

# Congratulations to the North Bay Regional Health Centre

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# Message from the President and CEO

Welcome to the new North Bay Regional Health Centre. After years of planning, our dream has become a reality and we will officially occupy the building for patient care on January 30, 2011.

We are proud to present this special edition of the Northern Ontario Medical Journal and highlight some of the features of our new health centre. Special thanks are extended to the many advertisers in this issue who made this edition possible.

Along with general information about the health centre's features, you will read about a larger Emergency Department, the addition of our community's first MRI to our Diagnostic Imaging Department, the attention paid to creating a healing environment and many other items.

This is the first time in Canada that an acute care community hospital and a specialized mental health centre will colocate on the same site. This co-location provides an opportunity to treat physical and mental illnesses at one site. It allows professionals to work together to determine the best approach to meet individual health needs and it gives us all an opportunity to remove the stigma surrounding mental illness.

After several years of working together, the North Bay General Hospital and the Northeast Mental Health Centre have embarked on a new journey and are now working towards full amalgamation of the two hospitals by April 1, 2011. We have included a story about this initiative.

I invite you to read this special edition and familiarize yourself with our new health centre

I would like to take this opportunity to thank staff of both hospitals for their dedication, enthusiasm and excellent work to ensure this new health centre is the best it could be. I would especially like to thank the members of both hospital boards who have given countless hours of their time. Your tireless support has allowed this dream to become a reality.

Mark Hurst President and CEO North Bay General Hospital and Northeast Mental Health Centre





Ed Eng Photography

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Overview of the North Bay Regional Health Centre Purpose-built facility designed for healing and recovery

### Emergency Department triple the size of old ER

Extra space and doubling of stretchers to help with patient flow

### Birthing Unit accommodates family caregivers

Moms to remain in same room from labour to post-partum care

### Long-awaited MRI approved by province

New imaging capability to reduce wait times, out-of-town travel

### Mental health facility eases transition to community

Town Square a space to work and socialize in non-clinical environment

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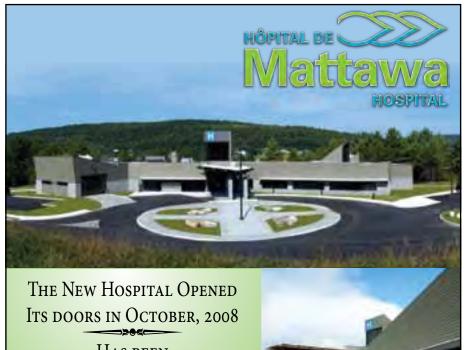


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# NBRHC is purpose built with unique features

### **By NBRHC Transition Planning Team**

North Bay is proud and fortunate to be opening its brand new health centre. The North Bay Regional Health Centre is a unique facility that offers both district acute care services and regional mental health care services in the same location; the first of its kind in Canada.

The new health centre has been built on an 80-acre greenfield site that was purchased for \$1 from Nipissing University and Canadore College. This large site has allowed us to keep the scale of the building appropriate to the community and to the natural surroundings, allowing us to build out and not up. Best practice literature shows that towering hospital buildings can have an intimidating effect on patients and staff.

### **750,000** square feet

The new health centre is a 750,000 square foot building with two levels in the Regional Mental Health Centre area (west end) and three levels in the District Hospital (east end). The fourth level on the east end of the building houses most of the mechanical and electrical equipment that serves the entire facility. The distance around the 'ring road', the road that encircles the entire facility, is approximately 1.6 kilometres (1 mile).

Our new building not only looks fantastic from the outside, it also brings the outside in, giving it a warm and healing feeling. Throughout the facility you will notice the use of natural accents such as wood, stone and plenty of natural light. The building is extremely patient focused with large windows in all the patient rooms and a higher proportion of private and semi-private rooms, many with washrooms that include a shower.

The District Hospital is identified with the four patient pods at the front of the building. With the use of the first four letters of the alphabet, natural colours and symbols from the four seasons we experience here in the north, a wayfinding system was designed. For example, a green tulip symbol against the backdrop of the colour green is the wayfinding cue for the A pod in the District Hospital, reflecting spring. As one moves along 'Main Street,' the colour, letter and symbol changes, signalling a new pod. B is yellow with a sun symbol, C is orange with a leaf symbol and D is blue with a snowflake symbol. These cues help with easy identification from one pod to the next.

In the Regional Mental Health Centre, patient care areas are referred to as lodges and are identified using images of nature, for example Maple Lodge, Heron Lodge, etc. This use of nature is intended to reflect the fact that our hospital is located in Northern Ontario and not in an urban centre.

### Healing circle

Many aspects of the building design are based on the symbol of the healing circle, reflecting the First Nation heritage prevalent in our community. Circular elements can be found in the flooring at many intersections along the main corridors of the building, but are most prevalent in the cafeteria and the multi-faith spiritual centre located at the core of the facility.

Next to the cafeteria is a 138-seat auditorium that includes a seating area for wheelchairs. This auditorium will allow for large group activities that were not previously accommodated in the older facilities.

When one walks down 'Main Street' in either the Regional Mental Health Centre or the District Hospital, a natural curve is built into the space (similar to that of the escarpment), minimizing the feeling of long daunting hallways. 'Main Street' in the District Hospital is built especially wide on the second level to allow for amenities such as a Tim Horton's coffee shop and the Volunteer Association's Gift Shop with seating areas along the way. In the Regional Mental Health Centre, Main Street guides you to a wonderful downtown-type of atmosphere being referred to as the 'Town Square' with an old-fashioned clock in the middle surrounded by benches. This area includes a gymnasium, hair salon, corner store, bank, patient-run businesses and a beautiful wooden horticultural centre that will provide therapeutic healing and recovery opportunities for the patients.



One of three patient courtyards at the District Hospital: a quiet place to relax.

The grounds surrounding the health centre have much to offer, including outside courtyards and seating adjacent to the cafeteria, a soccer field, a mini putt, ample parking for patients, staff and visitors and future access to Canadore College's walking trails.

We have waited many years to realize the dream of a new health centre and we are proud and honoured to showcase this beautiful facility to patients, volunteers, physicians, staff and visitors now and for years to come.

# **New Emergency Department a major improvement**



### Triple the size of former department and twice the number of stretchers

### By Lindsay Smylie Smith

Public Relations Officer

One of the first things patients will likely notice about the new Emergency Department is how much larger it is than the former facility at the Scollard site.

"Our new space is three times the size, measuring 30,000 square feet," explains Emergency Department Manager, Ann Loyst. "We are also doubling our beds, from 18 to 36.'

The only thing not increasing is the amount of staff. "Although the space has tripled, the staffing complement will not," Loyst explains. "We have been working in a space much too small for our patient volume."

The extra space and more beds will help with patient flow and moving patients through the department, but staff caution not to expect miracles. "There will still be wait times at our new Emergency Department," Loyst says. "That's the reality of health care."

### January 30

The new Emergency Department will begin services at the NBRHC on Sunday, January 30, at 6:00 a.m. The old ER at the Scollard site will close to new patients at 6 a.m. although registered patients waiting to be seen at the Scollard site will continue to be seen until the old ER has been cleared.

The waiting room is noticeably larger and has been designed to accommodate 70 people—a large increase over the current waiting room designed for 45.

The department has been divided into rooms based on patient needs, with most areas having a sight line from the Communication/Unit Leader desk. These include: Acute Care; Trauma; Clinical Decision Unit: Exam Area: Cast Room; Minor Procedure; Isolation; Gynecology, Crisis Intervention and Sexual Assault Treatment Rooms.

There are two full isolation rooms with anteroom, main area and bathroom, in addition to a decontamination isolation room. Twelve exam rooms double the current number and an acute care room with four stretchers and

three full trauma/resuscitation areas complement the department.

The inclusion of a Clinical Decision Unit will help keep patients out of the hallway.

Barry Aulbrook, RN and ER Transition Lead, says the old ER had five stretchers in the hallway because of lack of space. "The new Clinical Decision Unit will be used for patients who are not critically ill, but still require a stretcher or monitoring." The Clinical Decision Unit has 10 stretcher bays and three enclosed cubicles

### Efficiency

The physical location of the new ER will also help make patient care more efficient. The Diagnostic Imaging department is right next to the ER and there is a dedicated trauma elevator that goes directly to the Operating Rooms and the Critical Care Unit.

Adjacent to the Emergency Department is a large heated Ambulance Bay with room for four ambulances - an increase from the current space, which holds two. In an emergency, it can accommodate an entire bus and act as a triage bay. This area also contains a decontamination room. In the event patients or staff have been contaminated with chemical or radiation exposure, this room would be used before entering the hospital.

Nancy Iacko, Vice-President, Medicine Care Centre, says that when the Emergency Department at NBGH was built in the 1960s, it was designed to accommodate an annual volume of approximately 18,000 patients. "Over the past 50 years, a greater demand for acute care services coupled with a dramatic rise in patient volume has meant that the once sufficient department now treats a patient population almost three times the size of its original holding capacity."

### **Annual visits**

At present, Emergency Room visits average 48,000 per year. This number is expected to increase to 51.000 per year with the opening of the NBRHC, and the facility has been built to accommodate up to 57.000 annual visits.

"We were strapped by our



Although the space has tripled,

the staffing complement will

not. We have been working in

a space much to small for our

- Ann Loyst, Emergency

**Department Manager** 

patient volume."

Emergency Room physicians get oriented to the new Emergency Department.

physical plant," says Loyst. "We renovated as much as we could, but it was still nowhere near enough." As a result, any space in the department big enough to squeeze in a stretcher had one.

Fortunately, the NBGH emergency department is staffed by some of the most specialized and skilled professionals in the region, who have managed to deliver top quality care despite the challenging conditions faced in the former location.

In 2008, the ER staff managed one of the largest e-coli outbreaks in Canada. The ER staff and physicians were cred-

ited with playing a kev role in the identification the outbreak and helped prevent many others from getting sick.

Spatial constraints were also a barrier for ER staff when delivering complex emergency procedures. The cardiac room

(which cares for patients with chest pain, shortness of breath, asthma or a heart attack) had four stretchers crowded very close together. Patients being treated in this room require a great deal of medical equipment and staff. Staff had to be very careful not to knock over equipment, or each other.

These space constraints are alleviated in the new facility and new technology like

articulating arms keeps equipment off the floor and out of the way.

also moved forward with strategies to help improve wait times and patient care.

a unit within the hospital.

Also well underway is a discharge lounge staffed by a Registered Practical

> Nurse (RPN) that previously the ER to an inpa-

tient bed more quickly, freeing up space in the ER for someone else who requires

The hospital also launched the use of a transfer vehicle in November that assists in returning stretcher patients from the ER or inpatient beds to their homes or long term care homes. This will free up the ambulance crews to respond to emergencies and assist with patient flow through the ER.

While busy working toward the move to the new health centre, staff in the ER have

One of these strategies is the implementation of an admission nurse. The admission nurse processes the patient's admission history, medication profile and paperwork in order to expedite transfer to

> will free up beds cupied by patients who have been discharged but are awaiting an ambulance transfer or a family member to pick them up. This will allow patients in the ER awaiting a bed to move from

emergency attention.



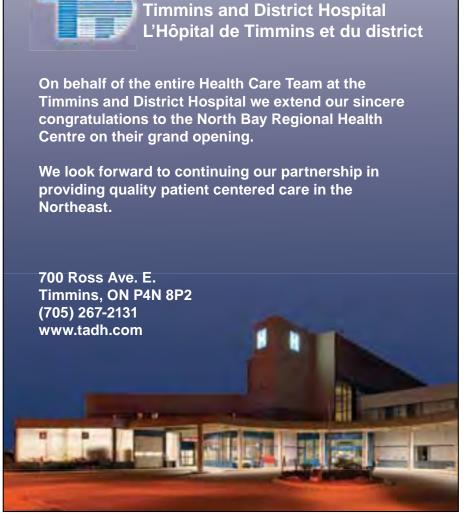


# ONGRATULATIONS

ON THE OPENING OF THE UNIQUE NORTH BAY REGIONAL HEALTH CENTRE AND THE ACHIEVEMENT OF BEING THE FIRST IN CANADA TO INCORPORATE BOTH, A GENERAL HOSPITAL (NBDH) AND AN ADVANCED SPECIALIZED MENTAL HEALTH FACILITY (NORTHEAST MENTAL HEALTH CENTRE) ON THE SAME SITE.

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# Childbirth is a family affair

### **Maternal Child Care Centre gets new name**

### By Lindsay Smylie Smith

Public Relations Officer

"You're not sick when you're having a baby," says Tiziana Silveri, Vice-President of Maternal/Child and Surgery Care Centres at the North Bay General Hospital (NBGH). "It's a healthy experience, and we wanted our area at the new hospital to reflect that."

It was with this in mind that the decision was made to rename the unit from the Maternal Child Care Centre to the Women and Children's Care Centre.

"This new name is more reflective of the patients we serve," explains Joanne Laplante, Program Manager.

The new one-site unit will encompass the Birthing Unit, Neonatal Intensive Care Unit (NICU), Pediatrics and the Maternal Newborn Clinic. This is a very busy department with 930 babies born at the hospital in 2009.

### **Birthing Unit**

Expectant mothers coming into the new Birthing Unit will not only have a beautiful view of the escarpment, but these Labour, Birth, Recovery and Postpartum rooms (LBRP) have been specially designed so mom and her support person can remain in the same room for the duration of her stay.

Laplante says the rooms have been designed with the entire family in mind. "Our new unit will be more accommodating to family caregivers, with rooms large enough for overnight stays by the spouse or significant other."

Since the NBRHC's food services will be decentralized, the system at the Birthing Unit will be more complementary to the haphazard meal schedule of the new mother. Mealtimes will be flexible, and kitchenettes will be provided for afterhours snacks

### High Risk C-Section Operating Room & NICU

One of the biggest changes is the inclusion of a special, dedicated operating room (OR) for cesarean sections right on the unit. This OR connects directly into the Neonatal Intensive Care Unit (NICU). The NICU is also much larger than the former space at the McLaren Site. The new unit features a separate isolation room and plenty of space to allow privacy for parents when spending time with their infants.

### **Paediatrics**

Laplante says the biggest advantage to the new paediatrics department will be to have all the paediatric patients admitted to



While training at the new site, staff show that baby will stay with mom in the LBRP room in a small bassinet.

one unit—rather than spread out between two sites like they were at the Scollard and McLaren sites.

"Our child/adolescent mental health rooms have also been designed with safety in mind," Laplante says.

You're not sick when you're having a baby. It's a healthy experience, and we wanted our area at the new hospital to reflect that"

> - Tiziana Silveri, Vice-President, Maternal/Child and Surgery Care

Laplante adds they are also looking forward to having a family lounge with an area for children to play.

### Maternal Newborn Clinic

The Maternal Newborn Clinic is larger

at the new Care Centre, with a separate waiting room. This clinic serves three purposes—the clinic sees all patients at 28 weeks of their pregnancy to begin their obstetrical history, teaching and initiate linkages with community partners and support services, as the patients' needs indicate. Second, it is where mother and baby are given a follow-up appointment a few days after discharge from the hospital. Postpartum assessment, support and education as well as an infant assessment and tips on feeding are some of the services offered at the appointment. The third purpose of the clinic is pre-operative preparation for patients booked for a caesarean section.

### One-site services

Silveri says having the hospital all together on one site will make a huge difference for patients. "Before, patients had to go back and forth between the McLaren Site and the Scollard site for lab tests, diagnostic imaging, X-rays and other services that were required. It will be wonderful to have all of those services

available in one building."

Other challenges were the lack of patient and parent waiting areas, limited cafeteria services, and the fact that the parent bathroom at the old site was actually on another floor!

"We really struggled with space in our former facilities. Our rooms and storage areas were very small, which made it difficult to work," Laplante says. "Cafeteria services were limited and staff were separated by the two sites so they didn't have a chance to meet a lot of other hospital employees. The move to one site and our new cafeteria will help bring us all together."

The Women and Children's Care Centre is already a highly developed care unit. With such an excellent foundation, the NBRHC will be able to finely tune its services to ensure the protection of family privacy, allow for family bonding and support social interaction between families and caregivers - all in a highly professional, progressive health-care environment.

# Native services help keep traditions alive

### By Renee Baker

Public Relations Officer

At any one time there are close to 150 patients receiving care at the Northeast Mental Health Centre, and approximately 25 per cent are from the Aboriginal culture

Native Services, a service within the HOPE Program, exists to encourage Aboriginal patients to participate in a variety of activities while in hospital, but also to gear the support that is provided to their individual needs. "Not all Aboriginal patients are interested in practicing traditions or participating in activities," explains Lauree Pizzale, Manager, HOPE Team. "Sometimes, it's as simple as the comfort of having an Aboriginal person to talk to or advocate on their behalf."

Pizzale says it's important to offer Aboriginal patients the option to practice their traditions. "And if patients are interested, traditional teachings are available to those who have not had the opportunity to learn them."

The new health centre has been designed with this in mind. There are many gathering places in the new hospital with one geared to our Aboriginal patients—the Pedahbun / Biidaaban Lounge, which can be translated as "dawn." The naming



A medicine wheel, made with grandfather stones—a ceremonial tool used for teachings in Aboriginal ways—is located on the health centre property.

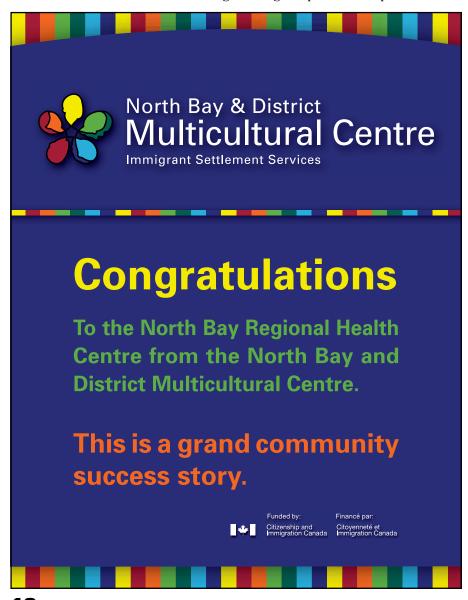
of this lounge provides inspiration to the space where talking circles will take place, elders can provide teachings, and patients can come to play cards and socialize.

In the new health centre, certain rooms have been mechanically designed to allow smudging—a purification ceremony many Aboriginals practice - and plans are under-

way to provide an appropriate space for a sweat lodge. In the summer, patients can perform smudging ceremonies in the Teepee, gather medicines on the property and take nature walks.

Pizzale says Native Services and the HOPE team are looking forward to hosting community events in the new schoolsized gymnasium. "Having a large space to gather for seasonal feasts, round dances, smudges and talking circles will have a positive effect on our patients."

Although many of the activities and programming remain the same, it is the additional space and venues that will enhance service delivery for our patients.







The new Diagnostic Imaging Department has a suite for ultrasound and reading of results.

# Diagnostic imaging improves with addition of MRI

### MRI space has been roughed in to the new centre

### By Kathy Stackelberg

Public Relations Officer

You may look great on the outside. But how do you feel, and how do you look on the inside? The new NBRHC has a range of equipment that can be used to look inside your body to give doctors insight into a medical condition. The technology used will depend on your symptoms and what part of your body is being examined.

Along with the construction of the new health centre comes the long awaited MRI (magnetic resonance imaging) machine that will boost the capabilities of the Diagnostic Imaging (DI) Department, thereby reducing wait times and distances travelled to other communities for this service. X-rays, CT scans, nuclear medicine scans, digital mammography, ultrasounds and MRI scans are all part of the newly developed DI department at NBRHC.

### North Bay gets its first MRI

A recent announcement that the province will support the yearly operating cost for an MRI set the fundraising machine in motion to purchase the equipment (\$3M). The North Bay and District Hospital (NBDH) Foundation has embarked on

its capital fundraising campaign for the MRI and other diagnostic imaging equipment. An MRI uses a giant magnet, radio frequency pulses and a computer to take high resolution pictures of your bones and soft tissues. Unlike CT scans, MRI works without radiation.

"An MRI brings North Bay up to contemporary standards in terms of diagnostic imaging," says Dr. Cam Hunter, Chief Radiologist at NBGH. "It will be a big change for our patients who currently have to travel to other cities to receive an MRI, and often have to wait for months to get an appointment."

The manager of the Diagnostic Imaging Department, John Henry, says this new department is a dream come true. "Forgive me if I seem like I am bragging—credit really goes to our community and our administration for their patient care philosophy in getting the new hospital for North Bay as well as our selection team for the equipment features - but this has been a once in a lifetime opportunity for me to participate in building a top class DI department with leading edge level of care and I just find it extremely exciting," says Henry. "My dream has been to be involved in a project that actually improves our health care

system and this new hospital is going to make a fantastic difference in health care in North Bay."

The DI Department has already implemented the modern and efficient way to store medical information through the use of a Picture Archiving and Communications System (PACS). PACS is used to digitize medical images, which can be stored on a computer and accessed by radiologists from anywhere in the hospital. The images can also be sent to other hospitals for consultation, and can be manipulated by doctors to show different perspectives. PACS is a much more user-friendly form of storing medical information than the old style X-rays that are produced on 'hard copy'.

"We have always had good doctors and caregivers here in North Bay and we have always been supported strongly by our community," says Henry. "Now, we are getting the tools to really support our medical community as they support health care in North Bay."

### Diagnostic Imaging includes:

- General radiology and fluoroscopy
- Mammography and the Ontario Breast Screening Program (OBSP)
- Ultrasound, non-invasive vascular studies, echocardiography and stressed echocardiography

- Bone densitometry
- CAT Scan
- MRI
- Nuclear Medicine, including cardiac studies and nuclear stress testing
- Prostate Biopsy Clinic
- Breast Assessment Clinic

Radiologists also provide reading services for Temiskaming and Mattawa hospitals.



The Honourable Monique Smith, MPP, announced on October 20, 2010 that North Bay will receive funding to operate its first MRI. President and CEO Mark Hurst holds photo of the MRI for which the hospital and community must now raise funds to purchase.

# Town Square is more than a centrepiece



Paul Prior, Peer Support Specialist, taking a moment to admire Town Square.

### A place to work, socialize and play while on the road to recovery

### **By Renee Baker**

Public Relations Officer

"A mental illness is not a life-sentence," says Paul, a Peer Support Specialist at the Northeast Mental Health Centre (NEM-HC). "Just because you are admitted to a mental health facility doesn't always mean you should hit the pause button on life."

Paul, who was diagnosed with a mental illness at 27, knows this first hand. It has been a long journey to understand and manage the symptoms of his mental illness in order to achieve as full a life as possible. He often credits the Healing Opportunities Promoting Empowerment (HOPE) Team for his ability to reassert control over his life. HOPE is a multidisciplinary therapeutic program at the NEMHC.

At the former NEMHC facilities, patients lived and received care in the same location. The ward-like environment created boredom and monotony that often destroyed hope - the pillar to recovery.





# **Building on healthcare in** the north.

Something exciting is happening to healthcare in the northeast. New hospitals are replacing old, employing more advanced technology and modern facilities for patients and staff. But one essential will not change- our shared commitment to improving the lives of patients and meeting the healthcare needs of our communities.

Hôpital régional de Sudbury Regional Hospital congratulates the North Bay Regional Health Centre on its new acute care facility.

Hôpital régional de Sudbury Regional Hospital This environment also worsened the feeling of isolation from society and from the rest of the hospital community.

A priority of the mental health centre is to treat individuals with a severe and persistent mental illness, but also to give them the skills they need to be successful when they are discharged and return to the community.

**E**When most people think of treatment for someone with a severe mental illness, they think of doctors, medications, patients in gowns and a **lonely environment. Not often** do they think of karaoke competitions, baking for others, card tournaments and educational upgrading."

> - Cynthia Lewicki, Occupational Therapist, HOPE Team

At the centre of the new Regional Mental Health Centre is a Town Square. The Town Square is more than just a centerpiece. It is the bridge between the hospital and the community. It is a place to learn and practice skills needed to ease the transition into the community and ensure success upon discharge. This type

of environment and care is in many ways a prescription for renewed meaning and purpose in a patient's life while they heal from the catastrophic effects of a serious and persistent mental illness.

In the Town Square, patients have the option of accessing appointments, as well as vocational, recreational and other services away from their living environment. A typical patient's day might include a haircut at the Lasting Impressions Hair Salon, followed by a Grade 9 English class in the school, an appointment to relieve neck pain at the Physiotherapy Clinic, 'a job' watering the plants in the horticultural greenhouse after lunch, and a movie in the auditorium with a peer later that evening.

Cynthia Lewicki, Occupational Therapist with the HOPE Team, explains the Town Centre is meant to promote a sense of community for every patient. "An important component to recovery is having the ability to self-manage - a skill patients need in the community." The idea is to normalize a person's life as much as possible to ease the transition to the community.

"When most people think of treatment for someone with a severe mental illness, they think of doctors, medications, patients in gowns and a lonely environment," says Lewicki. "Not often do they think of karaoke competitions, baking for others, card tournaments and educational upgrading." This type of recovery-focused care allows patients who are mentally ill to feel a sense of purpose and develop peer relationships.

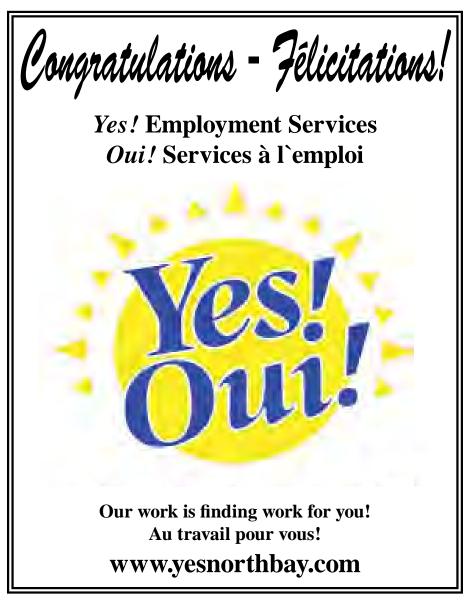
Lewicki describes the new facility as a great place to practice and a great place to recover. There is a great deal of evidence that with the right kind of services, even people affected by severe mental illness can recover and lead fulfilling lives.

Paul is a wonderful example of such a recovery. Today, he works as a Peer Support Specialist at NEMHC and is a strong advocate for the patients we serve. Paul has been instrumental in educating the 2,500 staff in their orientation to the new health centre.

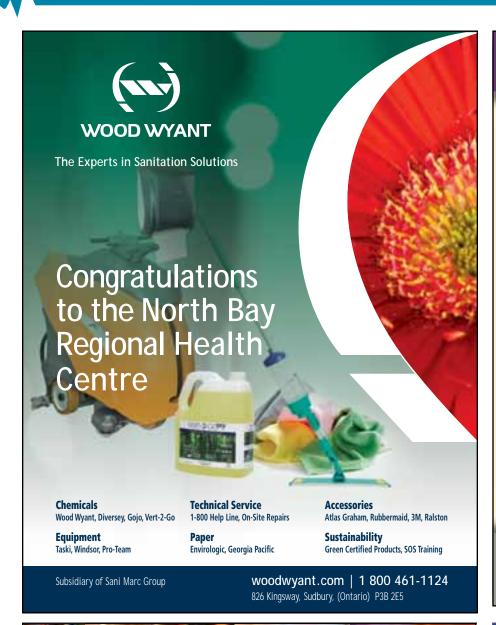
As a former patient and current staff member, he hopes that the Town Square will encourage patients who may not have participated in activities to get involved. "The new space is inviting and gives a sense of inclusion with many opportunities to work together and socialize in a non-clinical environment." ■

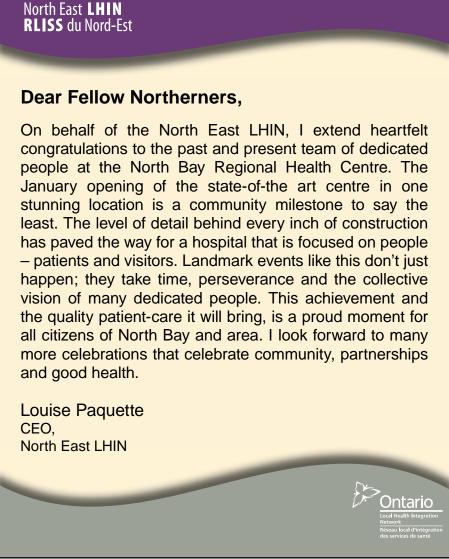


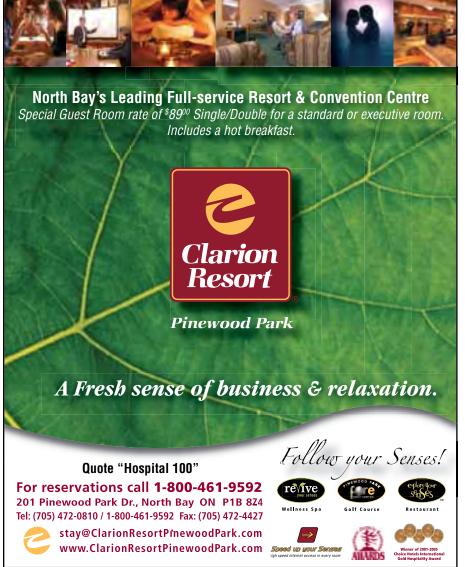
A hair salon is just one of the amenities in the Town Square at the Regional Mental Health Centre.

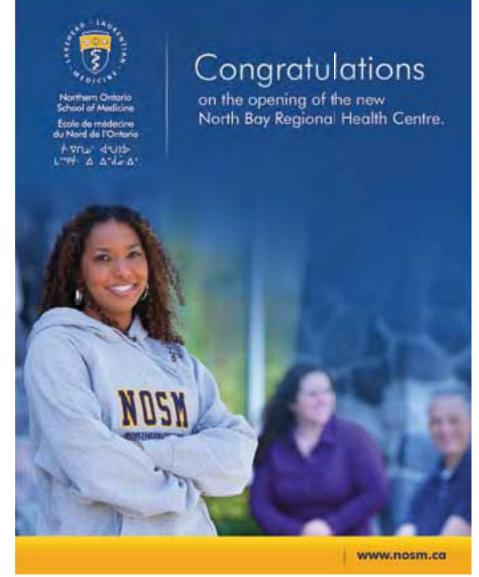












# Working towards amalgamation

# **NBGH and NEMHC to form new organization**

### **By Pat Stephens**

Director, Public Relations

Partners in the new North Bay Regional Health Centre, the North Bay General Hospital and the Northeast Mental Health Centre boards have decided to work towards amalgamating the two organizations and creating a new hospital that will provide both acute care services to North Bay and area, and specialized mental health services to all of northeastern Ontario.

The two hospitals have worked together to create efficiencies in the new health centre by sharing services such as Food and Nutrition Services and Environmental Services. In fact, since 2005, several managers have been working for both hospitals, jointly managing services such as Information Systems, Pharmacy, Clinical Records, Public Relations, Facilities Services and Materiel Management, to name a few.

In the Fall of 2009, it became clear to both hospital boards that full amalgamation of the two organizations would be



An aerial view of the North Bay Regional Health Centre with the District Hospital in the forefront.

the best thing to do and an Amalgamation Steering Committee was struck with the goal of creating a new organization called the North Bay Regional Health Centre with one board, one CEO and one senior team. The goal is to complete amalgamation by April 1, 2011.

"Things are moving ahead quickly," stated Phil Geden, Chair of the NBGH Board and Co-Chair of the Amalgamation Steering Committee. "As part of the plan and to help prepare the organizations for this amalgamation, the boards appointed Mark Hurst as the President and CEO of

both the NBGH and the NEMHC in the Fall of 2010."

Robert (Bob) Cunningham, previously President and CEO of the NEMHC, was appointed Executive Vice President for both NBGH and NEMHC and the Chief Amalgamation Officer (CAO).

"We congratulate both Mark and Bob on their new roles and their continued efforts to ensure our organizations provide the best possible health care to our patients," said Mary Tasz, Chair of the NEMHC Board.

"We are very grateful to Mark and Bob for overseeing the important steps involved in this amalgamation and for their leadership in the creation of a new organization," stated Kathrine Eckler, NEMHC Board member and Co-Chair of the Amalgamation Steering Committee.

Upon approval of the North East Local Health Integration Network and the Ministry of Health and Long Term Care, the boards are aiming for official amalgamation by April 1, 2011.

The mandate of the North Bay Regional Health Centre as an acute care district referral hospital and a regional specialized mental health centre will make it a progressive and unique health facility in Canada.



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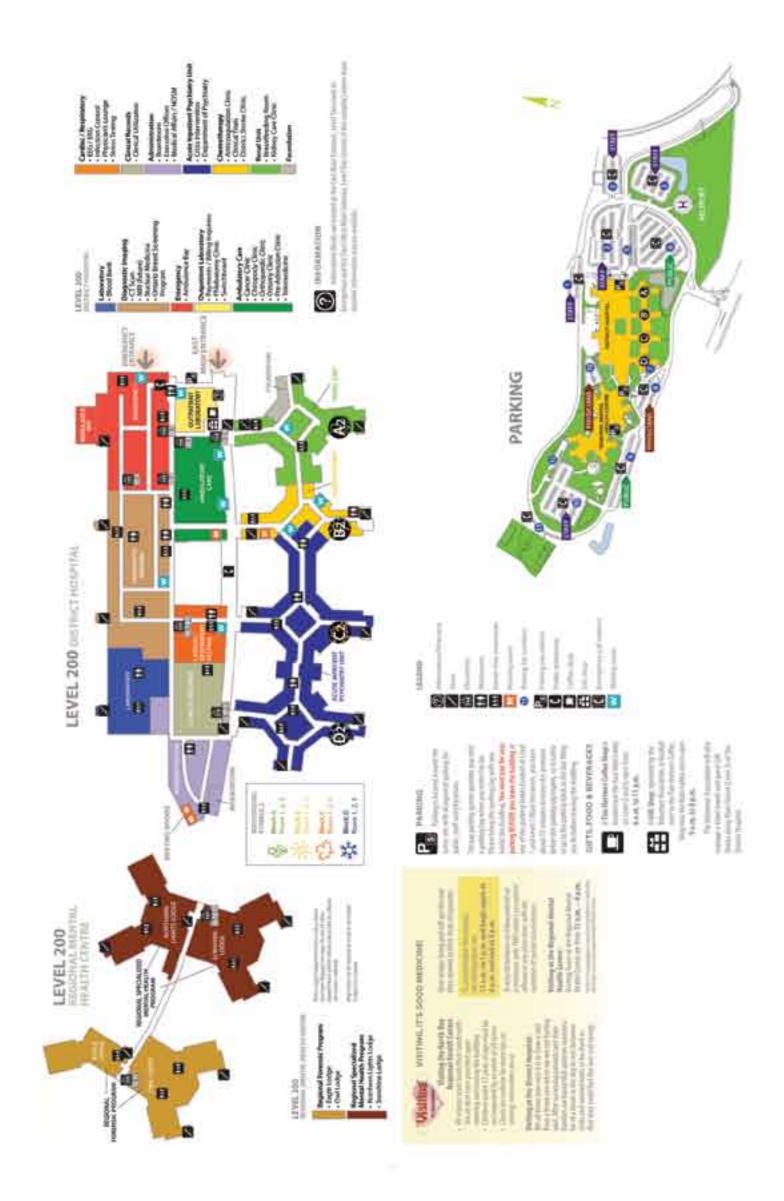
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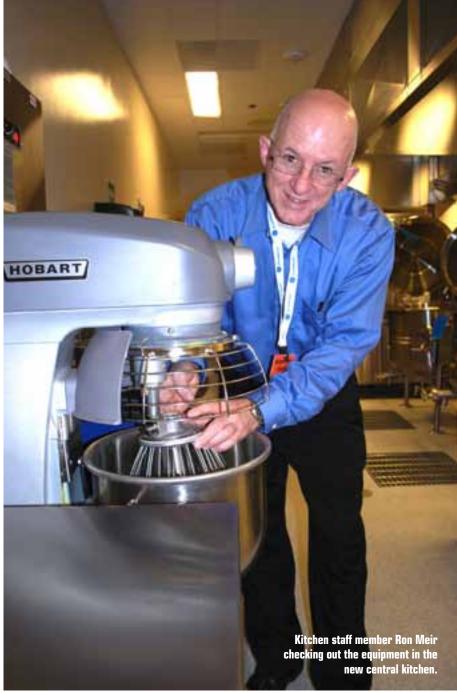
# NORTH BAY REGIONAL HEALTH CENTRE



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# Open for patients January 30th 2011





# Detailed planning goes into patient meals

### **Individualized menus** with more choice results in less waste

### By Kathy Stackelberg

Public Relations Officer

You tumbled down the stairs and broke your leg on the way to work this morning. You end up in the Emergency Department at the new North Bay Regional Health Centre. Once you get past the pain, and are comfortable in bed, you remember that you didn't eat breakfast and now you're starving. You'll be pleased to find out that food service has improved substantially at the NBRHC.

While you are waiting in the ER, you may be offered a boxed meal with a varied menu depending on the time of day. But when you arrive on a surgical or medical unit, the food selection and availability will make vou smile. Your menu choices will be individualized and much of the food you eat will have been prepared at the hospital, often on the unit itself.

"On a surgical unit, you will be visited by a food services worker who will help you select your menu," explains Shirley Strood, Coordinator, Food and Nutrition Services, "You will select the food to eat

posed to know now what you will feel like eating tomorrow or the next day? Allowing the patient to choose the food increases patient satisfaction and decreases waste," points out Strood.

Diets will be geared to specific patient needs. When you are admitted to an inpatient area, information about the food vou eat will be entered into a computerized

Or maybe you are simply a picky eater. The nurse and food service staff members become "nourishment partners" on the units, and you will always be assigned to the same food services person.

"This is helpful because it allows one person to keep tabs on how the patient is doing, what they are eating, and what we might change to meet their needs from one day to the next," explains Strood. "The food services staff member develops a rapport with the patient, gets to know the person and there is some consistency there. Being on the unit allows food services staff to address dietary issues much quicker too."

Much of the patient food will now be prepared in the central kitchen. But that food won't be put on trays and wheeled down long hallways with the hope that it might still be slightly warm when it gets to you. Prepared food is transferred cold or frozen to the patient care units where

**f** am so excited about all the changes and how efficient food services will be in the new health centre!"

- Shirley Strood, Coordinator, Food and Nutrition Services

in a couple of hours, not tomorrow or the next day. This was not an option at the old hospital sites but it's very important for the patient because how are you sup-

file. This is shared between nurses and food services staff, so there is ongoing communication about your dietary needs. Do you have allergies? Are you diabetic? kitchenettes are set up. Food services staff will heat and serve the food on 'locally assembled trays'.

In the mental health lodges, patients will be encouraged to help out with the meals. Various food choices will be offered up in the kitchenette cafeteria style, and patients will be expected to come to the dining area and select what they wish.

"Lunchtime will become a 'social experience' in the lodges," explains Strood. "The atmosphere around the kitchenette is very relaxed." With only 16 patients in each lodge, it's relatively easy to create this type of atmosphere. Similar to the setup in the District hospital, a computerized system with dietary software will keep tabs on special needs of patients. The computer prints out a nourishment sticker to ensure a patient with special needs gets the correct food. Here too, as in the District hospital, a food services worker and a nurse work together on the unit with the patient.

### What's on the menu for patients?

Strood explains that the NBRHC is choosing to go with a "wellness menu" that offers foods lower in sodium, high fibre/low fat, more fruits and vegetables, and bread and buns made with whole wheat and grains. "We'll basically follow the needs for cardiac patients or those with sodium restricted diets, which is the way we should all be eating anyway," says Strood.

In the central kitchen, the food will be prepared in-house, although some will still be outsourced. "For example, we would prepare a Sheppard's pie and a salad and make pudding or bake muffins for dessert, but we wouldn't necessarily bake pans of lasagna, because that's something we can purchase already made, frozen. If we prepared a spaghetti sauce, we would make a huge batch at once, and then freeze it, just like you would do at home."

"I am so excited about all the changes and how efficient food services will be in the new health centre!" exclaims Strood with a grin. "Every time I go over to the new central kitchen I can't believe it, and the food services staff is really looking forward to the move too." For District hospital food services staff this is a huge change as they have been spending the last several years doing the best they can with limited kitchen facilities. A majority of the food came from outside sources and had to be trucked between the two old hospital sites.

"We are so pleased to be able to offer a more efficient, patient-focused food service at the NBRHC," concludes Strood with a smile. So keep in mind, if you break your leg, and you end up in the NBRHC... yes, you'll have to deal with the pain, and nobody enjoys an overnight in a hospital, but at least you won't have to grumble about the food.

# Did you know?

- The new health centre sits on 80 acres of land
- The size of the facility is about 750,000 square feet
- The building will have 100 percent fresh air exchange consistently (does not use recirculated air)
- The building has two large standby diesel generators to provide emergency power in the event of power outage
- There are 3339 doors in the new health centre
- There are 1390 parking spaces (more than currently exist at NBDH and NEMHC combined)
- There are 2 roadway entrances to the facility (main entrance from Hwy 17 and a second entrance off College Drive)
- The distance around the perimeter of the health centre is approximately 2 km
- The address for the new facility is 50 College Drive
- There were 550 construction workers on site at peak construction
- The cafeteria will be set up in a food court style to be shared

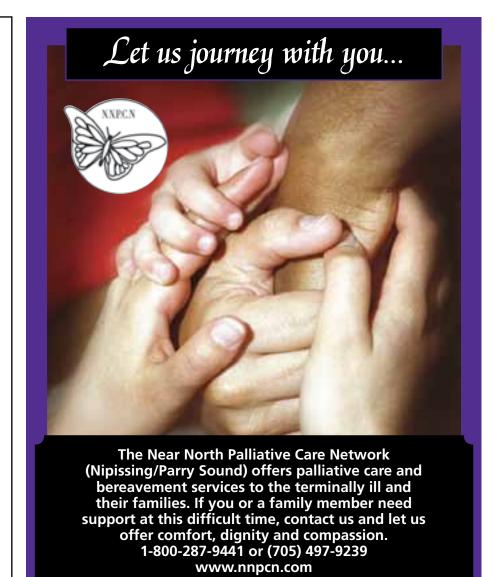
- by staff from both NEMHC and NBGH
- Many aspects of the building design are based on the symbol of the "healing circle" ...most prevalent in the cafeteria and the multifaith spiritual centre which make up the centre of the facility where people gather.
- The auditorium has 135 seats as well as spaces for wheelchairs.
- Curtain wall windows along Main Street (NBGH) let the sun shine in but keep the heat out
- New ambulance bay attached to Emergency holds four vehicles
- The hospital Emergency Department has two "SARS" isolation rooms directly off the ambulance bay and a decontamination room in the event of an outbreak
- The heliport on site (on the far east end of the property) is 36 metres in diameter to accommodate an air ambulance
- While the move is scheduled to occur over a two-week period, the patients will all be moved in two days: NEMHC on January 29, and NBGH on January 30.





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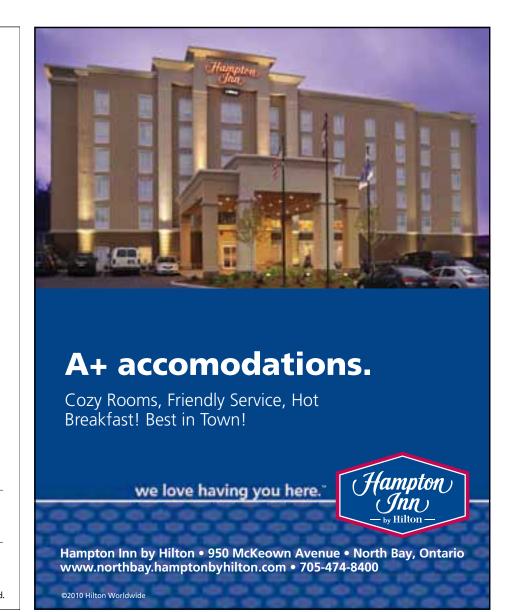
**Nild** 

### **Autohaus Stackelberg**

congratulates the team at the North Bay Regional Health Centre!

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Please don't try this at home. We used the magic of computers to create this image. No irresponsible driving was involved.



# Inspiring Possibilities

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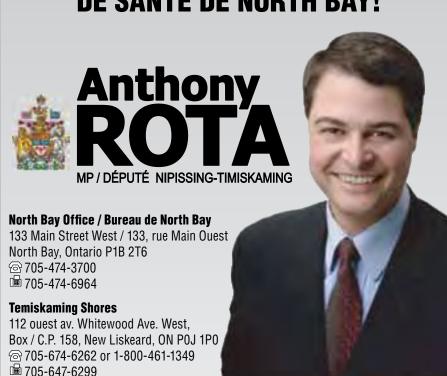
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# New hospital a boost for physician recruitment

### Thirty new physicians recruited in past four years

### **By Lindsay Smylie Smith**

Public Relations Officer

For the last four years, Kristen Honeysett-Vaughan has been working to bring new physicians to North Bay. Since expansion of the Medical Affairs Department in 2006, her team has been successful in recruiting 30 new physicians to our community.

Honeysett-Vaughan says the new hospital is definitely a draw, not only for new physicians, but also for our existing physicians.

She has toured hundreds of physicians, residents and medical students through the facility, and says they are all in awe of the new health centre.

"Physicians want to provide the best care possible for patients, and the new facility will help them to do this," says Honeysett-Vaughan. "The new hospital has a lot more physical space, which is such an attraction compared to our former facilities. The setup of the facility and the new equipment is fantastic."

The new Emergency Department, Operating Rooms and Critical Care Unit will also have a huge impact on the ability of physicians to provide patient care.

"The new ORs have been designed with ample space and windows, providing natural light for physicians and staff. This is a huge improvement over our former ORs,

where there are no windows and we are cramped for space," Honeysett-Vaughan explains.

The Emergency Department at the new hospital is three times the size of the existing site, and the new Critical Care



Kristen Honeysett-Vaughan, physician recruiter

Unit is much more spacious, which will allow the physicians, medical learners and staff to move around comfortably within the department. Most importantly, it allows for privacy for the patients and the physicians.

Honeysett-Vaughan says everyone and all services located together at one site will make things a lot easier for both patients and physicians. "Our current setup has patients and services spread out between two separate hospital sites, located one block apart, making it time consuming for rounds or consultations. It can be very confusing for new medical learners and physicians to figure out which site has which service."

North Bay is unique for physicians. because unlike other cities, the majority of family physicians still maintain hospital privileges, which allows them to take care of their own inpatients in hospital.

"Our hospital does not have a Hospitalist program. Instead, we utilize a City Call Program where family physicians work on a rotational basis with patients who have been admitted but, who do not have a family physician," Honeysett-Vaughan says.

North Bay family physicians have a vital role within the hospital, including working in ER and in the OR as surgical

assistants. This also contributes to our high collegiality between specialists and family physicians.

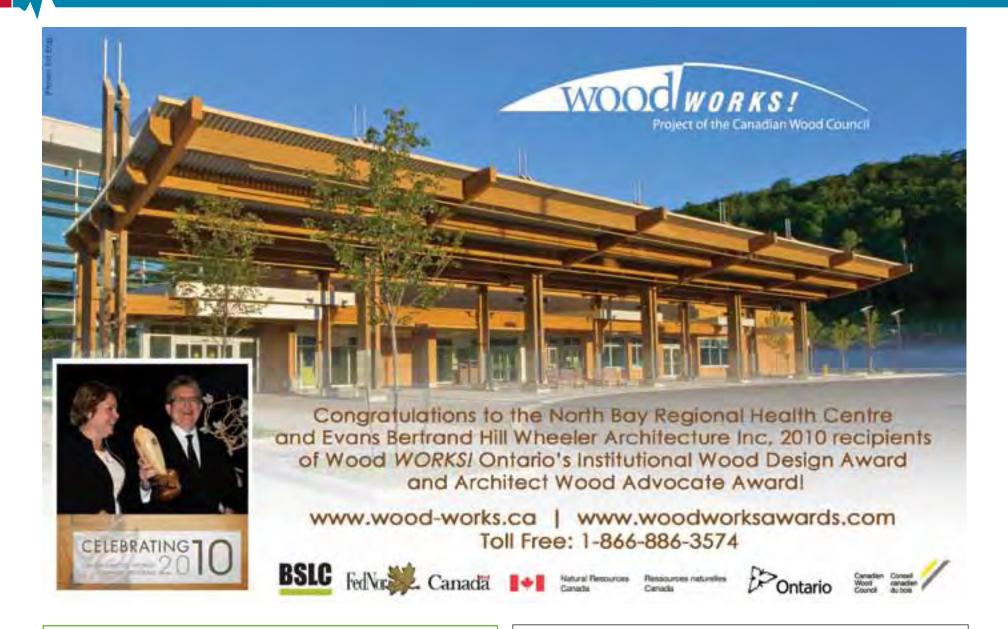
At any one time at NBGH there are numerous learners in various areas of the organization. The Medical Affairs department regularly has medical students and residents from both northern and southern medical schools and residency programs. They have also had international medical learners.

NBGH and NEMHC have formal affiliations with the Northern Ontario School of Medicine and, each year, eight third-year medical students come to our community to live and train here from September to April.

On top of that, North Bay also has four family medicine residency spots where the Medical Residents are based in our community for a period of two years.

"Our physicians have made teaching a part of their practice and we welcome the learners to our community and hospital," Honevsett-Vaughan says.

We work with great physicians, staff and community partners who are supportive of new physicians in their transition to our city.



### Congratulations!

The Board and staff of One Kids Place Children's Treatment Centre are pleased to join in the celebration for the opening of our new North Bay Regional Health Centre. This marks the beginning of a new era in healthcare for the North. We are excited to continue our partnership to further the goal of providing innovative healthcare services to children and families throughout the region.

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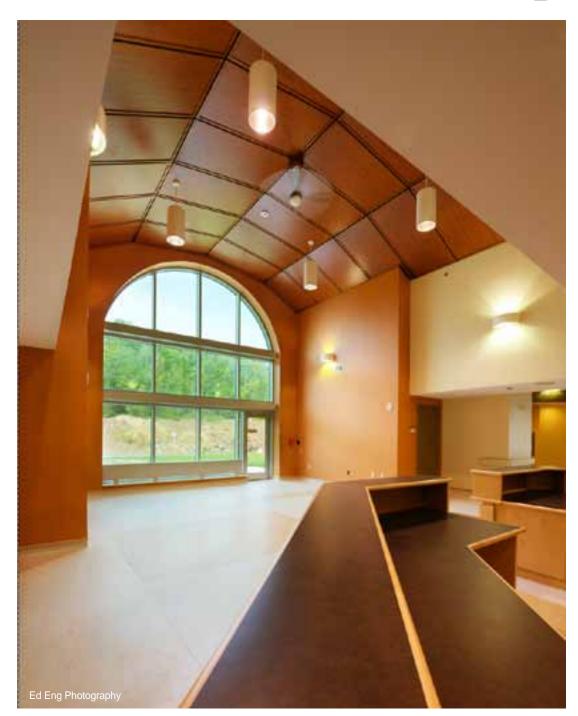
> It is an honour to welcome such a key community partner to the neighbourhood.







# Mental health facilities designed for 21st century



This new mental health centre lodge boasts ample windows to let in natural light and a view of the outdoors.



Regional mental health centre is designed like a small village with 'town centre.'

### State-of-the-art mental health centre has home-like features

### By Renee Baker

Public Relations Officer

Visitors to the new Regional Mental Health area of the North Bay Regional Health Centre may be surprised to find a state-of-the-art mental health facility that resembles a cluster of homes rather than

"The new mental health centre was built and designed to suit our patients' needs," says Dr. Susan Adams, Psychiatrist-in-Chief. "The facility boasts a view of the outdoors from almost every window, a valuable design feature that can reduce stress, fatigue and recovery time for patients and even improve staff satisfaction."

Each lodge in the mental health facility has access to an outdoor courtyard or garden, with views of nature and the escarpment that serves as a positive distraction. The Forensic Mental Health Program even has a specially designed secure courtyard, a place where patients who cannot leave the secure area can still enjoy outdoor activities while in hospital.

### **Privacy**

The most significant enhancement that patients will benefit from is privacy; a drastic change from the previous shared accommodations where 16 patients shared three showers and two ward-like sleeping quarters. Today, all patients have a private room and most have washroom facilities in the privacy of their own bedroom. "Our patients will now have the freedom to take a shower when they wish, hang a poster, write a letter, watch television and retreat to a personal space," says Adams. "This best practice reduces stress, promotes participation in activities and gives them a sense of autonomy.'

Perceptions of the mentally ill have changed drastically over the last century. Asylums, which we now regard as repressive, were actually an improvement over the crowded work-houses and prisons to which the mentally ill were condemned in earlier times. Even before effective treatments were available, there was recognition that treating the mentally ill with compassion and humanity is therapeutic.

Today, there are many effective medical treatments that can relieve or minimize the symptoms of mental illness. The physical environment can play a significant role in assisting patients on their journey to recovery.

The home-like units are called Lodges, where patients are encouraged to directly assist with meal preparation, a new feature for our patients. This new method will assist in making healthy choices, provide teaching on portions and selections based on dietary restrictions, and encourage patients to get comfortable in the kitchen. "These real-life experiences allow patients to practice the skills they need to live at home and in the community," says Adams.

### First for Canada

For the first time in Canada, an acute care hospital is co-located with a specialized mental health facility. Adams states this is a real benefit, as many of our patients have complex constellations of physical and psychiatric issues. "The ability for us as psychiatrists to work closely with our colleagues in other specialties is going to be of benefit to our patients and to all of us as professionals."

Our patients and staff are going from an old, outdated hospital to a state-of-the-art mental health centre. This new facility incorporates models of excellence and best practices of today and the future. With small buildings that look like homes, a "mall" where patients can practice new skills and access recreational and therapeutic services, green and landscaped outdoor spaces, this new environment is sure to be a welcoming neighbourhood for our patients and a magnet for enthusiastic professionals for many years.

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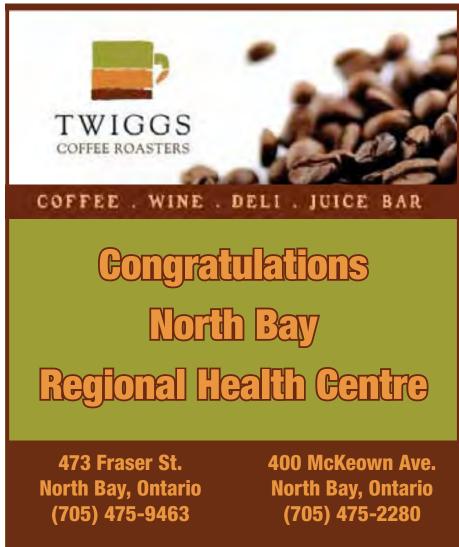
With a growing roster of medical school grads, thousands of nursing and health care professionals, and research projects of global perspective, Laurentian University has been a major contributor to the welfare of our communities for the past 50 years.

We congratulate the North Bay Regional Health Centre as it opens its doors and we salute our many graduates and students who will continue to excel in their vocation.





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Bell congratulates the North Bay Regional Health Centre.

# New health centre attracts staff

### **North Bay woman returns** home, works to bring others back

### By Lindsay Smylie Smith

Public Relations Officer

Lucie Laperrière knows all about home-

Born and raised in North Bay, Laperrière stayed home for her post-secondary studies before moving to Markham for her first job in recruitment.

Laperrière says in Markham she quickly became known as the 'small-town girl' around the office. "I would come back from long weekends or holidays in North Bay with stories of ice fishing and other stereotypical 'Northern Ontario' activities." Although she loved her job and the new friends she had made, Laperrière always knew she wanted to come home.

In 2008, she jumped at the chance to apply for a brand new position in the Human Resources Department at NBGH-recruitment and retention consultant. Her task - to recruit close to 200 staff over the next two years.

Now, Laperrière is helping to bring other former North Bay residents back home.

She says the new health centre gives her a real advantage when she is out meeting with potential recruits.

"The idea that our new health centre will be a one-stop location offering a state-ofthe-art acute care hospital and a modern, recovery-focused mental health facility has been one of our primary methods of attracting candidates to our new hospital," Laperrière explains.

"We will be the very first organization to house the acute physical care and specialized mental health components in one cooperative health care campus," she continues.



Recruitment and Retention Consultant Lucie Laperrière (right) and Recruitment Advisor Ashley Patey display the colourful folders filled with open and recently offered positions sorted by union and status.

### More beds, more staff

The increase in beds at the new NBRHC means more health-care professionals are needed to staff the 35 new beds at the District Hospital.

It's Laperrière and her team who are out there looking for the people to staff the extra beds.

"Up until now, our recruitment efforts have been focused primarily on RNs and RPNs. However, we are also looking for allied health professionals who work in

areas like our Laboratory, Pharmacy and Diagnostic Imaging departments," Laperrière explains.

However, Laperrière is quick to point out that recruitment efforts are not limited to those outside of the organization.

In mid-February 2010, the hospital achieved a major recruitment milestone when the first round of transition postings went up.

"It was incredible to see," Laperrière recalls. "There were rows and rows of coloured sheets listing the job details at the Scollard and McLaren sites and in the Nipissing Building (where HR is located)."

A total of 80 positions, specific to nursing and allied health, were posted internally. Laperrière says the response from the staff exceeded expectations. "It was definitely history in the making as one of the first recruitment steps to staffing our new health centre."

### New hospital helps retention

The excitement surrounding the opening of the new hospital has also had a positive effect on the retention of existing staff and new hires.

"The chance to be a part of history and be the first ones in our state-of-the-art health centre has provided incentive for

our staff to stay with us," she says.

Features of the new hospital aside, Laperrière says the community of North Bay plays a huge role in the recruitment and retention of staff to the hospital.

"North Bay is well known for being a caring, safe community of energetic, highspirited people," she says.

The unique combination of lush forests, spring-fed water and clean air creates a healthy environment for working, living and raising a family.

North Bay is known as the "Gateway to the North" and it is at the crossroads allowing easy access to larger metropolitan areas such as Toronto, Ottawa and Sudbury.

The short distance between home and work allows for more time to enjoy the wealth of parkland and leisure facilities within our community and the nice mix of urban and rural settings of the city is definitely advantageous.

At the end of the day, Laperrière says one of our best methods of recruitment is word-of-mouth.

"Our community members have become our very best recruiters as they are excited about our new facility and want their family and friends to join us in North Bay." ■



Internal job postings covered the job boards during initial recruitment.

# The changing face of volunteering

### **Health centre hopes to** attract volunteers and expand the role they play

### By Kimberly McElroy

Director, Volunteer Engagement

The importance of the health care volunteer in our area has never been greater. Far beyond the visible bricks and mortar of this state-of-the-art facility are the individuals who dedicate themselves to providing support, compassion and leadership through volunteerism.

Increasing fiscal responsibility, shifting demographics and more complex health care needs are changing the face of volunteering in the 21st century. To meet these demands, the Volunteer Engagement Department at the North Bay General Hospital and the Northeast Mental Health Centre has embarked on a recruitment initiative that will see its volunteer base increase by 300 per cent with the opening and co-location of the existing facilities at the end of January, 2011.

"I continue to be inspired by the power of our volunteers," says Mark Hurst, President and CEO of the North Bay and District Hospital and the Northeast Mental Health Centre. "Volunteers do everything from raising funds to ensuring the operations of essential services and enhancing the patient experience. Their investment of time is immeasurable and their contribution helps us reach our goal of providing high quality care."

### Impact on bottom line

While the time given by these committed individuals is not measured in dollars and cents, studies have shown that a volunteer's gift of time can have a significant impact on a hospital's bottom-line. National data released in the 2007 Canada Survey of Giving, Volunteering, and Participating showed that just under half of Canadians volunteer and that this equates to 2.1 billion hours or 1.1 million full-time jobs.

Baby boomers - those people born between 1946 and 1964 - are volunteering more and changing the face of volunteerism. These individuals are motivated by challenges and they aspire to leave a social legacy. Currently, there are over 15 million Canadians between the ages of 40 and 60 who are well poised to contribute to their communities. All generations are valued volunteers, but this untapped resource of connected influencers and collaborators will be instrumental in helping the North

Bay Regional Health Centre achieve its mission of providing safe, integrated, high quality, client focused care in northeastern Ontario.

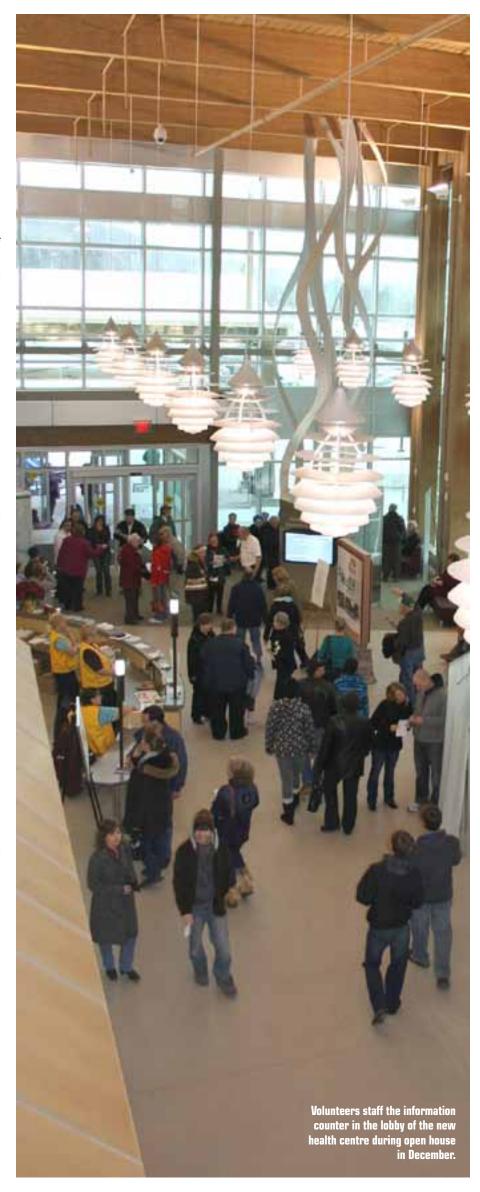
To align with the changing needs of the organization and demographics of our community, the North Bay and District Hospital and the Northeast Mental Health Centre are shifting from a task-based to a skill-based approach to volunteering. This innovative model aims to recruit retired or working professionals, and college and university students, and partner with local service clubs and corporations. The volunteer as program manager, consultant, mentor, entrepreneur, educator or innovator will challenge traditional volunteer models and engage the community in being active participants in enhancing regional health care. To adapt to this shift, volunteer position descriptions are designed to accommodate organizational needs, but also to provide enriching opportunities for contributing to patient care, developing careers, or strengthening skills.

### Recruiting

The Volunteer Engagement Team is still recruiting for a variety of initiatives, including its new Hospital Ambassador and Emergency Waiting Room Programs and for some of its more established programs in areas such as patient visiting or outpatient clinics. Consistent with the skill-based approach to volunteering and the organization's philosophy of VOLUN-TEER: your day, your time, your choice, these opportunities offer volunteers flexibility in giving their time and caters to their dynamic skills and experience.

Fostering and growing the existing base of committed volunteers at the North Bay General Hospital and the Northeast Mental Health Centre will be an integral part of building a centre of volunteer excellence. Whether it's the volunteer welcoming patients and families, the volunteer supporting health care professionals in the organization or the volunteer who is improving the patient experience, all will be vital members of the team that will be the face of the new North Bay Regional Health Centre.

The North Bay and District Hospital and the Northeast Mental Health Centre are still recruiting for volunteers for the opening of the new North Bay Regional Health Centre at the end of January. If you are interested in becoming a volunteer, please contact the Volunteer Engagement Team at: 705-474-8600 ext. 4139 or volengdept@ nbgh.on.ca ■





# Art helps provide a healing environment

### By Kathy Stackelberg

Public Relations Officer

International, national and local artists will have the opportunity to bring their works to the new North Bay Regional Health Centre through a unique program, ArtsHealth North Residency. Visiting artists will work on everything from paintings and drawings to video and photography, and will interact with the health centre patients and staff in many different ways.

"This is truly a unique opportunity for the partner hospitals to work with the members of the community and enhance our new environment with the healing aspects of art," states Pat Stephens, Manager, Public Relations.

Dermot Wilson, curator, WKP Kennedy Gallery in North Bay, was instrumental in submitting the successful application to the Ontario Arts Council for the ArtsHealth North Residency program. "The importance of art in healing has been documented throughout the world. With our community on the verge of opening this new health centre, the opportunity was golden and we are pleased the two hospitals were willing to work with us on the development of this and other art related experiences we plan to develop for the new health centre." explains Wilson.

Local artist Arlie Hoffman is the first artist-in-residence at NBRHC. A realist painter from North Bay, Hoffman has shown his work across the province and

has curated several shows in the region. Hoffman worked with hospital staff to prepare the new studio. He is also working on documenting his experiences and helping to create a policies and procedures manual for future resident artists.

The NBRHC Art Committee is building a Permanent Art Collection from many of the existing works from the two organizations. The committee is made up of members of the local art community and staff interested in art as a healing element in health care. It is tasked with renova-

This is truly a unique opportunity for the partner hospitals to work with the members of the community and enhance our new environment with the healing aspects of art."

> - Pat Stephens, Manager, **Public Relations**

tion, re-framing and installation of works throughout the new facility. Through a grant from the Northern Ontario Heritage Fund, an Art Studio Technician has been hired for one year to assist the Art Committee and the Artist-in-Residence.

To continue to build a permanent art col-

lection, the committee has set criteria for the acceptance of donations of art, which can be done through the hospital's Foundation. The Art Committee is planning to host a special fundraising 'Art Open House' in the late spring, 2011.

### **Cartoonist Lynn Johnston**

Another unique art related feature of the new NBRHC will be the works of Lynn Johnston, world renowned cartoonist who makes her home in Corbeil, near North Bay. Johnston has developed scenes of the characters from the For Better or For Worse cartoon strips for the Paediatric Unit and the children's area of the Emergency Department. When you enter the Paediatric Unit, you will see Farley the Dog running along the wall, leaving footprints that direct you to the family lounge.

"It's such a compliment to be asked to take part. I'm retired now and I was looking for a project!" said Johnston, when she was first approached about the project. She emphasized she would not be charging a fee for her work. "Cartoons I can do in my sleep!" she chuckled. "This is so exciting it's beyond words!'

The Manager of the Women and Children's Care Centre, Joanne Laplante, was beside herself when she heard the good news that characters from the Patterson Family had been selected to adorn the walls of her unit. "What is so special about having the For Better or For Worse characters in our hospital is that Lynn Johnston is from our own community. Her generosity of allowing us to use the characters throughout Paediatrics and the Emergency Department will achieve our goal of providing a warm, friendly surrounding for children when they come to the hospital for care."

The Famous Patterson Family will also go beyond the ER and Paediatric wall coverings to include a life-sized sculpture that is being set up in the health centre's east end main corridor known as Main Street. Johnston sculpted the family many years ago to sit in a downtown park, but the sculpture was vandalized. The sculpture is on loan to the centre from the North Bay Downtown Improvment Area (DIA). "It is so nice to see the family back on 'Main Street' again!" says Johnston. ■



**Art Committee members Nancy Davies and** June Stewart inventory current art at both the NBGH and the NEMHC with assistance of **Public Relations intern Laura Hokstad.** 



With the new Sault Area Hospital set to open on March 6, 2011, we congratulate our colleagues at the North Bay Regional Health Centre on your grand opening!

**Best wishes from** everyone at Sault Area Hospital.



Address of new SAH as of March 6, 2011:

750 Great Northern Road Sault Ste. Marie. ON P6A 5K7



# Building a better community starts with the right foundation.

Creating a vital, healthy community is a group effort. And at the heart of it, you'll find local organizations, fuelled by committed people who are passionate about building a better future for us all. That's why RBC® celebrates community-based organizations through the contribution of our resources, time and talents. Together we can build the right foundation for our community.

We are proud to support the people of North Bay and surrounding communities as the North Bay Regional Health Centre opens its doors. CONGRATULATIONS!

To find out more, go to www.rbc.com/responsibility.

Advice you can bank on™



Ambulatory Care is now located in one central location on Level 2 close to the main entrance of the District Hospital.

# **New Ambulatory Care Centre more convenient**

### One stop care

### **By Pat Stephens**

Director, Public Relations

Thanks to new surgical techniques, an increasing number of procedures can be completed as day surgery, so patients can recuperate in the privacy and comfort of their own homes. We call these patients ambulatory, because they do not require overnight care and can walk out of the hospital shortly after their surgical procedure.

Fifty years ago, when the Scollard site of the North Bay General Hospital (NBGH) was built, medical practice was very different. Patients stayed in hospital for much longer periods of time after surgery. Now, many operative procedures have become day clinics as part of the NBGH Ambulatory Care Clinic.

Clinics include services such as vasectomy, ophthalmology, endoscopy, chemotherapy and pain management. "Hospital care is very expensive and we should only be using inpatient beds for those who actually need it," says Tiziana Silveri, Vice-President of the Women and Children and the Surgery Care centres. "There has been so much progress in day surgery that we don't always need to keep people overnight anymore. And it actually makes for better patient care - we've had very positive feedback from our ambulatory care patients who feel that the quick surgery and home recovery makes for an easier overall surgical experience," she savs.

The former Ambulatory Care clinics were spread out between two sites and several floors. They were located on the main, second and fifth floor at McLaren and the fifth floor at Scollard. The new North Bay Regional Health Centre (NBRHC) consolidates all of the outpatient services into one central location on the main floor (Level 2), which will enable the centre to save on supplies and allow easier staff and patient flow from clinic to clinic, with significantly less travelling. tre has 16 dialysis stations, a significant increase from the 10 stations previously available. This expansion of services is desperately needed as a result of our aging population, earlier diagnosis of renal failure, the addition of a nephrologist and establishment of a predialysis clinic. In fact, demand for renal treatment has

increased by 47.7 per cent since 1996. These numbers can only be expected to rise, as health professionals in our community forecast an additional 15 per cent annual growth in renal procedures. Convenient access to dialysis services is

We've had very positive feedback from our ambulatory care patients who feel that the quick surgery and home recovery makes for an easier overall surgical experience."

- Tiziana Silveri, Vice-President, Women and Children and Surgery Care

The new Ambulatory Care Centre also provides more and better space to keep pace with the growth in day surgery and other outpatient procedures. In addition, the new facility has been designed for future growth, since the region's aging population will cause a dramatic rise in cancer-related clinics, pain management and renal dialysis.

Renal dialysis services are increasingly in demand at NBGH. The new health cenan important feature of the new facility. At the old sites, patients had to take an elevator to reach the clinic, whereas in the new facility, the services will be located on the main floor. Consolidation of all dialysis services in one area will make procedures more efficient for patients and staff, with significantly less travelling. "Renal dialysis services in the new health centre will be a one-stop service for our patients," says Nancy Jacko, Vice-President of Medicine Care. "Our patients can go from the waiting room, to predialysis to dialysis in sequence," she says.

The larger ambulatory care environment enables the dialysis program to provide more overall comfort to patients. The average renal patient spends about 16 hours per week in dialysis. The new space also optimizes the use of natural light, and will have more televisions and ability to view the outdoors.

### **Fast Facts:**

- NBRHC Ambulatory Care Services will promote health, prevent illness and reduce lengths of hospital stay
- Ambulatory Care clinics include: pain management, oncology, ophthalmology, orthopedics, ostomy, preadmission, surgery, urology, wound care, endoscopy, urodynamics and the new women's health clinic
- Chemotherapy treatments and renal dialysis treatments will continue to be provided and organized in a medical day care unit also located on Level 2 just inside the main entrance to the District Hospital.
- Ambulatory Care services will support and facilitate community education programs for topics such as incontinence and will provide nutrition counseling on a scheduled basis.

# Jennifer Graveline - one patient's story

"We are thankful to so many who cared for Jennifer and to you the donor who help the hospital provide more advanced levels of care."

Hello my name is Jacques Graveline and this is my wife Jennifer. She is very important to me.

On a particular day some time ago, Jennifer felt tired and complained about a sore upper back and pain in her left arm. I suggested she walk around to loosen up her muscles which she did, but a few minutes later she collapsed. I ran to help her. She was turning blue and could not breathe. Jennifer was in cardiac arrest.

We live around the corner from the Fire Department and they were first on the scene, arriving in only minutes. The firemen started CPR and defibrillated Jennifer's heart. The firemen revived Jennifer, restarting her heart and restoring her breathing.

### They saved her life.

The ambulance arrived and prepared her for transport to the hospital. On the way, Jennifer had to be defibrillated again—this time by the paramedics.

Again, Jennifer's life was saved.

In the emergency room, she received leading-edge treatment where her body was deep-cooled to protect her brain and vital organs.

Once Jennifer was stabilized, she was transferred to CCU for constant monitoring. The CCU doctor did not think she would make it, so I called all of the family to her bedside.

The family went in one at a time and our son-in-law Jerry took her hand and said "Jen, if you can hear me, squeeze my hand." And she did. He ran to the nursing station to tell them she responded and the CCU team immediately sprung into

This was a critical point. Now that Jennifer was responding, the CCU team needed to proceed with warming her body back to a normal temperature. There was a risk that she could have another heart attack. But she did not. She was then transferred to Sudbury.

Jennifer is lucky to be here today. Her life was saved by the firemen, paramedics, CCU team and the heart team in Sudbury. We are thankful to so many who cared for Jennifer and to you the donor who help the hospital provide more advanced levels

I am grateful each day that she continues to live a full life with me. Thank you!



Jacques and Jennifer Graveline with their grandchildren.

Photo courtesy of Ed Eng Photography

# Closing our community's health care gap

### **North Bay and District Hospital Foundation**

### **By Foundation Staff**

The North Bay and District Hospital Foundation has a 10-year history that began with the Caring for Generations campaign to raise the community's share for the building of the new North Bay Regional Health Centre.

The Foundation works with the community to raise funds to ensure that the hospital can continue to expand services, develop new programs, and bring leadingedge medical technology and treatment to the people of North Bay and district communities. Through generous support from donors, the Foundation helps ensure that the best health care will always be within reach for the entire community.

### A proud past

Planning for the Caring for Generations campaign began in 2000 and then went into high gear in September 2002 with a kick-off event and \$11.2 million already raised. The Caring for Generations campaign raised over 80 per cent of its dollars from donors who pledged more than \$100,000 - a major achievement and a factor that contributed greatly to the success of the campaign.

One notable achievement for the campaign was the fact that the operating cost was five cents on the dollar; significantly lower than the national average of eight to 12 cents on the dollar for campaigns of similar targets.

These efforts earned the campaign a prestigious national award—the AHP Canada Capital Campaign Showcase Award from the Association of Healthcare Philanthropy (AHP).

### A bright future

Scheduled to open January 30th, 2011, our new health centre will deliver the same high-quality of care in a new, stateof-the-art setting. The new NBRHC is the first of its kind in Ontario to combine a modern acute care hospital with a specialized mental health facility.

NBDH and NEMHC boards announced the intent to amalgamate into one new organization by 2012. This new organization will provide acute health services to North Bay and surrounding area and specialized mental health services to the region of northeastern Ontario. The NBDH Foundation will undergo a name change and will be the Foundation for this new entity.

### Why Give?

Donations are a critical source of funding for the hospital, which is separate and distinct from government and granting agencies.

Unprecedented community support acclaims that North Bay and area residents believe this new health centre is eminently worthy of support and a top priority.

Funds help provide advanced levels of care by purchasing needed medical equipment beyond the hospital's resources. Together, we are closing our community's health-care gap.

# Seeing More Clearly

A campaign for an MRI and more...



The North Bay & District Hospital Foundation has accepted the responsibility to lead district communities in support of the Seeing More Clearly. A campaign for an MRI and more...

When the Government of Ontario changed the financing of all new hospitals to cover 90 per cent of construction costs, with the remaining 10 per cent coming from the community, it further stated that 100 per cent of all **new** equipment will be the responsibility of the hospital and community.

Our Campaign Community Leaders include 41 committed individuals from our district. The campaign has started its first phase focusing on leadership gifts. **The public phase will be launched in spring 2011**, providing an opportunity for everyone to get involved.



Above: the Campaign and Honourary Campaign Co-Chairs; Ted Thomson, Al McDonald, Barbara Minogue and Ted Hargreaves (absent: Steve Omischl). Left: the full Campaign Cabinet.



### Introducing our Volunteers – The Campaign Cabinet

### Honourary Campaign Co-Chairs

### Ted Hargreaves

Honourary Campaign Co-Chair Regional Managing Partner BDO Canada LLP

### Barbara Minogue

Honourary Campaign Co-Chair Community Volunteer

### Steve Omischl

Honourary Campaign Co-Chair World Cup Champion 2004, 2007, 2008, 2009 3x Olympian - Freestyle Skiing

### **Campaign Co-Chairs**

### Al McDonald

Campaign Co-Chair Independent Business Owner

### Ted Thomson

Campaign Co-Chair Senior Financial Planning Advisor & Branch Owner Assante Wealth Management Ltd

### **Campaign Cabinet**

### Victorine Beddage

Psychiatrist
Northeast Mental Health Centre

### Nancy Birtch

Chartered Accountant KPMG LLP

### Marty Brown

Vice President Sparrow Brown

### Peter Chirico

Senior Account Manager Commercial Financial Services RBC Royal Bank

### Bob and Jan Chisholm

Owners
McDonalds Restaurant

### Brian Chute

Owner
Dean's Pharmasave

### Don Couchie

Owner Ojibway Snacks

### Don Curry

Executive Director
North Bay & District Multicultural
Centre

### Victor Fedeli

President Fedeli Corporation

### William Ferguson

VP Creative/Partner
TWG Communications

### Claude Fortier

Independent Business Owner

### Jean Jamieson

Broker Century 21 – Blue Sky Region

### Gary Jodouin

Chartered Accountant (retired)
KPMG LLP

### Steven Kizell Independent Business Owner

**Lois Krause** Executive Director North Bay & District Hospital

### Foundation

Luc Lalonde Vice President JP Investments Ltd.

### lan Macpherson President

President
Malmac Properties

### **Beverly Martin**

Chief Communications Officer
Ontario Northland

### lan Martyn

Owner & Funeral Director Martyn Funeral Home

### Arnold Mav

Owner Operator
Beedaubun Enterprise

### **Chris Mayne**

Mayne Travel Services Limited

### Don McCallum

Area Manager (retired) RBC Royal Bank

### **Grant McGuinty**

Co-Owner
McGuinty Funeral Home

### Lachlan McLachlan

Senior Financial Advisor
Assante Wealth Management Ltd.

### Jennifer McNutt Bywater

Owner
Vested Interest Trading

### **Brad Minogue**

Broker/ Appraiser Coldwell Banker Peter Minogue Real Estate Brokerage

### Peter Moffat

Owner Tim Hortons of North Bay

### **Tammy Morison**

Campaign Director North Bay & District Hospital Foundation

### Gordon Prisco

Lawyer Valin Partners LLP, Barristers and Solicitors

### **Bonnie Rymal**

Vice President Strategy
Management
NEMHC & NBGH
Chief Nursing Officer NEMHC

### Tiziana Silveri

Vice President, Surgery & Maternal/Child Care Centres North Bay General Hospital

### Luc Stang

President and CEO
Gin-Cor Industries Inc.

### Andrew Staniforth

Regional Sales Manager RBC Royal Bank

### **Michael Valenti**

Co-Owner
Designed Roofing

### Bob Cunningham

Ex-officio member Executive Vice-President & Chief Amalgamation Officer NBGH & NEMHC

### Mark Hurst

Ex-officio member President and CEO NBGH & NEMHC

### Pat Stephens

Ex-officio member Manager, Public Relations NBGH & NEMHC

### Barbara Morland Wellard

Ex-officio member Chair, Board of Trustees NBDH Foundation Partner, Valin Partners LLP, Barristers and Solicitors



# it's time

North Bay's outstanding medical community, supported by the new state-of-the-art North Bay Regional Health Centre, is complimented by modern amenities, diverse culture, and four seasons of activity. Just a quick drive away from larger urban centres. North Bay truly is the best of both worlds to work, live and play.

Getting to 'The Bay' is easy. Leaving is the hard part, once you've experienced it all.



