

2006-2007 Central Health Annual Report



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Chairperson's Message

As Chairperson of the Board of Trustees, I am very pleased to present Central Health's Annual Report for the fiscal year 2006-07. We, the Board of Trustees, are accountable for the information and results contained herein. We are committed to reporting on the results of the strategic directions set in the organization's strategic plan, on an annual basis.

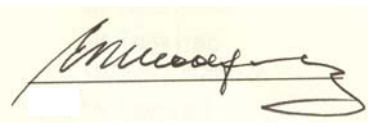
Central Health continues to provide first rate programs and services to infants, children, youth, adults and seniors. Its dedicated leadership provides focus and direction for an ever evolving health authority. This was further validated through the successful accreditation survey visit by the Canadian Council on Health Services Accreditation. Central Health was the first health authority in the province to undergo the accreditation process. Central Health emerged as a strong and unified organization that is well poised to manage the challenges and opportunities of the future.

In 2006-07 the continued expansion and growth of Primary Health Care sites in the region was a key area of focus. A new project site in New-Wes-Valley was implemented and others are moving forward in various stages of development.

The organization's commitment to transparency and accountability was realized with the implementation of a Client Relations Program. This program will add significant meaning and depth to interactions with clients in the region.

Central Health has achieved much in 2006-07 and the organization will continue to grow as it focuses on the challenges and opportunities in the upcoming year.

Sincerely,



Robert Woolfrey
Board Chair

"Central Health continues to provide first rate programs and services to infants, children, youth, adults and seniors."

Organizational Overview

Central Health has defined its vision, values and lines of business. These statements are fundamental to the organization and have been communicated to all staff of Central Health.

VISION

The vision of Central Health is of healthy people and healthy communities.

VALUES

Central Health's core values offer principles and a guiding framework for all employees as they work in their various capacities to provide health and community services to the people of central Newfoundland. These core values are:

- **Accountability**

Each person demonstrates commitment to the success of the organization's mission/mandate.

- **Collaboration**

Each person engages with internal and external partners to meet the mandate of clients and the organization.

- **Excellence**

Each person contributes to the continuous improvement of the quality of programs and services through the development of their knowledge, skills and use of best practices.

- **Fairness**

Each person engages in practices that are equitable and are supported by established and ethical standards.

- **Privacy**

Each person manages and protects confidential information related to persons/families/organizations/communities.

- **Respect**

Each person shows consideration for the circumstances of patients, residents, clients, families and caregivers.

“Central Health’s core values are: accountability, collaboration, excellence, fairness, privacy and respect.”

Organizational Overview

“Central Health is committed to a Primary Health Care model of service delivery and inherent in all lines of business is the need for learning and education in its broadest context.”

LINES OF BUSINESS

Central Health provides health services and programs to the citizens of Central Newfoundland. This includes hospital services, long term care, community and other services within allocated resources. Central Health is committed to a Primary Health Care model of service delivery and inherent in all lines of business is the need for learning and education in its broadest context. Primary Health Care is defined as the first level of contact with people taking action to improve health in a community. It is essential health care made accessible at a cost which the country and community can afford, with methods that are practical, scientifically sound and socially acceptable.

For certain services individuals may self-refer, while other services require a referral from a specific health professional. A multidisciplinary team of health professionals, support staff and partners provide the care and services required to meet the mandate of Central Health. It is important to note that services may fall under one or more headings and as Central Health is an evolving integrated authority, there will be further realigning of services and programs.

Promoting health and well-being

- Health promotion
- Health protection

Preventing illness and injury

- Prevention services

Providing supportive care

- Individual, family and community supportive services
- Long term care and residential services

Treating illness and injury

- Hospital based services
- Community based services

Providing rehabilitation services

NUMBER OF EMPLOYEES, PHYSICAL LOCATION AND KEY STATISTICS

The total workforce for the Central Health is 3,078, including salaried physicians. There are also approximately 80 fee-for-service physicians within the region.

Central Health's service district extends from Charlottetown in the east, Fogo Island in the north, Harbour Breton in the south to the Baie Verte Peninsula in the west. This geographical area encompasses more than half of the total land mass of Newfoundland.

In terms of geography and population, Central Health is the second largest health region in Newfoundland and Labrador, serving a population of approximately 100,000 and offering the full continuum of health care services. There are 845 beds throughout the region – 268 acute care, 517 long term care, 32 residential units and 28 bassinets.

OTHER KEY STATISTICS

	Totals
Patient Days for Acute Care	78,396
Admissions to Acute Care	10,384
Acute Care Beds	268
LTC patient days	182,119
Admissions to LTC	430
LTC Beds	517
Ambulatory Care Procedures	9,733
Operating Room Procedures	8,626
Volunteers	462
ER Visits	88,054
Total Employees	3,078
Total Physicians	129 (including fee-for-service)

“Central Health’s service district extends from Charlottetown in the east, Fogo Island in the north, Harbour Breton in the south to the Baie Verte Peninsula in the west.”

“Central Health’s mandate is derived from the Regional Health Authorities Act and its regulations.”

MANDATE

Central Health’s mandate is derived from the *Regional Health Authorities Act* and its regulations. Central Health is responsible for the delivery and administration of health services and community services in its health region in accordance with the above referenced legislation.

In carrying out its responsibilities, Central Health shall:

- promote and protect the health and well-being of its region and develop and implement measures for the prevention of disease and injury and the advancement of health and well-being;
- assess health services and community services needs in its region on an ongoing basis;
- develop objectives and priorities for the provision of health services and community services which meet the needs of its region and which are consistent with provincial objectives and priorities;
- manage and allocate resources, including funds provided by the government for health services and community services, in accordance with Legislation;
- ensure that services are provided in a manner that coordinates and integrates health and community services;
- collaborate with other persons and organizations, including federal, provincial and municipal government and agencies and other regional health authorities to coordinate health services and community services in the province and to achieve provincial objectives and priorities;
- collect and analyze health and community services information for use in the development and implementation of health and community services policies and programs for its region;
- provide information to the residents of the region respecting:
 - the services provided by the Authority
 - how they may gain access to those services
 - how they may communicate with the Authority respecting the provision of those services by the Authority
- monitor and evaluate the delivery of health services and community services in compliance with prescribed standards of provincial objectives and in accordance with guidelines that the minister may establish for the Authority;
- comply with directions the Minister may give.

Central Health will ensure accountability for its strategic and operational plans by monitoring and reporting in accordance with legislative, regulatory and policy requirements.

Mission

The following Mission Statement charts the course of Central Health to meet its vision for the next six (6) years. The recent integration of health boards across the province provides an opportunity to provide comprehensive health services that span the full continuum of care. Integrating business functions, policies, programs and services will take time but is imperative to the success of the organization.

By 2011, Central Health will provide nationally accredited, integrated health and community services and programs which respond to the identified needs of the people of Central Newfoundland and Labrador, within available resources.

“Central Health’s core values offer principles and a guiding framework for all employees as they work in their various capacities to provide health and community services to the people of Central Newfoundland.”

Shared Commitments/ Highlights & Accomplishments

Central Health enjoys a myriad of partnerships with individuals, communities, groups, private businesses, local and provincial governments as well as organizations throughout the province and country. The contribution and commitment of these stakeholders helps Central Health in carrying out its mandate and in accomplishing objectives for the betterment of health service delivery in the central region. Throughout the year, Central Health, together with partners, achieved great success. The following include some of the significant advances achieved in the past year.

IMPROVED POPULATION HEALTH

Smoking Rates and Protection from Environmental Smoke—Central Health is a key stakeholder in the Central Tobacco Awareness Coalition (CTAC), a coalition dedicated to raising awareness about smoking prevention and cessation initiatives in the central region. The main initiative for 2006-07 was partnering with Family Resource Centres across the central region to provide resources, hands-on tools and training in the area of smoking prevention, protection and cessation. This initiative was made possible with funding from Health Canada.

Other key activities included Youth Speak! which is a contest that asks youth in the region to design a print ad expressing their views on tobacco. The winning ad is used in a regional media campaign. The theme for this year's contest was *Tobacco Truths*. Posters from this year's contest have been developed and will be distributed to coincide with the opening of the 2007-08 school year.

In addition, CTAC continued to support public health nurses in the region with resources, training and materials.

Uptake of cervical screening—The emphasis for 2006-07 has been on increasing education and awareness about cervical cancer prevention. Specific campaigns were initiated to reach under-screened groups, including young women. A strategy was developed and implemented in partnership with the Nova Central School District and high school principals for public health nurses to provide education sessions to female students in level three.

“Throughout the year, Central Health, together with partners, achieved great success.”

Another major initiative included partnering with 106 hair salons throughout the region to distribute educational materials to hundreds of their clients. Organized women’s church groups continued to request education sessions with approximately 40 sessions conducted this year.

Flu Vaccine—While Central Health is proud of accomplishments in the uptake of flu vaccine among seniors and health care workers in the region, this is an area for improvement and significant resources are allocated to increase uptake.

Vaccine distributed by group						
Total Vaccine Distributed	Seniors 65 +	Chronic Medical Condition	Children 6-23 Months	Essential Community Workers	Central Health Staff	Unspecified
22,610	6,257	3,920	654	761	1,526	9,492

“In total, 21,760 doses of flu vaccine were distributed in 2006-07.”

In total, 22,610 doses of flu vaccine were distributed in 2006-07.

Injury Prevention—February 20, 2007 marked the initiation date of the Regional Injury Prevention Program for Central Health which highlights injury prevention as a priority in improving the overall health of the population. Central Health is taking a lead role in ensuring that the population is *learning to be injury free*. An Injury Prevention Working Group will provide direction for the Injury Prevention Program. Priorities are anticipated to include *car seat/helmet safety (children)*, *Preventing Alcohol and Risk Related to Trauma in Youth (PARTY) program (adolescents)*, *driver safety/distractions (adult)* and *falls prevention (seniors)*.

Dental Health of Children— Working from a health promotion framework, oral health education initiatives are a priority for public health nurses in this region. Cultural influences, accessibility to services and socio-economic factors influence parents’ decisions to initiate and maintain regular dental follow-up care with a dentist. In many communities, oral health messages are delivered by the public health nurse in a child health clinic. Schools are also a significant influence on oral care for children.

Shared Commitments/Highlights & Accomplishments

Numerous activities aimed to educate and enhance the oral health of our children took place during 2006-07, including:

- One thousand three hundred and forty three students and homes received dental health promotional material containing a positive oral health message directed to parents/guardians.
- Consultation with local dentists identified nursing bottle mouth¹ as a priority area for resource development for the early childhood population, particularly in the more rural communities of the region.
- The School Health Newsletter highlighted dental health messages in each edition. This resource was distributed to all students in the central region.

STRENGTHENED PUBLIC HEALTH CAPACITY

Resources for public health, including fiscal and human resources—In the 2006-07 fiscal year, Central Health received from government an allocation of five new public health nurse positions and \$320,000 in wellness funding to increase public health capacity and wellness in the region. Consistent with the findings in the provincial *Public Health Capacity Report*, these positions will focus on mass immunization, emergency preparedness and community development strategies. These human resources were allocated to the geographic areas of Green Bay, New-Wes-Valley, Botwood, Gander and Grand Falls-Windsor.

Wellness funds were also used to promote and support wellness initiatives in the areas of physical activity, healthy eating, tobacco control and injury prevention which are the four current priorities of the Provincial Wellness Plan.

All Hazards Emergency Preparedness—In 2006-07, Central Health carried out the following all-hazards emergency preparedness activities:

- Identified gaps in the planning process and redefined the Central Region Pandemic Influenza Plan.
- Investigated matters related to communications for pandemic influenza planning and response with physicians.
- Addressed emergency preparedness requirements for the Workplace Health, Safety & Compensation Commission.

“Wellness funds obtained in 2006-07 were also used to promote and support wellness initiatives...”

Current activities include:

- Development of a Health Emergency Incident Command Structure (ICS) to use with the All Hazards Emergency Preparedness Plan and Emergency Operations Centre (EOC).
- Development of a tool kit for operational departments to use during an all hazards emergency.

Environmental Health Policies—As part of the Provincial/Regional Environmental Health Program Managers Group, Central Health is involved in the revision and development of environmental health policies for the province. In addition, Central Health has a Clean Air Committee to address issues related to air quality within Central Health workplaces.

IMPROVED ACCESS TO PRIORITY SERVICES

Access to appropriate Primary Health Services—The Board of Trustees of Central Health has adopted the Primary Health Care model as the preferred service delivery model. Terms of reference for Community Advisory Committees (CAC) have been adopted by the Board and CACs have been established and are active in some primary health care sites.

Primary health care activities established in the Twillingate/New World Island and Connaigre Peninsula have been sustained and enhanced. The Connaigre Peninsula site has been expanded to comprise the entire Coast of Bays area including St. Alban's and surrounding communities. Central Health is proceeding with a phased-in approach to expand Primary Health Care sites and thus far has introduced the model in the Green Bay and New-Wes-Valley areas. Preliminary work pertaining to profiles of the sites and community needs assessments are underway in Botwood and Fogo Island.

Although Primary Health Care plans are site specific and address the unique challenges in each area, there has been a significant increase throughout all of Central Health in the following areas: health promotion/prevention initiatives, development of self-help strategies, utilization of technology, capacity building of the community and enhancing the development and functions of the Primary Health Care team.

“Primary Health Care plans are site-specific and address the unique challenges in each area.”

Shared Commitments/Highlights & Accomplishments

Home Care Services—In December 2006, the Home and Community Care Division of Central Health obtained funding from the Department of Health and Community Services to enhance home and clinic-based services, including:

- End of life care
- Acute post discharge mental health case management
- Acute post discharge intravenous therapy (IV) and wound management

The expanded services offered within the continuing care program in three pilot sites in Grand Fall-Windsor, Gander and Lewisporte include:

- Short-term non-means tested home support
- Special dressings
- IV therapy monitoring of clients receiving chemotherapy infusion for the treatment of colorectal cancer
- Wound care and injections twice daily and on weekends when required
- Intravenous antibiotics plus various medications for pain and symptom management in end-of-life care

To support delivering these services and expansion of hours of operation, staffing levels were increased. This represents a significant enhancement to the program and has strengthened its capacity to respond to the needs of clients requiring services outside of traditional hours. The ultimate goal is to prevent hospitalization or shorten length of stay in an acute care facility.

Enhanced services will be evaluated and opportunities to expand to other areas in the central region in 2007-088 will be explored.

Access to Quality Early Learning and Child Care—The priority initiatives in this program area in 2006-07 were:

- Child Care Inclusion
- EQulP
- Early Learning and Child Care (ELCC) capacity

The Child Care Inclusion initiative is focused on promoting and developing inclusive child care programs. Implementation began in February 2007 and is voluntary and available to any licensed child care provider in the region. The

“EQulP is a collaborative initiative focused on quality improvement in child care centers.”

addition of a new position has enabled the provision of on-site consultation to child care licensees, operators and staff in their efforts to include children with various challenges. This includes: covering the cost of an additional staff person to assist with meeting the needs of all children and covering the cost of two spaces for one child in order to reduce the staff-child ratio. Other supports include identification and delivery of training, information and referral support.

This year, six child care programs are participating and accessing the various inclusion supports, resulting in more children with special needs being included in licensed child care. This initiative will continue with increased funding in 2007-08. A significant increase in referral for these services is expected next year.

EQUIP is a collaborative initiative focused on quality improvement in child care centers. Two child care centres in Grand Falls-Windsor completed the evaluation and improvement plan phase and are now in the maintenance phase where supports are provided for six months. In 2007-08 these two centers will have fully completed the program and the goal is to recruit three more centers.

The Early Learning and Child Care (ELCC) capacity initiative is focused on increasing access to quality programs in under-serviced areas through the development of non-profit, regulated early learning and child care sites. These sites are intended to offer licensed child care and parenting supports, in line with the needs of families and communities in these areas. An ELCC coordinator position has been awarded for three years to assess the need and facilitate the development of identified under-serviced sites.

Mental Health and Addictions Services

Central Health has been fortunate to add a number of new positions in the area of Mental Health and Addictions Services. A new position of addictions prevention coordinator has been implemented. The role of this position is to initiate an integrated Mental Health Promotion and Early Intervention Strategy at Central Health, in partnership with other stakeholders. An early psychosis case manager has also been added to the staff compliment. The

“Central Health has been fortunate to add a number of new positions in the area of Mental Health and Addictions Services.”

Shared Commitments/Highlights & Accomplishments

goal of this position is to identify individuals who are experiencing early stage psychosis. Six new mental health and addictions counselor positions were also added.

Highlights of program offerings during the last year include the expansion of the Helping Skills program. Further expansion is planned in 2007-08. Links have also been established with the Voices Consumer Group who will collaborate with Central Health to offer a Schizophrenia Awareness Day for friends and families in October 2007.

“In the emergency department the nurse practitioner helps meet the needs of the public in a community where many do not have a family doctor.”

Nurse Practitioners in unique roles

During 2006-2007 Central Health introduced two new nurse practitioner roles in hospital care to enhance access to services. One nurse practitioner works in the Regional Dialysis Program and the other in Emergency Services at James Paton Memorial Regional Health Centre. These innovators enhance each service and help meet the needs of the public in Central Newfoundland.

Waitlist Management

There has been much commentary in the local, provincial and national media regarding waitlists for health services. This includes waiting for appointments with healthcare professionals including family doctors and specialist physicians, as well as waits for various diagnostic tests and procedures.

Central Health is an active participant in the Provincial Waitlist Management Strategy, which is part of a national initiative, whereby specific services are being monitored for wait times. All of these strategies are focused on improving wait times.

Client Relations Program

Central Health established a Client Relations Program and recruited a client relations coordinator in April 2006. Central Health is proud of this region-wide program which strives to facilitate resolution of concerns and minimize recurrences. To date the focus of the program has been to develop a process, pilot test the process, educate colleagues at Central Health about the process and to publicize the program. The key goal of the program is to improve

services based on the reported positive and negative experiences of clients, patients, residents and families.

Recruitment

Recruitment for several key positions at the executive management level was ongoing throughout 2006-07. The Board of Trustees was successful in recruiting a new Chief Executive Officer, Ms. Karen McGrath who joined the organization in March of 2007.

Recruitment of health professionals continues to be a challenge in all areas of Central Health, especially in rural areas. In collaboration with provincial recruiters, Central Health's Human Resources Department works diligently to ensure the availability of a sufficient quantity of all health professionals.

Capital Projects

Infrastructure improvement and redevelopment throughout the region is a continuous effort of Central Health. Some of the largest capital projects completed in 2006-07 include the Gander Cancer Centre, the Grand Falls-Windsor Cancer Centre, ongoing redevelopment of James Paton Memorial Regional Health Centre and Central Health's new Corporate Office in Grand Falls-Windsor.

Volunteers and Partners

The partnerships mentioned throughout this report by no means encompass the vast number of people and organizations that contribute to the daily operations of Central Health. Other partners include the large community of volunteers who give countless hours to the facilities and programs of Central Health; the Pastoral Care community and their contribution to the care of residents, patients and staff; community-based ambulance services that ensure access to care throughout the region and the informal and formal caregivers who provide support to children, youth, adults and seniors in many community-based programs. Many thanks are extended to all partners for the continued support.

Foundations

To share a compliment or concern or to ask a question, please contact the Client Relations Coordinator:

Ms. Cheryl Peckford
Client Relations
Coordinator
P.O. Box 1209
Lewisporte, NL
A0G 3A0
Tel: (709) 535-6010
Toll Free:
1-888-799-2272
Email:
cpeckford@cwhc.nl.ca

Shared Commitments/ Highlights & Accomplishments

“The Central Northeast and the South and Central Health Foundations, together have over 40 years of experience and have guided donors in the investment of over \$11 million dollars for priority medical equipment for the health of communities in the central region”

The Central Northeast Health Foundation and the South and Central Health Foundation are close affiliates of Central Health; each organization has its own board and governance structures. Both Foundations support the many programs and services of Central Health through fundraising. The Foundations are very proud of the tremendous impact that donor generosity has had on the quality of health services that are available at all sites throughout the region. Together, they have over 40 years of experience in the communities of central Newfoundland and have guided donors in the investment of over \$11 million dollars for priority medical equipment for the health of communities in the central region.

Outcomes of Objectives from Strategic Plan 2006-08

Central Health is pleased with the work already completed in the six strategic directions of its strategic plan. The Authority focused on these areas during 2006-07 and will continue to work towards them again in 2007-08. The six directions Central Health identified as priority areas are: Children's Health Strategy, Financial Sustainability, Policy Integration and Development, Long Term Care and Supportive Services, Healthy Aging and Culture of Safety. While the work is in early stages, much has been accomplished during the reporting period. The following is a brief update on the status of each strategic direction.

CHILDREN'S HEALTH STRATEGY

Central Health is committed to improving the health of children in the region through promoting healthy pregnancy, birth and infancy, strengthening child development and improving parenting, family and community supports.

Goal:

By 2008, Central Health will have developed and implemented, in collaboration with major stakeholders, a strategy to address children's health in the region in the areas of obesity and physical inactivity.

Objective for 2006-2007:

By 2007, Central Health will have completed an environmental scan and developed a regional strategy to respond to priority issues relating to children's health.

To accomplish this significant goal, Central Health has allocated resources to ensure this ambitious strategy is successful. Central Health is in the process of recruiting an individual for a six month secondment position to focus on this initiative. It is anticipated that this secondment will commence in May 2007. Once in place, the incumbent will lead the initiative to complete the environmental scan and the regional child health strategy.

Services delivered in the Child, Youth & Family Services program and the Early Learning and Child Care Program play a significant role in the Children's Health Strategy. Enhancements in these program areas has had a significant

"Central Health is pleased with the work already completed in six strategic directions of its strategic plan."

Outcomes of Objectives

impact on Central Health's ability to better provide quality services to the most vulnerable populations. A multi-sector steering committee is under development to enable this work and will be in place by April 2007.

During 2006-2007, Central Health was successful in strengthening its partnership with the Nova Central School District and individual schools in the region. The focus is to increase health and wellness for students through initiatives related to healthy eating and physical activity.

"...Central Health has been successful in strengthening its partnership with the Nova Central School District and individual schools in the region to increase it's focus on health and wellness..."

Objective for 2008:

By 2008, Central Health will have implemented, in collaboration with major stakeholders, two priority areas of the children's health strategy.

The current focus and the focus for the next year will be on completing and implementing the environmental scan and two components of the children's health strategy. There is a phased plan to eliminate pop and fried foods from being served and/or sold in schools, and to evaluate the Quality Daily Physical Activity program. These strategies will include education for teachers, principals and food caterers on the topics of obesity, physical activity and healthy eating.

FINANCIAL SUSTAINABILITY

Central Health is committed to delivering appropriate health services to the population of Central Newfoundland. In order to ensure long-term viability of these services, financial sustainability is essential.

Goal :

By 2008, Central Health will have achieved a balanced integrated operating budget, unless otherwise directed by government, while monitoring impact on programs and services.

Objective for 2006-2007:

By 2007, the Central Health will have the operational plan aligned with the budget process.

Central Health is pleased to report a balanced budget for the 2006-07 fiscal year. Additionally, there is no increase in the accumulated deficit.

In-line with the goal of having a balanced integrated operational budget, all education to align operational planning with the budget process is completed and operational planning will be in place for the 2007-08 budget year. Despite significant challenges, integrating three finance departments and systems from the legacy boards into one integrated department is ongoing. Initiatives include: best practice reviews, integration of computer systems and other work practices, monitoring for operational accountability and finance department reorganization.

Objective for 2008:

By 2008, Central Health will have achieved a balanced integrated operating budget, unless otherwise directed by government, while monitoring impact on programs and services.

To achieve this objective, opportunities for the next fiscal year include continuing integration of three computer systems and work practices; and to review and change business processes to ensure efficiency and accountability. Central Health recognizes that many challenges related to integration of the financial systems and data quality reporting must be overcome to accomplish this objective.

POLICY INTEGRATION AND DEVELOPMENT

Central Health is committed to ensuring the provision of consistent quality services through policy integration and development.

Goal:

By 2008, Central Health will have approved policies that are integrated and based on best available information across service and business areas.

Objective for 2006-2007:

By 2007, Central Health will have an approved policy integration and development framework based on best practices.

The work of integrating the policies and procedures from the three legacy boards of Central Health is an immense challenge. Despite the enormity of the task, the

“Central Health is pleased to report a balanced budget for the 2006-07 fiscal year. Additionally, there is no increase in the accumulated deficit.”

Outcomes of Objectives

framework with which to approach this initiative is completed and the work has commenced. The integration of policies is being lead by a steering committee, under the direction of a coordinator and working groups have been struck to complete policies throughout the organization. A work plan is in place. The training of clerical staff who will input the policies electronically has been completed.

“The work of integrating the policies and procedures from the three legacy boards of Central Health is an immense challenge.”

This integration has presented Central Health with an opportunity to review policies from a best practices perspective, thus ensuring they contain current information and reflect the most effective and efficient way of doing business. Central Health has benefited tremendously from this initiative in an unexpected way through the fostering of relationship building in this new health authority.

Objective for 2008:

By 2008, Central Health will have approved policies.

The work of policy integration and approval will continue into the 2007-08 period. It will be a challenge to ensure that all policies are reviewed and approved by 2008 because of the volume of policies requiring integration. Approved policies will be readily available to all Central Health staff through the Central Health intranet.

LONG TERM CARE AND SUPPORTIVE SERVICES

Central Health is committed to ensuring the appropriate services are delivered to those persons requiring long term care (LTC) within the mandate and available resources of Central Health.

Goal:

By 2008, Central Health will have initiated the implementation of strategies that identify a range of options to address LTC needs of persons in the region while allowing a level of choice.

Objective for 2006-2007:

By 2007, Central Health will have defined the LTC population needs and identified the programs required to address these needs.

Central Health has focused efforts on data gathering and completing a needs assessment during 2006–07. A Best Practices Review of LTC needs in the central region has been completed and the implementation plan is pending. The review encompassed LTC services in its broadest context including home living, supported living and facility living for people across the age spectrum. At this time, a secretariat is in place to enable the work to continue.

An emergency placement process was put in place in March 2007. This enables emergency supports to be put in place in a client’s home under particular circumstances for a defined period of time. Central Health will report on the number of clients who avail of this service in the next annual report.

Central Health has embarked on an innovative pilot project in community treatment interventions for high needs mental health clients. Early evaluation of this project indicates success.

Central Health is pleased to have service agreements in place with local community boards for the delivery of residential services at Pine Heights Group Home and Bill & Paul’s Cooperative.

There are ongoing discussions with local development groups on establishing assisted living models and with partners in the Personal Care Home industry on new models of care. *Level Two Plus* is one such model which has been pilot tested and will be evaluated in October 2007. Planning for a Supervised Care Project has been initiated.

Over the past year Central Health has implemented the Minimum Data Set assessment tool across the region. This allows comparisons of residents’ care requirements between nursing homes locally, provincially and nationally. The goal is to improve planning for the needs of residents and to ensure appropriate care for clients.

“The review encompassed LTC services in its broadest context including home living, supported living and facility living for people across the age spectrum.”

Outcomes of Objectives

Objective for 2008:

By 2008, Central Health will have initiated implementation of the LTC strategies.

The past year has enabled growth in LTC services at Central Health as described above. However, among the ongoing challenges we face are those of the geographic size of this urban and rural region.

HEALTHY AGING

Central Health is committed to supporting wellness in an aging population.

Goal:

By 2008, Central Health will have completed an environmental scan of the needs in Central Newfoundland and reviewed the Provincial Healthy Aging Strategy.

Objectives for 2007:

By 2007, Central Health will have completed an environmental scan of the needs of the aging population in the central region.

To meet this objective funding has been secured to recruit an individual to complete the environmental scan. It is anticipated that this position will be in place by May 2007 and the environmental scan will be completed within six months.

Central Health has committed to a Primary Health Care model which supports wellness and promotes health in all age groups including seniors. Central Health is pleased to host the provincial mental health coordinator for seniors in the central region. This position will contribute to the accomplishment of this strategic goal.

Objectives for 2008:

By 2008, Central Health will have reviewed and analyzed the Provincial Healthy Aging Strategy and identified the strategies to be implemented in central region.

“Central Health is committed to supporting wellness in an aging population.”

CULTURE OF SAFETY

Central Health is committed to integrating safety into all aspects of service delivery to individuals and communities in the central region, within available resources.

Goal:

By 2008, Central Health will have formalized and implemented programs to enable a culture of safety.

Objective 2006-2007:

By 2007, Central Health will have initiated a safety assessment.

Central Health wishes to demonstrate its commitment to deliver the best possible care to patients, clients and residents. Central Health put this commitment to the test by inviting a review of its services by an independent body. During March 2007, the Canadian Council on Health Services Accreditation (CCHSA) conducted a survey of Central Health, focusing on the care clients receive and the safety of that care. It is anticipated that the survey results will be received during the summer of 2007.

Central Health celebrated Patient Safety Week in October 2006 with the *It's OK to Ask* initiative of the Regional Infection Control Committee. This initiative encouraged and supported clients, residents and patients to ask their health care provider if they had washed their hands before providing care to them. The goal of this initiatives was to reduce the spread of infections.

The next steps in this focus on a culture of safety are to continue to implement the various aspects of the Safer Healthcare Now! (SHN!) national patient safety program and to put in place a computerized tracking system to help track and prevent errors. These steps will be accomplished over the coming year.

“Central Health wishes to demonstrate its commitment to deliver the best possible care to patients, clients and residents.”



Outcomes of Objectives

Objective for 2008:

By 2008, Central Health will have implemented three SHN! initiatives.

Central Health is progressing ahead of schedule in the implementation of the SHN! initiatives. Four initiatives are at various stages of implementation. They include the Ventilator Associated Pneumonia, Acute Myocardial Infarction (Heart Attack), Surgical Site Infection and Medication Reconciliation initiatives. These initiatives will improve patient care in the acute care programs in the Central Health region.

“Central Health is progressing ahead of schedule in the implementation of the SHN! initiatives.”

Opportunities and Challenges

The coming year present opportunities and challenges in a number of areas.

Senior's Health

The development of Central Health's Healthy Aging Strategy provides opportunity to identify and coordinate key data related to this population, which will provide direction for action planning. Current data regarding this area is not widely available and this may become a challenge for the project.

Meeting the demand and growth in the area of long term care continues to be a challenge for Central Health due in large part to an aging population. Opportunities exist to explore creative housing options and supportive services to meet the varying needs of seniors in this region.

The geography of Central Health is quite large and a high percentage of the region is rural. This will certainly present challenges when attempting to make a variety of program and residential options available to Seniors who live in these areas.

Primary Health Care

Keeping up with the growth in Primary Health Care in Central Health will continue to be a challenge in 2007-08. With four initiatives already underway, providing the support and resources to ensure continued growth is a priority for Central Health.

Recruitment and Retention

Recruitment and retention of staff is one of Central Health's most pressing challenges. As the population of this region and province continues to age, the number of staff retiring each year continues to grow. Disciplines such as medicine, nursing, social work, pharmacy, management, laboratory technology and diagnostic imaging technology will be the particular focus of recruitment strategies in 2007-08.

Infrastructure

The aging infrastructure of many Central Health sites and growing demand for additional space poses an ongoing challenge for the organization.

"Keeping up with the growth in Primary Health Care in Central Health will continue to be a challenge in 2007-08."

Opportunities and Challenges

Children’s Health

The Children’s Health Strategy provides an opportunity to coordinate data related to this population and to collaborate with stakeholders and partners to respond to needs. Enhancing the quality and responsiveness of Child, Youth and Family Services through the implementation of recommendations contained in the Turner Report and the Deloitte Review presents a significant challenge for managers and front line staff in this area.

Women’s Health

The most frequent barrier identified by women for low cervical screening rates is the lack of access to services. Only 33 per cent of the female population participated in annual screening again this past year. The challenge and focus for the coming year must be increasing accessibility for services to all women of the region.

Systems and Policy Integration

Integration was realized in many ways during 2006-07. Over the course of the coming year, amalgamation of key financial tools and full integration of information systems will be a priority for Central Health.

Additionally, the policy development and integration project is ongoing and will result in comprehensive and common policies throughout the region.

“The most frequent barrier identified by women for low cervical screening rates is the lack of access to services.”

Financial Statements

“Central Health is committed to delivering appropriate health services to the population of Central Newfoundland. In order to ensure long-term viability of these services, financial sustainability is essential.”



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Improvement and Corporate
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AUDITORS' REPORT

To the Board of Trustees of the **Central Regional Health Authority**

We have audited the consolidated balance sheet of the **Central Regional Health Authority** as at March 31, 2007 and the statements of changes in net assets, operations and cash flow for the year then ended. These financial statements are the responsibility of the Authority's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Authority as at March 31, 2007 and the results of its operations and the changes in its cash flow for the year then ended in accordance with Canadian generally accepted accounting principles.

Walters Hoffe
Chartered Accountants

Gander, Newfoundland

August 15, 2007

**AUDITORS' COMMENTS ON
SUPPLEMENTARY FINANCIAL INFORMATION**

To the Board of Trustees of the **Central Regional Health Authority**

The audited consolidated financial statements of the Authority and our report thereon are presented in the preceding section of this annual report. The financial information presented hereafter was derived from the accounting records tested by us as a part of the auditing procedures followed in our examination of the overall consolidated financial statements, and, in our opinion, it is fairly presented in all material respects in relation to the consolidated financial statements taken as a whole.

Walters Hoffe
Chartered Accountants

Gander, Newfoundland

August 15, 2007

**CENTRAL REGIONAL HEALTH AUTHORITY
CONSOLIDATED**

Balance Sheet

March 31, 2007

2007

2006

Assets

Current assets:

Receivables (Note 3)	\$ 10,368,442	7,037,181
Inventories (Note 4)	2,078,339	2,021,867
Prepays (Note 5)	3,728,519	3,405,356

Total current assets	16,175,300	12,464,404
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Cash restricted for security deposits	21,238	19,787
Investments restricted for general endowment purposes (Note 6)	289,331	251,301
Replacement reserve funding (Note 14)	266,884	305,594
Residents' trust funds held on deposit	673,123	674,177
Deposits on property, plant and equipment	2,188,547	170,670
Property, plant and equipment (Note 7)	58,099,681	61,374,138
Deferred charges	4,586	17,498

	<u>\$ 77,718,690</u>	<u>75,277,569</u>
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Liabilities

Current liabilities:

Bank indebtedness (Note 8)	\$ 9,430,449	9,988,601
Payables and accruals (Note 9)	21,621,993	16,072,278
Accrued vacation pay	9,054,125	8,301,154
Deferred grants and donations (Note 10)	6,028,002	5,273,635
Current portion of obligations under capital lease	119,237	101,282
Current portion of long-term debt	1,261,487	1,266,436
Current portion of accrued severance pay - estimated	1,200,000	1,083,645

Total current liabilities	48,715,293	42,087,031
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Security deposits payable	21,238	19,787
Long-term debt (Note 11)	22,607,748	23,925,817
Obligations under capital lease (Note 12)	273,759	302,605
Trust funds payable	673,123	674,177
Accrued severance pay, less current portion of \$1,200,000	20,791,136	20,534,699
Unamortized deferred contributions related to property, plant and equipment (Note 13)	23,821,781	24,760,418
Replacement reserve (Note 14)	266,884	305,594
J.M. Olds scholarship and library funds	85,574	84,393
	<u>117,256,536</u>	<u>112,694,521</u>

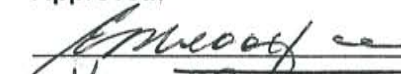

Net assets (deficit), per accompanying statement

Net assets invested in property, plant and equipment	9,892,005	11,064,585
Net assets restricted for general endowment purposes	289,331	251,301
Unrestricted net assets (deficit)	(49,719,182)	(48,732,838)
	<u>(39,537,846)</u>	<u>(37,416,952)</u>

	<u>\$ 77,718,690</u>	<u>75,277,569</u>
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See accompanying notes

Approved:

 Trustee
 Trustee