

Annual Report

AHI Board Chair / CEO Report

Our focus at Alexandra Hospital Ingersoll (AHI) this year was to ensure that patients, as well as their families, have the best experience possible during their time with us. From our medical team members to our maintenance crew, we worked together to deliver top-quality treatment in a safe environment.

> Key achievements from the past year supporting our commitment to quality care:

INGERSOLL CATARACT CENTRE

...provides patients in Ingersoll,
Tillsonburg & surrounding areas
with "patient-focused" cataract
procedures. Congratulations to
Dr. Johnson, who celebrated
15 years of performing cataract
surgery at AHI, on
February 25, 2015.

AHI FACEBOOK PAGE

...launched to better share timely information with patients and our community at large.

AHI PHYSICAL UPGRADES

...for patient convenience, safety and comfort: renovating First Floor to offer rotating outpatient clinics, adding senior-friendly distinctive paint colours & clearer signage, upgrading boiler system to reduce energy costs.

EBOLA VIRUS READINESS

...our team members undertook training to identify and monitor any potential cases.

AWARDED THE ADVANCING CLINIC EXCELLENCE AWARD

... "Best Demonstration of Project
Execution" for the way HUGO
was implemented. HUGO replaces
paper-based processes with
technology to ensure patients
receive the right medication
at the right time.

JOINT BOARD OF DIRECTORS

mestablished with TDMH Board.
They will remain two separate corporations with the goal to more efficiently serve our common

at the rig

Thanks to the AH Foundation, critical items were purchased including: Operating Room Microscope (\$77,482) and a Patient Wandering System (\$36,203).

Carol Prouse
Chair of Board

Crystal Houze
Integrated President and CEO



Thank you to all our supporters – medical and maintenance team members, volunteers, donors and community care partners – whose contributions help make our hospital the thriving place that it is.

Chief of Staff Report

As I review the previous year, a number of elements stand out as markers of the health of our local health care system at Alexandra Hospital. With ever-tighter financial resources, achieving efficiency in the pursuit of high quality is a key goal. The final consolidation of cataract surgery here at Alexandra Hospital is an important practical step in this direction. Medical research supports doing more procedures in one place to improve quality, and we continue to assess the success of our program.

The final implementation of inpatient bed reductions, which occurred in the fall of 2014, has meant significant adjustment for all staff. Around Christmas, numerous admissions had to be managed in the Emergency Department (ED). Fortunately, subsequent months have seen a more balanced ledger of inpatients and available beds.

Attracting capable physicians to manage both our inpatient unit and our

ED continues to be a priority. Due to changes in funding, it has become more challenging to bring new physicians willing to do "general" practice (family medicine, inpatient care, emergency shifts, etc.). However, we continue to look for interested individuals and will be lobbying the government to assist us in maintaining our physician roster. Dr. Jitin Sondhi has done a commendable job in recruiting a new panel of part-time emergency physicians to maintain our coverage.

Finally, we continue to optimize our use of the electronic patient record (PowerChart). After a considerable learning curve, we are achieving some stability and familiarity, which allows physicians to reduce the time spent entering orders. Projects are underway further to improve our use of the system and the quality and safety of care delivered to patients.

Dr. Joel Wohlgemut
Chief of Staff

AHI Treasurer's Report

The Alexandra Hospital, Ingersoll (AHI) Audit Committee, who meets independently and reports directly to the Board of Directors, reviewed the 2014/2015 Audited Financial Statements that were presented by Millard, Rouse & Rosebrugh LLP Chartered Accountants.

From the Audited Financial Statement of Operations on Page 3, total revenue was \$17,865,287, a decrease of \$118,881 over the previous year. This decrease can be attributed to reduced Ministry funding caused by the reduction of chronic care beds that had been closed in the fiscal year. Total expenses ended the year at \$17,250,061, a decrease of \$666,388 over the previous year. The majority of the expense reduction was related to lower salaries and employee benefits from cost saving initiatives that were implemented within the fiscal year. This left an operating surplus of \$660,854 for the year ended March 31, 2015.

In the Auditor's Report, Millard, Rouse & Rosebrugh LLP stated, "In our opinion, these financial statements present fairly, in all material respects, the financial position of The Alexandra Hospital Ingersoll as at March 31, 2015, and the results of its operations, changes in net assets and its cash flows for the year then ended in accordance with Canadian public sector accounting standards."

The Audit Committee recommends the acceptance of the Audited Financial Statements for the year ended March 31, 2015.

During 2012, the hospital opted for an open competitive bid for multi-year auditing services. The Audit Committee therefore, is recommending the appointment of the firm Millard, Rouse and Rosebrugh LLP Chartered Accountants of Brantford, Ontario as Auditors for AHI, for the fiscal period ending March 31, 2016.

Carol Smith-Gee
Incoming Treasurer

THE ALEXANDRA HOSPITAL INGERSOLL STATEMENT OF OPERATIONS

For the year ended March 31	2015	2014
REVENUE		
Ministry of Health and Long Term Care	15,278,292	15,530,626
Recoveries and miscellaneous	1,299,499	1,256,871
Patient revenue from other payers	748,528	764,834
Amortization of deferred contributions- equipment	397,693	315,223
Differential and co-payment	141,275	116,614
	17,865,287	17,984,168
EXPENSES		
Salaries and wages	8,535,627	8,934,711
Supplies and other expenses	3,383,256	3,400,736
Employee benefits	2,097,096	2,273,518
Medical staff renumeration	2,160,786	2,210,804
Medical and surgical supplies	463,372	425,402
Amortization of equipment, software licenses and fees	404,346	451,322
Drugs and medical gases	224,744	207,956
Bad debts	7,834	12,000
	17,250,061	17,916,449
Excess (Deficiency of Revenue over Expenses)		
Before Undernoted Items	615,226	67,719
Other Items		
Amortization of deferred contributions- building	262,494	272,800
Amortization of building	(375,685)	(386,203)
Deficit from Other Items	(113,191)	(113,403)
Other Votes		
Other votes revenue	257,160	254,674
Other votes expense	(264,964)	(242,636)
Surplus from Other Votes	(7,804)	12,038
Other Funding Sources (Note 12)		
Other funding revenue	576,319	422,002
Other funding expense	(409,696)	(369,938)
Surplus from Other Funding Sources	166,623	52,064
Surplus of Revenue over Expenses	660,854	18,418