



**Care Closer
to Home**

Patient Medical Equipment Appeal



Spring is a time of hope and promise of growth and new beginnings. I often hear from our staff, physicians, volunteers and community members how fortunate we are to have the Four Counties Health Village within our small, rural community. I am very proud of our dedicated health care team and the care being provided to our community. Our ongoing commitment to you is to provide the health care we would expect for our own families.

Four Counties Health Services (FCCHS) is truly a vibrant health village. Over the past year we continued to be fully occupied within

our acute care inpatient unit and have provided emergency care to over 10,500 patients. Our Rehabilitation Team provides therapy within the inpatient unit and on an ambulatory care basis, amounting to over 8,500 visits this past year.

We appreciate your support for FCCHS in our ongoing commitment of being a vibrant health village for our community.

Kim Jenkins

Kim Jenkins
Site Director FCCHS

Electrocardiogram (ECG)



A machine measuring a patient's heart function

Location: FCCHS
Emergency Department
\$18,500

NuStep Recumbent Cross Trainer



A rehabilitation stepper used to optimize patient health

Location: FCCHS
Physio Department
\$10,000

Nurse Duress System



A device used for nursing safety

Location: FCCHS
Emergency Department
\$8,000

Vital Signs Monitor



A monitor for assessing patient's blood pressure and other vital parameters

Location: FCCHS ED & ACNU
\$7,500

Bariatric Patient Care Stretcher



A stretcher designed to comfortably transport patients between care areas

Location: FCCHS ACNU & ED
\$6,000

YES! Here is my gift to help support FCCHS Patient Medical Equipment Appeal

Donation Amount: \$ _____

Payment Method: CHEQUE VISA MASTERCARD

Card No.: _____ Expiry: _____ CVC: _____

Signature: _____

Email: _____

YES! I would like to join the **Monthly Giving Program**



A Message from the Foundation Chair



The past year has been very exciting and uplifting as we reached out to our community

partners to raise funds for our annual medical equipment appeal of \$147,000 and our endoscopy campaign of \$450,000 totalling **\$597,000**. As chair of the FCCHS Foundation I want to thank all those who have supported our campaign and appeal. With your generosity, we were able to achieve our goals and provide essential patient equipment at FCCHS and care closer to home.

Our fundraising efforts focus on awareness of the services offered at FCCHS and the health village, along with the need to update and

purchase new equipment. As surprising as it may be, capital equipment purchases are not funded by the government. We strive to educate and inform by sharing this message and being more visible within our community.

In 2019, we will continue to present to service clubs, organizations and to the residents in our communities, providing them with hospital updates. Health care is a vital part of a vibrant and growing community and we await the provincial government's announcement in terms of a reorganized healthcare system.

We are in the process of planning for our 25th Annual Golf Tournament in July and our Beefin' It Up fundraiser this fall, which raised \$3,400 last fall. You will find details of these events within our spring and fall newsletters.

Donor and In Memoriam boards have been recently updated in the main and emergency department lobbies. Stop and have a look!

The **Spring Appeal** is for healthcare patient equipment totalling **\$50,000** to be purchased this spring/summer. We ask that you support this appeal to ensure that we can continue to provide optimal patient care at FCCHS and keep care closer to home.

Again, thank you for your support in keeping FCCHS a vibrant and vital part of our community and making it possible to provide the best care.

Tom Jeffery
 FCCHS Foundation Chair

■ YES! I would like to join the Monthly Giving Program

I would like to give \$ _____

METHOD OF PAYMENT: I authorize The Foundation of Four Counties Hospital to withdraw from my bank account through my financial institution on the 10th day of each month.

■ I have enclosed a VOID cheque ■ I prefer to use my credit card ■ VISA ■ MASTERCARD

Card No.: _____ Expiry: _____ CVC: _____

Signature: _____ Date: _____

You will receive a tax receipt at the end of the year. At any time you can change or cancel your monthly contribution by notifying

The Foundation: 519-693-4441 x 2438

At FCCHS Foundation, we appreciate your support and we treat your information with respect. We do not rent, sell or trade any personal information. The information you provide will be used to issue your charitable donation receipt and to keep you informed of events and fundraising opportunities in support of FCCHS. If at any time you wish to be removed from our mailing list, simply contact us: 519-693-4441 ext 2438 or info@fchsfoundation@mha.tvh.ca