

2001/02
Annual Report
June 6, 2002

C R E D I T • V A L L E Y

Board of Governors

Board Executive

Gordon Stovel (*Chairman*)

Norman Loberg (*Vice Chair*)

Stuart Smith (*Vice Chair*)

Harinder Takhar (*Treasurer*)

*Wayne Fyffe (*Secretary*)

Paul Clayton

*Dr. Jatinder Dhillon (*President, Medical Staff Association*)

*John Dunn (*Chairman, Foundation Board*)

*Dr. Barbara Clive (*Chief of Medical Staff*)

Cheryl Englander

Louis Rene Girard

*Dr. Paul Gurland (*Vice President, Medical Staff Association*)

Cindy Heinz (*Appointed November 2001*)

Carolyn Kovachik-MacNeil (*Resigned February 2002*)

Norman Loberg

*Katie Mahoney (*representing Region of Peel*)

*Sheila Mosey (*President, Credit Valley Volunteer Partners*)

Jim Murray

Richard Podsiadlo

Wendy Roney

Peter Smith

Bart Wassmansdorf

Geoff Watson

Jane Watson

*ex-officio members

OUR VISION

The Vision of the Credit Valley Hospital is to be the finest hospital in Canada in the hearts and minds of the people we serve.

OUR MISSION

The Credit Valley Hospital offers quality compassionate health care to the people of the growing communities of Peel and Halton.

OUR VALUES

Excellence in Patient Care

We will provide excellence in patient care by considering the individual's physical, emotional and spiritual needs. We see each patient as a special individual.

Respect

We recognize and treasure the unique contribution of each member of our CVH family (staff member, volunteer and physician) and value the rights of our patients and their families.

Leadership

We have a culture that facilitates and promotes innovation. We foster an organizational climate that encourages advancement of knowledge through education, experience and leadership.

Teamwork

We have found the best outcomes are achieved when we work together. The diverse skills and knowledge of our CVH family can be brought together to fulfill our service objectives.

Accountability

We acknowledge our responsibility to provide the best possible quality of care by managing our resources effectively and acknowledge our responsibility to act as advocates for our community to secure adequate resources to meet their needs.

Partnership

We seek the opportunity to develop effective partnerships to further improve the health of our community.

FOREWARD: MAINTAINING THE DELICATE BALANCE

It is no secret that health care is the number one concern on Canadian taxpayer's minds. How long will I have to wait for service? How far will I have to travel for service? Will there be a bed when I need it? Will there be a shortage of doctors, nurses or other health care professionals? Will I have to pay for my procedure? Will the system let me down?

The Credit Valley Hospital provides a wide spectrum of services at both the community and regional level. But our services and the space to provide them have reached their maximum. With record-breaking growth making Mississauga the sixth largest city in Canada, and a large part of the growth occurring within a kilometre of Credit Valley's front door, it's no wonder.



Record breaking growth has made Mississauga the sixth largest city in Canada. A large part of the growth is occurring in Credit Valley's neighborhood.

Our capital expansion project is designed to meet the needs of our burgeoning population. However, it will be late 2004, if everything goes as planned, before we'll be able to feel the welcome relief of more space to do our jobs. Until then our emergency room will be overcrowded. Our waiting lists for outpatient services such as physiotherapy will continue to grow. And without more inpatient beds, our waiting lists for surgery will become even longer.

We can and we will hire more professionals to handle the increasing patient demand -- when we have the space to care for them -- and the money! Until we have both, we are no different than the tightrope walker, a set of dominos or the

scales of justice. One false move causes a ripple effect that will be felt throughout our healthcare system. The decisions of our Board of Governors will impact the lives of our patients, our fellow health care providers in the community and our neighboring hospitals. They too are walking that tightrope.

This annual report is an effort to bring forward our achievements over the past year and our strategies for the future based on maintaining the delicate balance. We must and we will.

CREDIT VALLEY AT A GLANCE

Our Staffing Complement...

Nursing	1002
Professional Staff	569
Physicians with Privileges (including active, associate and courtesy)	333
Administrative	35
Service and Support	722
Total	2661

Our Programs...

Regional Programs

Renal
Oncology
Maternal/Child
Genetics

Other

Medicine
Surgery
Cardiopulmonary
Mental Health
Emergency
Rehabilitation

Activity Snapshot

Admission Type	1996/97	2000/01	2001/02
Surgery	10,450	17,770	18,158
Births	3,540	3,729	4,080
Emergency	59,870	64,974	66,692
Outpatient Visits	214,932	274,851	284,150

ANNUAL REPORT OF THE PRESIDENT & CHAIRMAN

In this year's report to the community, we will try to provide you with a perspective on the challenges faced by management, Governors and all those who work at The Credit Valley Hospital in achieving a "delicate balance" between accountability to ensure access to quality care and sound financial management.

We again began the year with uncertainty about the timeliness and extent of approvals for funding from the Ministry of Health to operate the hospital. In the summer, we were pleased to receive a large increase in funding which covered our inflationary costs and annualized costs of last year's growth in demand for services. Our expectation was that growth which occurred monthly throughout the current fiscal year would be funded near the end of the third quarter. Unfortunately this was not the case and the hospital was left with the largest deficit in its history. Fortunately, due to the excellence of governance and management practice over the years, Credit Valley had reserves from which we could draw to ensure that no debt was incurred. However, we are now extremely concerned about the fiscal year beginning April 1, 2002 as our job of achieving a delicate balance has been made more difficult. As we write this annual report our Board has chosen to preserve access to quality care at some risk to our financial health. We anxiously await news of the level of funding that will be made available to operate the hospital in fiscal 2002/03.

Although we have uncertainty about the total amount of funding that can be made available, we are certain that The Credit Valley Hospital has a strong case to make. We are confident because all of the performance measures received in the last year point to Credit Valley as an efficient deliverer of high quality care. As demand for our programs grow at a pace of five to ten percent per year, we continue to operate at a lower cost (two percent below the expected cost per weighted case for a similar hospital in Ontario). We also spend more than the average hospital on direct patient care as compared to administrative overhead. The Ontario Hospital Association Report Card on performance and patient satisfaction again showed this year that Credit Valley is performing at provincial ratings average or above average.

As of the last census, Mississauga is the sixth largest city in Canada with a net increase of 15,000 people per year. For the year ending December 31, 2001 a record \$1 billion in building permits were issued for residential housing. With this phenomenal growth rate, it is no surprise that we are also in need of rapid expansion of our physical facilities. We are pleased to report that a comprehensive master plan has now been developed to ensure that the full capacity of the existing hospital site is achieved over the next six or seven years. We were fortunate during the year to receive tremendous support from the Ministry of Health with respect to capital grants for various aspects of our master

plan. We also received support from our Foundation and our Capital Campaign Cabinet who have set a goal of raising \$50 million toward the community's share of our total \$350 million comprehensive master plan. We continue to work with our partners in the Ministry of Health and at Cancer Care Ontario to ensure that various aspects of the comprehensive master plan are fully funded and achieved in a timely manner, including the building of the Carlo Fidani Peel Regional Cancer Centre. As in the past, we continue to appreciate the support we receive from our four local MPP's whose constituents use Credit Valley.

While architectural drawings were being completed for the construction of the new cancer centre, several organizational arrangements were completed this year. A joint venture agreement was signed with Cancer Care Ontario; a proposal to establish an interim cancer centre through renovations to the existing hospital was submitted to the Ministry of Health; a preconstruction operating plan was submitted to the Ministry of Health to ensure that operating funds are available when the centre opens; Dr. Sheldon Fine was appointed chief of the newly created department of oncology at The Credit Valley Hospital; and a revised functional program for the right sizing of the cancer centre to ensure capacity to serve patients until the year 2010 was also submitted to the ministry for approval. At year end we welcomed a new CEO of Cancer Care Ontario, Dr. Alan Hudson, and look forward to working with him and the Ministry of Health to achieve our mutual goal of an integrated comprehensive cancer centre that is accountable for quality care that meets or exceeds provincial and national standards. Stay tuned for the sod turning ceremony in the near future!

During the year the senior administrative team, medical administration, the project management staff and the Foundation staff were relocated from the hospital to a two-storey office building now known as Valley House. These moves, along with several internal renovation projects, allowed the hospital to create more clinical space in its main building. When the administrative offices are complete in the new expanded facilities, Valley House will be available to the community as a rental facility and will eventually pay back to the hospital the costs of its construction. We were extremely pleased to receive the support of the Region of Peel to establish an intersection on Erin Mills Parkway to cope with the current and future demand for automobile traffic entering and exiting our site. Support from the Ministry of Health, the Region and our Foundation allowed us to complete the building of a community renal centre on Watline Road where 24 hemodialysis stations are now available as part of the expansion of our renal program. In addition, this support allowed us to purchase and install a state of the art MRI (magnetic resonance imaging) diagnostic capability, and at year end to tender the construction of a new heliport so that the old heliport can be moved to make way for the building of the new cancer centre.

Each year, the Board of Governors, senior and middle management and medical staff leadership take a day and half away from their daily routine to think strategically about the future. This year, we concluded that we needed a new strategic plan that addressed the needs of the community we serve beyond the time we have reached capacity on our existing site. We are committed to work with the Halton Peel District Health Council and our partners in surrounding hospitals and community agencies as well as the Ministry of Health to ensure that plans are in place to build the facilities required in the next decade to avoid the congestion that we are experiencing today.

Our Board of Governors consists of 16 elected volunteer members and seven ex-officio members appointed according to our by-laws. All of the above activities and more were accomplished at eight regular Board meetings during the year and one special meeting in August to address our operating budget. We were pleased that two of our Board members were honored for their unselfish commitment to public service and contribution to society. Mr. Harinder Takhar, our Board treasurer, was presented with the 2001 New Pioneers Recognition Award, which acknowledges the significant contributions to our society by new Canadians. Mr. Peter Smith, chairman of our corporate governance committee of the Board, was honored with an Order of Canada appointment for his outstanding service as chairman of the Canadian Mortgage and Housing Corporation and as a contributor to solutions for affordable housing for all Canadians. We are honoured to be associated with these high achieving Canadians and we thank all of our volunteer Board members for their ongoing commitment to Credit Valley. Regrettably during the year we received resignations from Carolyn Kovachik-MacNeil, Jane Watson and Stuart Smith due to changes in their personal and business lives, and we look forward to recognizing their contributions at the Annual General Meeting. We were pleased in December to appoint Cindy Heinz to fill the seat vacated by Eileen McMahan until she could be elected at the Annual General Meeting. Cindy is committed to the vision and mission of The Credit Valley Hospital and as a lawyer, brings added value and expertise to Board deliberations. We are pleased to report that after advertising this spring for additional vacancies on the Board, we were blessed with expressions of interest from over 28 citizens. The degree of interest and support from our community is indeed impressive.

There was also a change in the senior management team this year with the resignation of associate vice president, corporate planning Ian Sinclair. We wished Ian well in his future career and later welcomed Ron Noble as vice president planning and construction. Ron comes with considerable experience in similar planning and construction projects in Ontario and we look forward to his leadership as we enter the exciting phase of major construction on our site.

During the year we were pleased to support our volunteer associates with their desire to legally change their name to the Credit Valley Volunteer Partners. They have a new name, a new look with new smocks including the hospital's new logo, but the same dedication to helping us provide a caring environment for all those we serve. Thank you to all our volunteers.

Finally, although Board and senior management spend a great deal of time planning and controlling the physical and financial aspects of the hospital, we could not achieve our vision as the *finest Hospital in Canada in the hearts and minds of the people we serve* without the dedication, skill, hard work and loyalty of our hospital staff and medical staff. We truly believe that they are second to none and thank them for their ongoing commitment to you the people we serve.

We thank you for your continued support over the past year but ask you now to become engaged in the debate about the future of our health care system in Canada. We clearly need the support of the federal and provincial governments to maintain what we have, and we need to consider how we can structure the system so that it is affordable in the future. In short, we all need to ensure that we are able to achieve that delicate balance, for the good of all, now and in the future.

Respectfully submitted,



Gordon Stovel,
Chairman of the Board



D. Wayne Fyffe, President
and Chief Executive Officer

THE DELICATE BALANCE

Finding More Space

A 10,000 square foot administrative building was completed in November 2001 in order to free-up space in the hospital for more patient care areas



Trying to Keep Up with the Demand

Due to growth in the community, the Outpatient physiotherapy waitlist increased from 183 to 452 patients between April 1, 2000 and April 1, 2001. As a result, the number of patient complaints increased significantly and the working environment became more challenging for frontline physiotherapists, supervisory and clerical staff.



Meeting the Need

Last year, the Credit Valley laboratory performed 31% more tests than the previous year just to meet the needs of the patients. Many outpatient tests such as lab tests, are not paid for by the Ministry of Health on a per test basis. That means the hospital actually loses money, the more tests it performs!

Familiar Site

13% of the patients seeking treatment at Credit Valley's ER, end up being hospitalized. That means when all of the beds are full, the ERAs (emergency room admissions) must be cared for on a stretcher in the ER until a bed is vacated by another patient on a nursing unit. The wait could last anywhere from a few hours to a few days.



Every Little Bit Helps

Increasing hourly parking rates at Credit Valley is one way to help decrease our projected deficit. Hospitals must generate a portion of their operating funds through revenue generation such as paid parking. Government does not fund parking lots or their upkeep. Every little bit helps when we're facing a multi-million dollar deficit.

ANNUAL REPORT OF THE CHIEF OF MEDICAL STAFF

As the hospital administration and Board face the challenge of the “delicate balance” between accountability to ensure access to quality care and sound financial management, the medical staff faces a different balance. This delicate balance is one between the needs of our individual patient and our fiscal responsibility to the hospital and healthcare system as a whole. We are most accountable to our patients. Generations of medical students, at the completion of their studies, have stood and recited the Hippocratic Oath. In this oath we swear to follow only that which is of benefit to our patients and abstain from that which we see as deleterious to their well being. This commitment is difficult to achieve in the face of lengthy waiting times, inadequate resources for diagnostic tests and a growing problem of physician shortages. Yet we continue to try to use these scarce resources in an evidence based way, to make the most of what is available and for the maximum benefit to our patients. At Credit Valley we have achieved clinical efficiencies well below the average cost per case and continue to provide outstanding clinical care in comparison to our peers across the country. Hippocrates also wrote that the physician should be attentive to the manner in which he sits down and comports himself. He should have a calm face and give the patient his entire attention and not lose patience. As tough as this is to achieve in our present working environment we still obtained above average scores in patients’ “satisfaction with care and services” and with “physician care”. At Credit Valley we seem to have the balance in check for now.

This work can only be accomplished with strong leadership. This year Dr. Pamela Coates was reappointed for a second five-year term as the chief of paediatrics. Dr Coates has also been a strong voice on the Child Health Network, developing the regional paediatric centres through out the province. Dr Srigley is also appointed for a second five-year term as the chief of the laboratory. He has managed to attract very skilled pathology staff to his department. Dr Ronald Grossman arrived during the summer of 2001 to lead the department of medicine and has already been successful in recruiting key staff to his department. Dr. Lancelot Tin from Ohio was appointed as the new chief of surgery and will join us in July 2002. Dr. John Guy has provided sound leadership in the department and program of surgery for two full terms. He has adeptly dealt with the growing numbers of surgical patients in operating room space about to burst at the seams! Dr Janos Pataki was appointed the new medical director of the intensive care unit. We appreciate the many years of single-handed development and work that Dr. Price provided in this area over the years. We are delighted to have Dr. Diane Flood join us from Trillium Health Center. She has been appointed as the new division head of respirology after Dr. Amer’s longstanding guidance in this division. The oral and maxillofacial surgeons, lead by Dr. David Psutka, were finally granted full admitting privileges consistent with

changes in legislation last December. Credit Valley granted three cardiac surgeons courtesy privileges as part of the regional cardiac program based at Trillium.

Credit Valley continues to attract many health care trainees. Our large volume of interesting and diverse cases makes us an attractive teaching site for many disciplines. In keeping with our Hippocratic oath to value the art of teaching medicine we continue with our work with the Faculty of Health Sciences at McMaster University to develop a formal teaching affiliation.

The next year holds many more exciting challenges. Our medical human resource plan will be more integrated with the program workload projections and fiscal realities. Dr Grossman and the department of medicine hope to grow the division of general internal medicine to meet growing demands in the areas of patient volume and acuity. We will be reorganizing our administrative structures for research to better comply with recent legislative changes and meet the International Conference Harmonized Tripartite Guidelines for research. Patient safety and risk management remain high on my priority list and these are now more clearly integrated with the quality management department and program management. The pharmacy and therapeutics committee has changed its focus to be more proactive in reducing and preventing medication errors.

Let's hope we can keep tipping the scales to a positive balance!

Respectfully submitted,

A handwritten signature in cursive script that reads "Barbara Clive".

Barbara Clive MD, FRCP(C)
Chief of Medical Staff

THE YEAR IN REVIEW



The Big Drop

A five-ton magnet was dropped into place in preparation for Credit Valley's first MRI suite. An anticipated 4,000 patients will be served annually by the state-of-the-art diagnostic tool.



I Can See The Airplanes Overhead

Credit Valley's first offsite renal dialysis center was officially opened by the Minister of Health and Long-Term Care, Tony Clement, in October. The 24-station clinic provides a more comfortable treatment space for the patients. The skylights provide a room with a view!

CREDIT • VALLEY



Credit Valley's First Clown Therapist

Little Ibrahim Ahmed is doing more than just catching bubbles in his net. He's capturing the spirit of imagination and creativity that is thriving thanks to the hospital's new therapeutic clown program.

Professional Excellence in Nursing

The nurses at Credit Valley received the College of Nurses of Ontario's Quality Practice Setting Award. The initiative included a hospital wide quality practice setting survey, which enabled the nurses to document what they do best and what they need to improve within their scope of practice.



Making Things Happen Together

There was plenty of construction on the Credit Valley site this year. The new signalized intersection on Erin Mills Parkway was made possible by the Region of Peel and the roadwork on the hospital site was a joint venture between the province and the hospital.



Preparing for the Future

Hospital staff, physicians, patients, and volunteers were given a sneak preview of the hospital rooms of the future. The project office prepared three mock-up patient rooms to test materials and equipment that could be used in the patient rooms that will be part of the expansion project.



Cardiac Patients Take Note

The Credit Valley Hospital remains a leader in successful cardiac outcomes. Credit Valley's survival rate is 3 per cent higher than the North American average for 30 day mortality rates. And, for the third year in a row Credit Valley's medical residents have voted our ER as the best teaching experience of all the Toronto area teaching hospitals.

C R E D I T • V A L L E Y

ANNUAL REPORT OF THE CHAIRMAN OF THE CREDIT VALLEY HOSPITAL FOUNDATION

Friends of Credit Valley have risen to the challenge in this fiscal year amidst chaos in our world. The number of donors to our Foundation increased by 28%. You have given nearly \$1.8 million to the Annual Fund, an increase of 18% towards programs and equipment that allows us to help Credit Valley provide excellent healthcare.

This success is in addition to your crucial involvement in our capital expansion campaign.



The Hospital Foundation kicked off its staff appeal this year. The expansion will benefit our patients as well as our staff by providing an appropriate working environment for our staff and physicians.

Credit Valley today, means many things to many people. By the end of this expansion project, which is only four years away, it will mean even more:

The total expansion project, will double the size of the existing hospital to more than \$300 million. Our Foundation has committed to raise \$50 million from the private sector in our community.

Credit Valley is the place where life begins for close to 4,000 babies per year. In the future, the hospital will care for a projected 5,500 babies each year. The new regional maternal child centre will provide pre and post natal care for the current population and for high risk mothers-to-be from *this* region as well as Halton, Dufferin, Wellington and even some from Simcoe county.

It will provide advanced paediatric and neonatal care for children who will no longer need to be transported downtown. This will include paediatric oncology patients and developmental follow up for premature babies.

The hospital is a place where currently two million lab tests are performed every year. This will increase to 4.3 million tests including genetic screening and follow up counseling for families concerned about possible hereditary links to illness.

It is a regional care centre with on-site and satellite locations in the community currently providing 54 dialysis stations for people with kidney disease. At the completion of this campaign there will be 80 stations operating three shifts a day, six days a week.

Credit Valley is the Carlo Fidani Regional Cancer Centre providing full service care for those dealing with cancer. From diagnosis through chemotherapy, radiation, nutritional counseling, and palliative care, this cancer centre will set the standard for compassionate care with dignity.

And finally, it is a community hospital serving you and me, our families, our friends and our co-workers. Providing the best in health care for us all.

We consider you to be important members of the Credit Valley Circle of Friends. You have made our successes possible.

We give you our thanks, and our wish for the good health of you and your families, and your circle of friends.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'John Dunn', with a long, sweeping underline.

John Dunn
Chairman
The Credit Valley Hospital Foundation

SENSE OF COMMUNITY IN A HEALING ENVIRONMENT

Historically, hospitals have been primarily associated with treatment relating to physical injury or illness. But the world is a different place these days. More and more hospitals are realizing that treating the individual is about caring for more than the body. Healing spaces, spiritual support, and emotional comfort are at the forefront of modern-day care models and Credit Valley's vision for the future is no exception.

The architectural firm Salter Farrow Pilon has brought the hospital's vision to life with an innovative plan that will evolve care areas, public spaces and the hospital's grounds into an inviting village – complete with way-finding landmarks, therapeutic green spaces and individually designed program “neighbourhoods” that will create a homey feel for patients and families, staff, and everyone that visits the hospital.



The vision for the hospital's new lobby will set the scene as the village gathering place. An arching wooden “tree” sculpture will spread its branches up and outward to the ceiling that will let in natural light. The tree design is symbolic of the hospital's new logo – a tree with growing branches (our programs) reaching out into the community. This environmental theme will be carried over into every area – where natural wood, soft colours, open spaces and light will be the focal point of design.

Finding your way around a hospital can be challenging even with the most detailed instructions. Credit Valley will physically double in size during our expansion and close attention is being paid to way-finding and signage. Upon entering CVH, visitors will easily navigate their way along the village-style “main street” complete with landmarks and signage relating to the local flora and fauna associated with the Credit River.

The healing power of water has not been overlooked. The landscape vision includes environmentally conscious ponds that will capture rainwater. Indoor gardens will allow patients with green thumbs to continue their love of gardening – a highly therapeutic and rehabilitative activity.



Most inpatients spend only a few days in hospital. However, the average stay of a complex continuing care patient - suffering from serious illness such as Multiple Sclerosis, ALS, Alzheimer’s, or kidney disease - is 200+ days. That’s a long time to be looking at the same four walls. Palliative patients remain for approximately 18-21 days. While their stay is brief, comfort, pain management and support are vital to ensure they live their last days with a sense of dignity, peace and security. Outpatients, such as those receiving dialysis, visit the hospital on a regular basis for varying lengths of time.



Paediatric patients, expectant mothers, and people visiting the emergency department or having day surgery all have unique needs and priorities to make their healing process successful.

The different care teams at Credit Valley have worked with Salter Farrow Pilon to ensure that our renovations and new program areas will satisfy these unique needs. When asked what is most important to them, complex continuing care patients expressed the desire to be able to display and store their belongings – to create a sense of their own personal space, their own room. The care team has also looked at equipment storage, ceiling lifts and collapsible handles on furniture to alleviate the cramped spaces that often hinder patient care and mobility. The new paediatric areas will include classroom teaching facilities and a teen lounge. In the new village design, program neighbourhoods will have wide pathways to accommodate two-way wheelchair traffic, an assortment of plants and artwork, and family areas – somewhere to go for a quiet moment not too far from a loved one's room.

Exploring and accommodating everyone's needs is a time-consuming but meaningful process for us as health care providers. Credit Valley believes that our environment needs to be just as therapeutic as our programs and expertise in order to provide the best possible care for our patients. We invite you to call on us for any information about our expansion as we continue to grow to serve you better.



C R E D I T • V A L L E Y

READY, SET GROW... OUR PROGRESS OVER THE PAST YEAR

July: Ambulatory Care move to former Econocentre creates space in ER

August: Renal Care Centre at Watline receives first patients

October: MRI suite opens

November: Valley House welcomes new tenants

November: New exit opens in main parking lot

December: Erin Mills intersection opens

December: Relocating laser eye clinic to 2C creates space in ER

December: CCAC moves into former community relations office

March: Capital Project Community Information Evening

Renovations and Moves

Emergency Department: Renovations in the emergency department - ambulatory care area - are making room for more stretchers where the laser eye clinic used to be. Completion: January.

Maternal Childcare Program: These components are moving from 3C to the first floor of the Professional Building at 2300 Eglinton: high risk clinic; non-stress testing area; ultrasound; breast-feeding clinic; post-partum clinic. This move will create six new inpatient beds on 3C. Completion: mid-February.

Day Surgery: Once the maternal childcare services move to the Professional Building, day surgery move from 1B to the former non-stress testing area on 3C. This move will create five new in-patient beds on 1B. Completion: late-February.

Cardiopulmonary and CCAC: There is now space available in the main building in areas vacated by the tenants of Valley House. The Community Care Access Centre (CCAC) has moved into the former community relations office and the cramped cardiopulmonary area is expanding into some of the former administration offices to create another pulmonary function lab. More moves will follow once patient care priorities are finalized.

What's Coming Up

Relocation of Helipad, Sept. 2002: This project has gone to tender and we'll be on our way as soon as Government approves the budget. The helipad is being moved further north on the property next to Credit Valley Road at Eglinton Avenue.

Inpatient A-wing, March 2004: All designs, program and budget estimates have been completed and are with Government for approval. A mock-up of three rooms and a corridor will be built on level one in a former storage area. In April, patients and staff will be invited to "test" the space, finishes and other design elements in order to ensure the best model for them in our new wing.

Inpatient Mental Health and Rehabilitation Expansion E-wing, March 2005: This expansion will begin once A-wing is completed allowing complex continuing care patients to move there.

Carlo Fidani Peel Regional Cancer Centre and Ambulatory Care F-wing, Aug. 2004: We are looking at phasing the construction in order to be able to start some work on the site during the helipad project. F-wing includes the new main entrance and lobby area depicted in the artist's sketch on page one.

Maternal Child Care H-wing, Sept. 2005: This building will include expansions to support services such as laboratory and material's management. We are working with Government to determine the full scope and budget to expand those areas.

Parking: As soon as Government approves the hospital's overall Comprehensive Master Plan, we will be able to determine how much additional parking will be needed on the site. In the meantime, options being considered are vertically expanding the existing parking deck or building on the surface parking lot.

REPORT OF THE PRESIDENT OF THE CREDIT VALLEY VOLUNTEER PARTNERS

This year has once again been busy for our dedicated volunteers. Throughout the year 660 volunteers donated over 71,330 hours of their time and service.

In the fall of 2001 we changed our uniforms. Our new uniforms provide us with a professional and consistent look from our adults and youths that reflect the new face and image of The Credit Valley Hospital.

Our financial commitment to The Credit Valley Hospital for the year 2001/2002 was \$200,000; this was not only met but also exceeded with our volunteers donating \$213,092. Our efforts to raise these funds came from the many volunteers who work in our gift and flower shops, on our HELPP lottery desk and participated in our geranium sale, theatre night and Christmas bazaar.

In recognition that by investing in the youth of today, we will be providing future leaders and volunteers for tomorrow, a youth volunteer coordinator was recently hired. Funding for this position to develop and administer the youth program within the hospital will come from the Credit Valley Volunteer Partners.

The Credit Valley Volunteer Partners Board of Directors has continued to work on the four areas of growth identified by the volunteer membership in their strategic planning process; internal and external communication, patient services, board recruitment and development and volunteer recruitment and development. In February information was distributed to all volunteers encouraging their feedback on this plan. Volunteers will continued to be involved as specific action plans become implemented.

I would like to take this opportunity to thank The Credit Valley Volunteer Partners' Board for their hard work and dedication throughout this past year. I would also like to thank all the volunteers who give so much of their time to support our patients and staff in achieving the Hospital's vision and mission.

Respectfully submitted,



Sheila Mosey
President of Volunteer Board

WE'RE ALREADY PRETTY EFFICIENT!

How do we know we're delivering health care efficiently? The Ministry of Health and Long-Term Care has a way of measuring just that. It's called a "Cost Per Weighted Case Analysis" which is a way of putting a price on a particular medical procedure.

For example, the "average" cost of a normal, uncomplicated birth of a child, under the cost per weighted case analysis, is approximately \$2600. In this particular example, and in overall cost per weighted case analysis of all of the medical procedures measured by the Ministry, Credit Valley ranks two per cent *below* the average cost of hospital care (figures based on 2000/01 data). In other words, it costs Credit Valley two per cent *less* than the average at similar hospitals to provide your health care.

This is evidence of our good management and fiscal responsibility. However, we are concerned that we may become "too efficient". What that means is, treating more patients, with no additional resources, including staff, may actually increase risk to quality patient care.

For example, our hospital is designed to provide care for 366 patients. Right now we are caring for 395 patients. We don't really have space for those additional patients, but we've doubled up and in some cases put three patients in a room originally designed for one patient in order to meet the needs of our growing population. We haven't significantly increased staffing to handle the additional patients. The patients are receiving care, but the cost of providing that care – or our manpower costs – are less than average. As a result, our cost per weighted case decreases, while our patient numbers increase. And that has a direct impact on staff which often manifests itself in staff illness, employee burnout and could influence our ability to keep and attract good staff.

The Ministry of Health and Long Term Care, working with the Ontario Hospital Association, and the GTA/905 Healthcare Alliance, are working diligently to implement a funding formula that recognizes the intricacies of the cost per weighted case as well as the impact of growth in the most densely populated communities such as Mississauga. Inflation, new and expensive drugs, state of the art technologies, the fact that people are living longer, as well as the rapid population growth, equal never-ending cost escalations.

The Credit Valley Hospital CONDENSED BALANCE SHEET

As at March 31

	2002 \$	2001 \$
	[000's]	
ASSETS		
Current Assets	13,046	16,244
Long-term investments	70,434	66,491
Capital assets, net	96,881	84,999
	180,361	167,734
LIABILITIES AND NET ASSETS		
Current Liabilities	31,620	20,427
Long-term debt	4,810	4,942
Accrued post-retirement benefits	3,433	3,433
Deferred capital contributions	108,564	98,581
Net Assets	31,934	40,352
	180,361	167,734

CONDENSED STATEMENT OF OPERATIONS

Year ended March 31

Revenue	167,041	148,777
Expenses	175,459	150,826
Deficiency of revenue over expenses for the year	(8,418)	(2,049)

AUDITORS' REPORT

The above condensed balance sheet and condensed statement of operations are derived from the complete financial statements of The Credit Valley Hospital as at March 31, 2002 and for the year then ended on which we expressed an opinion without reservation in our report dated May 3, 2002. The fair summarization of the complete balance sheet and statement of operations is the responsibility of management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the condensed balance sheet and condensed statement of operations.

In our opinion, the above balance sheet and statement of operations fairly summarize, in all material respects, the related complete balance sheet and statement of operations in accordance with the criteria described in the Guideline referred to above.

This condensed balance sheet and condensed statement of operations does not contain all the disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that this condensed balance sheet and condensed statement of operations may not be appropriate for their purposes. For more information on the Hospital's financial position, results of operations and cash flows, reference should be made to the related complete financial statements.

Mississauga, Canada
May 10, 2002

Chartered Accountants

Copies of the complete audited financial statements are available upon request.

MORE PEOPLE, MORE DEMAND = MORE MONEY? WE'RE NOT SO SURE

We believe it's important that our public recognizes the challenges we face in our effort to provide the care that our patients expect from us and that we are determined to provide to them. After all, our mission is to offer *quality compassionate health care to the people of the growing communities of Peel and Halton.*

Therein lies the crux of the problem -- the growing communities of Peel and Halton.

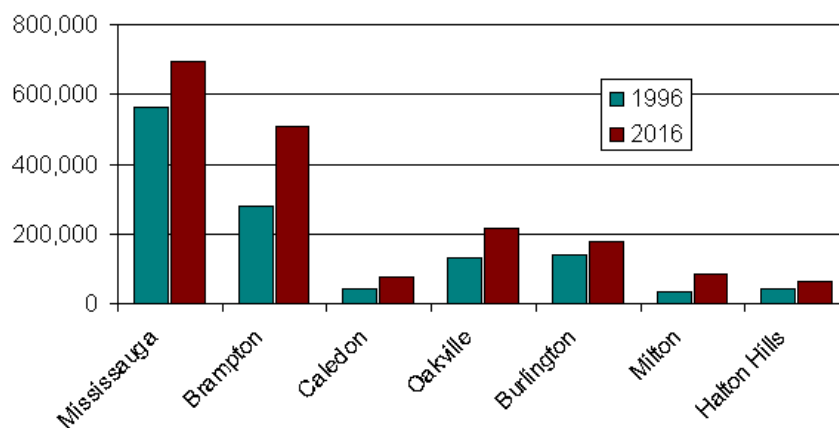
Anyone who lives in Mississauga and to the north and west of us, knows that the city is growing dramatically. This is great for the economy. But it's a real problem for Credit Valley. As more people move into the area, there is a greater need for hospital care. More people means more occurrences of illness and injury.



Funding for Growth

The Ministry of Health and Long Term Care is well acquainted with the challenges presented by our growing community. It's a problem shared by many hospitals in the GTA/905 area. The MoHLTC is working hard to implement a funding formula that will adequately reflect the impact of growth on hospital's funding needs.

Last year, Credit Valley received a 10.9 per cent increase in operational base funding for the 2001/02 fiscal year. This equates to an approximate \$12 million increase to the hospital's base budget. Part of the money was in recognition of the increased demand for services (due to population growth) during the 2000/01 fiscal year. The problem is, the community we serve didn't stop growing...and if the projections are accurate, won't stop growing until 2016 as the graph below shows.



Source: Regional Municipalities of Halton and Peel, 2000

So our money problems will continue to grow as the population grows.

We are hopeful that we will receive “growth funding” to cover 2001/02 growth and inflation that will be carried over into this year's base budget. However, we're not so optimistic that we'll receive money to cover the projected demand for our services during the 2002/03 fiscal year.