



# ANNUAL REPORT 2024-25

Santé Manitouwadge Health



# Vision • Mission • Values

**Our Vision:** Working together, keeping you healthy!

---

---

---

**Our Mission:** Your total healthcare experience: compassionate, exceptional and innovative.

---

---

---

**Our Values:** Quality service: Pride, Trust, Teamwork.

---

---

---



Pride | Trust | Teamwork



Annie Janveau

While my career thus far at Santé Manitowadge Health has been just over 20 years, this past fiscal year, 2024/25, saw me through my first full year as CEO of the organization. The years spent here have certainly provided me the knowledge allowing me to understand how our organization works and eased me through the transition into the role of the CEO.

This past year I have been immersed in learning that brought me into the weedy depths of how and why we do what we do. Making connections, participating, and building relationships has been a fundamental component in allowing us (SMH) to move forward.

The political arena has seen recent changes and with that comes a new climate of what the priorities of health care should be. The focus has been shifted on primary care and work is already underway to realize how we tie into those priorities with the resources we have and identify what we would need to achieve our expectations. Being a signatory member of the Noojmawing Sookatagaing Ontario Health Team ensures that we are involved participants in decision making for our region (Thunder Bay and District) and I am happy to say that there is good representation for the smaller Hospitals and ally organizations in the region as well as the city of Thunder Bay.

Retrospectively, Santé Manitowadge Health has had a busy year focused on the many aspects of quality spanning across the many domains as they relate to the many categories from direct patient care to organizational infrastructure to HHR. Some of the achievements that relate directly to quality patient outcomes include: introducing bladder scanners, ABI doppler, a new blood bank fridge, new BMD machine, new nutrition software, and new hematology analyzer which are all directly tied to patient care outcomes. Human health resource quality items include: education (CTAS, ACLS, TNCC,...), realigning positions and acquiring a mental health and addictions worker, filling the IPAC (infection prevention and control)/staff health and filling a longstanding vacancy of BSO (behavioral support worker) Other significant investments to infrastructure include: electrical panel upgrade, new boilers, sprinkler system upgrades and the ongoing and everchanging needs to keep up with IT (severs, software, security).

## Message from the Chief Executive Officer (Continued)

In looking to the future, collectively, as a region, we are already working very hard at developing an updated Electronic Health Record that will lead to improving the overall patient experience with safety and quality at the forefront. This multimillion-dollar project is no small feat. It requires a lot of time, dedicated HHR, good planning and the ability to anticipate not only the challenges and nuances of one site, but every hospital between Manitowadge to Kenora. This project is anticipated to come to fruition in April of 2027.

Santé Manitowadge Health also continues to work hard on the concept of a Long-Term Care expansion. On December 31, 2021, the application was submitted to the Ministry of Long-Term Care proposing the development of an additional 18 beds to our existing 9 bed facility. Response was received in April of 2022 allocating 18 new long-term care beds subject to the approval of the project and meeting all the conditions and requirements. While we have encountered some challenges, we continue to work on this project to meet the needs of our community. Unfortunately, we all know, these types of projects take time, in the realm of years, not days/weeks/or months, thankfully, we are a group who will take on any challenge and explore every option. We don't give up.

There is no doubt that the structural foundation, mechanical components and technological equipment are an absolute requirement for Santé Manitowadge Health to deliver the services that we do. But a co-worker once referenced in conversation, "it's about the heartbeat" of the organization. It is the staff that bring the organization to life to do what we do in our own unique ways. SMH has a healthy heartbeat and I am proud of the staff.

Finally, I would be remiss to not mention how appreciative we are of the feedback and support we receive from our partners, volunteers, and contributors. Your impact on us, impacts everyone we touch, through us you also impact lives.

Respectfully,

Annie.....



Dr. Camille Cimona

At this period we move from year 2024 to year 2025, I would like to outline the significant events and challenges faced by our healthcare institution: Sante Manitouwadge Health.

Over the last year, we continued to deal with issues of over-capacity as a result of recurrent delay on transfer of our patients to regional hospital either for reason of unavailable bed in the regional hospital or air-ambulance not being available.

Another ongoing challenge has been a lack of key diagnostic imaging service specifically a CT scanner. We continue to rely on the CT-Scan located in the regional hospital in Thunder Bay which is located 5-hours driving distance from our community. With the current advance in technology, having a CT-scan machine in healthcare institution like Sante Manitouwadge Health is no longer considered as a luxury, it is rather a necessity for early detection of medical conditions before their complications. To our community members, we would like to reassure everyone that efforts to engage Government authorities in resolving this issue are ongoing.

Particular key achievement of last year resides in keeping our ability to provide high-quality healthcare to Manitouwadge community members despite our limited resources in manpower and equipment. For this reason, as your Chief Of Staff, I would like to highlight the dedication, compassion, resilience of our healthcare workers, staff members, volunteers and community partners. Thank you for having been working together diligently and tirelessly, even when faced with the most challenging circumstances.

We look on the future optimistically, we remain committed to further enhancing our services and addressing the ongoing health challenges in our community. We will continue to prioritize patient's safety, improve access to care, and invest in the professional development of our staff.

Moving forward, let us continue to work together, support one another, and strive for excellence in all that we do. Together, we can overcome any challenge that comes our way and make a positive impact on the health and wellbeing of our Manitouwadge community.

Thank you,

Dr. T. C. Cimona-Malua  
Chief of Staff  
Santé Manitouwadge Health



Rolly Smith

SMH’s mission is “Your total healthcare experience: Compassionate, Exceptional and Innovative” and this is how the Board operates. And I would like to take this moment to add another facet to the Board method of operating: Ownership.

I feel privileged to be able to attend monthly meetings where I am among people who genuinely seek to uphold SMH’s mission in a manner that demonstrates a spirit of ownership for our hospital, and our community’s well being. I am also grateful for the teaching opportunities afforded me by Board members and staff at these meetings. Keep up the good work.

This past year has had its share of challenges, in particular with respect to staffing at all levels. And while we are routinely reminded that this staffing shortage is Canada wide, it still doesn’t alleviate the stress felt by managers who need to ask more of people who already show up for work. And it certainly doesn't lessen the pressure felt by front line staff who are the face of health care for patients, and sometimes the receiver of unwarranted frustration. Thank you for your continued efforts. We can only hope that our federal and provincial levels of government enact changes that could benefit all levels of health care.

Our greatest success this past year would have to be that we are still in the running for an expansion to our Long Term Care wing. What makes this a great success is that for the past year this has been accomplished with a relatively junior upper management team who were able to acknowledge their lack of experience when dealing with government expectations. During a monthly meeting our CEO conveyed that their team was finding the process challenging. As a result of this self-awareness being conveyed to the Board, one of the people who recently joined the Board presented that an experienced consulting agency was the way to go. 807 Management Services was hired this Spring to assist in the application process, a process which has been ongoing for over a year! While these projects tend to be multi-year events before shovels are in the ground, there is a sense that the recent presentation to the government went well and we are moving in the right direction.

When our current hospital was built, it was with similar struggles as now. It took years to get done. Years. And an entire wing was built with fundraising money. Some people still remember how they were approached. One person described the ask for donation as bold. It got the job done. When you enter the Family Health Team doors and walk down that hallway and see all the services available there, you know that this would not be here but for the generosity of people who gave up their time, energy and to be truthful, when they could, their money.



Rolly Smith

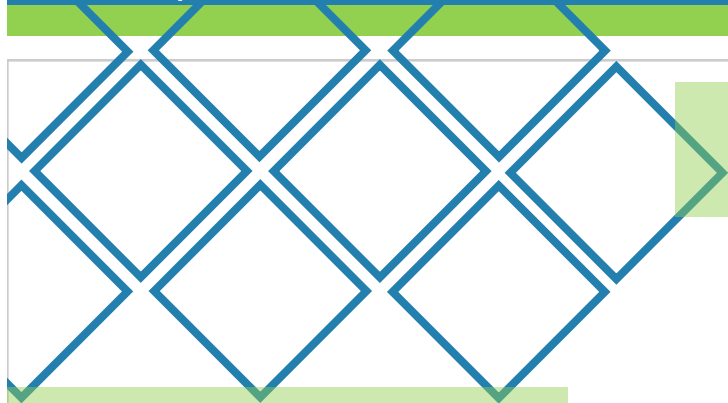
And just like our SMH staff who show up for work with a solution-focused approach to the day. I believe that the Long Term Care expansion will come to be. We just need to be bold, and determined, and a lot of other action-inspiring adjectives.

In closing, a heartfelt thank you to each Board member. I look forward to sharing the next year with you and hope you will continue to make our community a good place to live through all that life has to offer.

Respectfully submitted.

Roland Smith,  
Board Chair, Sante Manitowadge Health





## Committees of the Hospital

### Board of Directors

- Roland Smith, Chair
- Marcel DeMars, Director
- Jody Kuczynski, Director
- Jim Ward, Director
- John MacEachern, Director
- Louie Kannar, Director
- Ayad Sbeyti, Director
- Reene Warren, Director
- Dr. Camille Cimona , Chief of Staff
- Annie Janveau, Secretary/Treasurer
- Megan Esarte, Chief Nursing Officer

- Accreditation
- Contingency Planning
- Continuous Quality Improvement
- Credentialing
- Health Records
- Joint Occupational Health & Safety
- Infection Control
- Information Systems/ Privacy
- Lab Liaison/Transfusion Medicine
- LTC Interdisciplinary
- Medical Advisory Committee
- Pharmacy
- Resident Council
- Family Council
- Union/ Hospital
- Workplace Wellness

### Committees of the Board

- Executive Committee
- Governance Committee
- Finance and Audit Committee
- Quality Committee
- Joint Conference
- Fiscal Advisory

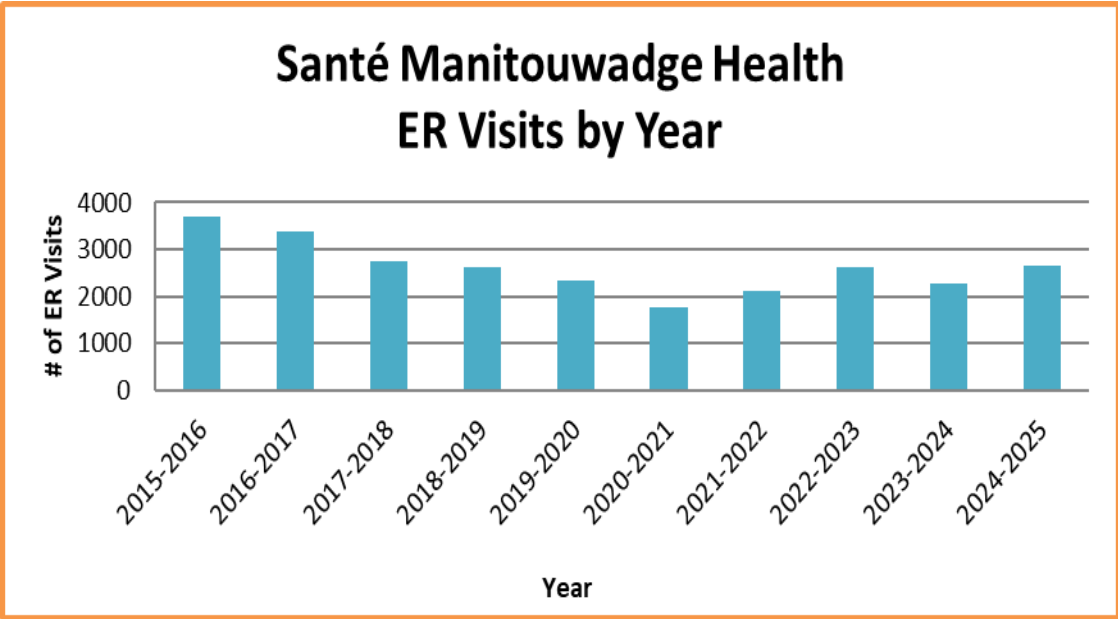
## Senior Management Team

- Annie Janveau**  
Chief Executive Officer
- Megan Esarte**  
Chief Nursing Officer & Director of Clinical Services
- Trena Roberts**  
Director of Community Programs and Services

# Statistics

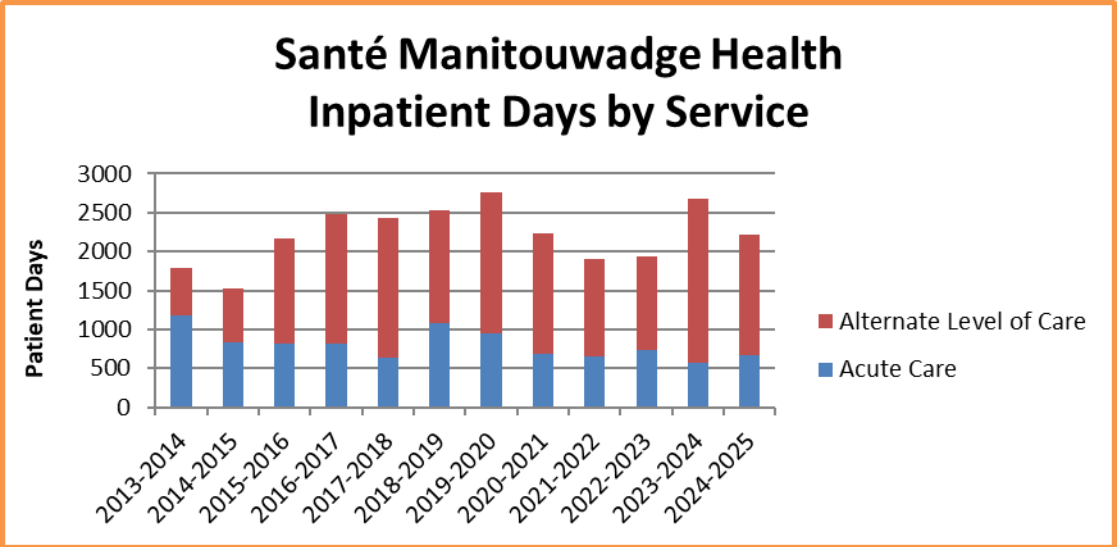
## Santé Manitowadge Health ER Visits by Year

# OF ER VISITS



## Santé Manitowadge Health Inpatient Days

PATIENT DAYS



## DIAGNOSTIC IMAGING

The Diagnostic Imaging Department at Santé Manitouwadge Health continues to provide quality care and services to the community and surrounding communities by offering Bone Mineral Densitometry, Echocardiography, MSK Ultrasounds, Ultrasound, Pulmonary Function Testing and Audiograms.

The Diagnostic Imaging Department had a team comprised of 2 full time and 1 part time Technologists until the end of November 2024, at which time Cassie Fogarty went on Maternity leave. In December 2024, Jarret Heath joined the DI Team as a casual employee to help maintain operations within the department. As Jarret is a dual trained Technologist in X-Ray and Ultrasound, he brings continuity of services to the department during scheduled shifts and during on call shifts.

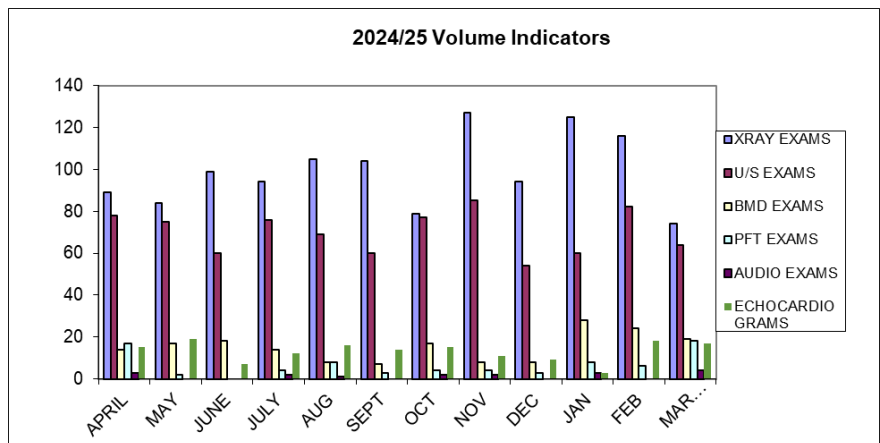
Our newest improvement to the department is the state of the art GE Prodigy Bone Mineral Densitometry equipment. This equipment was operational in December 2024. This BMD equipment provides the Gold Standard in imaging for osteoporosis. We have the privilege to offer this to our community and surrounding communities for many years to come, as our old machine was 22 years old.

While purchasing new equipment for the improvement of patient care is essential, so too is the repurposing of the old equipment to locations that are not as fortunate. A clean-up project of outdated, unused equipment was undertaken in the spring of 2025. With some assistance through Manitoulin Transport, we were able to donate the old iU22 Ultrasound system, which had not been in service since October 2021, an old PFT system and an old Audiogram system to an operation called Medical Equipment Modernization Opportunity (MEMO). The equipment was transported to Thunder Bay and from there would be relocated. The MEMO operations transport redundant hospital equipment and supplies to needy health care facilities in Cuba, El Salvador, Liberia, Nicaragua, Uganda and Zimbabwe.

We were also able to repurpose our CR Cassette System which was no longer relevant to our department and help a local Veterinarian provide advance services for surrounding community pet owners within the region.

The department continues to assist in the work towards advances allowing Patients access to their digital diagnostic records through a program called Pocket Health.

Marcia Newton MRT(R), DMS



“Best quality care received, enjoyed time at this great facility”



## Dietary

“I valued the respectfulness of all the staff.”

This past year we have had a few changes in staffing one of our part time cooks left, Laryn Bartley has joined us as a part time cook we love having Laryn with us she a great asset to our team.

Also two of our Dietary Aides left us we are in the process of hiring two more meanwhile thank you so much to dietary staff for filling in these positions everyone has been working hard.

We currently are going through a few changes in our department regarding LTC guidelines, Kiera and I went to Geraldton hospital earlier this year to check out how they Run New program site visit was very helpful to us.

We now know we must make changes in Dietary department to get us out of Dinosaur age as they call it.

These changes need to be made to meet all the LTC guidelines and regulations for our next LTC inspection.

With in the next few weeks our screens should be put up and running in Dietary department also one in LTC lounge this will show all our menus also recipes Kiera has done an amazing job entering recipes and entering them into this new system We all have a little learning coming up, but we are excited for the new changes.

Earlier this year our department saw an upgrade with a new showcase much better then old one we are loving the new look.

I would like to thank all Dietary staff for all the hard work in the past year we have a great team that work together thanks for all the extra you all do.

I look forward to another great year!

Fatima Dubreuil

## Director of Clinical Services/Chief Nursing Officer

Santé Manitouwadge Health clinical service departments continues to deliver high-quality, patient-centered care in alignment with the organization’s mission and values. The 2024-2025 year was both challenging and rewarding. Once again, the teams have enhanced patient outcomes by broadening their knowledge and skill set through professional development opportunities providing high quality patient care, all while putting patient wishes and care needs at the forefront. Our small but mighty hospital uses an integrated, innovative and team-based approach to service delivery which in turn, helps to increase positive patient outcomes. Our unique approach creates an environment of creativity and teamwork which in turn allows us to maximize our resources to develop new processes and practices which tailor our care and align our services to meet community needs.

I am extremely proud of the progress we’ve made in advancing clinical practice, fostering a culture of patient safety, and investing in professional growth. As we move forward, we remain committed to quality care and innovation in health care. I welcome the challenges and new opportunities in the 2025-2026 year as SMH has the team that always rises to the challenge to meet patient care needs.

Megan Esarte

“The fact that I had received the very best care, the staff treated me with respect. Thank you to all the staff”



## Information Technology

This year, IT has made some changes to enhance our digital security and improve overall security within the organisation. Cisco DUO was implemented into our authentication system, allowing for staff to utilize multifactor authentication when accessing work email and resources from outside of the organization. In addition to DUO, we are rolling out Imprivata, a system that will allow users to access their login credentials with a tap of their ID cards, saving staff members from having to enter the same credentials over and over.

SMH IT has also been upgrading servers and migrating platforms to the cloud, such as the clinical EMR PS Suites, which is now hosted on the cloud. This offers enhanced security, in addition to improved support for the server and the services it offers. In addition to the clinical EMR migration, SMH will begin a migration of a legacy file server to a new on-premises server which will offer additional space and resources. Once completed, the legacy server will be decommissioned.

SMH IT has also worked with HR to deploy our Employee Self-Serve portal, allowing us to reduce the amount of paper printouts. This new portal will also allow staff members to view past paystubs and tax information, in addition to submitting leave requests and vacation time. The new system will send the requests to the required individual, saving staff members time and paper when submitting requests.

As our digital age advances as does our policies and the cyber security that accompanies them. SMH has been consistently improving and updating them to keep up with the standards and best practices to help ensure the safety and security of our data. This includes incorporating new services such as Cisco DUO, but it also includes back-end enhancements with the auditing of user logon requests and file access activity.

Some of the future projects SMH IT has been working on have also made progress. Some of these upcoming projects include preparing our environment for the implementation of large update to our regional EMR system, replacing older servers and implementing a new digital service that will help improve the consistency of quality of care we offer our residents.

With the ever-changing world of Information Technology, we advance our systems and services to maintain a quality standard within a safe and secure environment, keeping hospital and patient information safe and secure.

### Support Services Manager/Privacy Officer

Did you know that the first time you present to SMH you were assigned a health record number. That number will be yours forever. Every visit you have to SMH, whether it be for an emergency visit or a lab procedure will be tied to that unique number. That same process happens at every hospital you have been a patient at and that same health record number is connected to each facility you have visited within the Thunder Bay region. This is your regional health record. Currently your health record is a hybrid of electronic information and printed paper. As you can well imagine, the sheer number of paper records housed in any hospital can be astronomical.

Planning and working groups are now underway as we work towards the implementation of a regional electronic health record system called Meditech Expanse. This is a large scale multi-year project. Many changes will be implemented as we move towards a fully electronic regional health record. This will greatly benefit both patients and staff from a quality, safety and efficiency standpoint.

Workflows will be streamlined and in turn improved clinical processes will help support better patient outcomes. We look forward to this transformation as we upgrade our systems and technology on a regional level.



## Laboratory

Things have been busy in the Laboratory Department. We definitely have lots of things left to accomplish. There is never a dull moment for us.

**Staffing:** We still are continuing ongoing recruitment efforts for an MLA and/or an MLT. Currently we have two full-time staff members. We have been fortunate that for the past year Michael Gillman has been returning to do some locum coverage for us while one staff member was off and while we continue to look for replacement staff. Unfortunately, we still will see some service interruptions based on staffing shortages especially when the staff are working alone. As we have more locum physicians coming to help our permanent physician we are seeing more patient visits.

**Hematology Analyzer Replacement:** A New Hematology analyzer has been purchased and received. Training has been completed for the new analyzer and we are now in a very intense validation protocol with UHN before we can switch to it. We hope to be live with the new instrument sometime in the Fall of 2025.

**Coagulation Analyzer Replacement:** A New Coagulation analyzer has been chosen which will be purchased and implemented during the first half of 2026. As with the Hematology analyzer a validation protocol with UHN will occur.

**New Blood Gas Analyzer:** Our Blood Gas analyzer is slated for replacement and the new analyzer will be implemented in the Fall of 2025. All new equipment does undergo validation protocols which are directed by UHN.

**ACD Laboratory Self Assessment:** The Laboratory's Self Assessment for Accreditation Canada was due in early 2025. With the help and guidance of UHN the assessment was performed and submitted. ACD was satisfied with our submission and plan for continuing improvements in the laboratory. This does come with a lot of work for the staff to make processes and outcomes better.

**Laboratory Directorship:** Lots of change and learning with the UHN Laboratory Directorship. This is an ongoing process, and we are continuing to progress.

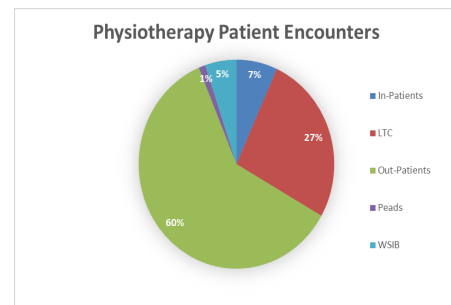
## Physiotherapy

Physiotherapy services are available to the community of Manitowadge for out-patient, in-patient, and the Long-Term Care services for: Orthopedic, Musculoskeletal, Neurological, and Acute Post-Operative conditions.

The Physiotherapy department offers rehabilitative care to patients through the out-patient clinic including group programs like the GLA:D Canada Program, (Good Life with Osteoarthritis in Demark) and collaborative programs like the Cardiac Rehab Program partnered with Thunder Bay. The department continues to offer an exercise class for staff members of SMH twice weekly to promote staff wellness.

The PTA/OTA/RA also now offers an Older Adult Exercise Program twice per week for 12 weeks in the spring and fall for approx. 60 minutes. The first session ran February to April 2025 and our next class will begin in September 2025. The program focuses on moderate exercise with engagement in aerobic activity and muscle-strengthening.

The department also reviewed the patient encounters by type for last year and reviewed the percentages of how often we were seeing each patient type; Out-Patients, In-Patients, WSIB, Long Term Care and Paediatric Patients.



## Housekeeping

Good housekeeping at a workplace means it should be tidy, organized, and safe.

Scheduled work rotation has now been implemented and offers numerous benefits for both employees and employers. Increased flexibility, improved work-life balance, enhanced skill development and stronger team dynamics.

Cleaning of locum housing is ongoing as needed.

We are now overseeing the daily task of cleaning the dental offices and clinic, this has been working well with the scheduled work rotation and adjustments to our scheduled hours of work.

We have gone through a few staff members; however we are now a department with a full complement of staff, and is operating at maximum efficiency, leading to increased productivity and better achievement of objectives.

The monthly Housekeeping Inspection has helped check if the facility is clean and well-maintained and improves worker and client health and safety.

All this was made possible because of the amazing HSKG and Laundry staff I would like to thank them for their hard work and dedication .

Stephanie Paton

“They were there when I needed help”



## Family Health Team

Mental Health and Addictions supports has been an ongoing struggle in our community. After many great efforts, from our previous MFHT interim Manager, in Fall of 2024 we were given the approval to reallocate our funds from our Primary Care Physio therapist position to fund the new Mental Health and Addictions position. Shortly after the position was secured, the role was successfully filled and developed. Although this individual contributed greatly to the development of the new role and program, they chose to resign due to wanting to return to retirement. However, after a short turn around, we have successfully offered the position to a New Grad of the Social Services Diploma, with continuing education for Bachelor of Social Work.

After many years of continued efforts to fill the Nurse Practitioner position, one of our local RN's was recently accepted into the Nurse Practitioner education program. The MFHT Executive Director has completed an application for the Grow Your Own program, and is currently waiting for a decision. The Grow Your Own program is designed to support the learner financially while providing the organization with years of service commitment. This is a big step for MFHT!!!!

The partnership with the Township of Manitowadge was to expire in March 2025, however we received approval to extend the contract until March 31, 2026, to use up the remaining funding. The SMH Senior Management Team is exploring alternative funding options so we can continue providing this much needed service in our community. The first step was to relocate the Myride coordinators to the SMH Gift Shop, which previously relied on volunteers. This also was done to improve confidentiality of patients within the MFHT reception area.

Over the fiscal year, the Family Health Team experienced staffing changes which contributed to positive growth. Through a seamless transition, Trena Roberts, accepted the role of the Manitowadge Family Health Team Executive Director, Diane Calback was quickly secured for the Social Work position, MFHT Nursing staff remained status quo, and our Dietician, Kiera Boyde returned from maturity leave. MFHT providers participated in an array of education including Palliative Care, Gynecological skills, footcare, etc. MFHT receptionist Carly Campbell recently completed her last year of the RPN program, and SMH was able to work with Confederation College to provide her practical education locally at SMH. Finally, there was a change over in admin staff, as Courtney Atkins left the FHT Office Coordinator role to accept the position of Quality Improvement Decision Support Specialist, providing service for 5 Family Health Teams across the north shore while being housed locally at MFHT. Kaelyn Hynes was successfully hired to fill the roll as the Office Coordinator.

MFHT continues to be present in the community by offering Public Health school presentations, vitals visits to Lakeview Apartments, presentations at Early On, participating at school career fairs, etc. The Palliative Care Committee worked hard over the last year to update materials and members, as staff turn over left the committee running on a skeleton crew. New members from MFHT and SMH have since joined the committee, and the palliative care binders, information, contacts, and handouts were all updated.



## Family Health Team

MFHT Executive Director Trena Roberts, has completed the Rotman, Health Care Leadership course through an online process. It has been a great experience and learning that will be beneficial for MFHT. MFHT was able to purchase a Billy blanket this year which will prevent new parents having to go on the road if this treatment is required for their newborn. This is very exciting!!

### Physician Recruitment Update:

The province wide physician shortage continues to be a severe challenge for our community, and we have been actively trying to recruit permanent physicians and replenish our locum pool. Dr. Cimona remains in the community, and has agreed to continue indefinitely with locum support. Valiant efforts to secure timely locum support continue to be put forth, and have been successful in developing a great locum pool to support Dr. Cimona. Securing locum support and mitigating local physician burn out has been the MFHT Director's number one priority. We have been applied for each Practice Ready Ontario cohort, hoping to secure an international Physician, that would train under Dr. Cimona. All the locums are new to the community, as the pandemic depleted our previous locum pool with most locums opting to settle down into their own practice or move out of province. Conversations regarding permanent and locum compensation in the North are occurring at the Ministry level, and we hope that changes will be implemented to aid in our ability to be competitive with Southern Ontario. MFHT Executive Director, Trena Roberts and SMH CNO, Megan Esarte attended two recruitment events in 2024/2025,; Thunder Bay through NOSM and Winnipeg for the Rural and Remote conference. Both events were very successful in promoting Sante Manitowadge Health, the community, and connecting with residents, physicians, and other rural recruiters. This also provided the opportunity to connection with NOSM in getting students to come to SMH. During the week of June 23, 2025, we will have our first student coming to shadow Dr. Cimona for four days. In May of 2025, we were able to secure funding of \$10, 000 from NOSM to purchase items to give our learners a better experience her eat SMH. All SMH and MFHT staff are going above and beyond to provide as much support as possible for Dr. Cimona during this time, and we look forward to meeting all the new locum physicians visiting our community in the coming months.



**SANTE MANITOUWADGE HEALTH  
STATEMENT OF OPERATIONS**

<b>For the period ended March 31, 2025</b>	<b>2025</b>	<b>2024</b>
<b>Revenue</b>		
Ministry of Health and Long Term Care	\$7,768,576	\$7,243,398
Other agencies and self pay	\$539,971	\$588,767
Other	\$645,253	\$664,011
Amortization of deferred contributions	\$109,925	\$113,041
<b>Total Revenue</b>	<b>\$9,063,725</b>	<b>\$8,609,217</b>
<b>Expenses</b>		
Administrative services and supplies	\$438,624	\$419,651
Amortization of equipment and information systems	\$196,792	\$196,308
Bad debts	\$21,244	\$5,891
Dietary food and supplies	\$142,689	\$131,032
Drugs	\$45,133	\$44,044
Family Health Team	\$763,121	\$726,700
Medical and surgical supplies	\$52,891	\$51,595
Nursing and other patient care supplies	\$337,389	\$317,135
Other programs	\$143,658	\$163,211
Telephone		\$2,156
Rent	\$155,592	\$157,321
Salaries and benefits	\$5,705,968	\$5,658,784
Support Services	\$249,943	\$219,824
Utilities and insurance	\$495,388	\$473,182
	<b>\$8,748,432</b>	<b>\$8,566,834</b>
<b>Excess of revenue over expense before the following :</b>	<b>315,293</b>	<b>42,383</b>
Amortization of land improvements and building	(\$515,142)	(\$510,122)
Amortization of deferred capital contributions - land improvements and building	\$391,622	\$382,286
<b>Excess (deficiency) of revenue over expenses</b>	<b>191,773</b>	<b>(\$85,453)</b>

**SANTE MANITOUWADGE HEALTH****STATEMENT OF FINANCIAL POSITION** as at March 31, 2025

	2025	2024
<b>Assets</b>		
<b>Current</b>		
Unrestricted cash	\$1,065,864	\$1,296,581
Short-term investments	\$440,704	\$103,225
Accounts receivable	\$456,731	\$415,530
Inventory	\$108,083	\$94,606
Restricted cash	-	-
Prepaid expenses and deposits	\$83,052	\$99,894
	<b>\$2,154,434</b>	<b>\$2,009,836</b>
<b>Capital assets</b>	<b>\$6,597,762</b>	<b>\$6,634,294</b>
<b>Long-term investments</b>	<b>0</b>	<b>\$320,495</b>
<b>Restricted cash</b>		
<b>Employee benefits receivable</b>	<b>\$233,405</b>	<b>\$243,904</b>
	<b>\$9,107,102</b>	<b>\$9,208,529</b>
<b>Liabilities</b>		
<b>Current</b>		
Bank indebtedness	-	-
Accounts payable and accruals	\$1,508,697	\$1,989,321
Deferred revenue		
Deferred contributions related to capital assets	\$5,324,293	\$5,259,521
Employee future benefits	\$471,100	\$470,100
Employee benefits payable	\$41,411	\$41,260
Repayable to TBRHSC	\$121,501	
	<b>\$7,467,002</b>	<b>\$7,760,202</b>
Contingencies		
<b>Net assets</b>		
Invested in capital assets	\$1,273,469	\$1,374,773
Unrestricted	\$366,631	\$73,554
	<b>\$1,640,100</b>	<b>\$1,448,327</b>
	<b>\$9,107,102</b>	<b>\$9,208,529</b>

**SANTE MANITOUWADGE HEALTH—FAMILY  
HEALTH TEAM  
STATEMENT OF OPERATIONS**

**For the period ended March 31, 2025**

**2025**

**2024**

**Revenue**

Operating funding	\$888,244	\$888,244
Operating funding—mental health		
One-time funding –Temp. Retention Incentive for Nurses		
One -time Funding - Operational Increase And OAB Project	\$17,298	\$23,634

Total Revenue	\$905,542	\$911,878
---------------	-----------	-----------

**Expenses**

Equipment lease and service contracts		0
Professional Development	\$11,448	\$9,535
Audit	\$6,000	\$6,000
Physician Consulting	\$13,193	\$13,000
One-Time Equipment		0
IT Over-head	\$9,413	\$16,948
General Consulting	\$4,265	\$2,320
General Overhead	\$54,775	\$36,744
Recruitment	\$10,760	\$17,326
Travel	\$8,175	\$8,757
Rent	\$54,043	\$54,043
Management Salaries and benefits	\$144,743	\$129,016
Interdisciplinary Salary and Benefits	\$439,534	\$427,686
Insurance	\$5,453	\$5,325

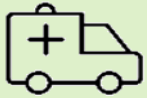
	\$763,121	\$726,700
--	-----------	-----------

<b>Excess of revenue over expense before the following :</b>	\$142,421	\$185,178
--------------------------------------------------------------	-----------	-----------

Repayable to Ministry of Health	<u>(\$142,421)</u>	<u>(\$185,178)</u>
---------------------------------	--------------------	--------------------

<b>Excess (deficiency) of revenue over expenses</b>	-	-
-----------------------------------------------------	---	---

## Fast Facts



2,664

Emergency Visits

6,226

Ambulatory Care Visits



2,220

Inpatient Days

228

Outpatient Telemedicine



“All staff actually cares about the patient and their job, the service is very personalized. On any given time in at the hospital or anywhere else in town the staff calls me by my name when they see me.”

## Chief Executive Officer

Annie Janveau 20 years

## Chief Nursing Officer/Director of Clinical Services

Megan Esarte 15 years

## Financial Manager

Amy Gray 10 years

## Director of Family Health Team and Clinical Programs

Trena Roberts 13 years

## Administration/Finance

Katie Aguiar 7 years  
 Linda Wieler >1 year  
 Stephanie Hardy 6 years  
 Julie MacIntyre 5 years  
 Paula Proulx 12 years

## Admitting

Alexia Dubois 8 years  
 Ginette Bedard 23 years  
 Rachael Tourout 1 year

## Diagnostic Imaging

Marcia Newton 32 years  
 John Oliveira 27 years  
 Cassandra Osiecki 6 years  
 Jared Heath >1 Year

## Family Health Team

Katelyn Hynes >1 year

## RN's

Moh Murad 12 years  
 Michella Newton 11 years

## Social Worker

Diane Callback >1 year

## Dietician

Kiera Boyd 7 years

## Food Services

Fatima Dubreuil 40 years  
 Melvia Penney 24 years  
 Helen Proulx 18 years  
 Kathy Sherwood 3 years  
 Sara Sotiriou 3 year

## Support Services Manager/ Privacy Officer

Teresa Malakoff 21 years

## Housekeeping

Linda Gagne 15 years  
 Sherrie Zaiser 16 years  
 Stephanie Paton 6 years  
 Rosza Mehlenbacher 2 year  
 Linda Tourout 2 year

## Laundry

Gail Ross 19 years

## Sterile Processing

Alexis Demers 12 years

## Information Technology

Scott Paananen 14 years



**Laboratory**

Susan MacGregor 37years  
Erica Phytilla 25 years

**Maintenance**

Micheal Franks >1 year

**Nursing Department**

**RN**

Ali Kuczynski 9 years  
Erika Robert 8 years  
Chantal Fleurent 6 years  
Faren Begin 3 years  
Brittany David 3 years  
Martha Ladouceur 3 years  
David Heinemann 1 year

**RPN**

Ronna Neale 28 years  
Denika Jomphe 6 years  
Anne-Marie Bellemore 4 years

**Telemedicine Coordinator/Infection Control**

Louise Baran\* 40 years

**PSW**

Fatima Machado 5 years  
Gina Wheadon 2 year

**Recreational Therapist**

**Ward Clerk**

Celina McKinnon >1 year

**Physiotherapy**

James Neale 28 years  
Tiffany Lidster 12 years

*\*Retired from SMH in 2022/23year*



*A sincere  
thanks  
for all you do!*



“The friendliness, the prompt service and the concern for my comfort”



Only Agree and Strongly Agree results are shown unless otherwise specified. For a more detailed breakdown refer to actual reports.

## Demographics

- Gender: These stats we all know anyway and even if all “Prefer not to answer are” male we are still a predominately female workplace.
  - Male 8.9%
  - Female 82.2%
  - Prefer not to answer 8.9%
- Age:
  - Age group 44 years and under 44.4%
  - Age group 45 and over 33.3%
  - Prefer not to say 22.2%
- Tenure in Organization:
  - Less than a year 13.3%
  - 1 to 5 years 24.4%
  - 6 to 10 years 20.0%
  - 11 or more years 42.2%

## Immediate Supervisor

- Provides me feedback on how well I do my job 71.0%
- Provides me with positive recognition. 75.6%
- Considers my suggestions for improving the workplace. 75.5%
  - My manager provides me with positive recognition for following correct patient safety procedures when an incident has occurred. 53.3%
    - Neither Agree nor Disagree 13.3%
    - Don’t know/Not applicable 28.9%
- My manager considers my suggestions for improving patient safety. 71.1%

## Job Characteristics Not all question responses are shown.

- I have enough time to do what is expected of me in my job. 55.5%
  - Neither Agree nor Disagree 28.9%
- I can make improvements in how I do my job. 66.6%
- I have opportunities for personal growth and development. 68.9%
- At work, I feel comfortable being myself. 82.2%
  - Neither Agree nor Disagree 13.3%

## Leadership

- Takes effective action to prevent harassment, abuse and violence in the workplace. 73.3%
- Is committed to providing a healthy and safe workplace. 75.5%
- Promotes high-quality care/services. 84.5%
- Can be trusted. 66.7%
  - Neither Agree nor Disagree 24.4%
  - Disagree 8.9%
- Takes effective action to prevent racism and discrimination in the workplace. 80.0%



**Patient Safety** Not all question responses are shown.

- Individuals involved in patient safety incidents have a quick and easy way to report what happened. 73.3%
- If I make a mistake, it will not be held against me. 57.7%
  - Neither Agree nor Disagree 15.6%
  - Don't know/Not applicable 22.2%
- After a serious incident, we try to prevent the same mistake in the future. 71.2%
- Please give your unit/team/work area an overall grade on patient safety.
  - Excellent/very good 68.9%
  - Acceptable 11.1%
  - Poor 4.4%
  - Don't know 4.4%
  - N/A 8.9%
  - Failing 2.3%
- Please give your organization an overall grade on patient safety.
  - Excellent/very good 64.5%
  - Acceptable 17.8%

**People-Centred Care** Not all question responses are shown.

- We treat patients with respect and dignity. 88.9%
- We make sure that patients, their families and caregivers actively participate in making care decisions. 71.1%
  - Don't know/Not applicable 24.4%
- We work well with other units to deliver the best patient care/services. 82.2%
- We have enough time during shift transitions to exchange patient care/service information. 40%
  - Neither Agree nor Disagree 13.3%
  - Don't know/Not applicable 37.7%

**Work Team** Not all question responses are shown.

- Communication is open and honest. 77.8%
- The people I work with help each other out. 88.9%
- The people I work with treat each other with respect, regardless of race, ethnicity, gender, disability, or age. 86.7%

**Well Being Engagement** Not all question responses are shown.

- Your work area is physically healthy and safe. 77.8%
- Your work area is psychologically healthy and safe. 66.6%
  - Neither Agree nor Disagree 24.4%
- I would recommend this organization as a place to work. 66.7%
  - Neither Agree nor Disagree 26.7%
- I often think about leaving my job.
  - Strongly Agree/Agree 28.9%
  - Neither Agree nor Disagree 26.7%
  - Strongly Disagree/Disagree 44.4%



• In the past 12 months, would you say that most work days were...?

- Quite Stressful 22.2%
- Somewhat Stressful 60.0%
- Not at all Stressful 17.8%

• Overall, how satisfied are you with your job? 82.2%

• **Equity, Diversity, and Inclusion**

• In the past 12 months, have you experienced unfair treatment or discrimination at work based on any of the following personal characteristics:

◆ Age

- ◆ No 93.3%
- ◆ Other responses were “Prefer not to answer” and “Yes” but no value entered

◆ Gender

- ◆ No 97.8%
- ◆ Yes 2.2%

◆ Sexual orientation

- ◆ No 100%

◆ Race or Colour

- ◆ No 100%

◆ Nationality or immigration status

- ◆ No 97.8%
- ◆ N/A 2.2%

◆ Ethnicity or culture, including Indigenous heritage

- ◆ No 93.3%
- ◆ N/A 6.7%
- ◆ Language
- ◆ No 97.8%
- ◆ N/A 2.2%

◆ Physical appearance other than skin colour

- ◆ No 97.8%
- ◆ Yes 2.2%

◆ Religion

- ◆ No 97.8%
- ◆ N/A 2.2%

◆ A physical or mental disability

- No 97.8%
- N/A 2.2%

◆ Other

- ◆ No 84.4%
- ◆ N/A 15.6%

◆ In the past 12 months, have you witnessed any kind of unfair treatment or discrimination at work directed at patients or their family/friends?

- ◆ No 86.7%
- ◆ Yes 8.9%
- ◆ Other responses were “Prefer not to answer” and “N/A” but no value entered

