



**ANNUAL
REPORT**
2019
2020



OSFHT

Owen Sound

FAMILY HEALTH TEAM

Message from our Executive Board

On behalf of Owen Sound Family Health Team (OSFHT), we are pleased to present our 2019/2020 Annual Report.

This report is reflective of a year of hard work and successful initiatives. The past year focused on change and looking to the future.

After 4 years of dedication and leadership to the OSFHT Dr. Lizette Van Zyl stepped away from her role as Board Chair. We extend our gratitude and recognition for the many contributions she made to OSFHT and our wider community.

With the changing HealthCare landscape in Ontario, we are proud to say that our work aligns with the Grey Bruce Ontario Health Team.

The wait list for a local family doctor continues to grow as people understand the importance of being connected to a Family Health Team.

The OSFHT continues to review current programs, services and workshops with a critical eye to ensure our patients continue to receive care that improves their health and quality of life. The review process ensures we are offering high quality programs and participating in continuous quality improvement. New and existing programs will be offered as Virtual Programs in 20/21.

Our team continues to work diligently to ensure OSFHT patients are supported through these unprecedented times.

Sincerely

Dr. Lizette Van Zyl, Board Chair

Paul Hoban, Executive Director

Your *health.* **Your** *plan.* **Your** *team.*

Patient Care Is our #1 Priority

“Showed genuine caring attitude made me feel comfortable talking about embarrassing information”

~ NP Patient

I am very happy to be able to avoid emergency and access a health care professional quickly. This service is excellent! thank you! ~ NP Patient

Very personalized, specific and comfortable! ~ NP Patient

...always supportive, informative and great at suggestions. Never judges and make me feel like I can succeed ! ~Smoking Cessation Patient

Excellent facilitator! Very informative and clear. Thank You ~ GLB Participant

Nice to be able to quickly get attention without having to wait for overburdened doctors for “simple matters” ~ NP Patient

↑ **4,720**
Unique Patients Served in by Nurse Practitioners in Same day / Next Day Clinics

Unique Patients Served in Diabetic Classes (GLB)
↓ **332**

↑ **4,948**
Patients were seen by Diabetic Registered Nurses in Clinics

Patients were seen by our 3 Smoking Cessation Counselors
691

Our patients *feel good* about their experience.

Our Staff Care about their Work

“Very helpful session regarding my child’s eating problems in a non judgmental easy going manner”

Dietitian is wonderful. I am so glad she is in Meaford now!

“Very well done - covered a lot of very important information. Also group participation especially well with the pharmacist who really supported the OT and dietitian. THANK YOU!”

“Our dietitian was encouraging, informative and positive. I liked the practical approach to decreasing carbohydrates. I like the team approach to health through the OSFHT.”

“Showed genuine caring attitude made me feel comfortable talking about embarrassing information”

93%

Patients surveyed were “always” satisfied with their visit that day

86%

Patients surveyed felt the amount of time spent with them was enough

85%

Patients surveyed felt they were involved in the decision about their care and treatment

85%

Patients Surveyed were given opportunity to ask questions about treatments.

Our values will be reflected in our team everyday

We are Community Focused & Aware

Programs Available to our Patients & the Community

CP - Smoking Cessation
NP - Heart Health Clinic
NP - Advanced Access Clinic
NP - Unattached Patient Program
NP - Bone Health
RN - PAP Clinic
RN - Diabetic Foot Clinic
RN - Diabetic Management Program
RN - Memory Clinic/MOCA's
RT - Respiratory Clinic/COPD
OT - Boosting Balance
OT - Healthy Bones
OT - Forever Fit (Sit & Stand)
OT - Learning the Ropes
OT - OA of the Hand
OT - Stress Management 101
RD - Craving Change
RD - Free Style Libre
RD - Healthy Lifestyle Program
RD - Heart Healthy Eating
RD - Living with Diabetes
RD - Pre-Natal Nutrition
RD - Picky Eaters, Problem Feeders
RD - Introducing Solids

33,944

FHT Patients have access to our Programs

Health Fairs were held by staff in the community

7

Patients have given consent to receive email

5785

Participants of "forever fit" rated that their health & wellness has improved

100%

"Forever Fit" program has increased in the last year

29%

Regularly Scheduled Programs (Weekly, Monthly & Quarterly)

24

Our *Team* meets the needs of our *Community*

Goals are Responsible and Sustainable

- To serve our patients and their families
- To meet the needs of our community
- To increase our programs and services
- To be the best employer

220

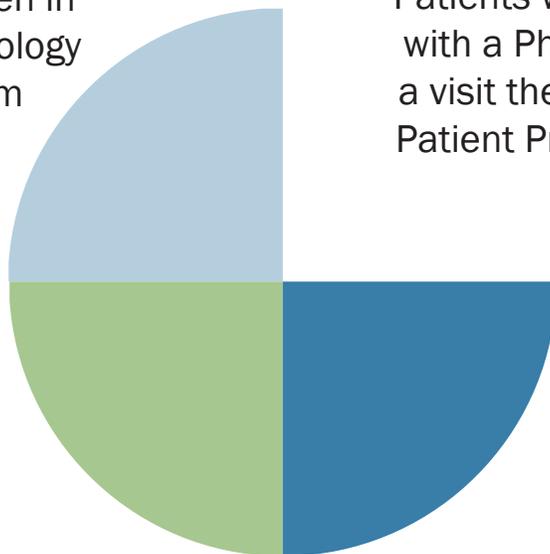
Patients were seen in the COPD/Respirology (ARGI) Program

38%

Patients were rostered with a Physician after a visit the Unattached Patient Program (UPP)

45%

Patients Surveyed would have gone to the ER if same day advanced access had not been available



97%

Patients with diabetes have had their quarterly blood work completed

73

Patients were seen in the Memory Clinic

Our values will be reflected in our team everyday

MISSION:
Your health, your plan, your team

VISION: An effective, integrated and cohesive team that leads the way in primary care to enable our patients to manage their healthcare needs

VALUES:
Respect, Accountability, Community, Teamwork

FOCUS ON

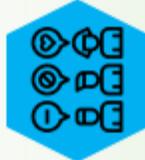
providing a center of excellence & healthy workplace for patients and staff.

being responsible with our resources and funding in delivering our work.

Building close relationships with our community partners.

prioritizing, planning & delivering services needed for our community & region.

as a unified team, we will strive to live our values, effectively, every day.



Our patients feel good about their experience



Our community needs are met responsibly & sustainably.



Our integration & leadership in our community is essential.



Our values will be reflected in our team everyday



Our team meets the needs of our community.



Ask patients for guidance and evaluation on improving our programs



Teach our patients about their health and taking care of themselves



Involve every patient in their individual health care plans



We will strive to increase knowledge of our work in the community



We will improve workflow, communication and standardize our work.



We will improve on sharing knowledge & information with our partners, staff & patients



We will improve leadership engagement for high needs patients in our health community



We will develop processes for patients who need direction and support



Our team will take part in improving our processes, communication and work culture



We will build on the strength and skills of our people



We will encourage life long learning in our team



We will continue to transform, adopt, learn, improve and innovate our programs



We will build a healthy respectful workplace



Develop a quality improvement program that advances care in our community



We will strive to keep our programs up to date and innovative



Engage patients and improve care for chronic conditions



Have same day and next day appointments available for our patients every day

Financial Responsibility & Sustainability

\$3.54
Million Budget

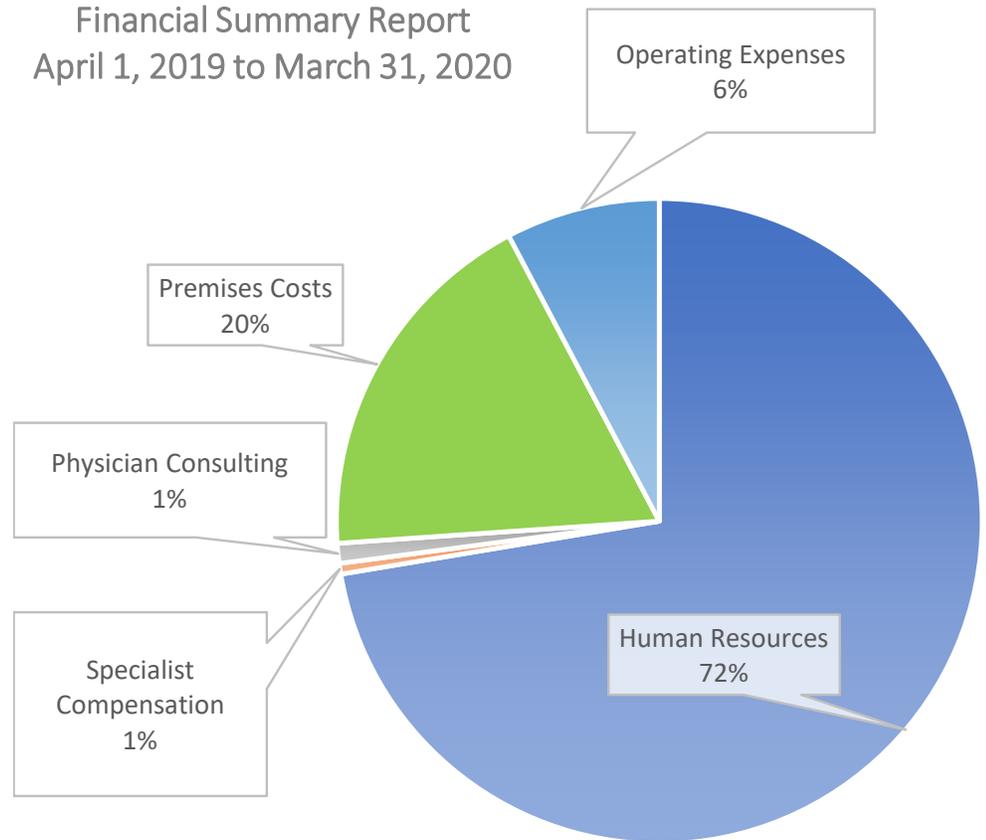
Financial Summary Report
April 1, 2019 to March 31, 2020

1%
Overall increase in
Budget from
2018/2019

-1%
Overall decrease in
Human Resources
from 2018/2019

13%
Overall increase in
premises costs from
2018/2019

Financial Summary Report
April 1, 2019 to March 31, 2020



We are *responsible* with our resources
and funding in *delivering* our work