



MARATHON

FAMILY HEALTH TEAM

Locum Information

Welcome to Marathon! The following information package will provide you with information for things to do before, during and after your locum with us. We hope that you find it helpful and informative.

Should you require further assistance regarding your locum, please contact Brett Redden- Physician Recruitment and Retention Coordinator at:

Phone: (807) 228-0406 (cell)

Email: bredden@mfht.org

Thank you for locuming alongside our award winning team! We hope you enjoy your stay!

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BEFORE YOU ARRIVE

LOCUM CHECKLIST

In preparation for your locum, please complete the following steps:

- Complete application for privileges with the Wilson Memorial General Hospital
- Finalize travel plans and arrival/departure dates/times. Note: Most locums fly into Thunder Bay and rent a vehicle from onsite rental Car Company. For more information please visit <http://www.tbairport.on.ca/page/rental-cars>. Air travel is approx 2 hours from Toronto to Thunder Bay. Car travel from Thunder Bay to Marathon is 3hrs 20 minutes.
- Confirm whether you plan on using the locum house or other accommodations (i.e. plan to stay at a friend or relative's house).
- Identify any special needs at your accommodations prior to your arrival (ex. Groceries). Please note that most stores are open from 9:00am-6:00pm and are open Sundays 12pm – 6pm.

Please notify Brett Redden, if you would be interested in the following activities

- ATV
- Badminton
- Basketball
- Boating
- Bowling
- Canoeing
- Cross Country Skiing
- Fishing
- Fitness or Weight Room
- Golf
- Hiking
- Hockey
- Kayaking
- Pickleball
- Snowmobiling
- Snowshoeing
- Volleyball
- Yoga

Interested in experiencing “the life of an underground miner”? If time allows for it, we can also arrange the tour of our underground mine- Hemlo Operation- Barrick Gold Corporation. The tour is available weekday mornings from 6:00am-12:00pm. The approximate travel time from Marathon to the mine is 30 minutes.

Please make specific arrangements with your clinic contact person with regards to where to go when you first arrive for your locum.

Melanie Bouchard (Locum Coordinator)- mbouchard@mfht.org or Brett Redden
(Physician Recruiter and Retention Coordinator)- bredde@mfht.org

Locum packages are available for pick up at locum house. On the date of your arrival, Brett Redden will meet you at the hospital, to obtain your locum package. Brett will be happy to escort you to your accommodation and review your locum package. Once settled into your accommodation, one of our associate physicians will be pleased to provide a tour of the hospital departments and orientation of the Emergency Department. On your first scheduled clinic shift an associate physician will also provide you with a tour and clinic orientation, arranged by your clinic contact person. A tour of the community, if desired, by a local representative can also be arranged upon request.

Upon request, a cell phone may be provided to you for use when on ER call. Otherwise, please use personal cell phone. Keys to the clinic, hospital, locum house, and a gym fob key are provided.

For more information, please contact: Melanie Bouchard, Locum Coordinator-Marathon Family Health Team- Phone: (807) 229-2343 Email: mbouchard@mfht.org

PLEASE REVIEW AND ENSURE THAT YOU HAVE COMPLETED ALL OF THE FOLLOWING:

- ☐ Application for privileges at Wilson Memorial General Hospital
- ☐ Method of payment to pay for accommodations – to be paid at the Clinic front desk (Debit/MC/VISA)
- ☐ Group Contracted Physician Contract
- ☐ Locum Physician Expense Form
- ☐ Locum Physician Evaluation Form

~ PLEASE LET US KNOW IF YOU REQUIRE ANY ASSISTANCE ~

TRAVEL



It is recommended that you book flights and rental car via Thunder Bay International Airport. After departing airport, exit left onto TransCanada Highway and travel East on Highway 17. Total driving distance/time- 305km/3hr.20 minutes.

Bring your camera...there are designated photo/scenic lookouts along the way.

Travel expenses within Ontario are fully reimbursed; please visit the Health Force Ontario(HFO) Rural Family Medicine Locum Program. Please note that HFO will cover 100% of the cost of flights from Montreal (East) and Winnipeg(West)- further east or west of these two entry points, your airline ticket will be pro-rated. The website as listed below for full details:

[http://www.healthforceontario.ca/Jobs/OntarioPhysicianLocumPrograms/RuralFamilyMedicineLocum Program.aspx](http://www.healthforceontario.ca/Jobs/OntarioPhysicianLocumPrograms/RuralFamilyMedicineLocumProgram.aspx)

ON ARRIVAL

Brett Redden-Physician Recruiter and Retention Coordinator, or a designated contact person will meet you at the hospital, so you may pick up your Locum package at locum house. Brett will escort you to your locum accommodation and review your locum package with you.

Brett will be your main contact during your locum- this way you may have peace of mind for general questions regarding the clinic/hospital/ community. Brett can be reached at 807-228-0406(on call). An orientation and tour of both Hospital and Clinic have been arranged. Please ask Brett or Mel for any assistance.

ACCOMMODATIONS

Welcome to our Locum Houses!



6 Laverendrye Crescent



6 Van Horne Crescent

- Spacious, modernized, fully equipped, two to three bedroom, split level accommodation-on-site washer/dryer, fridge/freezer, stove, microwave, toaster, kettle and coffeemaker.
- The fridge has some basic condiments which you are free to use. The cupboards may have some non-perishable food or items, so please feel free to use them if needed.
- Marathon has a fully-stocked grocery store, INDEPENDENT GROCER, located on the corner of Peninsula Road and Hemlo Drive, as well as a middle eastern Supermarket, MARATHON SUPERMARKET, located at 6 Steven's Avenue, if you wish to purchase any groceries.
- Garbage/Recycling- Garbage/Recycling bags are stored underneath the kitchen sink. MFHT house cleaner will dispose of these items upon your departure.
- Charges for the locum house are based on HFO reimbursement amounts. One night's accommodation at the Locum House is \$120(HST included). Normally we ask locums to pay for their housing at the front desk at clinic on the final day of the locum. You will be given a receipt to submit to Health Force Ontario.

UPON DEPARTURE

- Please turn down the house temperature to 15C in the cold months when away for the day, as well as when you leave at the end of your locum.
- You are not expected to wash sheets and towels. We are pleased to have a cleaner who will be doing a full clean and laundry service (**please note: cleaning and laundry service is not provided during your locum**).
- Our only other request is that you leave the house the way you found it.

WE WANT TO BE SURE YOUR STAY HERE IS AS COMFORTABLE AS POSSIBLE. LET US KNOW IF YOU REQUIRE ANYTHING DURING YOUR STAY, OR MAY HAVE RECOMMENDATIONS FOR OUR LOCUM ACCOMMODATION. THANK YOU!

ROLES AND RESPONSIBILITIES

MARATHON FAMILY HEALTH TEAM ORIENTATION



The Marathon Family Health Team group practice evolved in August 1996 and became a Family Health Team in December 2005. Please see our website at www.mfht.org for more information about MFHT.

If you could arrive approximately 15 minutes before your first scheduled clinic, the locum coordinator will show you around and orient you to the clinic. You will also be shown which desk you will be sitting at.

The family physicians currently in the practice (and their home phone numbers) are:

Megen Brunskill	807-229-8287
Nancy Fitch	807-229-8275
Sarah Newbery	807-229-1777
Eliseo Orrantia	807-229-1777
Ryan Patchett-Marble	807-228-3964
Sayali Tadwalkar	807-228-3469
Lily DeMiglio	905-525-8541

We all prefer first names be used. Hopefully you will have a chance to meet each of us and discuss our particular interests and roles.

Clinic related issues should be discussed with the Family Health Team Executive Director, Joanne Berube. Working with the physicians are several contracted employees and staff listed in the MFHT Staff area of the MFHT website.

CLINIC PHONE NUMBERS – AREA CODE ALWAYS 807:

Main Clinic Line for patients Booking Appointments:

Clinic: 807-229-3243

Fax: 807-229-2672

Clinic Line for Hospital use: 807-229-1246

OUR PHONE SYSTEM WILL AUTOMATICALLY BLOCK THE CALL SO THAT PHONE NUMBERS ARE NOT DISCLOSED TO THE GENERAL PUBLIC.

HOSPITAL PHONE NUMBERS:

Main Phone Line: 807-229-1740

Administration Office Fax: 807-229-1721

Medical Records Fax: 807-229-3242

Your hospital orientation package contains a list of extensions within the hospital.

ON CALL / CLINIC SCHEDULE

Prior to beginning your locum, you should have received a schedule for your approval. You will also receive a copy when you arrive in Marathon. This highlights when you are in clinic or when you are on call.

On Call coverage begins at 8:00 a.m. at Wilson Memorial General Hospital. Details regarding on call coverage and scheduling are found in the 'Orientation for Locum Physicians at Wilson Memorial General Hospital'.

Full Day Clinics are scheduled from 9:00 a.m. until 5:00 p.m. with lunch from 12:00 pm until 2:00 pm.

Morning Only Clinics are scheduled from 9:00 am to 1:00 pm

Afternoon Only Clinics are scheduled from 1:00 pm until 5:00 pm

PLEASE NOTE THAT ON WEDNESDAY'S, THE CLINIC IS CLOSED FOR STAFF TEAM MEETINGS FROM 9:00am to 1:00pm TEAM MEETINGS. ON FRIDAY'S THE CLINIC HOURS ARE 9:00am to 1:00pm, Friday afternoons for locums are virtual (phone) clinics.

We have tried to accommodate your requests about how much you would like to work during your locum in Marathon. If you find that the schedule is either too light or too heavy, please contact **Nancy Fitch-nfitch@mfht.org** or Brett Redden- bredden@mfht.org. We will try to accommodate your request for change.

APPOINTMENTS

If you would like a patient to book a follow up appointment-

Please indicate the number of follow-up units, 1 unit = 10mins, 2 units = 20mins, etc., with whom the follow-up should be booked (using the MDs initials or indicating RN/RPN), and when you would like the appointment booked (e.g. 1 month, 2 weeks, next available etc.) You can also use Oscar msg to request a follow up appointment.

EMR

We began using OSCAR software in December of 2011. Please see the separate EMR orientation section on this website. All recent information will be on the EMR. Older consults and reports are still found on the paper charts that are filed off site.

COLOURED CHARTS

We use a coloured folder system for our day-to-day office procedures. You will be shown where the all charts go that are completed or have tasks attached that need to be completed.

Blue Folders – Used to flag charts that are attached to messages sent electronically to the Dr.'s In-Box.

Red Folder – Emergency Folders These folders are of highest importance and require immediate attention. If you receive one of these folders on your desk you should attend to it immediately and then direct the staff accordingly. In some instances you may have to call the patient or the hospital or write an urgent prescription request. For urgent opiate renewals, please redirect them to the patient's MRP if they are around. Patients have been advised that 3 days' notice is required for prescription refills.

Green Folders – This is your daily mail folder. You will find lab work, consult notes, general mail, and magazines in this folder. You must sign off all the lab work which will be filed in the patient's paper chart and consult notes which will be scanned into the EMR. Once the filing is signed, the entire folder may be placed in the filing pile and it will come to the front and be filed or scanned.

BOOKING PROCEDURES AT THE HOSPITAL

Procedures are done on our individual call days. Booked into on call schedule in OSCAR.

If the procedure needs to be done sooner, you can book it on someone else's call day with their approval.

REFERRALS

These may be typed directly into the EMR. The current specialist list is located in the consultations section of the EMR. If you are unsure about who to refer to, please ask one of the physicians and we will provide a suggestion for you.

COVERING PAPERWORK

You will likely be covering for one of the physicians while you are here. There should be a Departing MD Sheet for any physicians not in the clinic. The staff orienting you should let you know which physician(s) you are covering for and we would ask that you check their paperwork daily at their desk.

You will be given a 'patient issues / findings' sheet. Please use this sheet to mark down any patients that will need follow-up or attention by their family physician after your locum is complete. This sheet will be attached to the Locum Evaluation Form, which you will complete at the end of your locum assignment. There is also a flow sheet on which you can keep track of abnormal results or interesting consultation notes and the actions taken as an FYI for physicians who are away. Alternatively, these can be sent to the physician's pending inbox.

BILLING

We primarily do shadow billing as we are on an alternate payment plan. Any out of province billing is fee for service (FFS), as are WSIB billings and private billings. You will be paid these amounts on top your daily locum rate.

Clinic day sheets: please indicate the fee code and diagnostic code on these sheets. Please also indicate if it is a WSIB case.

ER patients: please collect stickers with the patient names on one piece of paper. These are submitted to the billing office.

Hospital admissions: There is a separate white billing sheet that is in every admission package. You may complete this and simply indicate on the sticker sheet that the patient was admitted. In patient weekend rounds are also tracked on this same piece of paper.

If you have any patients from Quebec, please get them to complete the OUT OF PROVINCE CLAIMS FORM; it must be completed fully by the patient. We would like you to do this regardless of whether they have their Health Card on them or not, more often than not the wrong information is collected from their cards. You are also required to sign this form.

For initial WSIB visit, please complete a Form 8 and try to get as much information from the patient as possible, especially SIN and employer's name and contract phone numbers.

PAYMENT

You will be mailed a cheque from HFO for your locum days. Sessional and extra billings will be mailed to you directly from MFHT at the end of the calendar month. You may continue to receive cheques for extra billings that are received in the months after you leave.

You will receive an invoice from the practice for the locum house accommodations. We do this to pay for the upkeep of the houses as we are directly responsible for this. This invoice can be submitted to the HFO directly for reimbursement. You have these options to pay this invoice directly to the practice using:

1. VISA / Mastercard
2. Personal cheque made payable to The Marathon Family Practice
3. Have the amount deducted from your sessional payment

Please complete your shadow billing sheet and Locum Physician Checklist sheet to be sure that you have completed all steps.

Please submit all billing and diagnostic codes to Dario Verin & Samantha Perry (Accounts and Billing Clerk for Marathon FHT).

FOR ANY BILLING OR FINANCE INQUIRIES PLEASE SEE DARIO VERIN AT THE MARATHON FAMILY HEALTH TEAM. HE MAY ALSO BE CONTACTED VIA TELEPHONE AT 807-232-8032.

NOSH LOCUM ORIENTATION

MARATHON LOCUM ORIENTATION/LOCUM ROLES

Our hospital offers a nine-bed acute care, plus a twelve-bed chronic care wing with regional referral centre 300 km away. Visiting surgeons do consults and GI endoscopy; visiting ophthalmologist does consults and cataract surgery; and a shared mental health model works with a psychiatrist. Our EMR is "OSCAR" with updated cumulative patient profiles and medication profiles.

- The hospital services Marathon and surrounding area. It and employs approximately 150 people at 26 Peninsula Road, phone: 807-229-1740.
- The facility, equipment and fully qualified staff can handle a variety of emergency, medical, pediatric, coronary and chronic care problems either directly or through transfer from or to other health care facilities. We also have a 24 hour Emergency Department with has approximately 6,000 visits/year.
- The Wilson Memorial General Hospital aims to provide quality health care services to the residents its serves, and to promote health education and improved community health through the integration and coordination of community health programs such as meals-on-wheels, lifeline, telephone assurance, senior day care and respite care.

HOSPITAL SERVICES INCLUDE:

- Family medicine
- Maternity and pediatrics
- Emergency
- Tele-medicine and consultation
- Laboratory
- Radiology
- Ultrasound
- Physiotherapy
- Occupational therapy
- Clinical nutrition
- Diabetes education
- Chemotherapy

Chief Administrative Officer Adam Brown
Chief of Staff of WMGH Chief of Nursing

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PLEASE CONTACT US AT THE FOLLOWING: 26 Peninsula Road-Marathon, ON P0T 2E0-Phone: (807) 229-1740 Email: admin@nosh.ca .For further information, please visit our website: www.nosh.ca

COMMUNITIES SERVED:	Marathon, First Nations communities of Pic River and Pic Mobert and occasionally patients from White River.
BEDS:	8 acute care beds plus an obstetrics LDRP room 1 observation room 12 chronic care beds.
NURSING STAFF:	2 RN's and 1-2 RPN's on each 12 hour shift (7 to 7). Typically the RPN's provide service on the chronic care patient ward. The RN's work in acute care with one RN per shift assigned to the ward, and one to the ER. The RN's do move between the two acute care areas of the hospital to assist one another with their respective workloads.
PHYSIOTHERAPY	8:00am-5:00pm Mondays to Thursdays, 8:00am to Noon on Fridays. Physiotherapy services for inpatients, outpatients and our Continuing Complex Care and Long Term Care patients. The physiotherapy team includes two full time Physiotherapists and one full time Physiotherapist Assistant who collaborate with other medical professionals, regional and local health organizations and local industry to provide the best possible rehabilitation services to clients. The departments are fully equipped with a variety of modalities and a great selection of exercise equipment- including treadmill, stationary bicycle, rowing machine and some resistance training equipment All clients must obtain a physician referral to access physiotherapy services.
<u>Lab:</u>	7:30 am to 5:00 pm Monday to Friday with lab staff available on call outside of those hours. Lab outpatient hours are from 8:30am to 2:00pm.
<u>Diagnostic Imaging:</u>	8 am to 4 pm with staff available for on call outside of those hours. Only one of the technicians has been trained to do ultrasound so that service is not consistently available on-call. assessments if the ultrasound technician is not available. Portable U/S physicians to use in ER. Targeted Ultrasound.
<u>Call ins:</u>	At our facility the lab and diagnostic imaging staff are on call after their regular hours are complete (as above). Each call-in costs the hospital 4 hours of regular time service. Where it is determined that waiting to obtain lab or x-ray services until the regular hours of operation is unlikely to impact care, our tendency as physicians is to wait. For example, one might choose to splint a probable Boxer's fracture for a number of hours rather than seek an immediate x-ray in a case where it is possible to do so.

ON CALL SERVICES

Physician Weekday On Call Shifts:

full shift (24 hours): 8:00am to 08:00am the following day

split shift (12 hour blocks): 8:00-20:00 and 20:00-08:00

On call physicians are:

- All locums are expected to be ready and be onsite at hospital for handover at 8:00am.
- Responsibility includes covering the ED, the inpatient ward, and the long term care ward
- The nurses at Wilson Memorial General Hospital (WMGH) are well trained and work with a fair amount of autonomy. If they ask you to see the patient urgently, you should listen carefully. As many of our nurses and staff have worked at WMGH and lived in Marathon for many years, they often know our patients well and can be a valuable source of “collateral” information.
- We typically see between 15-20 patients in the ED within the 24 hour period. Most of these visits are of relatively low acuity and seen in the first 12 hours of your shift. You are not expected to stay on-site throughout the entire shift. At night, a nurse may contact you to defer seeing low acuity patients until the next day
- Overnight, you may choose to sleep at the locum house or at hospital.
- The physician on call is responsible for admitting the patient. If you admit a patient you are expected to follow this patient throughout your locum.
- on call for the hospital during the entire call shift. The non-on-call MRPs cover their own stable inpatients to 5 pm, including chronic care patients.
- expected to cover requests from clinic docs for assessment for admission, and urgent ER procedures and investigations.
- expected to remain within a 10 minute response time from the facility
- expected to be within easy reach of a telephone
- Any patient presenting to the hospital who is 37 weeks gestational age or greater is usually considered the responsibility of the obstetrics physician on call that week. The RNs will usually call in that physician themselves.

Please use personal cell phone for on-call ER shifts. The nurses have been instructed to call the physician for all urgent or calls. There may also occasionally be after hours calls from THAS (telephone health advisory system) to discuss patients enrolled with the Marathon Family Health Team.

Elective Booked Procedures:

(e.g. Toenail resections, joint injections, cast removals etc.) are typically done in the morning in ER. You may book your own procedures generated from clinic on your call day; if it should not wait, (eg I+D), send to doc on call. If possible avoid doing elective procedures during the hours of 17:15 -19:30 (RN's dinner and shift handover).

Triage:

The people in the community are encouraged to use the emergency department for urgent and emergent care problems. When the RN relays a history it is reasonable for the physician to manage the patient by providing the RN with instructions for the patient regarding care and follow-up e.g. an 8 year old presenting with ear pain and no fever may be instructed to try Tylenol and/or Advil for 24-48 hours and follow up at the clinic if symptoms persist.

It is not necessary that the physician on call see all of the patients presenting to the ER. However, we do try to provide as supportive an environment for our staff as is reasonable, so if the RN asks specifically that the physician see the patient, the physician is strongly encouraged to do so.

At the start of an ER shift, there is a standing folder by the doctor's computer with ER charts deferred by the RN as CTAS 5 from the night before. These require a quick review, and signoff by the ER doc coming on shift.

Handover:

- **PATIENTS DEFERRED OUT OF ONE'S OWN CALL DAY** (eg. Someone presenting at 2am with ankle pain asked to return at 9 am the next day) may be seen by the deferring physician OR handed over to the next call day physician with clear verbal handover. We usually have a handover phone call, if necessary, at the end of each call shift to relay information on acute inpatients and outpatients and anyone in the process of being worked up.
- **PATIENTS ADMITTED BY THE ON CALL PHYSICIAN** are transferred to their usual family doctor the next morning (8 am). Log into the clinic EMR via remote desktop in the doctor's lounge and check the patient's demographics section to find the patient's usual doctor (if it is blank, they have no family doctor.) **IF THEY DO NOT HAVE A DOCTOR OR THEIR DOCTOR IS AWAY, THE ADMITTING DOCTOR CONTINUES TO FOLLOW THESE PATIENTS TO DISCHARGE.**

On Monday morning, the outgoing Sunday on call doc should do the 8 am handover for any patients admitted over the weekend. Locums may also get an 8 am phone call when not on call, to pick up a new inpatient who is the patient of the doc for whom the locum is covering paperwork in clinic.

If the inpatient is not discharged at the end of the locum period, hand over inpatients to:

- another doctor who knows the case, OR
- the doc on call for the day of the locum's departure.

If, during the locum, one locum gets more than 3 inpatients assigned to them at a time, this can be redistributed via corridor conversations to keep the workload manageable.

Backup:

A specific local physician will be assigned as the back up on days that a locum is on call. Please call this person first for any questions you may have. Our local practice is to offer one another assistance when requested. The same is expected of the locum when not on call: that they would come urgently if possible, if called to assist in the ER. If backup assistance is needed when on call use the systems below:

In **CRITICAL SITUATIONS** ask the ward clerk or ER nurse to check the sign out board at the nurse's station to determine who might be available to come and assist.

In **NON-CRITICAL SITUATIONS** review the posted schedule and determine which local doctor is least busy at that time, and therefore most able to help.

There is always one physician on call for obstetrics when the program is open. The "Obs doc" will be available as last resort for any Emergency backup requirements, unless that doctor makes specific arrangements to have his/her responsibilities covered by another physician. Memos will be posted if the obs program is closed for any reason.

Occasionally a physician is required to travel with land or air ambulance to transfer a patient to Thunder Bay. Usually this is the role of the on call physician, and that physician has an obligation to arrange for on call coverage via the backup system prior to going on the transfer.

Ventilator:

We have one vent that can provide excellent bipap/cpap intervention if needed. There is no RT and no nursing pool available for staffing the vent beyond several hours so it is used only:

- as an option for ER to support a patient while awaiting transfer or for a short trial of therapy
- for palliative care patients, to gain time before death while awaiting the arrival of a loved one.

Disaster:

If there are a large or overwhelming number of casualties in the Emergency department, the physician on call may call a “Code Green”, or disaster. If the locum physician is on call, he/she should immediately call one of the local colleagues and then follow the instructions as per “Code Green” policy in the Policy Binder (see below).

Obstetrics:

Locums are not expected to provide obstetrical services. However, we have a policy that the on call physician may function as the “baby doc” at a delivery. Locums are expected to:

- have NRP certification
- Familiarize themselves with the obstetrics room and neonatal resuscitation cart at the start of their time here.
- Assess pre-term pregnant patients presenting to hospital (less than 37 weeks), for these will require transfer if delivery is a possibility.
- Call in the obstetrical physician if it is felt that a pre-term delivery is imminent/possible.

Any patient presenting to the hospital who is 37 weeks gestational age or greater is usually considered the responsibility of the obstetrics physician on call that week. The RNs will usually call in that physician themselves.

Inpatients:

Admitted patients: The MD on call will be responsible for all inpatients after 17:00. The on call physician can expect to receive a handover about any inpatients that they anticipate may develop problems through the night. If this has not happened for a particular patient and the on call physician is called, if they feel it would be helpful, they can consider having the hospital contact the attending physician

On weekends, the on-call physician is expected to round on all active inpatients. There should be a weekend transfer note on the chart to facilitate provision of care. The note should be explicit regarding a care plan including anticipated problems or issues.

On weekdays, the locum is expected to round on their own inpatients prior to the start of the clinic day, with the goal of discharging patients eligible for discharge by 11am.

ER hold: An on-call physician may choose keep a patient in ER for observation for a period of time after initial assessment. As a general rule, this will be considered an ER hold if the duration of stay is less than 6 hours. If more than 6 hours, it then generally becomes an admission and an admitting Hx and PE, plus admitting orders must be completed. Exceptions for extending ER hold would be situations where a patient is waiting for test results but is not being actively managed (e.g. atypical chest pain awaiting the 6-hour troponin result to rule out ACS).

Transfers:

Thunder Bay Regional Health Sciences Centre (TBRHSC) is our regional referral center. To discuss a sick patient with a specialist call TBRHSC at **1-807-684-6001 or -6000 x0** and that service will connect with the specialist requested. For critically ill patients, plus pts who may not be critical but will certainly require transfer, (as well as in the case where you have contacted the specialist for advice, and transfer is recommended but there are no available beds in Thunder Bay), “Critical” can be contacted and they will seek the nearest available bed and specialist appropriate to the case. The number for “Critical” is posted on each of the telephones in ER and at the nurse’s station.

Medical Records:

At the beginning of your stay you will be:

- Provided a key to the Medical Records Department
- Requested to provide an example of your signature and initials in medical records
- Provided with a package of ER medical directives to sign which allows the ER RN to initiate treatment before your arrival to the ER. Eg. Chest pain, anaphylaxis

IT IS EXPECTED THAT PRIOR TO COMPLETION OF THEIR LOCUM ALL PHYSICIANS WILL:

- sign off all of their lab work, x-ray reports and charts
- stop in at health records and ensure that any outstanding charting is completed

There is a 'locum' slot in the medical records department that you can check after hours, if needed. The discharging physician will complete the discharge summary on any patients for whom they have cared. The exception to this would be a patient cared for by their family doctor during the week and then discharged on a Saturday by the on call physician. The attending physician would then complete the discharge. All medical record entries must note the date and time.

Policy Binders:

Hospital policies pertaining to nursing care: located at the nursing station

Policies pertaining to medical care: located in each of the ER rooms and in the physicians' office.

ER Order Sets / Admissions:

There are several order sets/treatment protocols available via entryptpoint. You will have received login information. Please use these for all admissions.

Formulary:

There is a hospital formulary binder that outlines all of the medications that are kept in stock in the hospital. There are a number of non-formulary medications that may also be available, and you can check with the RN if you have questions about a particular medication. Non formulary medications can be ordered from the local pharmacy in town using a prescription *for hospital use*

Mask Fitting:

If you have never been fit in another facility for a mask for the prevention of FRI (Febrile Respiratory Illness), then please speak with the Director of Nursing regarding having a mask fitting scheduled. Your mask should stay in the facility for your use in the Emergency Department or on the ward.

Feedback:

If you have any feedback regarding your work at Wilson Memorial General Hospital, please feel free to contact the Chief of Staff, Dr. Sayali Tadwalkar. If you have feedback regarding the conduct of staff at our facility, it would be appreciated if you could put that feedback in writing to Mr. Jordan Rochon Director of Nursing Services, and CC it to the Chief of Staff to follow up. (See email addresses below.) **Thank you** for being willing to provide service to our facility.

COMMUNITY PROGRAMS AVAILABLE FROM WILSON MEMORIAL GENERAL HOSPITAL

ASSISTED LIVING PROGRAM

The Assisted Living Program (ALP) is designed to assist seniors 65 and over to maintain independence in their home with supports. This Program will provide a flexible menu of personal support and essential home making services including ADL, IADL and recreation services, backed up by 'after-hours' staff availability. We will be utilizing existing staff from hospital. The ALP provides an opportunity to transform care delivery to low, moderate and high services, based on the client's needs as they change.

We are working in collaboration with CCAC (community care access center) and the community, to enhance services provided.

How to access the ALP?

Physicians or Nurse Practitioners can fill out a CCAC referral specified for the Assisted Living Program, or the individual or family can contact CCAC and request an assessment. CCAC will then conduct a RAI-MDS assessment. The senior's needs have to score a 7-16, to be enrolled in the program. The individual's information will then be forwarded to the Community Programs Coordinator to make contact with the senior and set up the services based on their needs, likes and dislikes. There is a 30% cost of services to the client as the program is partially funded through the LHNS. This Program is great for any seniors who wish to live in their homes longer with appropriate supports.

MEALS ON WHEELS

The Meals on Wheels program is designed to enable eligible individuals to benefit from the delivery of hot and well balanced meals to their homes. Its goal is to help community members stay healthy and maintain their independence while living at home. The Meals consists of a soup, salad, entre and desert at a cost of \$5.25 per meal. Meals are delivered by volunteers from Wilson Memorial General Hospital and the individual can choose from 3 or 5 days per week.

How to access Meals on Wheels?

The individual must be physically or emotionally unable to prepare meals due to illness or disability. EX -Seniors living alone, frail elderly, individuals with medical conditions and/or in the process of recovery from an illness, or individuals with a referral from physician or nurse practitioner. The individual may contact the Community Programs Coordinator at 807-229- 1740 ext 278 or a referral form can also be completed by the health care professional.

SENIORS SERVICES VAN

The Seniors' Services Van offers transportation services for eligible seniors to attend medical appointments, health related appointments and wellness programs. Having this service available allows seniors' to get out and remain active to help them remain at home longer and remain self sufficient.

How to Access the Seniors' Services Van?

Eligibility: Seniors age 55+ must apply to be eligible for this service. Special circumstances may be considered with Physician/nurse practitioner referral. Referral can be done by calling the Community Programs Coordinator at 807-229-1740 ext 278 or emailing lobertin@nosh.ca. Individual can call 807-229-1740 Ext. 278 to register and also receive their first 3 trips free.

SENIORS DAY PROGRAM

The Seniors Day Program is designed to provide a social outlet for seniors as well as respite time for their caregivers. The Senior Day Program will accommodate higher need seniors who are isolated in our community with different types of recreation at Wilson Memorial General Hospital. Seniors aged 55+ are encouraged to attend either full or half days, with a nutritious lunch. Program runs Tuesdays and Thursdays from 10 am – 3:30 pm. Coffee tea and snacks are provided to the individuals. There is a small nominal fee to offset costs for meals, prizes, supplies, entertainment costs etc.

How to Access the Seniors Day Program?

Referral can be done by Physician or Nurse Practitioner, or the individual or family member can call the Community Programs Coordinator at 807-229-1740 ext 278 to register.

CHECK OUT our Step Outside Program @<https://mfht.org/stepoutside/>

Walking Loop



NAN'S 7+ FAVORITE LOCAL HIKES

PEBBLE BEACH 10min

Drive down Peninsula Rd to the post office/museum T-intersection. Turn L, drive approx 500m to Howe St (sign on R: Pebble Beach). Turn R, park at end of road past playground, walk down path to far L to gorgeous beach. Stroll either way and return.

CARDEN COVE TO STURDY COVE 1.5h.

Drive up Peninsula Rd to the Jehovah Witness Kingdom Hall (across from SPG gas station.) Turn L, drive approx 2 km along gravel road to end of road. Park on road, find trail on L to water, hike along beach and at the end of the beach find the trail marker into the forest—these white markers will lead you over about 30 min to a fabulous secluded cove. (There is a place after about 10 min in the forest where finding the trail is tricky: you think you should go straight in a rocky clearing, which in fact the white trail markers are to the L.) Out there at the cove, there is an additional hike to a lookout which I actually have yet to do, so can't direct you, but it is reportedly stunning. (WINTER ROAD CLOSED—2km walk in!)

HAWK'S RIDGE 1.25h.

Turn onto Hemlo road and drive all the way to the cul-de-sac end (eg the locum house turnoff/LaVerendrye is almost at the end of Hemlo.) Park, follow a trail sign towards the Lake along a sandy trail for 25 metres, then look for a trail up to the L heading into the forest. Stay on this main trail/follow the sign to Hawk's Ridge(after 15-20 min walk trail goes R toward the lake—don't go L or you will be walking to Pic River.) Hawk's ridge can't be missed for the sudden, stunning view down a crazy steep ridge is unmistakable. Turn and walk home.

THE 'LAGOON' 40 min.

Either park at the same spot as Hawk's ridge, and instead of taking trail into the forest off the sandy path to L, go straight under the culvert and climb up out of the culvert onto the gravel road (called Treatment Road, also a great 7.5 km run to the end and back.) Or, drive to the end of Steven's ave and you encounter a metal gate, which is the start of Treatment Road. Or, leave your car at home if you are staying on La Verendrye and walk under the culvert at the bottom of the street—L is Treatment Road. About 500m from the culvert there is a trail on the R which goes down to the lake. Walk either way along the rocks. STUNNING rocks and lake. In the winter, Superior forms great ice sculptures all by herself.

CUMMINGS BEACH 30 min.

Drive down Peninsula Rd all the way to Superior; turn R and keep heading toward the Lake via old mill property; there are signs to Boat Launch. Park at Boat Launch and follow the continuation of the road to the R which turns into a trail. The trail ends at a creek; the Beach is at the end of the creek, which can be tricky to get to, depending on the Creek's status. The best fun is to forget about the beach, and just go down the short sandy hill when you reach the creek, and negotiate your return all along the Superior rocks. (They can be wet and slippery but you can get all the way back to the boat launch along the rocks.) (WINTER ROAD CLOSED—have to hike to the boat launch from a road blockade, adds 15 min.)

PUKASKWA PARK 25 min drive away

Many options—30 min hike along beaches, to a 6 hr hike along the coastal trail to the suspension bridge. 4 km into the coastal trail is a sweet little beach good for picnics. Don't try to get to the bridge if it may get dark on you! For the beaches and South Headlands trail combo (my favourite, about 45 min) find your way to site 54 at Pukaskwa park and take the trail. There are markers which lead you to connect 4 beaches and finally a big rocky peninsula, which ends at Hattie Cove which will be where you likely parked. (Unless you go in winter, when the park access road is closed, and you have to walk/ski/snowshoe in 2 km to get to the parking lot/site 54.) To get to Pukaskwa, go E on hwy 11/17 and turn after 10 min onto the Pic River/Pukaskwa road. The park is at the end of the road.

NEYS PARK 25 min drive away

Several options. A kilometre long white sand beach; a nice rocky trail at Prisoners cove (can go in and out 15 min each way and be satisfied, or go further); plus an interesting hike called "the Crack" which you have to be shown, it is too hard to describe (you climb up a fault line in the cliff and down a neighbouring gully.) Again, the access road is closed in winter and is 2 km in to the beach.

WELCOME



A SUPERIOR COMMUNITY



Where to Eat...



TIM HORTON'S- 14 Peninsula Road



A & W- 2 Hemlo Drive



2SUBWAY-20 Peninsula Road



PIZZA HUT- 2 Ontario Steet



Wok With Chow - 83 Evergreen Street

BILOXY's- 65 Peninsula Road



THE OAR HOUSE -88 Evergreen Steet



2 MARATHON CLASSIC COFFEE- Hemlo Drive

I SEW STUDIO & BOUTIQUE- 3 Woodson Street

PUBLIC SERVICES

Local Media

Radio

-  CBC Radio One (Thunder Bay)
-  CFNO (Marathon) 93.1 FM
-  1090 AM

Newspapers

-  Marathon Mercury (weekly)
-  Thunder Bay Chronicle Journal (daily)

Online Publications

-  Ontario News North
(OntarioNewsNorth.com)



Marathon Public Library

-  Free internet access to all.



Marathon Airport

The Marathon Municipal Airport (CYSP), which operates as a Registered Airport, is located 2.6 kilometers (1.6 miles) northeast of the Town of Marathon and occupies a land area of approximately 219 hectares (542 acres). The maneuvering area consists of one runway and a joining taxiway system and a public apron.

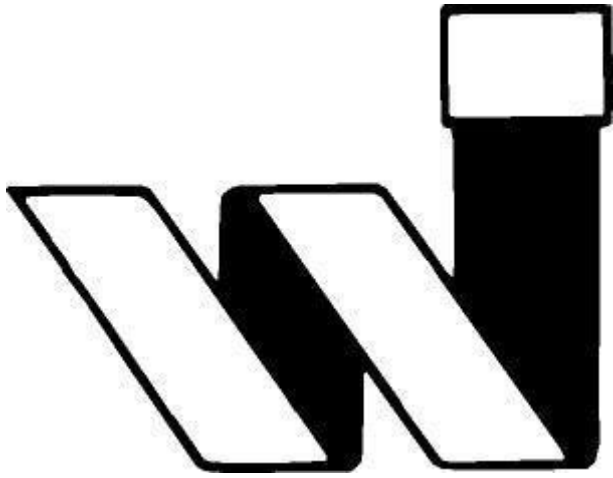


For a complete list of community services & recreation, please visit-

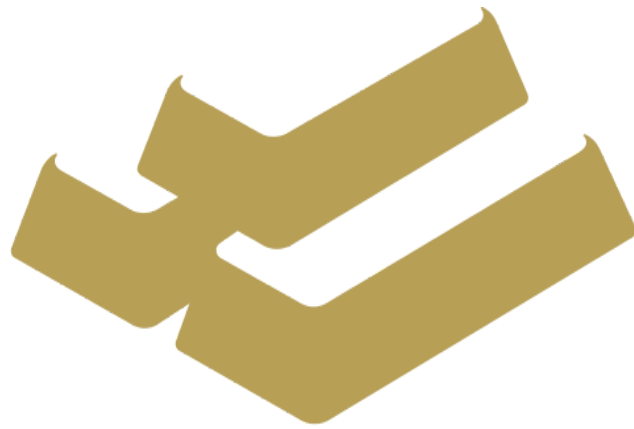
www.marathon.ca

WAY FINDING IN MARATHON





Williams Mine
P.O. Box 500
Marathon, ON
POT 2E0
(807) 238-1100



BARRICK

EVERYONE GOING HOME
SAFE AND HEALTHY EVERYDAY

WE HOPE YOU ENJOYED
YOUR STAY IN MARATHON!



LET US KNOW WHAT YOU THOUGHT
BY USING THE HASHTAGS

#MarathonON

#POT2E0



www.marathon.ca

Ski & Snowshoe Marathon!

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Nordic Trails

Snowshoe Trails

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Legend

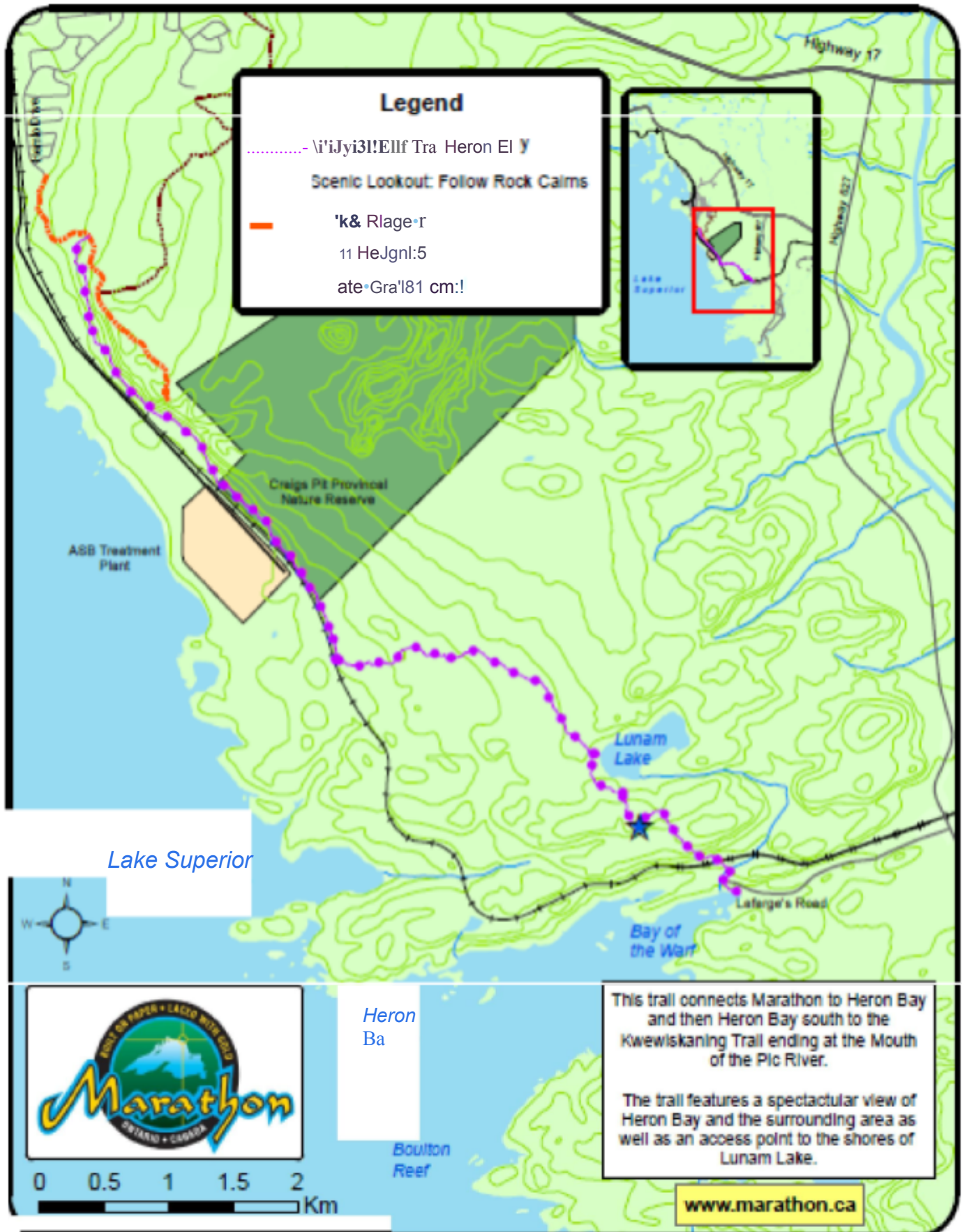
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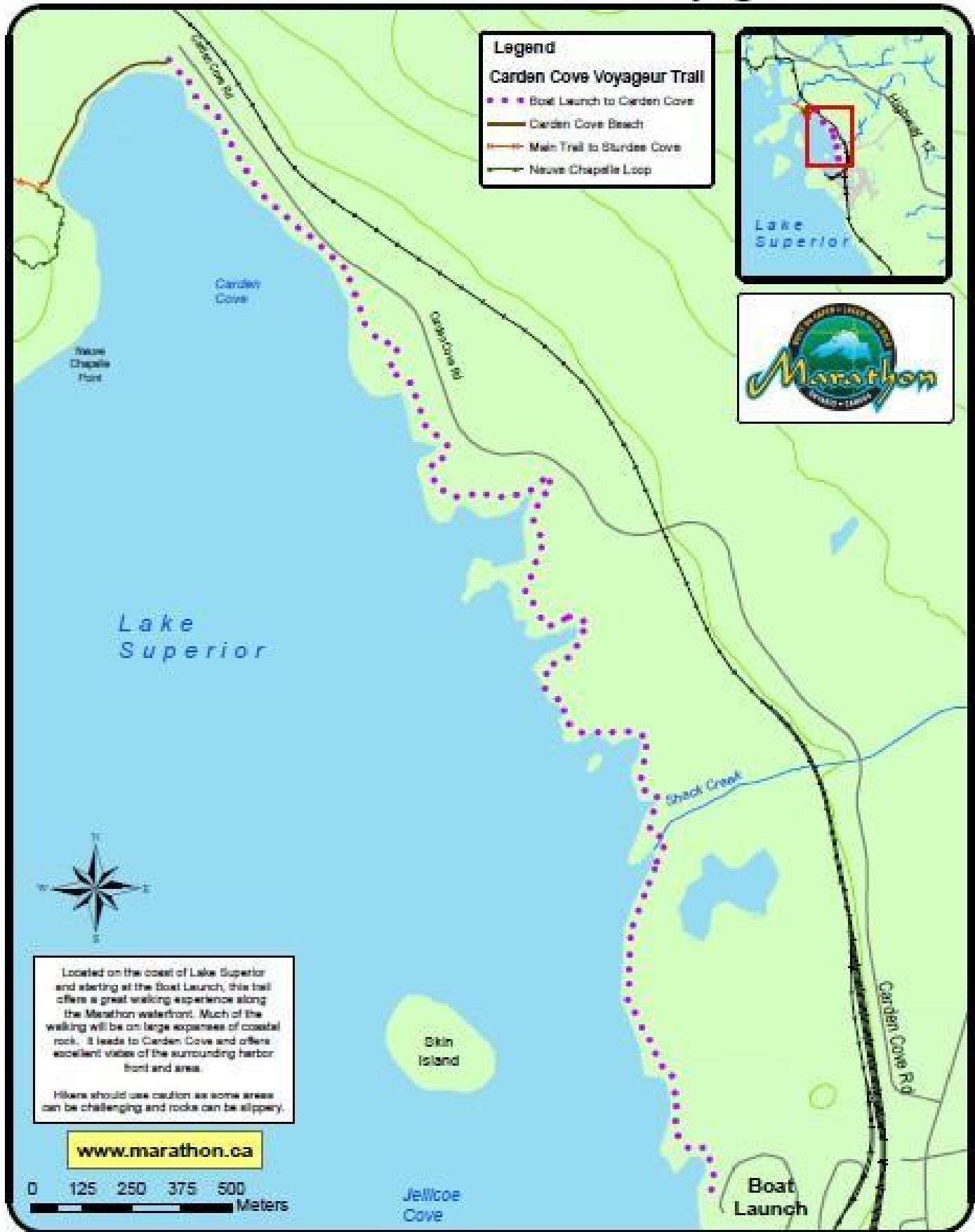
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Voyageur Trail: Marathon To Heron Bay



Boat Launch to Carden Cove Voyageur Trail



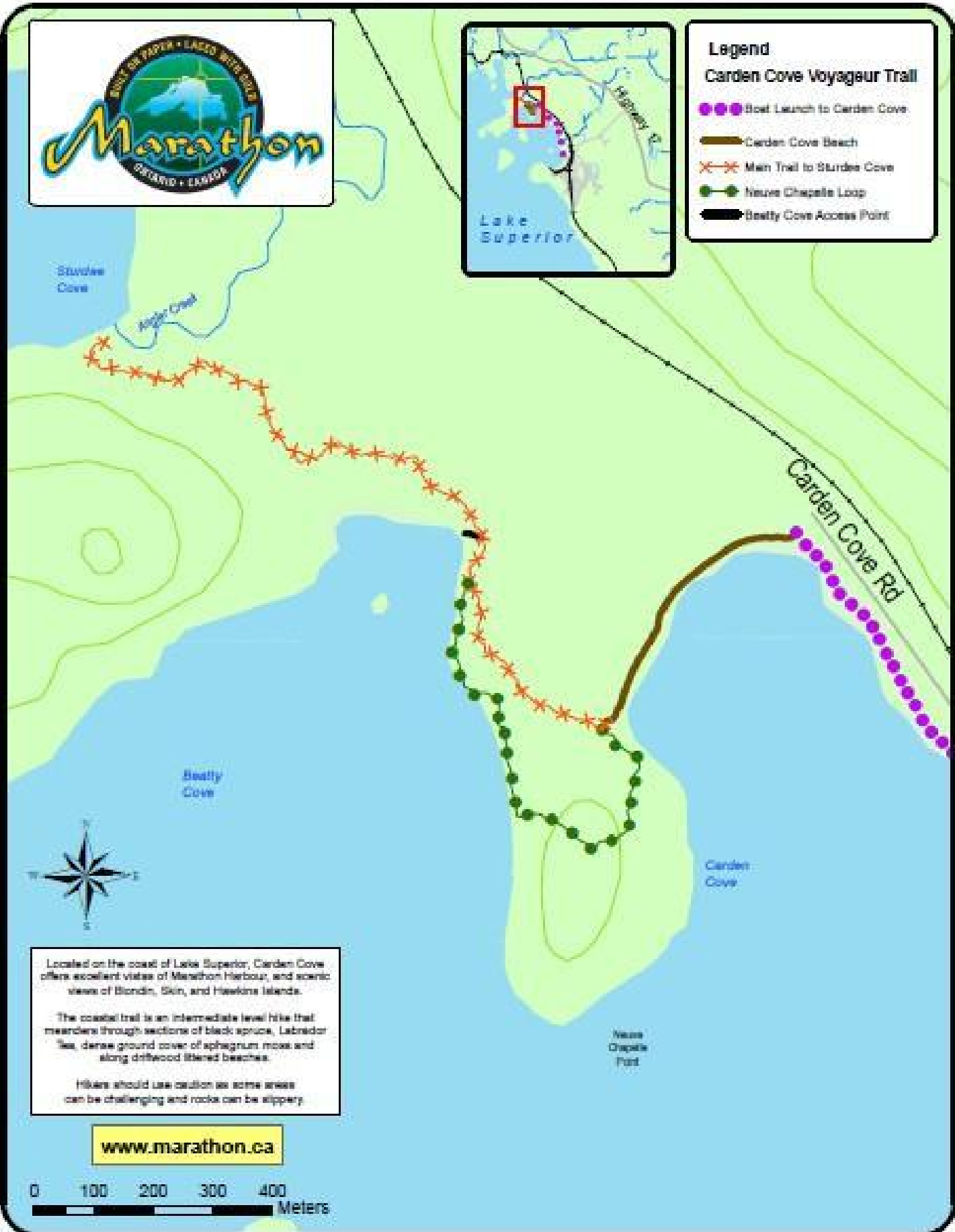
Carden Cove to Sturdee Cove



Legend

Carden Cove Voyager Trail

-  Boat Launch to Carden Cove
-  Carden Cove Beach
-  Main Trail to Sturdee Cove
-  Neve's Chapel's Loop
-  Betty Cove Access Point



Located on the coast of Lake Superior, Carden Cove offers excellent vistas of Marathon Harbour, and scenic views of Blondin, Skin, and Hawkins islands.

The coastal trail is an intermediate level hike that meanders through sections of black spruce, Labrador fir, dense ground cover of sphagnum moss and along driftwood littered beaches.

Hikers should use caution as some areas can be challenging and rocks can be slippery.

www.marathon.ca

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Mink Creek Falls

Mink Falls, located 2-1.5 km from the
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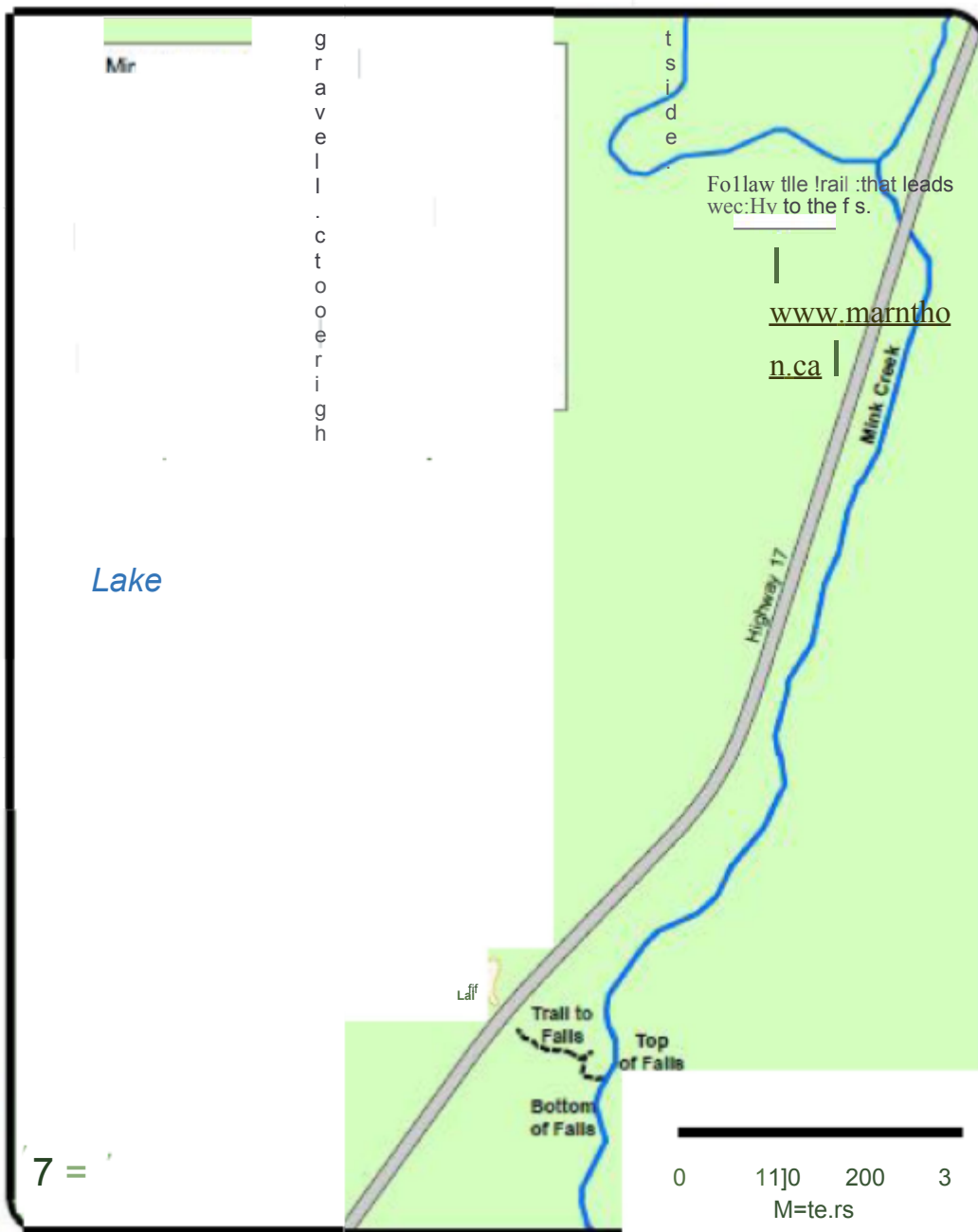
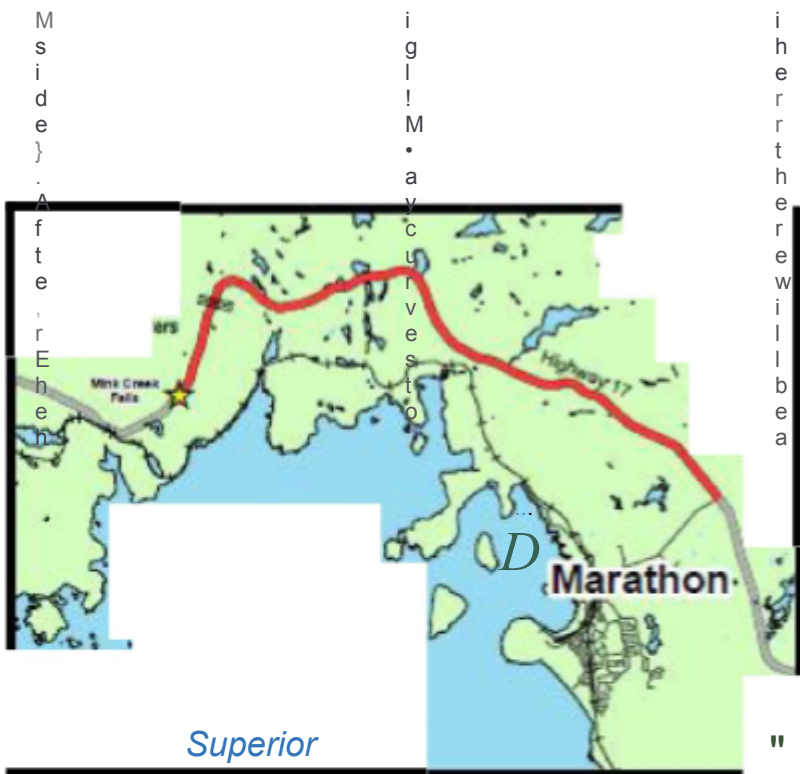
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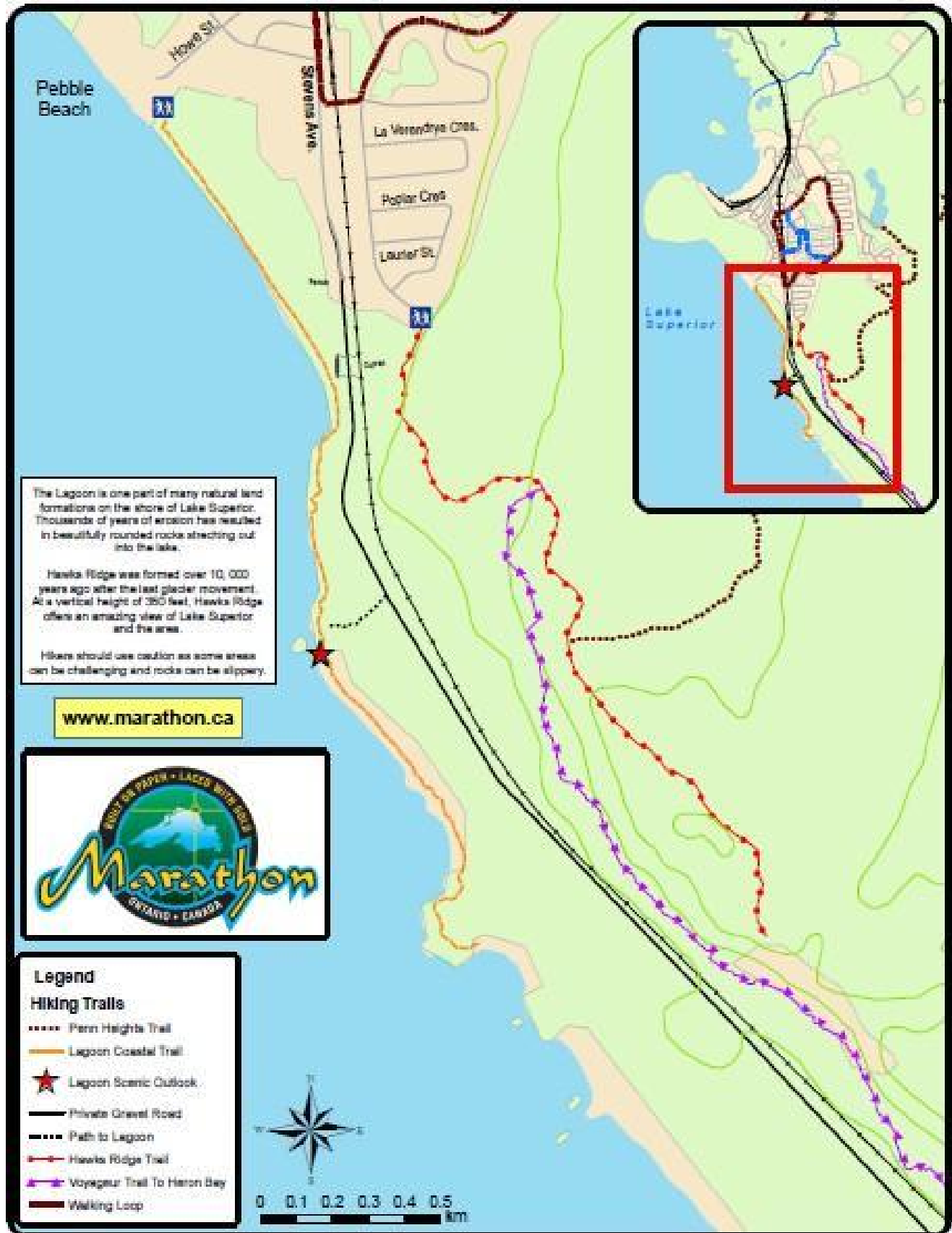
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Pebbles Beach "The Lagoon" Coastal Trail and Hawks Ridge



Penn lake Park Hiking Trail

- Volleyball Court



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Penn Lake
Park

Volley
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