,

Any Questions?

Risk and Patient Safety

Board Orientation 2025

Cindy Cole – Director Risk Management & EHR Implementation Lead

Integrated Risk Management

Integrated risk management **(IRM)** is defined as "a continuous, proactive, and systematic process to understand, manage, *prioritize** and communicate, risk from an organization-wide perspective in a cohesive and consistent manner. It is about supporting strategic decision-making that contributes to the achievement of an organization's overall objectives."

Government of Canada / Gouvernement du Canada

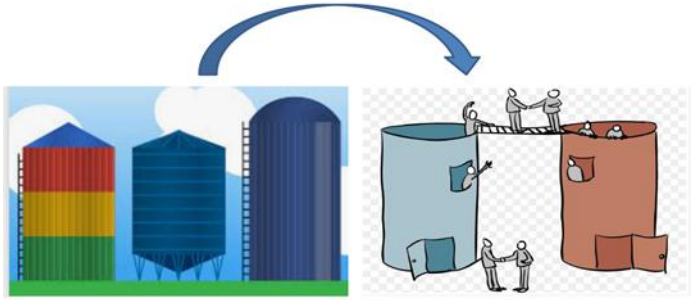
Treasury Board of Canada Secretariat, 2016
*HIROC added

Riverside Health Care

The Value of Integrated Risk Management

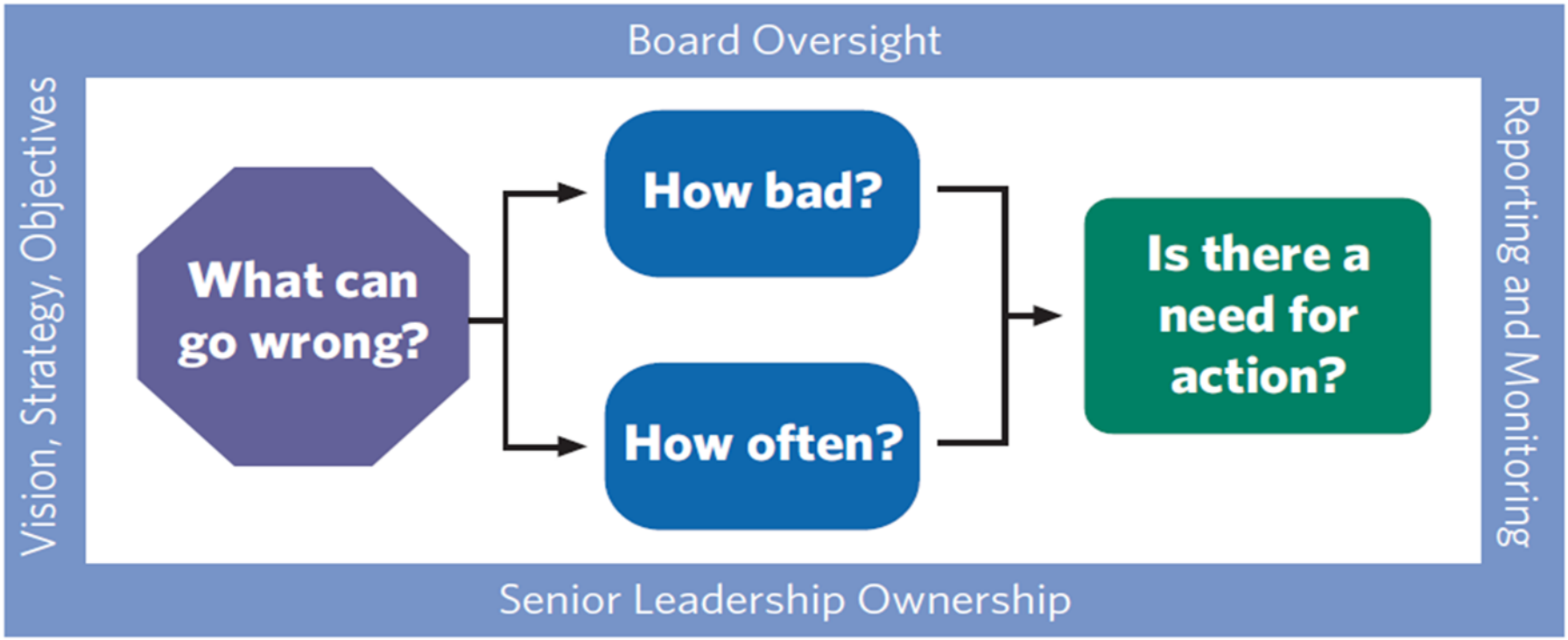
A Framework For

- Understanding and *prioritizing* different types of risks from across an organization
- Creating a concise summary of the most significant risks
- Identifying whether further work is required to bring these risks to acceptable levels
- Opportunity to reduce the number of surprises and losses in the future
- Supports achievement of strategic objectives
- Being proactive versus reactive



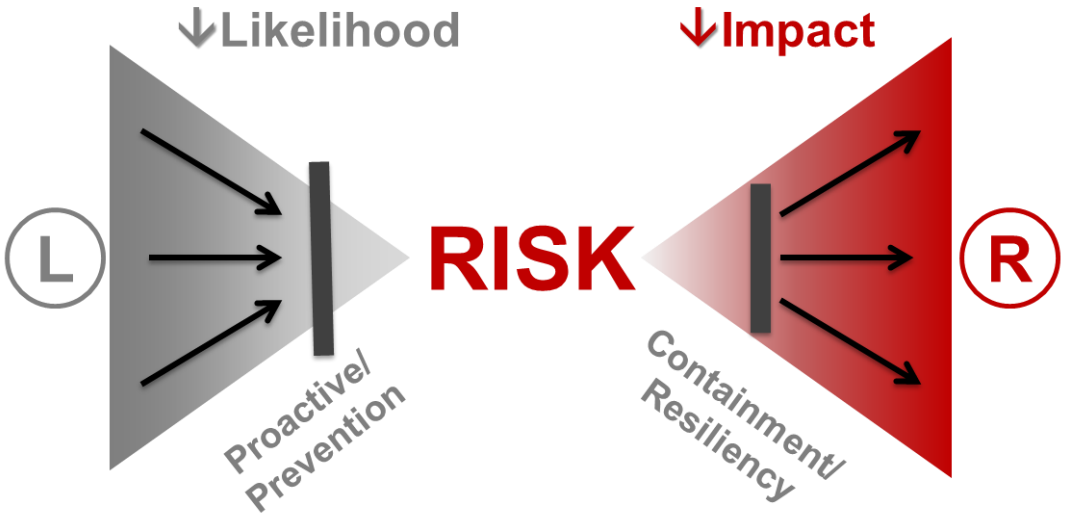
Riverside Health Care

Risk Identification

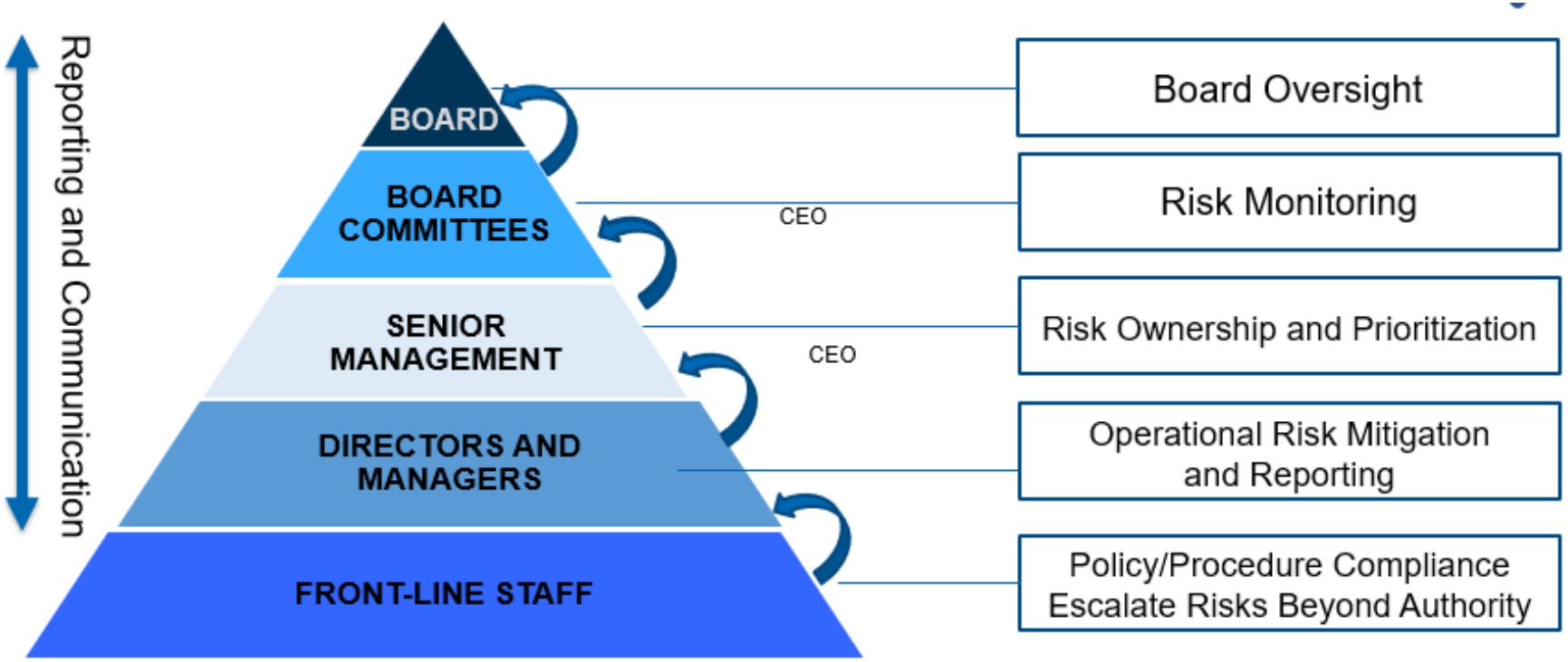


Likelihood and Impact Identified Risk

- Often described in terms of the impact and the associated likelihood of occurrence
- May arise from trends, changes, disruptions and emerging issues
- Risks are distinct from existing issues or problems
- Is about the effect of uncertainty on objectives



IRM Involvement



Current RHC Priority Risks

- In 2021 Leadership Team went through a risk identification exercise.
- Identified risks were consolidated down to 11 top priority organizational risks
- The risk rating was updated in July 2025 for top 10 risks

Human Resources (4)
Leadership (2)
Information Management/Technology (2)
Facilities (1)
Care (1)

RHC Integrated Risk Management Scale					
	Impact				
Likelihood	Very Low	Low	Medium	High	Very High
Very High			2		1
High			2	3	
Medium		2			
Low					
Very Low					

Very High/Very High: HR - Recruitment/Retention
High/ High: HR – Development, Worklife Balance, IST System Technology Failure
Very High/Medium: IST - Breach Loss of Information,
Facilities –Aging Maintenance
High/Medium: HR-Violence, Care- Access to care
Medium/Low: Leadership- Culture, Information Gap

Risk Management – Current Activities

Patient Safety

- Incident Reporting
- Infection Control & Prevention Programs & Monitoring
- Debriefs & Event Reviews
- Patient Safety Trends Reports
- Critical Incident Report Reviews

Staff Safety

- Incident Reporting
- Orientation & Training
- Workplace Hazard Assessments
- Staff Safety Trend Reports
- JOHS Committees
- Violence Prevention Committee

Risk Mitigation Activities

- Complaints procedure
- Patient & Resident Experience Surveys
- Volumes & Census
- Emergency Preparedness
- Inspections & Audits
- Accreditations
- Patient & Family Advisory Council

Foundational Activities

- Policies & Procedures
- Reporting structures
- Committees
- Training
- Legislative Requirements
- Best Practices

Riverside Health Care

Governance Risk

- Governance risk in health care can have significant negative impact on risk oversight and strategy with potential for impact on patient care and reputational loss.

- This risk relates to lack of effective structure and processes for the board to carry out their critical governance function.

- This can include but not limited to:
  - Inability to attract &/or retain board and committee members with the right skillset
  - Ineffective accountability processes
  - Insufficient reporting for board oversight and decision making
  - Lack of strategy alignment
  - Lack of board orientation and training

Governance Risk:
Key controls and mitigation strategies

- Governance Structure:
  - Bylaws
  - Governance manual and policies
  - Committee terms of reference
  - Board processes guidelines
  - Board evaluation plan
- Dedicated board liaison to support board and committees (Brooke)
- Board and committees work plan with priorities identified including key function and policy review
- Reporting, Monitoring and Compliance:
  - IRM with regular monitoring and reporting to committee/boards
  - Information to Board to assist with oversight function such as
    - Safety and quality indicators
    - Aggregate data on complaints
    - Financial update, controls, forecasting, funding agreements
    - Outcomes of internal and external reviews and audits
    - Policy and regulatory compliance reports
  - Input from patients and families
- Strategic Plan including dedicated Board retreats to develop, review, revise strategic plan.
- Board Recruitment and Retention
- Board Education and Training

21 Questions

HIROC

Guidance for healthcare boards on what they should ask senior leaders about risk.

Drawing on strong ethical and evidence-based principles, HIROC, in collaboration with subscribers, has developed guiding questions to help boards of healthcare organizations carry out a critical governance function – the oversight of key organizational risks.

Strategic context

1 What are the organization's vision and strategic objectives and do they reflect the core mandate of delivering high quality, safe care?

Board education

2 How does the board get the knowledge and experience necessary to oversee risk management in a healthcare organization?

Risk culture

3 What is the board doing to encourage speaking up across the organization about potential risks and unsafe practices?

Risk management program

4 What is the organization's policy/plan/framework for identifying, assessing and managing key risks?

5 How do senior leaders demonstrate ownership for key risks?

Key risks (patients & staff)

6 What are the most significant risks related to care?

7 What are the themes/trends arising from patient complaints?

8 What are the most significant risks related to human resources?

Key risks (other)

9 What are the most significant risks related to finances?

10 What are the most significant risks related to leadership?

11 What are the most significant risks related to external relations?

12 What are the most significant risks related to information management/ technology?

13 What are the most significant risks related to facilities/infrastructure?

14 What are the most significant risks related to regulatory compliance?

15 What are other significant risks (e.g. research, education)?

Risk management

16 How are decisions made on additional controls or actions required to manage key risks?

Risk prioritization

17 How do senior leaders determine top organizational risks and which risks to report to the board?

Risk reporting

18 What records are kept for key risks and how do these roll-up into regular, effective reports for management and the board?

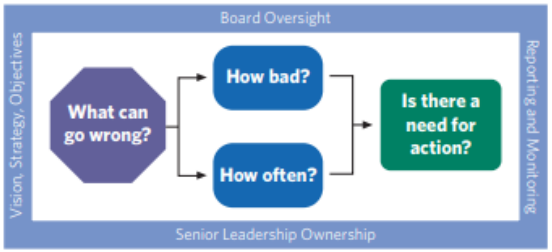
Crisis response

19 How does the organization plan for, respond to and learn from crises?

Assurance and evaluation

20 How is the board assured that controls for key risks are working?

21 How is the organization's risk management program evaluated?



A simplified risk management framework

Risk Management Questions?

Patient Safety

(Client and Resident Safety too)

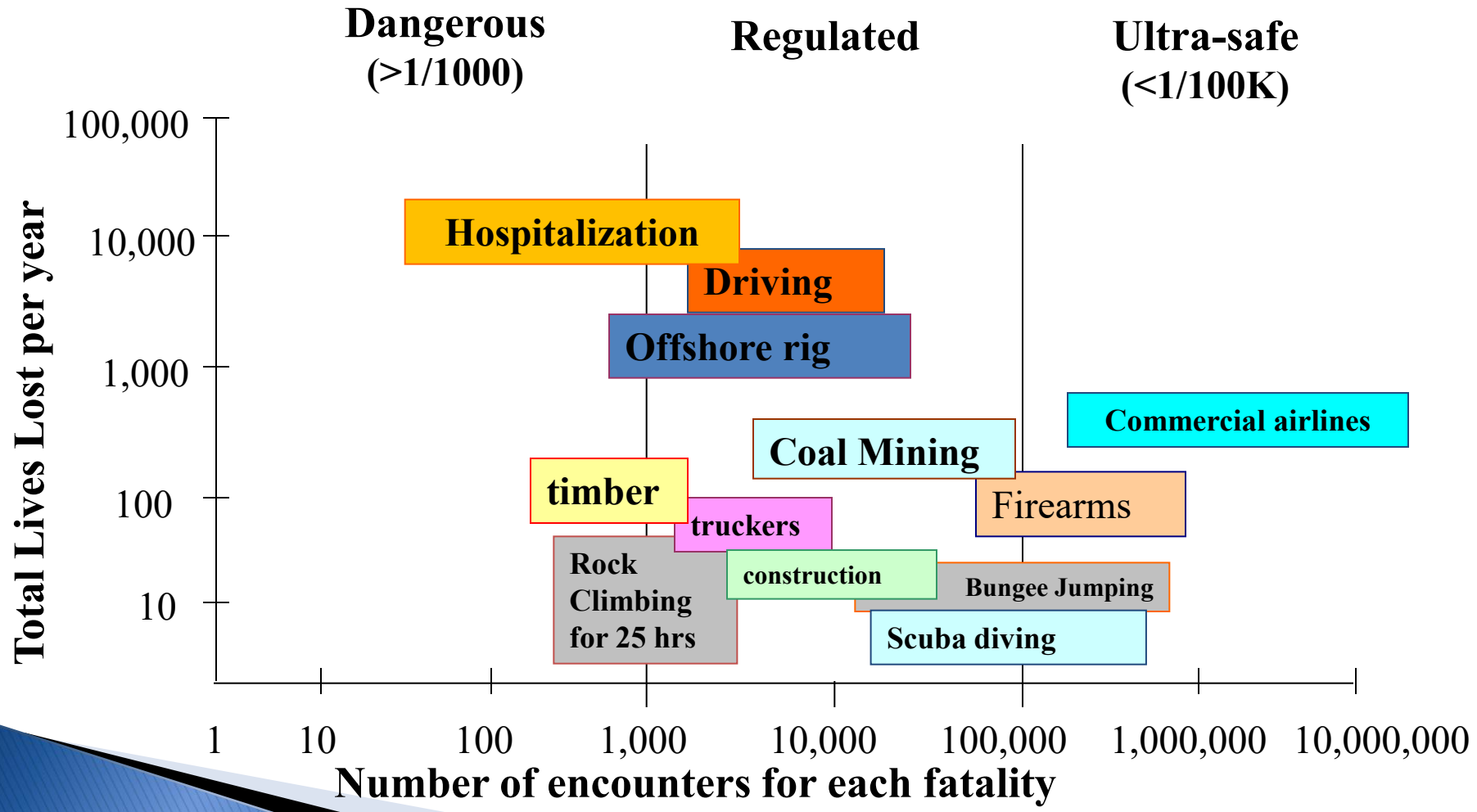
Patient Safety

Definition of Patient Safety:

- Patient safety is a discipline in the healthcare sector that applies safety science methods toward the goal of achieving a trustworthy system of healthcare delivery.
- Patient safety is also an attribute of healthcare systems; it minimizes the incidence and impact of and maximizes recovery from adverse events.
- It is defined as the reduction and mitigation of unsafe acts within the health care system.

As defined by the Canadian Patient Safety Institute Core Curriculum

How Risky is Healthcare?



Adapted by Dr. Philip Hébert

Why is Patient Safety a priority?

- The Canadian Adverse Events Study (2004)
- 7.5% of patients admitted to acute care had an adverse event occur during their stay. That's 185,000 events from a total of 2.5 million admissions per year.
- 37% were considered to be preventable events. That's 70,000 per year.
- 21% of the patients that suffered a preventable event died. That's 14,700 per year.

Just Culture

Definition:

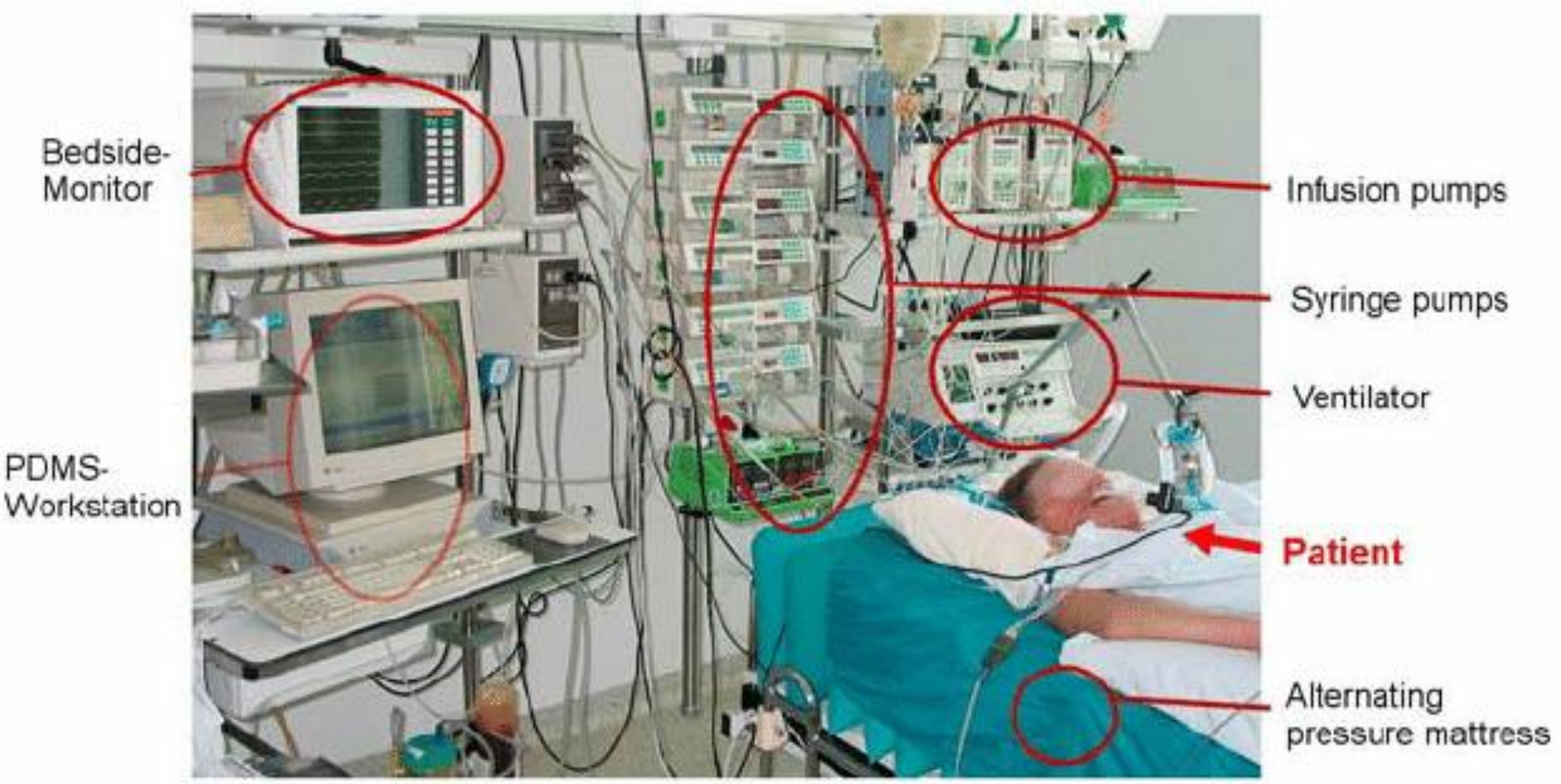
- An environment which seeks to balance the need to learn from mistakes and the need to take disciplinary action.
- Goal: achieving a culture in which frontline personnel feel comfortable disclosing errors—including their own—while maintaining professional accountability.
- However, in contrast to a culture that touts “no blame” as its governing principle, a just culture does not tolerate conscious disregard of clear risks to patients or gross misconduct (e.g., falsifying a record, performing professional duties while intoxicated).

Just Culture

- https://www.youtube.com/watch?v=VJ0UtU58d9M

Passing the ball test

- https://www.youtube.com/watch?v=IGQmdoK_ZfY



Riverside Health Care

Reporting Incidents

- Adverse Events Management System (AEMS) is completed for:
  - Near Miss events-
    - Reportable circumstance – not patient related
    - Near Miss – potential for harm, intercepted & corrected before it reaches the patient
  - No Harm Incident- A patient safety incident that reached a patient, but no discernable harm resulted.
  - Harmful Incident – A patient safety incident that resulted in harm to the patient
  - AEMS is also completed for non patient events such as equipment failure, occupational hazards, theft etc

Event Review

- Multidiscipline event review held to learn from incident and determine:
  - What happened
  - How it happened
  - Why it happened
  - What can be done to reduce risk of reoccurrence making care safer
  - What was learned

  Reviews are confidential open discussion with all involved to share information and support one another.

Riverside's Patient Safety Tracking

- Near Miss
- Falls
- Aggression
- Medication Errors
- Medication Reconciliation
- Venous Thromboembolism Prophylaxis
- Antimicrobial Stewardship
- Infection Control ie: Hand Hygiene

Board Member Role in Patient Safety

- Patient Safety is part of everyone's role
- Riverside reports our safety incidents to the Board of Directors and all staff with the intent that public reporting will be something we will work toward.
- Supporting a just culture with encouragement for reporting incidents and learning from them and not placing blame when an incident does occur.
- Consider the safety impact when reviewing and authorizing proposed capital purchases.

Patient Safety Questions?


Thank You!

Riverside Health Care

Quality and ACCREDITATION

Board Orientation October 2025

Riverside's Quality Program

- At Riverside, we strive to deliver safe, high-quality care to our patients, residents and clients, and we are committed to creating a safe healthy work life for our employees and teams.

- The guiding principles supporting the delivery of care and service are based on the quality dimensions Accreditation uses to develop the standards and criteria for providing safe, high quality health care.

  - **Accessibility** – Give me timely and equitable service
  - **Appropriateness** – Do the right thing to achieve the best results
  - **Client-centered Services** – Partner with me and my family in our care
  - **Continuity of Services** – Coordinate my care across the continuum
  - **Efficiency** – Make the best use of resources
  - **Population Focus** – Work with my community to anticipate and meet our needs
  - **Safety** – Keep me safe
  - **Work life** – Take care of those who take care of me

- *The Excellent Care of All Act* (ECFAA) defines a high-quality health care system as one that is "accessible, appropriate, effective, efficient, equitable, integrated, patient-centered, population health focused and safe."

Riverside's Quality Program

Indigenous Liaison and ICC's

Professional Practice Specialist

Quality Assurance Auditor

Health System Navigator and ALC Nurse

Roles to Quality

Quality Assurance Auditor

- responsible for ensuring patient and department records and processes are following policies, quality standards, workflow procedures, and regulatory and accreditation requirements
- assurance audits of various practice elements, including review of records and processes. Audit results will be utilized to present and implement system enhancements focus on the critical elements of care, efficiency and effectiveness.
- All audit activities will include detailed auditing records tracking implementation of continuous performance improvement opportunities recommended by the Quality Auditor for implementation. Follow up analysis of implemented changes will be essential to assuring quality improvements are occurring, as designed.
- focus on report trending to assist in providing both compliance and continuous innovation across the Riverside Health Care system.
- Other key responsibilities include serving as Riverside Health Care's quality assurance expert and supporting regulatory and accreditation survey activities.

Roles to Quality

- Professional Practice Specialist

  - Provide nursing orientation that is consistent across the organization, specific to acute vs LTC.
  - Role in onboarding our nursing staff, attend interviews and review resumes to ensure that qualifications are specific to our needs.
  - Participate in the work of the units
  - Identify and provide education for any areas to make it consistent with our best practice guidelines and policies/procedures.
  - Update Policies and procedures as per best practice guidelines.
  - Attend case reviews and debriefs with both our front-line staff and our senior team as needed.
  - Provide the appropriate education and training for any areas that are identified through Risk/ QI/ nursing etc.
  - Work closely with Quality and Risk to address mitigation strategies

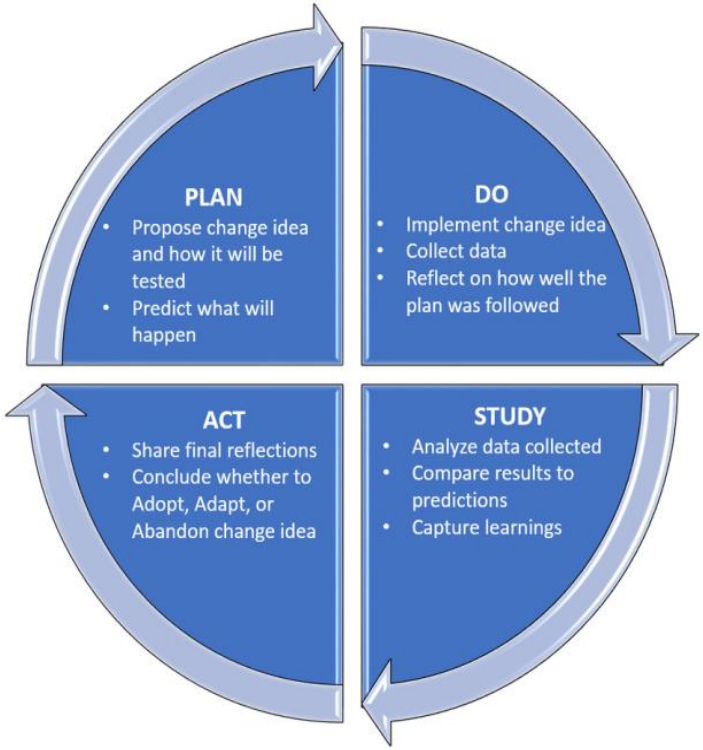
Roles to Quality

Indigenous Liaison

- Focuses on developing the relationship between our First Nation communities and Riverside Health Care by enhancing communication on both access to and quality of care.
- Working closely with our Indigenous Care Coordinators from GHAC. Above all else we are an advocate that will assist patients, residents, clients and staff to address any gaps in service delivery.
- Ensuring indigenous clients have a medium to safely to express themselves, understand their diagnosis and their care pathway
- Engage in the language comfortable to the client to improve their feeling of inclusion and to ensure their spiritual needs are addressed.
- Ensuring that Indigenous clients feel heard and supported.

Riverside's Quality Program

- Riverside uses the *Plan Do Study Act (PDSA)* model for most quality improvement activities
- Quality Activities at Riverside
  - Quality Committee and Teams
    - QSR Committee of the Board
    - QSRP Review Team
    - Quality of Care Committee
    - Medical Advisory Committee (MAC)
    - Patient & Family Advisory Committee (PFAC)
    - Ethics Team
    - Pharmacy and Therapeutic Committee (P&T)
    - Infection Prevention and Control Committee (IP&C)
    - Joint Occupational Health and Safety Committees (JOHSC)
    - Accreditation Teams
  - Quality Improvement Plan
  - Accreditation
  - Departmental Quality Improvement Programs
  - Monitoring Indicators
  - Mandatory Reporting



Riverside's Annual Quality Improvement Plan (QIP)

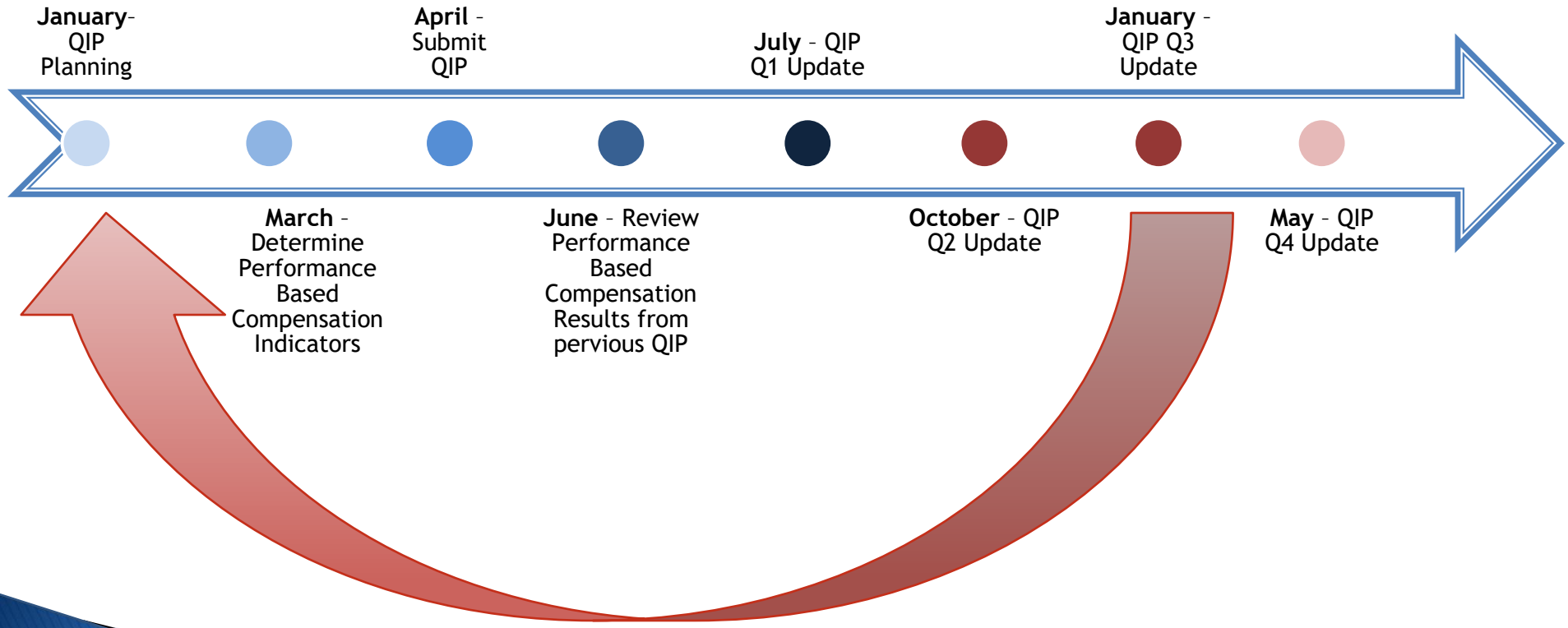
- A QIP is a **public, documented set of quality commitments** that a health care organization makes to its patients, clients, residents, staff, and community on an annual basis to improve quality through focused targets and actions
- The QIP is the blueprint for how your organization will strive to meet or exceed the improvement targets you have set for that year.
- Each year's QIP is designed to build off the one before. We are required to develop and submit the QIP to Health Quality Ontario (HQO) **on or before April 1** of every year.
- The ECFAA require hospitals to directly involve patients in the development of the annual QIP and to improve patient relations processes and Riverside strives to engage patients, residents, clients, families and staff in all of our quality improvement activities
- ECFAA (Excellent Care for All Act) requires the compensation of CEOs and other executives to be linked to the achievement of performance improvement targets laid out in the QIP of every hospital in Ontario

Riverside's Annual Quality Improvement Plan (QIP)

- The QIP program in Ontario represents one of the largest jurisdiction-wide quality improvement efforts in the world

- The goals of the QIP program are to:
  - Promote quality as a strategic focus;
  - Foster a culture of quality within organization and providers of care; and
  - Set and advance both local and provincial priorities for quality improvement through an alignment with the Quality Matters framework

Annual QIP Timeline



Riverside's Annual Quality Improvement Plan (QIP) 2025-26

Riverside Health Care 2025/26QIP

Theme	Measure/Indicator		2024/25 performance (Q3)	Suggested 2025/26 Target	Q1 Apr-Jun	Q2 Jul-Sep	Q3 Oct-Dec	Q4 Jan-Mar
Experience	Employee retention (excluding retirements)	⌘	96.0%	97.0%				
Experience	Position Stabilization (1.0 - (# filled positions/ # total FT & PT positions)) x100		80.00%	82.0%				
Experience	Workforce stability - agency staffing utilization (% = agency costs(wages, fees and housing)/ total expenditures)		13.90%	20.0%				
Experience	Quality of work life - #days refused vacation requests (% = vacation days refused within year)		n/a	collecting baseline				
Experience	Performance Conversations	⌘	n/a	100.0%				
Equity	Mandatory Education Compliance		n/a	100.0%				
Equity	Appropriate referral to Mental Health follow up for those meeting criteria through the Emergency Department	⌘	41.0%	70.0%				
Experience	Experience Survey-Short Survey Reponse Rate	⌘	collecting baseline	500/year				
Experience	Emergency Department Wait Time for Registration to Physician/NP Initial Assessment		n/a	collecting baseline				
Safety	# completion of medication reconciliation upon discharge			100%				
Experience	# riders to utilize specialist and diagnostic transportation		n/a	collecting baseline				
Experience	OT hours Rainy Crest (Staff and Agency)		n/a	collecting baseline				
Experience	Rainy Crest Activation Program	⌘	n/a	Milestone 1				
Experience	Emergency Department Wait Time for Registration to Triage/Assessment (Time in ER until disposition decision)			collecting baseline				
Safety	Review of Residents in Daily Physical Restraints in Rainy River ELDCAP		39.90%	20%				
Safety	Number of workplace violence incidents reported by workers (physical violence or threat of physical violence) within a 12 month period Hospital/Community sites		# wpv in 24-25	10-20% increase in reporting				
Safety	Number of workplace violence incidents reported by workers (physical violence or threat of physical violence) within a 12 month period. LTC/ELDCAP Sites	⌘	# wpv in 24-25	10-20% increase in reporting				

⌘ =performance based compensation

Update 202

Accreditation

- Accreditation Canada is an independent, not-for-profit, 100% Canadian organization and use Health Standards Organization (HSO) standards, which are developed by expert patients, providers and policymakers. Our clients are diverse health care and social services organizations, including hospitals, nursing homes, long-term care facilities, clinics, and community health programs. We have been helping our clients improve health care quality and safety for over 60 years

- Qmentum Global for Canadian Accreditation HSO and Accreditation Canada are committed to continued innovation of programs that are adapted to and better meet the needs of organizations and improve outcomes. As a result, Qmentum Global for Canadian Accreditation is introduced as the next iteration of Qmentum for Canadian Accreditation.

- Qmentum Global for Canadian Accreditation empowers and enables your organization to continuously improve the quality of care. Founded on core design principles, the program provides your organization with the relevant assessment methods, assessment criteria, and resources to enhance accountability and drive measurable improvements against evidence informed standards.

Accreditation

Figure 1. *Qmentum Global for Canadian Accreditation*

Accreditation

- Self-Assessment-The self assessment is conducted by your organization to assess its conformity against the assessment manual. The self-assessment can be customized by your organization to assess its conformity against all or select assessment criteria and can be organized by program or unit, to promote continuous learning and improvement

- Survey Instruments-A survey instrument is a questionnaire designed to obtain responses from members of an organization to generate measurable data for reporting, analysis, and action planning purposes. The program includes two instruments: the HSO Global Workforce Survey and the HSO Governing Body Assessment.

- Attestation- is an assessment method where your organization completes self-directed assessments and attests to their conformity with attestable criteria in the assessment manual, including all required organizational practices. The assessment criteria assessed through attestation apply to policies, procedures or plans, and the delivery of services.

- On-site Assessment The on-site assessment is conducted in person on-site by third-party surveyors to assess your organization's conformity against the on-site assessment criteria in the assessment manual. On-site assessments are conducted by third-party surveyors who are trained by Accreditation Canada. Third-party surveyors demonstrate the skills, knowledge, and behaviors to assess your organization and to contribute to its learning and improvement journey. Third-party surveyors may include people with lived experience, providers, and leaders.

Riversides Quality Program

Quality & Accreditation Questions?