

**THE 2002/03
ANNUAL REPORT
JUNE 5, 2003**

BOARD OF GOVERNORS

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

Cindy Heinz

*Katie Mahoney (*representing Region of Peel*)

*Jill McGill (*President, Credit Valley Volunteer Partners*)

Jim Murray

Joanne Rogers (*appointed October 2002*)

Wendy Roney

Peter Smith

Bart Wassmansdorf

Geoff 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: KEEPING THE PROMISE

It has been an exhilarating and exhausting year. It has been one of change and challenges. It has been a year where pledges long promised by others have been realized. It has been a year where we, despite significant challenges, have kept our promises to you, our patients and families. It has been a year where we have gazed long and hard into the future, making note of the promises we must act upon to ensure your future good health.

This annual report looks at the promises made, those kept, and those we are making for the future. We recognize that like those past promises, the promise of the future will no doubt be fraught with obstacles. But our goal is clear, our strategy is sound, our resolve is unwavering.

We, as members of The Credit Valley Hospital Board of Governors, made a promise as we took our oath of office, to guide this hospital's administration to the best of our ability to ensure the best health care for the people we represent – our friends, our families, our neighbours, our co-workers. It is a daunting task. But we have placed our confidence in our world-class health professionals and administrative team who work tirelessly to maintain the delicate balance between good health and fiscal responsibility. In a year that challenged them with TB, West Nile, Norwalk, SARS and accreditation, they have proven without a shadow of a doubt that our confidence is not misplaced.



FRONT ROW: CINDY HEINZ, WAYNE FYFFE, GORDON STOVEL, DR. BARBARA CLIVE, HARINDER TAKHAR, KATIE MAHONEY.

MIDDLE ROW: PETER SMITH, JIM MURRAY, RENATO DICENZA, BART WASSMANSDORF, GEOFF WATSON, JILL MCGILL, CHERYL ENGLANDER.

BACK ROW: RICK PODSIADLO, LOUIS GIRARD, BILL GARDINER, CATHERINE CLARK, DR. PAUL GURLAND, NORM LOBERG, JOHN DUNN.

ABSENT: DR. ASHE DEVANESEN, WENDY RONEY, JOANNE ROGERS

CREDIT VALLEY AT A GLANCE

Our Staffing Complement...

Nursing	1067
Professional Staff	610
Physicians with Privileges (including active, associate and courtesy)	374
Administrative	36
Service and Support	291
Total	2378

Our Programs...

Regional Programs

Renal
Oncology
Maternal/Child
Genetics

Other

Medicine
Surgery
Cardiopulmonary
Mental Health
Emergency
Rehabilitation

Activity Snapshot

Admission Type	1996/97	2001/02	2002/03
Surgery	7,770	14,007	14,827
Births	3,540	4,080	4,264
Emergency	59,870	66,692	66,815
Outpatient Visits	214,932	293,485	296,436
Inpatient Services	98,460	129,504	128,328

As the activity snapshot attests, our inpatient service activity decreased slightly over the previous year whereas our outpatient service activity remained about the same. This was a concerted decision to maintain activity at the previous year's levels due to our tenuous financial situation as well as due to limited physical space to provide additional care.

The Ministry of Health & Long-Term Care has approved a capital project (approximate value of \$135 million) to provide enhanced chemotherapy, new radiation services, enhanced ambulatory care, and 10 new mental health beds to the community. The buildings are expected to be open in May, 2005. The Hospital is currently working on approval of additional inpatient capacity to meet provincially mandated Health Services Restructuring Commission directives.

CVH ended the year with a deficit of \$1 million compared to a forecasted deficit of \$11.5 million (before building depreciation). The deficit was related primarily to inflation issues, and did not address increased capacity. Additional funds approved in July, 2002 and March, 2003 helped to offset the projected deficit. Working capital improved by \$15.9 million due to liquidation of long term investments used to retire \$13.3 million of bank indebtedness caused primarily by unfunded expenses of \$8.5 million in 2001/02.

ANNUAL REPORT OF THE PRESIDENT & CHAIRMAN

“Keeping the Promise”

It is our pleasure to report on the activities of the hospital and the Board of Governors during the 12 month period April 1, 2002 to March 31, 2003. At all times we remain focused on our obligation to keep the promise of access to quality care; satisfaction with working conditions and career opportunities; and achievement of financial health for the organization.

In terms of access to quality care, hospitals need the best staff, sufficient capacity to deliver services, a plan for the future to ensure capacity, and an objective measure that we are indeed delivering quality services.

In last year’s annual report, we suggested that readers “stay tuned” for a sod-turning ceremony for the long awaited ambulatory care expansion and cancer centre building project. On January 31, 2003, for the first time in the history of Credit Valley Hospital the Premier of the province of Ontario officiated, along with the Minister of Health and others, at a sod-turning ceremony to begin the construction of a 300,000 square foot addition to the hospital, to be constructed by our partners, PCL Construction. This long awaited expansion was a milestone in the history of the hospital and certainly a highlight of the last year.

This year, we invite you to “stay tuned” again for a major announcement on the next phase of construction of our comprehensive master plan, namely A wing (inpatient capacity) and H wing (primarily related to our role as a regional centre for high risk neonates and high risk obstetrics)

In addition, the Board endorsed a report undertaken by all hospitals in Halton and Peel, along with the District Health Council, which demonstrates the need for Credit Valley and all other hospitals to complete the development of their existing sites and then to locate a facility north and west of Credit Valley to accommodate continued population growth beyond the year 2008.

As the year began, we were determined to develop a new strategic plan to guide our hospital over the next three to five years. The development of this plan was the major topic for our annual Board/medical/management leadership summit in October. At last month’s Board meeting, the Board adopted the plan, which resulted from an extensive consultation internally and externally throughout the past year. Copies of our new strategic plan are available to anyone who wishes one by contacting the presidents office.

Evidence that we have been able to attract and retain the best hospital staff, medical staff and volunteers, is the way in which they responded to various medical crises throughout the past year. Credit Valley and other hospitals were buffeted by infectious diseases with unprecedented intensity over the past year. We had unusual cases of tuberculosis, a Norwalk outbreak causing the closure of some of our inpatient wards over the winter, the first death in Canada of a patient from the West Nile Virus, and in excess of 50 days of ongoing crisis management due to an outbreak of SARS (Sever Acute Respiratory Syndrome). Our staff met these challenges with determination, commitment, and incredibly hard work. We are pleased that so many organizations have chosen to pay tribute to all hospital staff as a result of SARS, and this hospital is no exception.

Just before the province declared a medical emergency for SARS, The Credit Valley Hospital went through an exhaustive review by its peers in respect to the hospital's ability to meet or exceed national standards as determined by the Canadian Council on Health Services Accreditation. For an unprecedented fifth time in a row, the hospital has been granted full accreditation with no recommendations requiring action prior to the next survey in three years time. This is significant in the best of times, but considering the challenges that the hospital and its staff have faced over the last three years, this is truly a remarkable achievement for which every member of the CVH team should take considerable credit!

The Board and management of the hospital also have promises to keep in terms of working conditions and career opportunities for our employees and physicians. In order to ensure that there is a constant focus on this important aspect of hospital operations, the Board of Governors has established a human resources sub-committee.

The human resources sub-committee was pleased to review our continued successful recruitment, with fewer contract employees and fewer part time nurses than most other hospitals. Our turnover rates for jobs, and utilization of sick time, are lower than the industry average. The Board confirmed the priority to implement cost of living increases and market adjustments effective April 1st of each year despite considerable economic uncertainty.

As an outcome of our emphasis on human resources and strategic discussions at a previous leadership summit, the hospital is in the process of implementing a new program called "Our People Care". This program is intended to assist employees and medical staff in determining behaviors and attitudes which will best promote excellence in working conditions, team functioning, and quality patient care. In response to one of the regular surveys of our staff, the hospital has employed a full time staff educator to assist with the implementation of the Our People Care program as well as respond to the general education needs of staff as indicated in the survey.

Balancing the budget is an increasingly difficult promise to keep. The major reasons for this are continued economic uncertainty, slowness of announcements of funding from the provincial government, and ongoing growth in demand for services. We began the year with an economic crisis preceded by the largest deficit in the history of The Credit Valley Hospital for the year ended March 31, 2002. We are extremely pleased to report that at the end of the current year, March 31, 2003, the hospital has essentially a balanced budget (the deficit is less than 1% of total expenditures before building depreciation). This economic turnaround was brought about by excellent teamwork involving our local MPPs support for increased resources; public support for more expenditures for hospitals; new revenue ideas from manager's and others, hard work by managers and staff who focused on fiscal responsibility; the co-operation of our medical leaders and medical staff in ensuring that growth in service volume was kept within tolerable limits; and wise counsel and patience from the Board of Governors.

In July we received the first announcement of government funding for the fiscal year beginning the previous April. While this was welcome funding, it was insufficient to balance the budget, and there was no indication if further funds would be available in the fiscal year.

In September, the hospital issued a special article in our newspaper insert "A Credit To Your Health" in which we indicated the magnitude of the financial disaster facing the hospital along with a request to the public to provide suggestions about the various options the Board of Governors could choose to achieve a balanced budget.

In October the Board was asked not to take action to reduce service levels in order to achieve a balanced budget because an announcement of further funding would be made at the November meeting of the Ontario Hospital Association. At that meeting, the Minister of Health announced that there would be a third party review of all hospital finances in order to determine how an additional \$300 million would be distributed to hospitals across the province.

On February 4th, the leadership of the Board of Governors, management and medical staff at The Credit Valley Hospital met with the third party reviewers and answered their questions. At the end of the fiscal year, we received notice that we would receive an additional \$7.8 million.

Needless to say, the degree of uncertainty coupled with the agonizing choices of reducing and/or curtailing service volumes made the job of volunteer Board of Governors even more difficult than usual. We look forward to greater financial stability and predictability, hopefully brought about by current government plans for multiyear funding of hospitals.

In the meantime, the Board of Governors and management of the hospital will work with our staff and others to ensure that we continue to meet or exceed all financial benchmarks for efficient performance of Ontario hospitals, just as we have done to meet or exceed all quality of care standards.

Our Board of Governors is made up of sixteen members, elected by membership of the corporation at its Annual General Meeting and seven ex-officio members appointed by virtue of the position they hold in the hospital. Three individuals were appointed at the Annual General Meeting last year namely, Catherine Clark, Renato Discenza and Bill Gardiner, all of whom who have made significant contributions over the last year. Owing to a promotion to a position in the United States, we regrettably accepted the resignation of Paul Clayton. In October, the Board of Governors appointed Joanne Rogers until she could be elected by the membership at the next Annual General Meeting. Board members attended a total of nine meetings of the Board of Governors which included educational sessions on such diverse topics as ethics, changes to Community Care Access Centres, accreditation, clinical pathways, and Ontario Hospital Association advocacy.

Volunteerism is one of the greatest strengths of the Canadian healthcare system, and we want to acknowledge the support that our Board of Governors has provided to the entire hospital, but in particular, to us as leaders in the last year.

Volunteers are also extremely important to the delivery of quality patient care. The Credit Valley Hospital is blessed with an organization called the Credit Valley Volunteer Partners who continue to raise funds and provide that extra "tender loving care" which helps make an often frightful hospital experience much easier for all of our patients and visitors. In keeping with the high achievements of our staff and medical staff, our volunteer partners in the last year increased the volume of volunteer hours of service by nine percent. We want to thank our volunteers for their understanding during their temporary enforced absence from the hospital during the SARS emergency medical crisis, and we are glad they are back!

The hospital would not be able to maintain its state-of-the-art equipment nor complete its construction projects without the support of a well organized and enthusiastic Board of Directors and staff of our Credit Valley Hospital Foundation. Thank you to all involved for yet another successful year and in particular our thanks to John Dunn who after 12 years of serving on the Board of Directors stepped down as Chairman in the last year. We were

pleased that the Foundation through its focus group analysis, determined that our hospital and campaign slogan should be "World Class - Right Here".

The hospital received national attention through the CTV national news coverage of the West Nile Virus, congestion in hospital ERs across the country, and publication of the Romanow Report on the future of Health Care in Canada. This latter event saw news anchor Lloyd Robertson spend the entire day at Credit Valley Hospital and broadcast the national news live from our Emergency Department. The hospital was delighted to co-operate with the media because it is crucial that Canadians understand the importance of adequate funding and right sizing of our health care system to meet the needs of our growing and aging population.

As indicated earlier, we were pleased with the number of advertisements and other expressions of support for our hospital staff during the SARS medical emergency crisis. We are hopeful that the recommendations in the Romanow and Kirby reports, coupled with renewed awareness of the importance of the hospitals and healthcare workers, will reduce the uncertainties of funding for ongoing operations and building projects experienced over the past decade.

Finally, we would be remiss if we did not take close with a special tribute to our extraordinary staff and physicians for the way in which they dealt with the unique, varied and stressful challenges presented by SARS. You are truly world class.

Respectfully submitted,



Gordon F. Stovel
Chairman of the Board



D. Wayne Fyffe
President & Chief Executive Officer

May 21, 2003

KEEPING THE PROMISE

So much has happened at Credit Valley over the past year it's been difficult to document it all. However, these bulleted items will give you a sampling of some of the hurdles as well as the accomplishments that have enabled us to keep our promise to you, the people we serve, of quality health care by our world class health care providers.

- In January the long-awaited sod turning event to officially begin construction of The Carlo Fidani Peel Regional Cancer Centre was held (see photos "Keeping the Promise: The Construction Project"). The 300,000 square foot addition to the existing hospital will provide a centre of excellence for oncology care as well as additional ambulatory care space for our other regional and community programs. It was the first time the Premier of the province ever attended an event at Credit Valley.



- Just prior to the SARS crisis, the hospital was visited by three surveyors from the Canadian Council of Health Services Accreditation, March 24, 25, 26.



- This followed months of preparation of documentation and review of hospital policies and procedures. The surveyors awarded Credit Valley with an unprecedented fifth accreditation with no recommendations for action. Truly world class.
- Code Orange at William Osler Health Centre in late February meant Credit Valley took some ambulatory patients as well as 270 additional renal dialysis patients from Osler over a five day period. It was a credit to our dialysis staff and many others that we were able to accommodate the additional patient load.



- Code Orange - SARS. The severe acute respiratory syndrome (SARS) crisis meant cancellation of clinics and elective surgeries. It meant severe visitation restrictions. It meant our volunteers and students were forced to stay away. We have not yet recovered from the ramifications of these measures. Our staff

and physicians performed as the true professionals we know they are. Truly world class.

- Infectious diseases specialist, Dr. Neil Rau was credited with “sleuthing out” the West Nile Virus at The Credit Valley Hospital in the late summer. His expertise and commentary continues to be sought by newsmakers throughout the country and beyond.

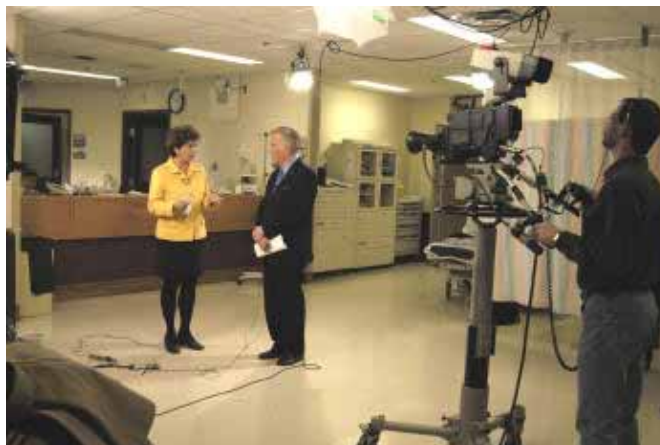


- Norwalk Virus (in December) caused nursing unit "closures", and major infection control initiatives such as hand-washing stations on each nursing unit. This was a precursor to the infection control initiatives undertaken for SARS. The importance of good hand-washing techniques was emphasized at that time with hand-washing stations put in place throughout the hospital. But it was never more prevalent when the hospital, like all others in the Greater Toronto Area took on the SARS crisis.
- The obstetrics and gynaecology program reports an increasing workload in the antenatal high risk clinic - providing assessments and follow-up for higher risk obstetrics patients “closer to home” with multidisciplinary team including obstetricians, radiologists, endocrinologists, neonatologists, geneticists, nursing, nutrition counseling and social work and psychology staff.
- The electronic child health network (eCHN) was implemented to provide consistent and immediate electronic information sharing between member hospitals.
- The west cluster, regional maternal/child network continued to develop and implement a series of joint educational programs to provide a consistent approach to maternal/child care throughout the hospitals in Halton and Peel which form the “west cluster” of hospitals in the Child Health Network. For example, interactive methods of instruction were used to teach the skills of neonatal chest tubes, ventilation, parenteral therapy, phlebotomy, and infant nutrition. This was delivered by 12 local facilitators (RN’s and RT’s) from the four organizations of the West Cluster and was repeated on eight different dates. Total attendance – 175.
- A team of 24 regional multidisciplinary team members led by Dr. James MacKinnon from CVH has developed the first regional neonatal pathway for feeding the compromised newborn. The pathway will direct the practice of the team when initiating feeding plans for the compromised newborn in our nurseries.



- We continued to expand paediatric and newborn services in keeping with responsibilities as a regional children’s health centre and an advanced level II centre for maternal and newborn care.
- Funding was secured from the Therapeutic Clowns Canada Foundation for continuation of the Therapeutic Clown Program.
- Credit Valley received formal designation as a POGO (Paediatric Oncology Group of Ontario) satellite, one of four satellite oncology programs in the province.

- Speech language pathologists and nursing staff at Credit Valley developed and implemented a new swallowing screening tool to be used when patients are seen in the ER on weekends or after regular outpatient hours. This screening tool forms an integral part of best practice in stroke care and allows for more timely evaluation of a patient's ability to safely manage medications, their own secretions, and oral nutrition.
- Ten staff from the areas of nursing, social work, physiotherapy, occupational therapy and speech language pathology departments participated in a rehabilitation education program for stroke (REPS). The staff has been certified as “stroke experts” and is now acting as mentors to the broader in-house multidisciplinary team working with stroke patients.
- The rehabilitation day hospital reported the highest proportion of referrals from inpatient units in years. In 02/03. Seventy-eight percent of the referrals were from inpatient units and 22% from the community. Of the inpatient referrals, 64% were from the rehabilitation unit, and 36% were from acute care, demonstrating the role day hospital plays in facilitating patient movement through the hospital and discharge from inpatient care.



- CTV National News was hosted *live* from Credit Valley's emergency department, in November, the day the long-awaited Romanow Report was publicly released. Host Lloyd Robertson and National Health Reporter Avis Favaro reported on the hospital's

reaction to the report and called upon reporters from across the country to contribute their reports to the national news cast.

- Dr. Joseph Wong once again traveled to China as part of his *Smile China* initiative. Dr. Wong was recognized by the Republic of China for his humanitarian efforts.
- Vincent Lo, director of psychology, joined an international medical aids team to provide teaching and clinical consultation to 3 mental health hospitals in Suzhou, China.
- Credit Valley's pastoral care department became a teaching site for five student chaplains studying the clinical pastoral education (CPE) program.
- Credit Valley has mentored 734 Students in 13 different health professions totaling 79,864 hours of clinical time over the past year.

- Medical students from the University of Toronto have once again voted their "learning experience" in the CVH emergency department as the best work experience of any of the hospitals hosting medical students from U of T.



- A shift to higher acuity /severity of illness in the emergency department is a continuing trend. Several medical directives have been established to allow nursing staff in the ER to initiate treatment and or diagnostic tests while patients are in the waiting room in order to provide timely intervention.



- The emergency department took a little time for some fun as Dr. Rhonda Taylor was surprised with her "Thrill of a Lifetime" to visit the set of the television comedy/drama "Scrubs" filmed in Los Angeles, California. Rhonda even appeared in a cameo role on the actual television show as part of her "thrill".

ANNUAL REPORT OF THE CHIEF OF MEDICAL STAFF

“Worse than not having sight is not having vision”. Helen Keller.

At The Credit Valley Hospital our vision is “to be the finest hospital in Canada in the hearts and minds of the people we serve”. Maintaining this vision has enabled us to ‘keep the promise’ of our mission to the patients of The Credit Valley Hospital and the people of our community.

Evidence that this promise has been kept is in the accomplishments of our medical leaders. Dr. Lancelot Tin arrived safely from Toledo, Ohio in the summer of 2002 to take on his role as the new chief of surgery. He has included department of surgery to deal with our immediate issues of space and overcrowding. The plan promotes the use of minimally invasive surgery to reduce length of stay, reduce the burden on our inpatients beds and provide state of the art care to surgical patients. Dr. J. Guy, former chief of surgery, left us in the Fall of 2002 to provide leadership in a growing department of surgery in the United Arab Emirates.

Dr. Eric Letovsky was appointed for a second five year term as the chief of the emergency department. Dr. Letovsky’s passion for his work has led to ongoing recognition of Credit Valley as an outstanding teaching hospital and a long list of new physician recruits to our emergency medical staff.

In November 2002, Dr. Manish Maingi was appointed as the new medical director of the cardiac programme. Dr. Maurice Druck is thanked for his leadership in this programme since its inception. The combined excellence in the emergency and cardiac programmes has allowed us to exceed national benchmarks in the many aspects of care of heart attack victims.

Dr. Sheldon Fine, chief of oncology, was officially appointed regional vice president, Cancer Care Ontario, with added responsibility for the Peel Regional Cancer Program, bringing us a step closer to providing this essential service closer to home.

Dr. John Srigley and his department are congratulated on a second successful accreditation through The College of American Pathologists.

Dr. Battigelli and the members of his mental health department have been recognized for the excellence in patient care through the external review completed in October. Dr. Battigelli, and many other leaders, faced some of our most challenging days in the Fall of 2002 as we developed a “recovery plan” for our looming deficit. Recognition of our efficient and high quality patient care by the Ministry of Health and Long-Term Care’s Third Party reviewers allowed us to continue our work in our many community and regional programmes.

Dr. David Clarkson, chief of the department of family medicine must be recognized for establishing our first “hospitalist” programme. Drs. Kroll, Deppisch, Besik, Hong, Boyko, and Clarkson are skilled and committed family physicians who provide care to those patients who require admission to the hospital but do not have a family doctor on staff.

Our commitment to excellence and safe patient care is also evidenced by the development of new policies and practice guidelines. The clinical practice guideline on the administration of blood products recognizes the rights of patients to be informed of the relevant material risks of blood products, an ever-increasing concern in our society. Our policy on disclosure of error

and misadventure was discussed widely throughout the organization. This policy recognizes the patient's "right to know" and reminds us that we can always learn from our mistakes.

The clinical trials task force led by Dr. R. Grossman and Connie Day worked very hard to develop clinical research policies to comply with the new federal requirements based on the *Good Clinical Practice Guidelines* of the International Conference on Harmonization. CVH is recognized as a desired facility for clinical research because of our large volume and variety of patients, high quality of medical staff and stringent research protocols.

In the Spring of 2001, Drs. Kelton, Dean of the Faculty of Health Sciences, and S. Denberg, Associate Dean of Faculty of Health Sciences from McMaster University visited our medical advisory committee in an ongoing dialogue in pursuit of a teaching affiliation with The Credit Valley Hospital. We continue to recognize the importance of teaching health professionals to enrich our lives, patient care and to assist with future recruitment in the competitive world of medical human resources.

All of these medical accomplishments at The Credit Valley Hospital can only be realized when there is cooperation and support from our senior management team and our committed volunteer Board members. Together, maintaining the vision and 'keeping the promise' of our mission, allows us to keep our eyes on the light at the end of the tunnel during this time of healthcare uncertainty.

Respectfully submitted,

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

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



CREDIT VALLEY
THE CREDIT VALLEY HOSPITAL

January 10, 2003

Mr. Gordon Stovel
Chairman of the Board of Governors
The Credit Valley Hospital

Dear Mr. Stovel

On behalf of the MAC, I would like to extend our appreciation to the Board for their exceptional efforts in ensuring the Carlo Fidani Peel Regional Cancer Center and Ambulatory Care expansion becomes a reality.

Through the generous time and committed efforts of individuals such as yourself, Bob Ferchat and Bart Wassmansdorf in securing the funding for this phase of CMP, the Credit Valley Hospital is positioned to better fulfill its mission to *offer quality passionate care to the people of the growing communities of Peel and Halton*. On their behalf, we thank you.

Yours truly,
The Medical Members of MAC

Dr. Barbara Clive

Dr. Jitendra Atkayde

Dr. David Clarkson

Dr. John Srigley

Dr. Matt Gysler

Dr. Pam Coates

Dr. Lance Tin

Dr. Eric Letovsky

Dr. Paul Philbrook

Dr. Asha Devanesen

Dr. Sheldon Fine

Dr. Michael Barsky

Dr. Ron Grossman

Dr. Marino Battigelli

Dr. Paul Gurland

Dr. Can Nguyen

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ANNUAL REPORT OF THE CHAIRMAN OF THE CREDIT VALLEY HOSPITAL FOUNDATION

It is our privilege to address this annual report to you, the hospital community.

The Credit Valley Hospital Foundation Board of Directors has made a commitment to enable the delivery of “*world class*” health care “*right here*” in this community. Our commitment has both tangible and intangible qualities. The tangible is obvious. We have launched a \$50 million capital campaign in support of Credit Valley’s \$300+ million expansion project. The intangible is our continued philosophy to build, nurture and enhance relationships with our donors and our community.

This past year, the Foundation conducted several focus groups to assess your perceptions of Credit Valley. Overwhelmingly, you and your fellow citizens named us your hospital of choice in Peel/Halton region. Ranked amongst the best hospitals in downtown Toronto, you told us that Credit Valley provides *world class* expert care, *right here* in our own community.

“*World Class Right Here*” emerged as a testament to the medical expertise, state-of-the-art technology, unprecedented commitment to caring about our patients and leading edge medical research that Credit Valley offers. Much more than a slogan, it is a state of mind, a workplace of choice, a sense of pride of accomplishment and a goal to continue the achievements and distinctions demonstrated in our first 18 years of operation.

Our donors inspire Credit Valley health care teams to be the best that they can be. With their support we achieved unprecedented growth this past year. The Foundation acquired more than 4,000 new donors, and a 73% increase in overall giving. Our Monthly Giving Program has grown by 130%.

We also welcomed two new donors to our Million Dollar Club including GlaxoSmithKline Canada Inc. and the WB Family Foundation, in addition to existing members Mr. Carlo Fidani, The Canadian Cancer Society, The Credit Valley Hospital Partners and the Sikh Community in honour of Guru Nanak.

Our \$50 Million capital campaign stands at \$28.6 Million pledged – a demonstration of our community’s commitment.

The achievements are only possible with your support.

Thank you for helping make Credit Valley “*World Class Right Here*”.

Respectfully submitted,



Robert A. Ferchat
Chairman
The Credit Valley Hospital Foundation Board of Directors

THE PROMISE: WORLD CLASS RIGHT HERE

In May of this year, the Board of Governors adopted an official slogan that we believe represents the stature Credit Valley has achieved among our patients and families and the broader medical community, *“World Class Right Here”*.

It is because of Credit Valley’s reputation and expertise that it has been mandated by the Ontario Ministry of Health to broaden its scope of services to provide world class regional programs in:

- oncology
- maternal child health
- genetics
- renal dialysis

In addition to its current programs in:

- general medicine
- surgery
- emergency medicine
- mental health
- continuing/rehabilitation care
- cardiac services



Credit Valley is undergoing a \$300+M expansion project that will see the hospital expand from 500,000 to 1,000,000 square feet to ensure its continued ability to provide world class health care, right here for our community.

The Board of Governors is confident that we are world class not only because of an unprecedented five accreditations with no recommendations for action by the Canadian College of Health Services Accreditation (CCHSA) but for a multitude of other reasons that are witnessed each and every day by the patients and families we serve. Below are some of those reasons.

World • Class Regional Oncology Program

- Credit Valley, under the leadership of Dr. Sheldon Fine and in partnership with Cancer Care Ontario, has created an “Atlas of Outcomes” tracking and measuring each patient’s therapy and response. Patient outcomes are evaluated and shared with health care institutions to better inform future treatments and set the standards for care throughout the province.
- Credit Valley has the best toxicity outcomes for patients receiving chemotherapy. The national average for hospital admissions for drug toxicity following chemotherapy treatments is 20. Credit Valley’s admissions average six with none in the last two years.
- Credit Valley is spearheading an initiative known as “Translational Research” which will move research out of the lab and make new treatments available to patients sooner.
- The Carlo Fidani Peel Regional Cancer Centre will be equipped with four radiation therapy machines (with capacity to expand to six) and is expected to provide 1,300 radiation treatments when the cancer centre opens in the spring of 2005.

- The Carlo Fidani Peel Regional Cancer Centre will be the largest integrated oncology program in the country, serving more patients than the busiest cancer centres in the U.S.



World - Class Regional Program In Renal Medicine

- The new ambulatory care centre within The Carlo Fidani Peel Regional Cancer Centre will allow Credit Valley to grow from 65 renal dialysis stations to 80 stations to serve the growing number of patients with renal disease.
- The regional renal dialysis program will accommodate approximately 71,135 treatments annually.

World - Class Regional Maternal Child Centre

- At Credit Valley, one baby is born every two hours, every day, and every night of every year. We are growing a population for at least six elementary schools each year. With only six delivery rooms, our next phase of expansion will create a world class regional maternal/child center to handle in excess of 5,000 births per year.
- Credit Valley's antennal high risk clinic was started in May 2000 and provides specialized world class services for women with high risk pregnancies right here in our community.
- Credit Valley, in partnership with GlaxoSmithKline, has initiated an award-winning outpatient education program for children with asthma that is now being implemented in community schools.

World - Class Regional Genetics Program

- Credit Valley's regional genetics program, in partnership with McMaster Health Sciences Centre, has been accredited by the Canadian College of Medical Geneticists as a full-service clinical and laboratory facility and as a training program for medical genetics.
- Credit Valley's laboratory is one of only three in Ontario and seven in Canada to be accredited with the College of American Pathologists Laboratory Accreditation Program.
- Credit Valley's blood transfusion program is accredited by the American Association of Blood Banks.
- Our pathology department is headed by world-renowned physician, Dr. John Srigley, who was the only Canadian invited to a recent World Health Organization meeting of pathologists.

World - Class Surgical Program

- Credit Valley surgeons have pioneered advanced surgical techniques in urology and ophthalmology.

World • Class Diagnostic Imaging

- Credit Valley, in conjunction with its partnership with AGFA has implemented a complete Picture Archiving Computer System (PACS) — one of only four health care centres in Canada to fully utilize digital patient records and filmless imaging.



- Credit Valley has created a partnership with Philips Medical Systems which establishes the hospital as a luminary site for the Philips MRI (magnetic resonance imaging) unit. The hospital will showcase the MRI unit to physicians, technologists and administrators from across North America. As part of this agreement, Philips maintains the MRI as a state-of-

the-art system, as new software, sequences and hardware are developed over the next five years. Phillips has a 15-year relationship with the hospital and is known for its innovations in MRI. MRI is an advanced imaging tool using both magnetic fields and radio waves to image the human body. It is especially useful in imaging the brain, spinal cord, muscles and ligaments, abdomen and pelvis, as well as major arteries.

World • Class Research

- Credit Valley is involved in more than 200 clinical trials—more than at any other community hospital in Canada.
- Credit Valley is part of several large national study groups such as the National Cancer Cancer Institute of Canada and the National Surgical Adjuvant Breast Project.
- Credit Valley is developing formal research affiliations with the University of Toronto and McMaster University.

World • Class Cardiac Care

- Credit Valley has one of the best clinical outcomes in North America for cardiac patients as measured at 30 days post heart attack.

World • Class Emergency Department

- 95% of Credit Valley's emergency department physicians have obtained advanced certification in emergency medicine - more than any other community hospital in Canada.
- Dr. Eric Letovsky, Chief of Emergency Medicine, has been named a full professor of medicine at the University of Toronto.



PROMISES TO KEEP: THE CONSTRUCTION PROJECT

In January 2003, the official sod-turning marking the beginning of construction of The Carlo Fidani Peel Regional Cancer Centre and Ambulatory Care Centre was held. The 300,000+ square foot expansion will house state-of-the-art oncology treatment including chemotherapy and radiation. The bulk of the project will provide increased treatment space for our burgeoning regional ambulatory care programs. As well additional space for inpatient rehabilitation and mental health services will be part of this construction project. Please see below for more detail of just how much space is going to be required in order to provide world class care closer to home for our patients and their families.



“F” Block

Level One:

The Carlo Fidani Peel Regional Cancer Centre	48,000 sq. feet
<ul style="list-style-type: none"> • Outpatient, radiation therapy and physics 	

Level Two:

The Carlo Fidani Peel Regional Cancer Centre	12,700 sq. feet
<ul style="list-style-type: none"> • Chemotherapy and pharmacy • Supportive care 	

Diabetes Patient Education	5,200 sq. feet
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Renal Dialysis	16,500 sq. feet
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Volunteers	1,900 sq. feet
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Level Three:

Ambulatory Care Clinics	20,000 sq. feet
<ul style="list-style-type: none"> • Ophthalmology clinics • Medical/surgical clinics and minor procedures • Fracture/minor procedures • Satellite Diagnostic Imaging 	



Cardiopulmonary Services	20,000 sq. feet
<ul style="list-style-type: none"> • Diagnostic • Cardiopulmonary Clinics 	

Level Four:

Peel Regional Cancer Centre Administration	10,940 sq. feet
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- CVH Administration Areas 15,000 sq. feet
- Communications
 - Executive offices
 - Financial Services
 - Foundation
 - Medical Administration
 - Quality Management

“FA” Block

Level One:

- Rehabilitation Outpatient Services 26,381 sq. feet
- General rehabilitation
 - Day Hospital
 - Paediatric rehabilitation
 - Speech/Language Pathology/Audiology

Satellite Specimen Collection 2,400 sq. feet

Health Records 6,600 sq. feet

Level Two:

- Ambulatory Mental Health Services 26,000 sq. ft.
- Child and Family Services
 - General Adult Services and Specialized clinics
 - START Day Hospital
 - Schizophrenia



“E” Block:

Level Two:

- Inpatient Mental Health 23,000 sq. feet
- Unit A: Crisis Prevention
 - Unit B: Psychogeriatric

Ambulatory Mental Health 23,000 sq. feet

PROMISES TO KEEP: WHERE TO FROM HERE



- By the end of December 2003, The Carlo Fidani Peel Regional Cancer Centre and Ambulatory Care Centre will be shelled in. Work will be underway for internal fittings.
- By the end of December 2003, tenders will go out for the hospital's long-awaited "A" wing as well as "H" wing. "A" wing, located at the north-east end of the hospital will house two floors of complex continuing care and palliative care units. The upper two floors will house portions of the regional maternal child program (paediatrics and perinatal inpatient care). "H" wing will include a second floor for the laboratory. The third floor will house portions of the regional maternal child program (labour and delivery, and neonatal intensive care unit).
- Also during the winter of 2004 plans will be developed for a regional women's health centre and outpatient perinatal care.
- By the spring of 2003, construction will begin on "A" and "H" wings.
- Moving forward with the recommendations of the joint report of the Halton Peel District Health Council and Halton Peel Hospitals regarding future planning for a new hospital constructed in northwest Mississauga is an effort to meet the growing needs of our burgeoning community northwest of Credit Valley Hospital.
- Moving forward with the recommendations of the strategic plan of the Board of Governors adopted in May 2003. Strategic directions are as follows:
 - To clarify Credit Valley Hospital's community and regional hospital roles by defining the scope of services within its present clinical programmes, and identify areas of program enhancement, both community and regionally based, to meet the diverse health needs of our growing community.
 - To strengthen and enhance Credit Valley Hospital's integrated technological and diagnostic systems within the hospital and with our external health care partners, to ensure our professionals have the most state-of-the-art, efficient and safe systems to aid in the expeditious treatment of our patients.
 - To strengthen and enhance Credit Valley Hospital's position as the workplace of choice to recruit and retain the best health care professionals, volunteers and support staff.
 - To strengthen and enhance Credit Valley Hospital's Quality Program to create evidence-based, safety-focused and patient-centered systems for patients and staff.

REPORT OF THE PRESIDENT OF THE CREDIT VALLEY VOLUNTEER PARTNERS

Keeping promises is what the The Credit Valley Partners are all about. We promise to be there to assist our patients, staff and physicians in a variety of ways.

I would like to congratulate 726 volunteers, who kept our promise through their dedication and care to provide assistance in more than 60 areas of the hospital while accumulating 77,820 hours of help. This is an increase of nine percent over last year.

The adult group of volunteers who range in age from 18 to 88, work at varying times from a few hours a week to many hours each day. They come by foot, car or public transportation, and love every minute of their time at the hospital. The fine group of youth volunteers who, this year, went into many more areas of the hospital and were of immense value. All of the volunteers fulfilled every aspect of the mission statement "to offer quality compassionate health care".

With the help of these volunteers and participation of community businesses, a community theatre and visitors to the hospital, our volunteer partner's board has again excelled in its' fund raising activities. Our \$200,000 commitment to the capital campaign has been achieved as planned this year.

We also successfully melded together the volunteer units into a much more effective and aligned group of caregivers. We now boast a full board, which includes a director of retail, a vice president of fundraising, and two new members at large. Our youth volunteers are led by a volunteer coordinator, a position which has been funded by the volunteer partners. Volunteers are motivated by monthly information meetings and a quarterly publication "*The Volunteer Voice*", which insures that they are kept informed about our board's progress, hospital events and information on specific volunteer areas.

Our annual celebration of our success and recognition of our efforts was delayed this year due to SARS (severe acute respiratory syndrome). SARS impacted our ability to serve in our volunteer capacity as the provincial directives required that we stay at home for a period of several weeks. Our volunteers were sorely missed throughout the hospital. But it was gratifying as we were welcomed back to Credit Valley with open arms.

We go forward into next year with increased enthusiasm and confidence.

Respectfully submitted,



Jill McGill
Chairman, Volunteer Partners Board

2002/03 OPERATING SUMMARY

Overview

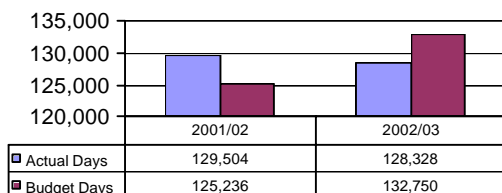
During 2002/03, the Hospital received confirmation of \$15.8 million of new base funding comprised of \$8.0 million in July/02 and \$7.8 million (Third Party Review) in March/03. The Hospital began the year with a \$19.5 million deficit.

As a result of higher than anticipated MoH and non-MoH revenues, containing other expenses, and not filling all staff vacancies, the Hospital ended the year with a \$1.0 million deficit.

Patient Services

2002/03 inpatient days were 3.3% below budget and 0.1% below last year.

Inpatient Days



Estimated weighted cases for 2002/03 (25,964) are 2.4% below funded levels (26,612).

Ambulatory care visits were 1.6% below budget, and 1.0% above last year. Births were on budget and 4.5% over last year.

Financial Performance

The Hospital ended the year with a \$1.0 million deficit, \$2.7 million better than the forecast of \$3.7 million deficit.

Revenues were \$2.0 million higher than forecast due to Parking fees (\$520K), Preferred Accommodation (\$265K), MoH revenues (\$254K), Interest Income (\$110K), Television/Telephone (\$75K), and various other smaller items adding to \$720K.

Expenses were \$700K below forecast due to depreciation (\$896K), salaries and wages (\$482K), benefits (\$345K), medical & surgical (\$97K), offset by higher than expected supplies (\$855K).

Cash and Investments (excluding Superbuild)

The hospital's cash and short/long term investments totaled \$785K at March 31, 2003 versus \$5.6 million at March 31, 2002. When March 31/03 cash is adjusted to exclude \$1.5 million of MoH advances and include \$7.8 million of Third Party Review funding received after year-end, cash would have been \$7.1 million.

Cash was \$14.4 million better than forecast primarily due to higher than expected Accounts Payable (\$6.0 million), and lower than expected Long Term Investments - Superbuild Fund (\$6.4 million).

AUDITORS' REPORT

The Credit Valley Hospital

CONDENSED BALANCE SHEET

As at March 31

	2003	2002
	\$	\$
	[000's]	
ASSETS		
Current Assets	17,137	12,432
Long-term receivables	1,393	614
Long-term investments	50,650	70,434
Capital assets, net	102,541	96,881
	171,721	180,361
LIABILITIES AND NET ASSETS		
Current Liabilities	20,440	31,620
Long-term debt	5,071	4,810
Accrued post-retirement benefits	3,798	3,433
Deferred capital contributions	113,023	108,564
Net Assets	29,389	31,934
	171,721	180,361

CONDENSED STATEMENT OF OPERATIONS

Year ended March 31

REVENUE		
Ontario Ministry of Health & Long-term Care grants	151,696	132,093
Other revenue sources	38,615	34,948
	190,311	167,041
EXPENSES		
Salaries, wages and employee benefits	134,158	116,913
Supplies and other expenses	26,390	27,921
Drugs, medical and surgical supplies	22,456	20,233
Depreciation	9,852	10,392
	192,856	175,459
Deficiency of revenue over expenses for the year	(2,545)	(8,418)

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, 2003 and for the year then ended on which we expressed an opinion without reservation in our report dated May 2, 2003. 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 condensed balance sheet and condensed 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.

Toronto, Canada,
May 2, 2003.

Chartered Accountants

Mississauga, Canada
May 2003

Chartered Accountants

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

SALARY DISCLOSURE STATEMENT 2003

HOSPITAL	LAST NAME	FIRST NAME	POSITION	SALARY	BENEFITS
The Credit Valley Hospital	ANDERSEN	HELEN	Admin. Director, Program Management	\$105,303.29	\$355.32
The Credit Valley Hospital	BACHLE	MARG	VP, Nursing	\$160,223.67	\$7,078.55
The Credit Valley Hospital	BANDLER	NORMA	VP, Resource Development	\$159,418.29	\$9,344.84
The Credit Valley Hospital	BOWIE	JAMIE	Director, Information Systems	\$112,889.44	\$364.94
The Credit Valley Hospital	CHAPMAN	CORRINE	Admin. Director, Program Management	\$107,803.30	\$355.32
The Credit Valley Hospital	DEHAY-TURNER	SHELLEY	Nursing Director	\$100,858.68	\$339.17
The Credit Valley Hospital	DOUGLAS	BEVERLY	Nursing Director	\$108,142.40	\$355.32
The Credit Valley Hospital	FELTIS	TIMOTHY	Pathologist	\$182,922.03	\$617.10
The Credit Valley Hospital	FYFFE	WAYNE	President	\$257,669.93	\$14,065.82
The Credit Valley Hospital	GEDDIE	WILLIAM	Pathologist	\$182,922.04	\$617.10
The Credit Valley Hospital	GERMAIN	DAN	VP, Finance	\$160,223.69	\$7,078.55
The Credit Valley Hospital	HILLEBRAND	NICOLETTE	Director, Pharmacy	\$104,283.89	\$351.66
The Credit Valley Hospital	HODGES	SHARON	Nursing Director	\$108,224.59	\$355.32
The Credit Valley Hospital	JOHNSON	WENDY	Director, Community Relations / Comm.	\$104,868.58	\$344.94
The Credit Valley Hospital	KING	DOUGLAS	VP, Support Services	\$180,811.70	\$7,078.55
The Credit Valley Hospital	LANG-BERKOWITZ	ANNE MARIE	Admin. Director, Program Management	\$105,302.27	\$355.32
The Credit Valley Hospital	LO	VINCENT	Director, Psychology	\$101,950.73	\$335.07
The Credit Valley Hospital	MERCURI	PAT	Admin. Director, Program Management	\$109,258.21	\$355.32
The Credit Valley Hospital	NOBLE	RON	VP, Corporate Planning	\$103,487.30	\$4,709.93
The Credit Valley Hospital	ROSS	JAMES	Director, Human Resources	\$120,266.13	\$794.29
The Credit Valley Hospital	ROWE	DAVID	Senior Vice President	\$197,808.25	\$7,554.12
The Credit Valley Hospital	SPEEVAK	MARSHA	Cyogeneticist	\$112,401.22	\$379.38
The Credit Valley Hospital	SUE CHUE LAM	ANDREW	Pathologist	\$182,922.00	\$617.10

*Salary paid may include any or all of the following: base salary, retroactive pay, grievance settlement, deferred bonus plan, and other taxable earnings shown in Box 14 on an individual's T4 (excluding taxable benefits). Prepared in accordance with the Public Sector Salary Disclosure Act, 1996.

2003 CAL GUTKIN AWARD NOMINEES

The Dr. Calvin Gutkin Quality Award was established in 1995 to recognize outstanding achievement by a team or individual who has made a significant improvement in the care/service provided to our customers. The following are a list of nominees for this year's award.

This year, there are four nominations for the 2002 Quality Award. The nominations include over 70 staff and physicians from a variety of programs, clinical and support departments. This truly shows how we work together to improve care and patient safety.

The projects will be evaluated by an interdisciplinary review team using Quality Improvement Principles such as Team work, Customer Focus, Process Orientation, Measurement Data, Prevention Based Strategies and Community Integration.

1. Paediatric MRI Sedation Service:

Cori Chapman, Dr. Pam Coates, Colleen Butler, Lorraine Bird, Susan Hale, Elvina Goh, Heather Van Der Eyken, Anne Marie Lang-Berkowitz, Beverley Douglas, Eric White, Lynn Wells, Don Old, Dr. Janet Lawrence, Sam Pahulje, Monica McCabe, Kathy Beattie, Mary Ancona-Spina, Autumn Lynds, Gail Lang, Debbie Coutts, Jane Scigliano.

Outcomes include: Development and implementation of this new service including MRI safety and paediatric sedation protocols, interdisciplinary process changes from the Paediatrician's office through to recovery in Ambulatory Care, team education and patient educational brochure.

2. ICU/CCU Clinical Issues' Group:

Delayne Haasz, Gail Lang, Debbie Coutts, Suzanne Watts, Jeanene Luckhart, Rosa Alber, Karen Deciccio, Joanne Burnell, Wendy Cormier, Dr. Janos Pataki, Virginia Ward, Heidi Nixdorf, Barb Young, ICU/CCU Staff Nurses.

Outcomes include: This front line interdisciplinary team has been involved with everything from preprinted order forms, medical directives, clinical pathways, policies/procedures and protocols. All stem from the team's strong desire to improve quality through evidenced based care, prevent unnecessary iatrogenic complications related to ICU stay, shorten patient's ICU stay, increase patient comfort, and improve job satisfaction and knowledge level of the health team members.

3. Satellite Paediatric Oncology Program

Dr. Erez, Colleen Butler, Anna Geraldes, Eve Poulin, Lorraine Bird, Dr. Coates, Mary Beth Reid, Mary Dodge Bovaird, Dr. MacKinnon, Brenda Zalter, Anthony Donohoe, Cindy Leng, Sandra Gabriele, Dr. Ahmed, Laura Harrison.

Outcomes include: Administration of chemotherapy and management of complications in our community. This includes care and treatment of children and their families during clinic, inpatient and palliative phases of care. Many new evidence based processes have been developed. In addition, the program has developed initiatives to stay focused on caring for the staff and to be mindful of the stress that comes with this line of work.

4. Rehab/Renal Liaison Team

Ann Geerts, Beverley Douglas, Christine Zettler, Cindy Van Horn, Karyn Lumsden, Laurie Goodman, Peter Rughi, 1D Staff Nurses.

Outcomes include: Improved continuity of care for patients requiring peritoneal dialysis on the rehabilitation unit. Through teamwork across units, programs and disciplines and the establishment of unit champions, mentoring and changes in practice, the nurses are now able to provide the full spectrum of monitoring and intervention required by these patients.

5. Picture Archiving Communication System (PACS) in the Operating Room Team:

Doris Gorthy, Dr. C. Nguyen, Dr. M. Barsky, Don Old, Dr. T. Short, Dr. Stephen Florence, Eva Jakobczak

Outcomes include: Implementation of the PACS system in the OR and PACU so that the patient's entire imaging history is available at the time of surgery, so that surgeons and nurses view soft copy images rather than film. Number of films being printed for O.R. cases has been reduced by approximately 95%. The ergonomic features of the equipment stands were based on the specific needs of the surgeons and nurses and the O.R. environment.