



OUTSTANDING CARE – NO EXCEPTIONS!



ANNUAL REPORT

2015-2016

BUILDING ON OUR STRENGTHS

THE WINDSOR-ESSEX HOSPITALS SYSTEM

www.windsorhospitals.ca

FUTURE HOME OF THE PROPOSED WINDSOR-ESSEX SINGLE-SITE ACUTE CARE HOSPITAL

(dollar amounts in thousands)

FINANCIAL POSITION (as at March 31)	2016	2015
Assets:		
Current assets and investments held for capital purposes	\$ 34,430	\$ 60,233
Capital assets, net of accumulated amortization	\$ 174,415	\$ 173,160
Total assets	\$ 208,845	\$ 233,393
Liabilities and Net Assets:		
Current and long term liabilities	\$ 138,290	\$ 139,349
Deferred capital grants, net of amortization	\$ 117,608	\$ 119,840
Total liabilities	\$ 255,898	\$ 259,189
Accumulated remeasurement losses	\$ (2,731)	\$ (2,647)
Net assets	\$ (44,322)	\$ (23,149)
Total liabilities and net assets	\$ 208,845	\$ 233,393
REVENUE AND EXPENSES (for the year ended March 31)	2016	2015
Revenue:		
Provincial programs	\$ 396,518	\$ 401,583
Other fees and revenue	\$ 82,559	\$ 79,803
Total revenue	\$ 479,077	\$ 481,386
Expenses:		
Compensation and benefits	\$ 294,115	\$ 287,963
Supplies and other expenses	\$ 206,135	\$ 204,937
Total expenses	\$ 500,250	\$ 492,900
Deficit for the year	\$ (21,173)	\$ (11,514)
Ministry of Health and Long Term Care - Total Margin	\$ (17,640)	\$ (7,934)
CASH FLOWS (for the year ended March 31)	2016	2015
Cash Flows From (Used In):		
Cash flows from operations and changes in operating balances	\$ (12,660)	\$ (7,780)
Additions to capital assets	\$ (16,459)	\$ (22,311)
Cash flows from grants, investing and financing activities	\$ 7,012	\$ 10,051
Decrease in Cash for the Year	\$ (22,107)	\$ (20,040)
Cash Surplus, Beginning of Year	\$ 26,520	\$ 46,560
Cash Surplus, End of Year	\$ 4,413	\$ 26,520
PATIENT SERVICE VOLUMES (for the year ended March 31)	2016	2015
Acute patients separated (discharged)	29,163	28,898
Patient days	192,155	196,737
Births	3,599	3,570
Day surgery and Endoscopy cases	42,834	44,418
Emergency department visits	117,943	128,357

REPORT OF THE INDEPENDENT AUDITORS ON THE SUMMARY FINANCIAL STATEMENTS

To the Board of Directors of Windsor Regional Hospital

The accompanying summary financial statements of Windsor Regional Hospital, which comprise the summary statement of financial position as at March 31, 2016, the summary statements of revenue and expense and cash flows for the year then ended, and related notes, are derived from the audited financial statements, prepared in accordance with Canadian public sector accounting standards, of Windsor Regional Hospital as at and for the year ended March 31, 2016.

We expressed an unmodified audit opinion on those financial statements in our report dated June 23, 2016.

The summary financial statements do not contain all the disclosures required by Canadian public sector accounting standards applied in the preparation of the audited financial statements of Windsor Regional Hospital. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of Windsor Regional Hospital.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the basis described in Note 1.

Auditors' Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements."

Opinion

In our opinion, the summary financial statements derived from the audited financial statements of Windsor Regional Hospital as at and for the year ended March 31, 2016 are a fair summary of those financial statements, in accordance with the basis described in Note 1.

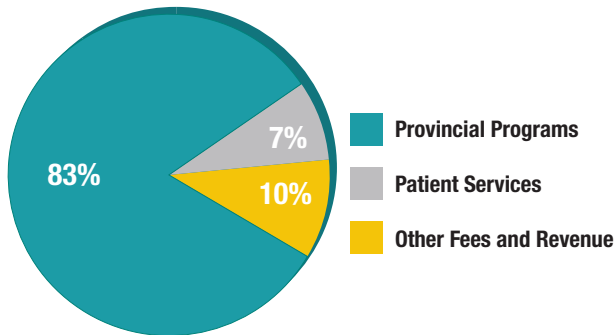
KPMG LLP

Chartered Professional Accountants, Licensed Public Accountants
June 23, 2016
Windsor, Canada

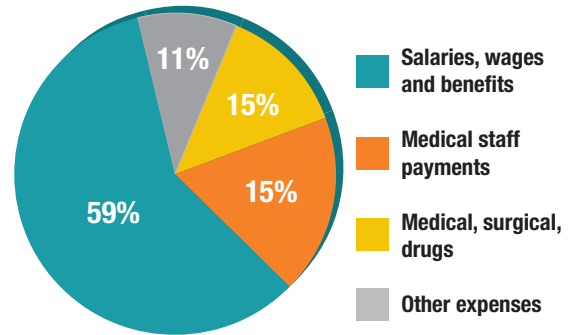
Note 1

The summary financial statements are derived from the complete audited financial statements, prepared in accordance with Canadian public sector accounting standards as at and for the year ended March 31, 2016 and do not include certain disclosures required under the Canadian public sector accounting standards.

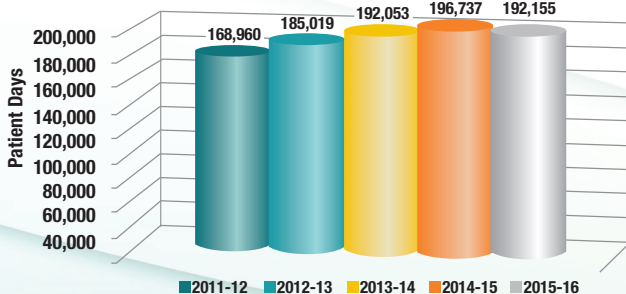
Sources of Revenue Fiscal 2015-16



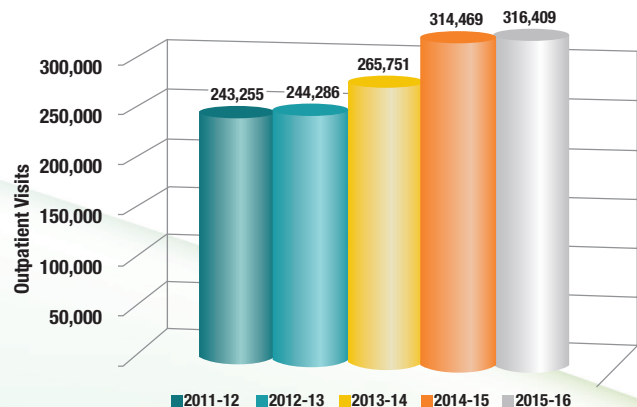
Operating Expenses by Category Fiscal 2015-16



Five Year Summary of Patient Days



Five Year Summary of Outpatient Visits



Joint Message From The Board Chair, President and CEO and Chief of Staff




Bob Renaud
Board Chair




David Musyj
President and CEO




Dr. Gary Ing
M.D., F.C.F.P.
Chief of Staff

The last fiscal year was both a rewarding and challenging one, resulting in many positives for Windsor Regional Hospital (WRH), along with some difficult decisions that had to be made.

The SOP (Standardization and Optimization Process) continued making significant progress with a solid team that included Dr. Andrew Petrakos who wrote an article that was highly motivating, focused and complimentary. He summed up his comments by stating, "We are building on the strengths of each and every member of the WRH team, working toward a shared Vision of providing, 'Outstanding Care – No Exceptions,' for our patients." This is what the SOP work is all about, strengthening our processes for our current two campuses, but also for our future state-of-the-art acute care hospital and health system.

The major question for this year was, where is the new hospital going to be built? Out of the more than 20 properties submitted through the Request-for-Proposal (RFP) process, the volunteer Site Selection Sub-Committee spent countless hours studying and evaluating each of the properties, both individually and then collectively, before agreeing on a short list of up to five. The process included 32 expert and community defined criteria as well as the acquisition cost in the final phase, all of which were clearly defined in the RFP.

July 16, 2015 became an important and historic day as that was when the site of the proposed state-of-the-art acute care hospital, at the corner of County Rd. 42 and the 9th Concession, was revealed. It was announced as part of the new \$2 billion Windsor-Essex Hospitals System which also included an Emergency Urgent Care Centre on the former Grace Hospital site; a 60-bed Mental Health addition at the Hôtel-Dieu Grace Healthcare, Tayfour Campus as well as Chronic Disease Management and Transitional Mental Health at the WRH Ouellette Campus site (the former HDGH Site). Turning over the property at the current Metropolitan Site to the City of Windsor was included as part of the agreement to build on the former Grace Site.

To keep the momentum going toward obtaining Stage 2 approval from the Ministry of Health and Long Term Care (MOHLTC), meaning we would have an approved project, the City of Windsor and County of Essex provided overwhelming support by committing to the required 10% community share, which in our case was \$200 million.

Strong support for the Windsor-Essex Hospitals System was further demonstrated when elected leaders of our region came together in a unified voice, encouraging the Province to move forward with the next stage toward the \$2 billion investment in Windsor-Essex. MPP Taras Natyshak, MPP Percy Hatfield, MPP Lisa Gretzky, Mayor Drew Dilkens and Warden Tom Bain signed a letter to the Minister of Health and Long Term Care confirming a regional commitment for the future capital investment. This immediately followed the dates that the County of Essex Council unanimously voted in favour of committing a levy of \$91.5 million, and the City of Windsor voted 9 to 1 in favour of a levy commitment of \$108.5 million. Historic indeed and another strong sign of support to the Province that #weareready!

On October 1st, we celebrated the second year anniversary of realignment between Hôtel-Dieu Grace Hospital (now Healthcare) and Windsor Regional Hospital. It gave us an opportunity to promote our WROC (Windsor Regional Ouellette Campus) 'N WROL (Windsor Regional On Lens) theme with a walk between the Met Campus Courtyard and the Ouellette Campus Healing Garden where entertainment and refreshments were provided for patients, families and staff.

Another proud achievement was the opening of the Ronald McDonald House Windsor, the very first 'house within a hospital' concept in Canada to provide comfort and compassion to families whose sick children will now only be steps away. It is available to families today and will be an important part of our future state-of-the-art acute care hospital.

Further, before this fiscal year concluded, we began work on our next Strategic Plan and five-year vision for acute care service across our region in collaboration with Leamington District Memorial Hospital. Although both are independent organizations, it just makes sense for both hospitals to ensure their respective strategic plans work well together to strengthen acute care across the entire system. Hôtel-Dieu Grace Healthcare offers programs and services that focus on post acute care and will be conducting their own strategic planning later in the year. They will engage both acute care organizations and other health services providers to ensure continuity and alignment with the health system.

Another important initiative was revealed when we announced that community volunteers had stepped forward for the Garden to Table

Program. The Community Garden – Grow, Harvest, Prepare and Share initiative caught on quickly and several people became involved in planting, weeding and nurturing the gardens at Met Campus and Ouellette Campus through the guidance of Volunteer Services.

We had to also face a serious budget issue through an operating and capital budget planning process completed for the first full fiscal year post-realignment. This meant that each department had to examine its performance as compared to similar hospitals in Ontario. We needed to move to the 25th percentile (top 25%) of performance as compared to our peers, so we had to start doing things differently. Through Health System Funding Reform (HSFR), the funding formula had changed and we had to take action.

HSFR caused us to make difficult, but necessary changes to staff mix and nursing model of care, along with some clinic changes. The formula is based on three components. The first is Organizational-Level funding which makes up 40% of the HSFR allocation. Second is the Quality-Based Procedures (QBP) that comprises 30% of the base and, lastly, 30% is for fixed overhead or global base funding. We continue to work with the MOHLTC toward equitable operating funding.

As Bob Renaud, Chair of the Board of Directors of Windsor Regional Hospital stated, "It is not only an honour, but also highly rewarding for me, and each of our Board Directors, to be part of such a progressive organization driven by its Vision of 'Outstanding Care – No Exceptions!'. The successes are recognized and celebrated. The challenges and problems are identified and addressed by skilled and devoted people who know that continuous improvement, through a focus on best practice processes, will create future successes. Each of our patients and their families deserve nothing less."

"I want to compliment and thank Board Chair, Bob Renaud, for his years of service on the Board of Directors," said David Musyj, President and CEO of Windsor Regional Hospital. "As he moves from Chair to the Past Chair position, Bob will always be remembered for his leadership, not only at the helm of the Board, steering it through many successes and challenges, but also chairing the Site Selection Sub-Committee for the new Windsor-Essex Hospitals System, spending many hours with the group toward their final recommendation for the future."

"I feel that much has been accomplished this past year by the Medical Advisory Committee (MAC) because of their willingness to listen, get involved and work together during difficult and changing times. Bringing the two MACs together provides a real focus on patient care at both campuses. It is a pleasure to be working with such an energetic group, focused on their patients, their families and the staff," stated Dr. Gary Ing, Chief of Staff of Windsor Regional Hospital.

Together, we thank the employees, professional staff, auxiliary and volunteers for their belief and commitment to Windsor Regional Hospital. The future is ours if we truly believe in our potential to achieve 'Outstanding Care – No Exceptions!'

Bob Renaud, Board Chair, Windsor Regional Hospital

David Musyj, President and CEO, Windsor Regional Hospital

Dr. Gary Ing, Chief of Staff, Windsor Regional Hospital

Achievements:

- Windsor Regional Hospital invited to present at the IPAC Canada 2015 National Education Conference on the topic, *Building System Capacity And Responsiveness To Emerging Pathogens And Outbreaks – Lessons Learned During The Ebola Outbreak Of 2014-15*.
- Windsor Regional Hospital team attended the RL Solutions Patient Safety event focusing on the successful implementation of the RL Solution product at Windsor Regional Hospital. The title of the session was, *From Bedside to Boardroom in a Large Multi-Site Community Hospital*.
- Windsor Regional Hospital received the 2015 Agency Recognition Award by the Council of Ontario University Programs in Nursing (COUPN) during a ceremony held at the Chestnut Residence and Conference Centre in Toronto.
- Windsor Regional Hospital showcased at the IHI International Forum on Quality and Safety in Healthcare on April 13th presenting on *Fixing More Than Fracture: Collaborative Partnerships Improve Patient Outcomes*.
- Windsor Regional Hospital presented at the 5th Annual Accreditation Canada Quality Conference in Montreal, Quebec on April 25th and 26th, *Partners in Design: Meaningful Patient Engagement In Process Improvement*.
- Windsor Regional Hospital presented five poster presentations at the Mayo Clinic Delivery Science Summit on September 16th-18th at the Mayo Civic Center in Rochester, Minnesota.
- Windsor Regional Hospital Patient Experience Task Force hosted Dr. Timothy Gilligan, Co-Director for the Centre for Healthcare Communication at the Cleveland Clinic.
- Windsor Regional Hospital invited Dr. Rueben Devlin, President and CEO, Humber River Hospital in Toronto to present to our region, his success in building and opening the first fully-digital hospital in North America.

OUR VISION: Outstanding Care – No Exceptions!

OUR MISSION: Deliver an outstanding care experience driven by a passionate commitment to excellence.

COMPASSION is our
PASSION

WINDSOR REGIONAL HOSPITAL ANNUAL REPORT APRIL 1, 2015 - MARCH 31, 2016

BOARD OF DIRECTORS

Robert Renaud, *Chair (until June 2016)*
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Anthony Paniccia, *Treasurer (until June 2016)*
Gay Wrye, *Past Chair (until June 2016)*
Arvind Arya
Dr. Gerry Cooper, *Schulich School of Medicine & Dentistry,
Windsor Campus, Ex-Officio/Non-Voting*
Dr. Abdelrahman Elashaal, *Vice-President, Professional Staff, Met
Ex-Officio/Non-Voting (as of April 1, 2016)*
Patricia France
Dr. Kristen Gyetvai, *President, Professional Staff,
Ex-Officio/Non-Voting (as of April 1, 2016)*
Dr. Gary Ing, *Chief of Staff, Ex-Officio/Non-Voting*
Lisa Landry
Leanne Leech, *Treasurer (as of June, 2016)*

John Leontowicz
Karen McCullough, *Chief Operating Officer and Chief Nursing Executive,
Ex-Officio/Non-Voting*
Dr. Sowmil Mehta, *President, Professional Staff,
Ex-Officio/Non-Voting (until March 31, 2016)*
Dr. Maureen Muldoon
David Musyj, *President and Chief Executive Officer,
Ex-Officio/Non-Voting, Secretary*
Ruth Orton
Yvan Poulin
Dr. Minesh Singh, *Vice-President, Professional Staff,
Ex-Officio/Non-Voting, Ouellette*
Pam Skillings
Dan Wilson, *Vice-Chair (as of June 2016)*

EXECUTIVE COMMITTEE

Janice Dawson, *Vice-President, Critical Care, Cardiology, Regional Stroke
and Clinical Support Services*
Mark Fathers, *Vice-President, Corporate Services and Chief Financial Officer*
Mark Ferrari, *Executive Director, Windsor Family Health Team*
Ron Foster, *Vice-President, Public Affairs, Communications and Philanthropy*
Karen McCullough, *Chief Operating Officer and Chief Nursing Executive*

David Musyj, *President and Chief Executive Officer*
Ralph Nicoletti, *Vice-President, Medicine and Emergency Services*
Rosemary Petrakos, *Vice-President, Peri-operative, Surgery and Women's
and Children's Services*
Monica Staley-Liang, *Vice-President, Regional Cancer Programs,
Renal, Patient Relations and Legal Affairs*

MEDICAL ADVISORY COMMITTEE

Dr. Gary Ing, *Chief of Staff, Ex-Officio/Non-Voting*
Dr. Sowmil Mehta, *President, Professional Staff, Ex-Officio/Non-Voting
(until March 31, 2016)*
Dr. Kristen Gyetvai, *President, Professional Staff, Ex-Officio/Non-Voting
(as of April 1, 2016)*
Dr. Minesh Singh, *Vice-President, Professional Staff, Ex-Officio/
Non-Voting, Ouellette*
Dr. Abdelrahman Elashaal, *Vice-President, Professional Staff, Ex-Officio/
Non-Voting, Met (as of April 1, 2016)*
Dr. Roland Mikhail, *Secretary Treasurer, Professional Staff, Ex-Officio/
Non-Voting (as of April 1, 2016)*
Dr. Winston Ramsewak, *Chief, Diagnostic Imaging, Met and Ouellette*
Dr. Kan Gnanendran, *Chief of Anaesthesia, Met (until September 30, 2015)*
Dr. Hemant Ghate, *Chief of Anaesthesia, Ouellette (until September 30, 2015)*
Dr. Americo Liolli, *Chief of Anaesthesia, Met and Ouellette
(as of October 1, 2015)*
Dr. Donald Levy, *Chief, Emergency Medicine, Met and Ouellette*
Dr. Marguerite Chevalier, *Chief of Family Medicine, Met and Ouellette
(as of November 1, 2015)*
Dr. Roxana Chow, *Chief of Family Medicine, Ouellette (until October 31, 2015)*

Dr. Rajasekar Basker, *Chief of Psychiatry, Met and Ouellette*
Dr. David Shum, *Chief of Laboratory Medicine, Met and Ouellette*
Dr. Al Kadri, *Chief of Medicine, Ouellette (until June 25, 2015)*
Dr. Syed Hussaini, *Chief of Medicine, Met (until October 31, 2015)*
Dr. Wassim Saad, *Chief of Medicine, Met and Ouellette (as of November 1, 2015)*
Dr. Josh Polsky, *Chief of OB/GYN, Met*
Dr. Kenneth Schneider, *Chief of Oncology, Met*
Dr. Joseph Multari, *Chief of Oral and Maxillofacial Surgery & Dentistry, Met
(until May 31, 2015)*
Dr. Richard Stapleford, *Chief of Oral and Maxillofacial Surgery & Dentistry,
Met and Ouellette (as of June 1, 2015)*
Dr. Lenna Morgan, *Chief of Paediatrics, Met*
Dr. Shael Liebman, *Chief of Surgery, Met (until October 31, 2015)*
Dr. Hussain Khalaff, *Chief of Surgery, Ouellette (until October 31, 2015)*
Dr. Takeshi Takahashi, *Chief of Surgery, Met and Ouellette
(as of November 1, 2015)*
Dr. Dante Morassutti, *Chief of Neurosciences, Met and Ouellette*
Dr. Margaret Steele, *Schulich School of Medicine & Dentistry*

FOUNDATION BOARD OF DIRECTORS

Ilias Kiritsis, *President*
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John Comisso, *Treasurer*
Elaine Snaden, *Secretary*
Beverly Ann Becker

John Jedlinski, *Chair, Governance & By-Law*
Tim Kawalec
Lisa Landry, *Cross Appointment, Windsor Regional
Hospital Board of Directors*
David Macleod

Loris Macor, *Chair, Nominating*
Beth Ann Prince, *Chair, Fundraising*
Martha Reavley
Robert Reid, *Chair, Finance & Investment*

AUXILIARY

Fae Gillespie, *President, Windsor Regional Hospital Auxiliary*