Empowered
Progressive
Innovative
Care



DRHC

Dryden Regional Health Centre

hospital and community care

ANNUAL REPORT

2025-26

Letter from the: **Board Chair and Chief Executive Officer**

Empowered Progressive Innovative Care

Looking back on the third year of our Strategic Plan - **Empowered, Progressive, Innovative Care** we are proud of all the work we have done and the progress we have made towards our objectives and priorities.

A lot is changed in the healthcare sector (and the world) since the Board of Directors began developing **Empowered, Progressive, Innovative Care** in 2022, however the three pillars of our plan: Be a Great Place to Work, Ensure Strong Foundations, and Lead New Solutions are still just as relevant today for the growth and development of Dryden Regional Health Centre as they were nearly four years ago. This fall, the Board will begin to look at the next Strategic Plan, we hope to continue building on the progress we have made over the last three years, while identifying new priorities and opportunities to improve health outcomes and experience for patients and their families.

The 2025/2026 Annual Report is just a snapshot of the incredible work that our people – staff, physicians, and volunteers do every day to care for the communities we serve. None of this would be possible without their dedication to providing exceptional, compassionate patient care.

Vanessa Simpson
Board Chair

Doreen Armstrong-Ross
President & Chief Executive Officer



YEAR AT A GLANCE

Empowered Progressive Innovative Care

17,175 Emergency Room Visits

30,540 Total Diagnostic Imaging
- Ultrasound, 3,146
- CT Scan 3,540
- X-Ray 23,854

350,041 Medication Orders

12,486 Physiotherapy Attendance Days
- Inpatient 4,381
- Outpatient 7,033
- Homecare 1,072

119 Newborns

128,544 Laboratory Tests

11,921 Inpatient Days

1,334 Doses of Chemotherapy Prepared

2,499 Occupational Therapy OT) Attendance Days
- Inpatient 1,641
- Outpatient 395
- Homecare 463

1,384 TeleMed Appointments

207,105 Packaged Oral Tablets Dispensed to Patients

868 Oncology Visits

338,340 Pounds of Laundry

9,179 Dictations

321	51	15	31	21
Employees	New Hires	Active Physicians	Medical Learners	Active Volunteers





2042
Mental Health Therapy

3641
Dryden Diabetes Centre

1499
Registered Dietitian

DRYDEN AREA FAMILY HEALTH TEAM Patient Visits By Program

2181
Blood Pressure Management

1953
Nurse Practitioners

1694
Lung Health



SURGERIES PERFORMED by Specialty:

890	160	111	75	58	66	15	271	34
General Surgeries	Knee Replacements	Hip Replacements	Shoulder Surgeries	Ears, Nose, Throat	Plastics	Spines	Urology	Gynecology

PILLAR 1: BE A GREAT PLACE TO WORK

Priority 1.1
Make Day to Day Work More Fulfilling

1.1.1 Focus on adopting evidence-based practices, strategies and behaviours that we know will have positive impacts on staff, performance, fulfillment, and engagement.

1.1.2 Use innovative best practices so our people can care, work, grow, and thrive, and be an exceptional place for existing and new staff to deliver quality patient care.

Here's What We Did:

- We are committed to helping to support the development of the next generation of healthcare workers. That is why we have worked to develop and grow our Summer **Patient Care Assistant (PCA)** program. Students pursing either a degree or diploma in Nursing can work alongside experienced healthcare workers, developing skills that will help them into their future careers. For the summer of 2026, we were excited to welcome our largest ever cohort of 15 PCAs, including nine new PCAs joining us after completing their first year of post-secondary studies. Additionally, three returning PCAs have signed on with DRHC to start their careers after completing their RN programs.

- In Spring 2026, DRHC successfully completed **Accreditation Canada's Laboratory Accreditation**, meeting 95.6% of 388 standards. This process looks at the processes of specimen collection and testing, to ensure compliance with legislative requirements and best practices, in areas including chemistry, hematology, microbiology, point of care testing and transfusion medicine.

- We successfully supported two registered nurses in furthering their education through the **Grow Your Own Nurse Practitioner Program**, helping to increase access to primary care for patients at the Dryden Area Family Health Team.

- With support from the Dryden Regional Health Services Foundation, three new graduate physicians were recruited to start their practices in Dryden, including both family practice through the Dingwall Medical Group and hospital-based services including emergency, obstetrics and hospitalist work.

    - During the last year, DRHC has supported 31 medical learners for a total of 248 weeks of education and training for medical students and residents.

Priority 1.2
Be a Safe Place for Everyone

1.2.1 Provide our people with access to the leadership, resources, and supports needed to thrive in a physically and emotionally safe environment.

1.2.2 Implement and provide training that allows us to actively demonstrate our commitment to cultural diversity, anti-racism and inclusion in our daily work.

Here's What We Did:

- Based on feedback from staff, we invested in **24-hour security**, to observe, de-escalate, and support our people, ensuring a safe and secure environment to work and to receive care. Our contracted security team patrols the entire campus, including the Hospital, Dryden Area Family Health Team, parking lots and grounds, and is available to support during emergency codes and escalate to local law enforcement when required.

- We invited representatives from the Canadian Mental Health Association (CMHA) to visit each of our departments, and facilitate sessions focused on **Flourishing in the Workplace**, including strategies to promote well-being and balance that staff can integrate into their professional and personal lives. The Leadership team attended an additional session hosted by CMHA on how to recognize and support staff who may be experiencing mental health challenges.

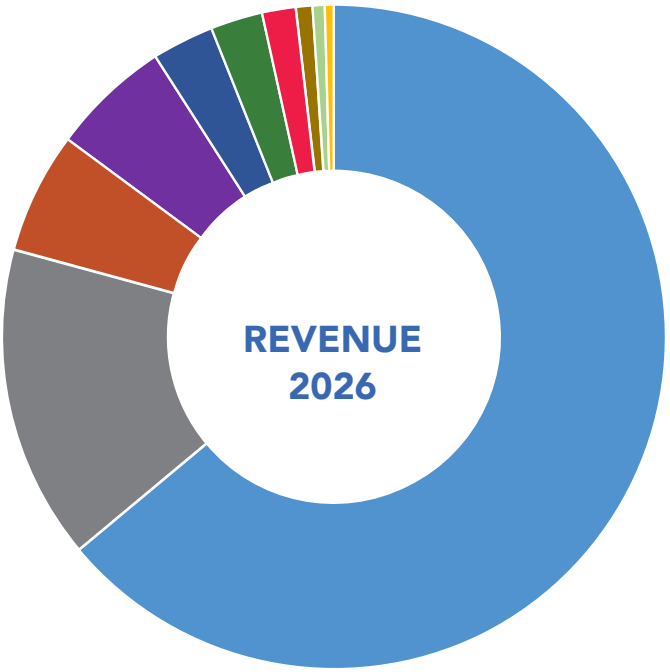




PILLAR 2: ENSURE STRONG FOUNDATIONS

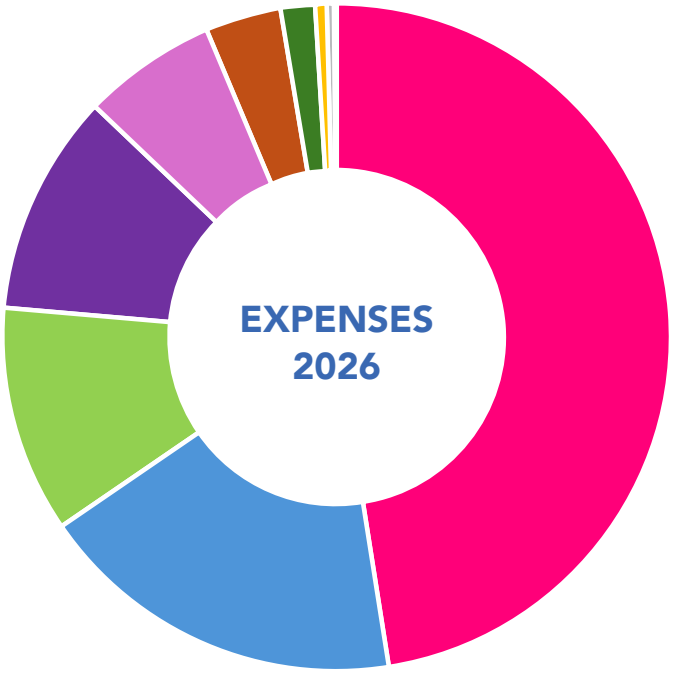
FINANCIAL PERFORMANCE

Visit **drhc.on.ca/reports** to view the full 2025/2026 financial statements.



REVENUE 2026

Ministry of Health Base Allocation	$27,436,961
Bundled Care (Quality Based Funding)	$2,492,078
One-Time Payments	$1,286,132
Ontario Health Team Funding	$1,079,515
Paymaster for VSP Funding	$261,589
Hospital On-Call Coverage Funding	$717,776
Alternate Funding Agreement Program Funding	$2,552,954
Cancer Care Ontario Funding	$179,779
Other Revenue (Schedule 1)	$6,562,060
Amortization of Equipment Grants/Donations	$347,092
Total Revenue	**$42,915,936**



EXPENSES 2026

Salaries and Wages (Schedule 3)	$19,890,500
Employee Benefits (Schedule 4)	$4,487,196
Employee Benefits Future Costs	$45,100
Medical Staff Renumeration (Schedule 5)	$4,605,592
Supplies and Other Expenses (Schedule 6)	$7,501,628
Medical and Surgical Supplies	$1,544,387
Drugs	$2,711,240
Amortization of Equipment	$689,480
Bad Debts	$149,217
Transfer to Kenora Rainy River Regional Lab Program	$248,711
Total Expenses	**$41,873,051**
Excess (Deficiency) of Revenue over Expenses from Health Centre Operations	1,042,885
Other Items	
Amortization of Building Grants/Donations	$568,801
Amortization of Land Improvements and Building	(729,257)
Interest on Long-Term Liabilities	20,497)
	180,953)
Other Votes and Programs - Revenues	6,334,310
Other Votes and Programs - Expenses	(5,763,615)
Other Votes and Programs - Provisions for Recovery	(557,948)
	(7,253)
Excess (Deficit) of Revenue Over Expenses for the Year	**$854,679**

Priority 2.1
Optimizing Funding

2.1.1 Ensure we are optimizing how we access funding to support our work.

2.1.2 Identify and implement innovative ways to generate/ increase our revenues.

2.1.3 Execute on strategies that will create clinical and/ or operational efficiencies so that we can do more with the resources that we have.

Here's What We Did:

- DRHC is responsible for planning infrastructure renewal activities, to ensure that the facilities remain in good repair. In 2025/2026, dedicated Health Infrastructure Renewal Funds (HIRF) of $710,448 were used to help address renewal needs, including:

    - ✓ Roof upgrades
    - ✓ Motor control centre replacements
    - ✓ Electrical upgrades
    - ✓ Furnace replacement
    - ✓ Backflow protection
    - ✓ Interior/Exterior lighting upgrades
    - ✓ Chiller replacement

- With support from the Dryden Regional Health Services Foundation and the monthly DRHC50/50 Draw, we have been able to make several investments this year to sustain and enhance our ability to deliver high-quality patient care, including:

    - ✓ Implant instrument and lighting upgrades for the operating room;
    - ✓ New treatment bed and recumbent bike for rehab;
    - ✓ An upgraded sleep chair for palliative care; Three new inpatient beds;
    - ✓ A new fluid warmer for the Emergency Department.

    Additionally, the Foundation has also committed to support several future purchases, including:

    - ✓ New OR stretchers;
    - ✓ New electrocardiogram (EKG) and PCA pump to support nursing departments;
    - ✓ New operating table and video monitors for the operating room;
    - ✓ Replacement pediatric immobilizer and positioner, cushions and footrest extensions to ensure safer, more comfortable CT and other diagnostic scans.

- DRHC was able to access several additional and one-time funding to support and grow specific programs and services to meet needs of the community, including:

  - ✓ Emergency Department stabilization funding, used to support Nurse Practitioners in the emergency department.
  - ✓ Sexual Assault and Domestic Violence Treatment Centre program, to support health, psycho-social, and forensic needs of survivors, as well as education for healthcare providers and community agencies.
  - ✓ Alternate Level of Care (ALC) and Patient Flow funding, to provide support, resources and supplies for patients to help them to safely transition back home after discharge.
  - ✓ Surgical Pathway Health Professional Training to help Operating Room staff to develop and expand their skill-sets and Incremental Surgical Recovery funds to increase capacity and reduce wait-times for surgery in Ontario.
  - ✓ Extended funding for the **Palliative Clinical Coach** position, providing specialized support for complex palliative case management, and supports for other healthcare providers.



Priority 2.2
Adaptive Core Services

2.2.1 Act on opportunities to improve service delivery approaches to ensure we are maximizing our use of resources and providing care aligned with best practices.

2.2.2 Plan for and continue to invest in making capital upgrades that will enhance our ability to deliver quality services.

2.2.3 Ensure effective emergency planning.

Here's What We Did:

- Work and planning is continuing for the upcoming **Hemodialysis Unit** first announced in 2023. Preliminary drawings have been completed, and we are working with engineering and architecture firms to continue work through the Ministry of Health's capital projects process.

- DRHC continues to work through the capital planning stages and is nearing the detailed planning stage for the **Pharmacy re-development project.** The completion of this project will ensure DRHC's pharmacy remains compliant with the latest requirements and best practices, and will improve efficiency to support patients in Dryden and other hospital pharmacies that DRHC supports.

- This project will allow the DRHC Pharmacy department to meet the code compliance changes, as well as the added benefit of additional throughput and processing contingencies which are particularly important to the additional pharmacies in the region that the Dryden Regional Health Centre's pharmacy supports.

- The **Community-Based Mental Health Stabilization Unit (CBMHSU)** provides short-term recovery services for individuals aged 16 or older experiencing mild to moderate health symptoms. The Stabilization Unit offers both day programming and inpatient (overnight) interventions to meet the needs of clients. Treatments and supports offered through the CBMHSU include individual and group therapies, activation and life skills coaching, and case management.

    - Last year, the CBMHSU provided services to 123 overnight residents (for a total of 463 inpatient days) and 85 day program attendees (for a total of 154 attendance days).

Priority 2.3
Commit to the Process of Truth & Reconciliation

2.3.1 Invest to ensure our actions at DRHC promote culturally safe experiences and advance health equity for Indigenous Peoples.

Here's What We Did:

- Additional mandatory education on anti-racism and Indigenous perspectives and experiences has been rolled out as part of mandatory annual education for all staff. We are continuing to seek out new resources and education for our employees to foster an environment of ongoing education and understanding.

- This year, we continued to support community partners and participated in various events throughout the year which recognize and celebrate Indigenous cultures, perspectives and experiences, including community powwows, and the National Day for Truth & Reconciliation.

Priority 2.4
Demonstrate our commitment to Equity, Diversity & Inclusion

2.4.1 Develop mechanisms for engaging the voices of groups we may not have heard from in the past.

Here's What We Did:

- Lead by the Equity, Diversity, and Inclusion (EDI) Committee, DRHC is working towards the completion of the Registered Nurses' Association of Ontario (RNAO) Best Practice Guidelines for *Promoting 2SLGBTQ+ Health Equity*. As part of the gap analysis and action plan, we have invited several community members to participate, offering unique perspectives and their lived experiences to help identify opportunities to make DRHC a safer space.

- The Committee is continuing to develop and roll out initiatives that have been identified in the project including reviewing processes and education for staff to ensure a safer experience for patients throughout their care journey, from the point of registration throughout their care journey.

PILLAR 3: LEAD NEW SOLUTIONS

Priority 3.1.1

Invest in leadership and be leaders for positive change

3.1.1 Create short- to medium-term development plans for key leaders with the goal of increasing DRHC's capacity and competency to lead internal and system change.

3.1.2 Support and enable DRHC leaders to actively advocate for and support the development and improvement of community-based services that will improve the health of our communities.

3.1.3 Build on our capacity and capabilities of leader roles at DRHC to ensure external accountabilities are assigned, understood, and accounted for.

Here's What We Did:

- The Leadership Team participates in Leadership Development Institute (LDI) days several times each year, to focus on developing leadership skills, strategies to better support and empower staff. At dedicated "Fix-It" days, the Leadership team sets aside time to tackle issues and processes to make day-to-day work more efficient and fulfilling for our staff.

- Each spring, DRHC supports the planning and execution of the Dryden Regional Palliative Care Committee's annual Palliative Care Conference. This annual event brings together experts from a variety of backgrounds to provide a free educational opportunity for community members, and encourage and support them to have difficult – but necessary - conversations. The 2026 Palliative Care Conference welcomed over 80 participants, and included topics such as advanced care planning, and Medical Assistance in Dying (MAiD).

Priority 3.2

Build Partnerships and collaboration for better health outcomes.

3.2.1 Ensure a sustainable future by understanding our mandate, advancing partnerships, and using best practices to guide how we are using our valuable and limited resources.

3.2.2 Provide strong leadership to help our communities and system find solutions to increasingly difficult challenges, advance partnerships, and advocate for system change.

Here's What We Did:

- Along with 12 other hospitals in the Northwest region, DRHC is working towards the implementation of a new electronic medical record (EMR), **Meditech Expanse**, expected to launch across the region in Spring 2027. Many working groups are working simultaneously, bringing together subject matter experts from the different sites to ensure the new software can meet the unique needs of Northwestern Ontario. Once implemented, patients can be reassured that the modern system will enhance collaboration between healthcare providers for better health outcomes.





STRATEGIC PLAN SCORECARD

PILLER 1 - A GREAT PLACE TO WORK

Metric	2023/2024 Results	2024/2025 Results	2025/2026 Results	TARGET
VACANCY RATE: % of positions unfilled compared to the total number of positions available *(lower % is better)*	6.80%	7.80%	6.90%	10.00% *(lower % is better)*
EDUCATION HOURS: total number of paid education hours for staff. *(higher hours is better)*	2778 hrs.	1593 hrs.	1958 hrs.	1620 hrs. *(higher hours is better)*
UNUSED VACATION TIME: Unused Vacation Time: % of full-time staff who took at least 90% of their allotted vacation time *(higher % is better)*	73.80%	84.00%	75.10%	80.00% *(higher % is better)*
EMPLOYEE ENGAGEMENT SCORE: average score taken from the annual employee engagement survey. *(higher % is better)*	79.50%	74.30%	86.00%	77.30% *(higher % is better)*





PILLAR 2 - ENSURE STRONG FOUNDATIONS

Metric	2023/2024 Results	2024/2025 Results	2025/2026 Results	TARGET
GROSS MARGIN: A measure of efficiency calculated by dividing the gross profit/ loss as a percentage of total revenue *(higher % is better)*	-020%	-0.20%	2.13%	0.00% *(higher % is better)*
STAFF EXPERIENCE: % Staff responding "AGREE" or "STRONGLY AGREE" to the question "At DRHC, employees appreciate others whose backgrounds, beliefs, and experiences are different from their own. *(higher % is better)*	77.10%	74.30%	72.00%	85.00% *(higher % is better)*
PATIENT EXPERIENCE: % of responding Emergency patients who answered ALWAYS to the following question: "During this emergency department visit, how often did nurses treat you with courtesy and respect?" *(higher % is better)*	90.00%	94.00%	92.00%	85.00% *(higher % is better)*



PILLAR 3 - LEAD NEW SOLUTIONS

Metric	2023/2024 Results	2024/2025 Results	2025/2026 Results	TARGET
HOSPITALIZATION FOR CONDITIONS BETTER TREATED IN AMBULATORY CARE: the rate (per 1000 admitted patients) of those admitted for acute or chronic health conditions that could be managed through outpatient or primary care *(lower % is better)*	4.00%	4.30%	3.40%	4.50% *(lower % is better)*
CYBER SECURITY ASSESSMENT SCORE: Security Maturity Assessment score provides a comprehensive picture of the organization's security posture and enables the organization to identify gaps for improvement.	480	480	588	COLLECTING BASELINE







