

**STEVENSON MEMORIAL HOSPITAL**  
**Report of the Interim Chief of Staff to the Annual General Meeting**  
**June 21, 2011**

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First and foremost, allow me to express my thanks to the Board and more specifically, to your Chair for having allowed me to continue as Chief of Staff for another year.

As Chief, it is my role to bring to the Board the responsibilities, the achievements and the concerns of providing high quality patient care as it pertains to the professional staff. As of this year, the term professional staff now encompasses doctors, dentists, midwives and registered nurses – extended class.

Quality continues to be the primary focus. Quality is measured through the “Balanced Scorecard” and perhaps, more directly through patient satisfaction surveys. Our ratings in Obstetrics are excellent. It usually is in any small hospital but ours is exemplary. The same can be said of the surgical service. Our specialty services are expanding now including ophthalmology, oto-rhino, laryngology, endocrinology, cardiology, orthopedics, women’s wellness, and pediatrics. The Emergency Department continues to struggle with a volume of patients that exceeds the resources. Total numbers have dropped by close to 10% but the acuity level of the patients has increased noticeably. Government incentives have improved the “wait times”. The transfer out of emergencies remains a problem. Whereas heart attacks and strokes have designated regional centres, orthopedics does not. Administration has been working diligently throughout the year to resolve this issue particularly as it pertains to hip fractures.

The medical service continues to be hampered by a bed shortage. Much of the problem related to the large number of patients requiring Alternate Level of Care (ALC) that cannot be accommodated elsewhere. On a more positive note, services (CCAC Home First, Early Discharge Planning) are now being expanded for those who have passed the acute phase of their illness and no longer need to be in hospital. Despite the crowding, the rate of hospital-acquired infections is down. The “Readmission Rate” as a measure of quality is an interesting parameter and will be looked at this year. The “End of Life Decision Making Process” is being developed by the Ethics Committee with the guidance of the Bioethics Service at Southlake. The establishment of a “Palliative Care” service is being temporarily slowed by lack of suitable space.

Professional Staff are increasing in numbers thanks to the efforts of Dr. O. Ramirez through the Emergency Department and the Recruitment and Retention Committee. Three family physicians and three specialists have joined the staff. Sadly, we have lost one in each group, neither for reasons associated with the Hospital. We are currently actively looking for another obstetrician, another pediatrician, another midwife and another “hospitalist”. Sub specialists (e.g., orthopedics) are also being sought.

An updating of the credentialing process continues as new directions come in from the Ministry, HIROC, the OMA and the OHA. A set of revised Medical Staff Rules and Regulations will be completed this year.

Candidates for both the President of the Medical Staff and the Chief of Family Medicine have come forward and will be presented to the Board before fall.

Realizing the serious financial constraints that the hospital will have to face in the coming year, progress will be incremental at best. I look forward to the challenge of 2011 – 2012.

Respectfully submitted,

Dr. Trevor Hunt  
Interim Chief of Staff