



2012 . 2013

ANNUAL REPORT

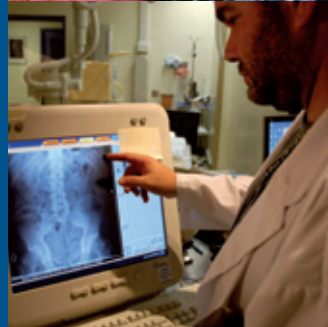
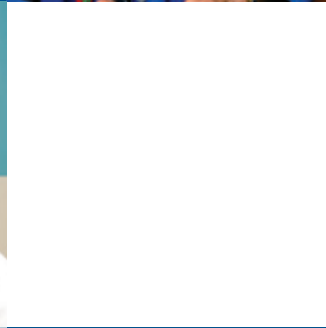
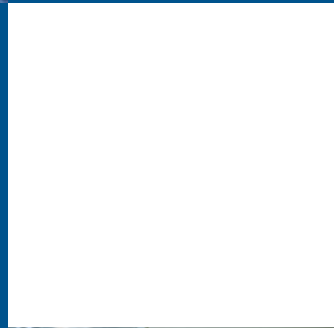


TABLE OF CONTENTS

A NEW CORPORATE BRAND FOR A NEW HOSPITAL	4-5
MISSION VISION VALUES	5
REPORT OF THE CHAIR OF THE BOARD OF DIRECTORS	6
REPORT OF THE CHIEF EXECUTIVE OFFICER	7
REPORT OF THE RETIRING CHIEF OF STAFF	8
2012-2013 BOARD OF DIRECTORS	9
COMPASSION: A VIBRANT TESTIMONY!	10-11
INNOVATION: TELEMEDECINE SERVING PATIENTS!	12-13
EXCELLENCE: SUPERIOR QUALITY STANDARDS!	14-15
ROCKLAND AND CASSELMAN... SERVING OUR COMMUNITIES!	16-17
2012 . 2013 FINANCIAL STATEMENT	18
2012 . 2013 STATISTICS	19
HAWKESBURY GENERAL HOSPITAL FOUNDATION	
WORD OF THE CHAIR OF THE BOARD OF DIRECTORS	20
2012-2013 BOARD OF DIRECTORS	20
2012-2013 FOUNDATION'S FINANCIAL STATEMENT	21
MAJOR CAMPAIGN FINANCIAL STATEMENT	21
A NEW HOSPITAL IN 2017. 2018	22-23
TO BETTER SERVE YOU...	25



COMPASSION
INNOVATION
EXCELLENCE

**A NEW
CORPORATE
BRAND FOR A
NEW HOSPITAL**

In the forthcoming years, HGHI will experience the most important development of its 100-year-old history. Starting in 2017-2018, the Glengarry and Prescott-Russell population served by HGHI will have access to an expanded healthcare campus, which will include a new 100-bed regional hospital and a regional healthcare hub in Hawkesbury, as well as satellite services in Casselman and Rockland.

To reflect this transformation, the hospital's corporate brand has been redesigned and adapted. The initials (HGHI) are now prominent, rather than the legal form previously used. The logo adopted in 2000 is kept as it reflects community spirit. The corporate colors are also retained. Blue is associated with life and well-being, and by extension to the health mission of the hospital. Yellow is associated with warmth and revival. Closer to us, it represents one of the typical colors of the agricultural scenery of Prescott-Russell.

The logo and the initials are accompanied by three keywords that define the hospital's inherent character.

COMPASSION

The institutions that preceded the present hospital, the former hospitals founded by the Sisters of Charity of Ottawa and the Smith Clinic, were established to serve the community in the early 1900's. These establishments were known for their compassionate and charitable mission. When they were relocated on the current site within the new Hawkesbury & District General Hospital in 1984, compassion was passed on and anchored within the walls of the new building. To this day, this culture of compassion transmitted by the founders remains the soul of HGH.

INNOVATION

Following its modernization in 1984, HGH launched innovative projects. First institution to operate a Hospital-in-the Home program in Ontario, HGH pioneered several other administrative and clinical initiatives that served as models. Ongoing investments in information technology allowed HGH to be a leader in healthcare information systems. In the last 30 years, this spirit of innovation has taken root and is further developing.

EXCELLENCE

With the addition of many new services in recent years and the future opening of a new full service regional hospital, HGH will continue to build on excellence. Staff training programs, the university affiliation and the deployment of stringent quality control programs are important steps in the pursuit of new achievements. Already, performance results in some sectors are convincing. This commitment to excellence will foster a new momentum of progress at HGH in the upcoming years.

MISSION

TO PROMOTE HEALTH AND PROVIDE
COMPASSIONATE CARE FOR OUR
COMMUNITIES THROUGH THE CYCLE OF LIFE.

VISION

DEDICATED PEOPLE PURSUING HEALTHCARE
EXCELLENCE THROUGH TEAMWORK,
INNOVATION AND LEADERSHIP.

VALUES

RESPECT, QUALITY, COLLABORATION,
INTEGRITY, COMPASSION

REPORT OF THE CHAIR OF THE BOARD OF DIRECTORS



Sébastien Racine

Sébastien Racine,
CHAIR

During the past year, the Board of Directors was in “action mode” to update the HGH mission and vision.

For the third year, HGH has completed an annual Quality Improvement Plan with more than thirty initiatives, for which the targets were reached or surpassed in more than 80% of the cases. Regular and comprehensive reports from the Chief of Staff demonstrate that medical practice is evolving positively in an environment of continuous improvement and accountability.

In terms of partnerships and its regional role, this year, HGH has focused on the affiliation with La Cité collégiale of Ottawa. This agreement allowed our organizations to set up two in-training programs for two groups of students, namely for the Personal Support Worker program and the Registered Practical Nursing Program.

HGH joined the Lower Outaouais Family Health Team to initiate planning for a regional Health Link project for Prescott-Russell within the new strategy of the Ministry of Health. Earlier this year, HGH was given the mandate to manage the telemedicine network for the five Eastern Counties. All these initiatives allow HGH to innovate and prepare for its future as a regional hospital.

In terms of infrastructure, remarkable progress was achieved. The Ministry of Health approved our Functional Program and all technical plans in January 2013. As planned, on May 23rd, 2013, Infrastructure Ontario issued a call for tender for prequalification. To date, our project remains compliant with established budgets and timelines.

The Board of Directors has approved a process to start the functional and technical planning for the Prescott-Russell Healthcare Hub project, a key strategic initiative which will consolidate the primary health care and a number of HGH community care programs in new or modernized buildings.

Over the next three years, the hospital will have to complete a major and complex transition. From a district hospital, we will become a full service regional hospital. Through our actions and commitment to improve and develop services, the Board of Directors has already paved the way for this transition to be successful.

Following the approval of the strategic plan by the Board of Directors in April 2012, we immediately proceeded with the development of a tactical plan. This plan defines all the measures and strategies required to meet the strategic directions established for 2013-2017, which is the transition period before the opening of the new hospital.

In terms of quality and access, we have put in place initiatives to reduce waiting times and increase our operational capacity. The new endoscopy suite allowed us to reduce our wait times and increase our daily volume of procedures. With an additional operating room since January 2013, we are targeting the same objectives for surgical procedures. We have improved the technical functionality of certain pieces of equipment in diagnostic imaging and cardiology. We have acquired a bone density unit and this service will be operational in the near future. As for the Emergency Service, given the increasing volume of patients and waiting times, we launched a new initiative to reorganize the service and improve patient flow.

The entire ambulatory care sector has become a priority for the hospital. Thus, the operation and the capacity of specialized outpatient clinics will be upgraded to accommodate patient volume and availability of specialists. The consolidation plan for mental health and addiction services is well underway and this sector is already quite ready for their first visit by Accreditation Canada in 2014.

In terms of human resources, we have integrated the new mental health and addiction work teams. We have completed a customer service training program where more than 50% of our employees attended. A change management initiative started in April 2013 to prepare employees to face major changes that will affect them in the coming years.

In terms of information technology, we continued our integration project for the electronic medical record. We completed the installation of the Kronos system, a software for human resources management.

On the financial side, we ended fiscal year with a major operating surplus. Our reserves now allow us to meet our financial obligations for the redevelopment project, in addition to giving us the flexibility needed to support investments in infrastructures for the Prescott-Russell Regional Healthcare Hub.

REPORT OF THE CHIEF EXECUTIVE OFFICER



A handwritten signature in black ink, which appears to read "M. LeBoutillier".

Marc LeBoutillier,
CHIEF EXECUTIVE OFFICER

REPORT OF THE RETIRING CHIEF OF STAFF



A handwritten signature in black ink, appearing to read 'Luc Chagnon'.

Luc Chagnon, MD
RETIRING CHIEF OF STAFF

The year 2012-2013 was another productive year for the medical staff at HGH.

Fifteen new colleagues have joined our Medical Staff. Recruitment remains a high priority at the Medical Affairs Office.

In 2012-2013, many physicians have actively participated in the hospital's redevelopment project. Their views and opinions are essential in order to ensure the new hospital will meet the needs of the community and also to promote the advancement of the practice of medicine at the cutting edge technology.

Despite the ongoing growth of clinical activity at the Emergency Department, the emergency physicians still continue to offer high quality services. While waiting for the future expansion, the emergency team has implemented innovative solutions in order to continue to provide quality services to its clients.

As for our affiliation with the Faculty of Medicine of the University of Ottawa, we continue to be involved in teaching medical students. The majority of our physicians now have an academic appointment with the University of Ottawa as clinician-teacher. In the past year, we have totaled 619 days of education to medical students and residents.

I wish to thank the HGH team of professionals who, by their daily commitment, improve the condition of our patients. I also would like to recognize the support staff's involvement in promoting a healthy workplace.

I would also like to thank the Board of Directors for giving me the opportunity to fulfill the position of Chief of Staff for the past three years. Professionally, it has been a rewarding experience. I wish to extend my best wishes to Dr. Julie Maranda who has accepted the mandate of Chief of Staff as of May 1st, 2013.



2012-2013 BOARD OF DIRECTORS

- 1] JACQUES PARISIEN, Member (*L'Original*)
- 2] PAULE DOUCET, Member (*L'Original*)
- 3] NICOLE DELAND, Treasurer (*North Lancaster*)
- 4] JO-ANNE LAVIOLETTE, Member (*Casselman*)
- 5] SUZANNE SAUVÉ, Manager, Board Operations
- 6] SÉBASTIEN RACINE, Board Chair (*Casselman*)
- 7] JEFFREY GEIGEL, Member (*L'Original*)
- 8] MARCEL J. DAUTH, Member (*Hawkesbury*)
- 9] DR LUC CHAGNON, Chief of Staff
- 10] SUZANNE QUESNEL-GAUTHIER, Vice-Chair (*L'Original*)
- 11] MICHEL LAFERRIÈRE, Chair, HGH Foundation
- 12] MARC LEBOUTILLIER, Chief Executive Officer
- 13] LAURENT SOULIGNY, Member (*St-Isidore*)
- 14] MARIËLLE HEUVELMANS, Vice-President, Clinical Programs

Absences

DR ANDRÉ BORDUAS, President of the Medical Staff
STÉPHANE P. PARISIEN, Member (*Hawkesbury*)



Ms. Linda Ouimet



COMPASSION



Mr. Laurent Lefebvre



I WAS SO WELL CARED FOR!
I FELT THAT PEOPLE TOOK MY
WELLBEING TO HEART. [...]

— Mr. Laurent Lefebvre

COMPASSION: A VIBRANT TESTIMONY!

In the winter of 2013, Mr. Laurent Lefebvre from Alfred was hospitalized for five weeks. At 60, suffering from multiple fractures to the femur, it was his first stay in a hospital. "At first, I could not even put on my socks or take a shower by myself. But I got help; I was cared for and was listened to. Everyone worked really hard to make my stay at the hospital pleasant and comfortable. They took the time to explain the treatments I was receiving. The patience, the sensitiveness and the good mood of all the people that worked here were amazing. It was like a family!" said Mr. Lefebvre about his hospital stay.

The staff's compassion witnessed by Mr. Lefebvre is among the values transmitted by the founders of the hospital. "Compassion is in our culture. It would be impossible to do a good job without feeling compassion for our patients" explains Mrs. Linda Ouimet, Charge Nurse for the Complex Continuous Care Service, also known as the Rehab Department.

Employed at HGH for 34 years, Ms. Ouimet coordinates the clinical activities of a 18-bed department. "The majority of our patients stay here for a period ranging from 14 to 30 days. We have time to build close relationships with them and their families. To offer better care, it's important to understand all aspects of the lives of our patients and to develop a trusting relationship with them. Those hospitalized are often worried about the future. They wonder about the after-effects of their illness or accident and how their return home will be. This is why we work closely with families, as they are part of the treatment plan," adds Mrs. Ouimet.

To help and prepare the patient for his return home, the department organizes follow-ups with other hospital services such as occupational therapy, physiotherapy and psychiatry. Thereafter, professionals ensuring outpatient services, including home care, are involved.

"I was so well cared for! I felt that people took my wellbeing to heart. In addition to fractures, I am diabetic; they also helped me to better manage my condition. I return regularly for physiotherapy and I want to say thank you and congratulations to the whole team for the excellent care," concludes Mr. Lefebvre.

*HGH, a culture of **COMPASSION!***



Mrs. Nicole Pageau



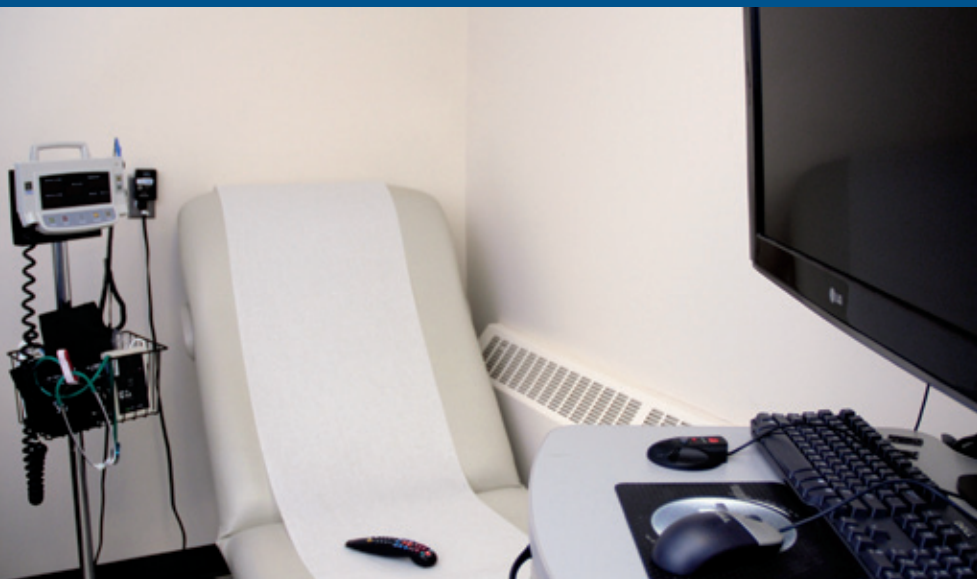
Mrs. Lise McDonell



Mrs. Sylvie Lefebvre



INNOVATION



IT'S A GREAT SERVICE! [...] THANKS TO THE CAMERA AND THE SCREEN, I COULD SEE AND HEAR MY NEPHROLOGIST VERY CLEARLY. [...]

— Mrs. Nicole Pageau

INNOVATION: TELEMEDECINE SERVING PATIENTS!

For close to three years, Mrs. Nicole Pageau has been seeing a kidney specialist. In July, she had her first experience of telemedicine at the HGH. "It's a great service! I was very pleasantly surprised. Everything was well organized and I received the same level of service as if I had seen my doctor in Ottawa, but without having to spend hours on the road. It saves a lot of stress and it reduces costs. Thanks to the camera and the screen, I could see and hear my nephrologist very clearly. I could also ask questions, just like during a visit in person. A nurse was with me and it was reassuring," relates Mrs. Pageau.

Applying technology to patient care defines the spirit of innovation that exists in the hospital where the staff is proudly committed to the constant improvement of access to services." Because of telemedicine at HGH, our patients now have access to consultations in nephrology, dermatology and podiatry, as well as in cases of thrombosis, fertility treatments, pre and post-operative examinations and weight management. Specialists are now available, no matter where they practice in Ontario. Using high-performance instruments, they can hear the heart, breathing or examine the patient's ears or throat remotely. A nurse accompanies the patient and manipulates the equipment during the consultation. Telemedicine also benefits the staff by facilitating distance learning, inter-professional collaboration and the holding of clinical meetings," explains Mrs. Lise McDonnell, Geriatric & Clinical Nurse Counsellor and Telemedicine Coordinator.

In 2011, recognizing the expertise acquired by the hospital, the Champlain Local Health Integration Network commissioned HGH to manage the telemedicine system in the five Eastern Ontario counties. Also in 2011, HGH was one of the first hospitals in Ontario to offer Telectroke, a specialized telemedicine service. In stroke cases, this program allows the emergency physician to remotely consult a neurologist and to quickly begin the most effective treatment for the patient. "When a stroke is suspected, the whole hospital is quickly called up to treat the patient, as we only have a few hours to minimize its negative consequences. All the professionals on the response team are aware of their specific role and its importance to the patient's health. This program changes lives. It allows us to quickly treat patients here. It avoids ambulance trips to hospitals in Ottawa and the related loss of time. It helps our patients recover faster and greatly improves their quality of life, which also has a very important impact on their families and the entire community," says Mrs. Sylvie Lefebvre, Director of Specialty Care.

*HGH, a spirit of **INNOVATION!***



EXCELLENCE



Dr. Jeffrey Wackett



Dr. André Borduas



Mrs. Hélène Cousineau-Ouellette



Mrs. Éline Brazeau



WHAT AN IMPROVEMENT FOR
OUR PATIENTS AND STAFF! [...]

— Mrs. Hélène Cousineau-Ouellette

EXCELLENCE: SUPERIOR QUALITY STANDARDS!

In January 2013, HGH inaugurated a new endoscopy unit to improve services and access to specialized procedures for patients in the region. “What an improvement for our patients and staff! Wait times have been reduced, the equipment is state-of-the-art and patients are much more comfortable during examinations and procedures,” explains Mrs. Hélène Cousineau-Ouellette, Interim Director of Perioperative Services. Endoscopy is used to look inside body cavities or organs with a camera in order to make a diagnosis, remove tissues or do surgical procedures.

The new endoscopy unit, an investment of \$1.5 million, is an example of the pursuit of excellence in all respects and the achievement of quality objectives that HGH is setting. The new specialized facilities now allow viewing of test results simultaneously on a high-definition screen. Dr. Jeffrey Wackett, surgeon, is pleased with the changes. “The endoscopy unit allows us to make a greater number of examinations and procedures and it also freed an operating room. It is much more efficient now. Surgeons have at their disposal two operating rooms and more operating time, which reduced wait times,” he said. The unit also contributes to satisfactorily meet the timeframes established by the province for exams and follow-ups as part of the early screening program ColonCancerCheck. Incidentally, HGH’s quality indicators are among the best in Ontario.

As all surgeries or endoscopy involve risks of infection, an important aspect of perioperative services is the reprocessing of medical equipment, or sterilization of instruments. “Our role is crucial. We must strictly observe all the steps for the cleaning and disinfection of the scopes and make sure they are properly sealed. For the health of our patients, we must eliminate the risk of contamination. The new unit and our new equipment allow for better work organization,” explains Mrs. Éline Brazeau, Aide for the Medical Device Reprocessing Service.

The new endoscopy unit also has impacts outside the hospital. “As a family physician, I refer my patients to HGH for some tests, and if necessary, the surgeries are done on site. They now have access to faster service. When we know that a patient has a 90% chance of recovery when colon cancer is detected early, we understand the importance of this new service for the community,” says Dr. André Borduas, General Practitioner.

*HGH, a commitment to **EXCELLENCE!***



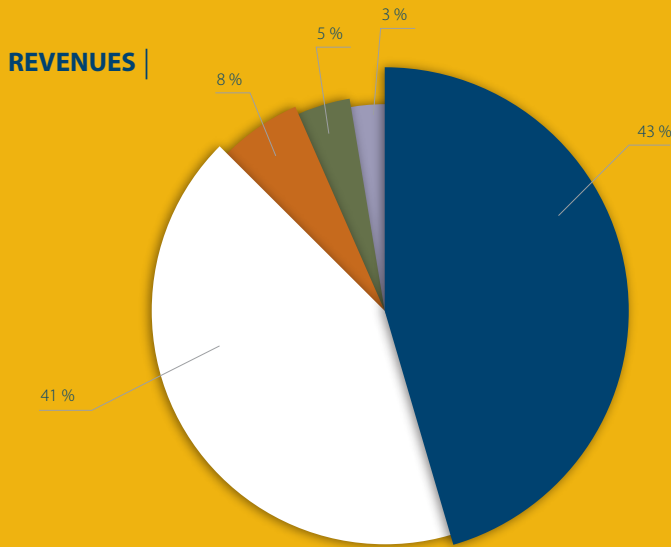
ROCKLAND AND CASSELMAN ... SERVING OUR COMMUNITIES!

For more than 15 years, HGH has been providing services in mental health and addictions in the areas of Rockland and Casselman. In recent years, HGH has improved access to services at the request of the people of these communities. Over 15 programs are offered through HGH's five community services: the Mental Health Crisis Service, the Addiction Service, the Geriatric Psychiatry Service, the Assertive Community Treatment Team and the Royal-Comtois Centre. To date, over 4,500 individuals and their families benefit each year from these programs that are offered in private homes, residences for the elderly, long-term care facilities and in the satellite centers of Casselman and Rockland. The reasons for consultations are varied: depression, stress, anxiety, substance abuse, problem gambling, trauma, schizophrenia, dementia, sexual assault, domestic violence, relationship problems, etc.

Within a year, services related to addictions, problem gambling and psychotherapy will double in the Rockland area. By October 2013, the Rockland satellite center will be relocated to 1905 Laurier Street in order to better serve its customers. In Casselman, the 710 Main Street location was recently renovated to increase the services offered by various professionals, including adding an authorized psychogeriatric nurse and a substance abuse therapist. Thanks to its many community partners and the support of the Champlain Local Health Integration Network, HGH seeks to expand the range of services offered in these communities, to facilitate access to programs and to reduce wait times.



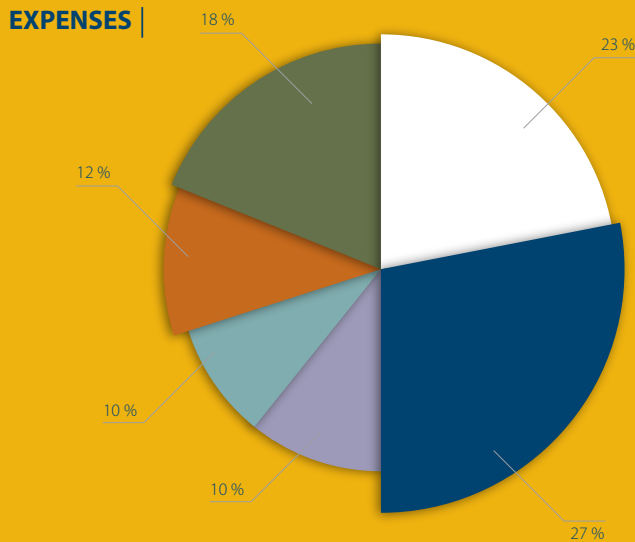
2012 . 2013 FINANCIAL STATEMENT



REVENUES (IN \$M)

MINISTRY OF HEALTH OF ONTARIO	\$25 640
OTHER SOURCES	\$24 430
ONTARIO HEALTH INSURANCE PLAN	\$4 511
RECOVERIES AND OTHER REVENUES	\$3 205
OTHERS	\$1 858
TOTAL REVENUES	\$59 644

* Including Mental Health and Addictions



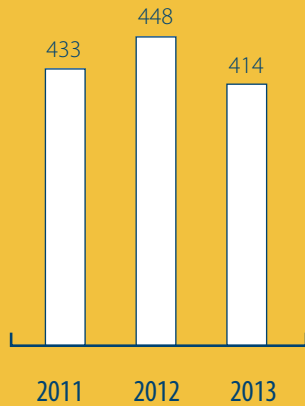
EXPENSES (IN \$M)

AMBULATORY CARE	\$14 805
INPATIENTS	\$12 245
DIAGNOSTIC AND THERAPEUTIC SERVICES	\$9 883
SUPPORT SERVICES	\$6 407
ADMINISTRATION	\$5344
OTHERS	\$1 858
TOTAL EXPENSES	\$59 644

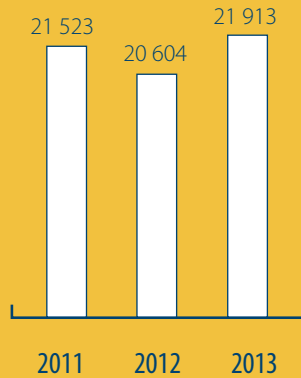
* Including Mental Health and Addictions

2012 . 2013 STATISTICS

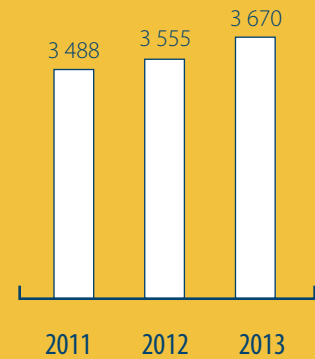
NEWBORNS



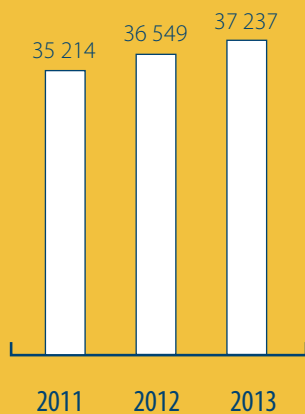
INPATIENT DAYS – ADULTS



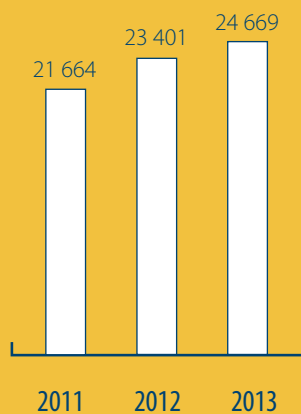
SURGICAL PROCEDURES



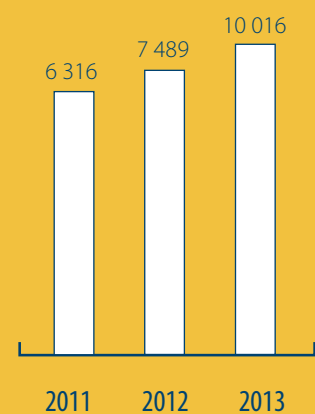
VISITS – EMERGENCY DEPARTMENT



VISITS – AMBULATORY CARE



VISITS – MENTAL HEALTH AND ADDICTIONS



WORD OF THE CHAIR OF THE BOARD OF DIRECTORS



Michel Laferrière
Michel Laferrière,
CHAIR



On behalf of the Board of Directors and staff of the HGH Foundation, let me offer my sincere thanks to our generous donors, participant in our philanthropic activities, as well as to our volunteers. We are proud of our achievements. For my part, in this third year as Chair of the Board of Directors, it is with pleasure that I continue to promote the aspiration of the founders of our charitable organization and therefore contributing to the success of their work.

One of our goals for this year is to raise \$300,000 for services in mental health and addiction services of our hospital. It is very important for our entire community, to whom we strive to offer the best healthcare services. Did you know that for every dollar invested in mental health and addiction, the medical health system saves seven dollars? With the expansion of the hospital, in 2014, the Foundation will be involved in financing the purchase of specialized medical equipment in order to provide the best possible care to the population. In relation to these challenges, and echoing the profound changes in the world of philanthropy in recent years, the Foundation is reviewing all of its policies and practices.

Looking to the future, the Foundation reassesses its position and operations in order to rally more donors around this great cause. Thank you for your trust and contribution to our success.

2012-2013 BOARD OF DIRECTORS

DIRECTORS

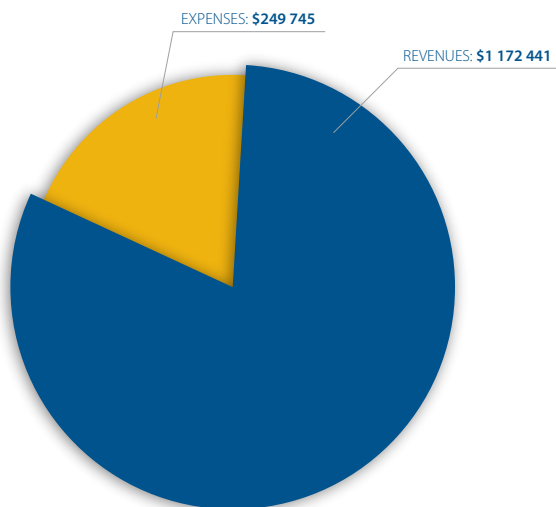
MICHEL LAFERRIÈRE, Chair (*Hawkesbury*) | JOHANNE MÉNARD, 1st Vice-Chair (*East Hawkesbury*) |
KARL HOLMES, 2nd Vice-Chair (*Hawkesbury*) | JOHN HOLLETT, Treasurer (*Hawkesbury*) |
PIERRE-ANDRÉ DUCHEMIN (*Hawkesbury*) | SUZANNE M. FARAG (*Cornwall*) | MARTIN GAUTHIER (*Casselman*) |
JAMES HOCQUARD (*Grenville*) | ANTOINE MANICACCI (*Gatineau*) | DIANE MATICHAK (*St-Eugène*) | MIREILLE LAUZON-DAUTH
(*Hawkesbury*) | JEANNINE LEFEBVRE (*Vankleek Hill*) | JEAN-PIERRE PAQUETTE (*L'Orignal*) | MICHELINE SAUVÉ (*L'Orignal*)

RESOURCE PERSON

LUC SÉGUIN, Vice-President of Administrative and Fiscal Services, HGH

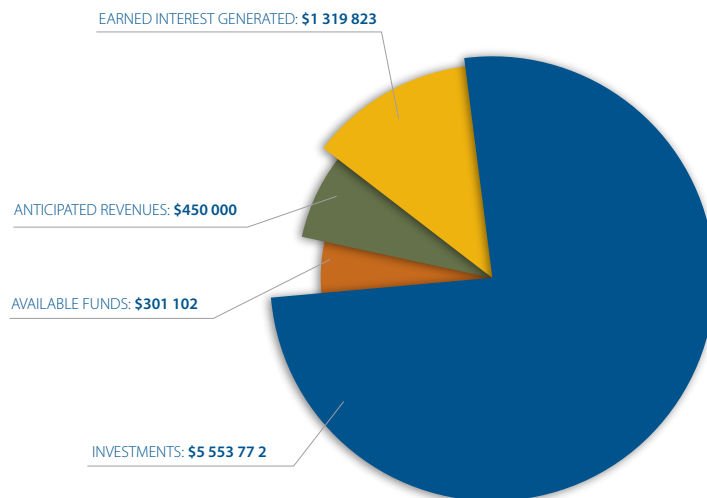
**2012-2013
FOUNDATION'S
FINANCIAL STATEMENT**

EXCESS OF REVENUES
OVER EXPENSES: \$922 696

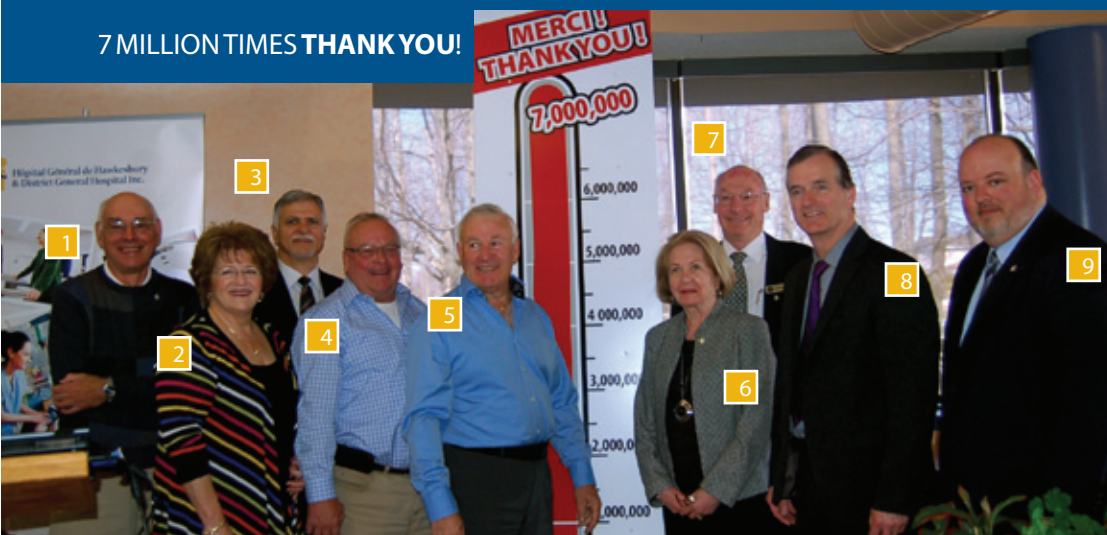


**MAJOR CAMPAIGN
FINANCIAL STATEMENT**

\$7 074 697



7 MILLION TIMES THANK YOU!



- 1] JOHN HOLLETT
- 2] JEANNINE LEFEBVRE
- 3] MICHEL LAFERRIÈRE
- 4] JEAN-GUY BARRETTE
- 5] WAYNE ASSALY
- 6] BARBARA PAQUETTE
- 7] JEAN-PIERRE PAQUETTE
- 8] MARC LEBOUTILLIER
- 9] SÉBASTIEN RACINE



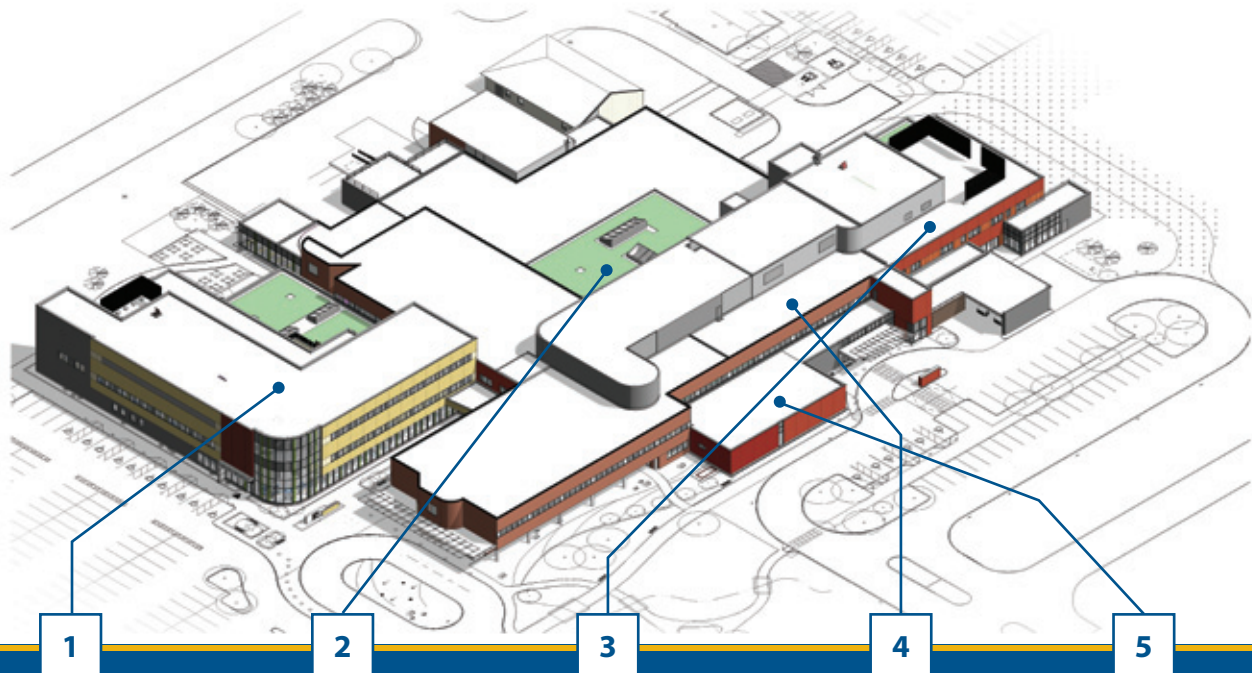
UNIVERSITY

**A NEW HOSPITAL
IN 2017.2018**



TO BETTER SERVE YOU...

24



1

NEW PAVILION

New construction West side of the Hospital (3 storeys, 72,000 sq. ft.). Consolidation of all specialty clinics, outpatient rehab, hemodialysis and cardiology services.

2

NEW PERIOPERATIVE DEPARTMENT

Infill and construction of current open courtyard located in the centre of the Hospital (8,600 sq. ft.) for OR, day surgery, endoscopy and minor surgery.

3

EAST WING EXPANSION

Level 1:
Emergency Services expansion (18,700 sq. ft.);

Level 2:
Relocation of Family Birthing Centre (11,000 sq. ft.).

4

EXPANDED BED CAPACITY (27 NEW ACUTE CARE BEDS)

- Relocation of current Complex Continuing Care Unit to Level 2 of Ambulatory Care Pavilion;
- Relocation and expansion of the Intensive Care Unit adjacent to new Emergency Department;
- Expansion of Medical-Surgical Unit;
- New Psychiatric Inpatient Unit.

5

NEW SPECIALIZED MEDICAL IMAGING UNIT

- New CT Scan Service;
- New Magnetic Resonance Imaging (MRI) Service.