



Central Health Strategic Plan
April 1, 2008 to March 31, 2011

June 28, 2008



Message from the Chairperson



As Chairperson of the Board of Trustees for Central Health, I am pleased to present our strategic plan for 2008-11. This strategic plan reflects Central Health's broad mandate and the continued integration efforts. The ambition of this organization is to provide the best possible programs and services to the people of the region served by Central Health.

Through the development of our strategic plan, we have identified strategic issues arising from the Department of Health and Community Services strategic directions (see Appendix A). This document builds on the vision, mission and values of the organization and it will guide the operations of Central Health in achieving its goals and objectives for the next three years.

As a Board, we are accountable to clients, patients, residents, staff and the public for the content of this strategic plan, which meets the requirements of a *Category 1 Government Entity* in accordance the *Transparency and Accountability Act*. The goals and objectives identified herein represent our commitment to the citizens of this region. We commit to reporting on our progress each year through an annual report.

This strategic plan will serve as the organization's roadmap. A great amount of planning and research has gone into preparing this document and I would like to take this opportunity to thank the trustees and staff of Central Health who have worked diligently to prepare the 2008-11 strategic plan. The plan establishes priorities and, with achievable objectives in place, it provides a solid foundation for the pillars of quality and improvement. The Board of Trustees of Central Health acknowledges its accountability for the preparation of this plan and for achieving the specific goals and objectives of the plan.

Sincerely,

A handwritten signature in black ink that reads "Robert Woolfrey". The signature is written in a cursive style.

Robert Woolfrey

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Overview

Formed on April 1, 2005, Central Health is the integration of three health and community services organizations: Health and Community Services - Central, Central East Health Care Institutions Board, and Central West Health Corporation.



In terms of geography and population, Central Health is the second largest health region in Newfoundland and Labrador, serving a population of approximately 94,000 and offering a full continuum of health care services that are dispersed throughout the region. The region extends from Charlottetown in the east, Fogo Island in the northeast, Harbour Breton in the south to Baie Verte in the west (see Appendix B for a complete list of all Central Health sites). This geographical area encompasses more than half of the total land mass of the island.

Within the region there is a diverse array of primary, secondary, long term care, community health and some enhanced secondary services¹. These services are provided through a number of community health centres, health centres, long term care (LTC) facilities and two regional referral centres.

Services include: promoting health and well-being, preventing illness and injury, providing supportive care, treating illness and injury and providing rehabilitation services. There are 845 beds throughout the region - 268 acute care, 517 LTC, 32 residential units and 28 bassinets. Central Health is responsible for the licensing and monitoring of personal care homes and child care centres within the region and partners with the Miawpukek First Nation to support health services delivery in Conne River.

Central Health is considered a provincial leader in several initiatives including the Client Registration Management System (CRMS) and Minimum Data Sets (MDS). Central Health volunteered to be the site for the Client Pay Pilot Project. Regional Health Authorities' client payments are currently produced from multiple systems and some stand alone systems that were developed before the integration of the regional health boards. The Client Pay Pilot Project is

¹ Primary care is defined as the first level of contact with the medical care system, provided primarily by family physicians. Secondary care is defined as the first level of specialized care requiring more sophisticated and complicated diagnostic procedures and treatment than provided at the primary care level, normally delivered in hospitals. Enhanced secondary care refers to some types of sub-specialty care requiring a high level of intensive hospital based care.

designed to assist the regional health authorities in managing all aspects of providing client payments in the service areas of Community Supports, Child Youth and Family Services and Youth Corrections. The implementation of the CRMS Client Pay will not alter benefits received by clients and will serve to unify the Health Authorities client payments into one centralized service.

While the Department of Health and Community Services is acknowledged as the primary regional health board funder, Central Health is pleased to partner with its two charitable Foundations to enhance the programs and services it provides. The Central Northeast Health Foundation and the South and Central Health Foundation are two distinct organizations which operate under the direction of two volunteer Boards of Directors.

The Foundations continue to fund a wide variety of initiatives totaling over half a million dollars annually thanks to the generosity of donors. Recent examples include the purchase of new equipment such as a state-of-the-art Urology Laser, Life Support Machine, Unit Dosage Medical Equipment and an Ultrasound Transducer. Central Health looks forward to continuing this long tradition of generosity and partnering to improve the health of our communities.

The annual 2008-09 operational budget for Central Health is \$223,435,978.000. Central Health's total workforce is approximately 3,000 individuals, including salaried physicians. The organization's most significant expense is salaries and benefits, which comprises 65 per cent of the total budget. This is followed by direct client costs (13 per cent) and supplies (6 per cent). Other expenditures include medical and surgical supplies, equipment, drugs, building and grounds maintenance and referred out services.

Contact Us
See a complete list of
contact information in
Appendix C

Mandate

Central Health is legislatively responsible for the delivery and administration of health services and community services in its health region under the *Regional Health Authorities Act*. Central Health provides services in the context of provincial legislation, regulations and departmental standards.

In carrying out its responsibilities, Central Health shall:

- a. 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;
- b. assess health services and community services needs in its region on an ongoing basis;
- c. 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;
- d. manage and allocate resources, including funds provided by the government for health and community services, in accordance with this Act;
- e. ensure that services are provided in a manner that coordinates and integrates health and community services;
- f. collaborate with other persons and organizations, including federal, provincial and municipal governments and agencies and other regional health authorities, to coordinate health and community services in the province and to achieve provincial objectives and priorities;
- g. 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;
- h. provide information to the residents of the region respecting
 - i) the services provided by the authority ,
 - ii) how they may gain access to those services, and
 - iii) how they may communicate with the authority respecting the provision of those services by the authority
- i. monitor and evaluate the delivery of health and community services and compliance with prescribed standards and provincial objectives and in accordance with guidelines that the minister may establish for the authority under paragraph 5(1)(b); and
- j. 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.

Lines of Business

Central Health provides health services and programs to the citizens of central Newfoundland and Labrador. This includes hospital, LTC, community and other services within current resources. Central Health is committed to a Primary Health Care (PHC) model of service delivery². For certain services people can self refer while other services require a referral from a specific health discipline. A multidisciplinary team of health professionals, support staff and partners provide the care and services required to meet the mandate of Central Health.

The lines of business of an organization represent its areas of focus in delivering its mandate. Central Health accomplishes its mandate through five lines of business:

- Promoting health and well-being
- Preventing illness and injury
- Providing supportive care
- Treating illness and injury
- Providing rehabilitative services

It is important to note that services may fall under one or more headings below, and as Central Health is an evolving integrated authority, there will be further realignment of services and programs during the life of this strategic plan.

3.1 Promoting health and well-being

Health promotion is a process of supporting, enabling and fostering individuals, families, groups and communities to take control of and improve their health. Health promotion services address healthy lifestyles, stress management, supportive environments and environmental health.

Strategies include working with partners to improve the health of citizens by:

- Providing health education
- Building healthy public policy
- Strengthening community action
- Creating supportive environments
- Supporting development of personal skills
- Re-orienting health services

Health protection identifies, reduces and eliminates hazards and risks to the health of individuals in the community. The main components of health protection are:

- Communicable disease surveillance and control
- Immunization
- Monitoring environmental health factors such as water safety and food sanitation
- Responding to community emergencies

Health protection is delivered within the context of current legislation, where applicable.

² Primary health care is defined as the first level 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.

3.2 Preventing illness and injury

Prevention services offer early intervention and best available information to prevent the onset of disease, illness and injury, and/or the deterioration of well-being. Services available vary depending on the incidence or potential for disease, illness or injury found in specific areas. Services may include but are not limited to:

- Screening such as cervical, breast, prostate and colorectal
- Injury prevention activities such as helmet safety, water safety, and ice safety

3.3 Providing supportive care

Central Health provides broad ranging supportive care services across the continuum of care and lifespan in various situations within provincial guidelines, organizational policies, legislation and resources. This includes the provision and/or coordination of access to an array of services generally at the community level, as determined by a professional needs assessment and/or a financial means assessment. This promotes the safety, health and well-being of the individual by supporting the existing strengths of the individual, family and community.

Individual, family and community supportive services make up a considerable component of the work of Central Health. These include:

- Child care services including licensing, monitoring and providing support to child care centres, preschools, and family home child care
- Maternal child health care
- Child protection services
- Adoptions
- Services to families of infants, preschool and school age children who have or are at risk of delayed development
- A variety of services to clients who require support as a result of family and/or social issues
- Services to clients with disabilities both physical and cognitive
- Restorative justice including support for youth and their families interacting with the justice system
- Elder care services
- Mental health and addictions services
- Home support services within eligibility criteria
- Health care supplies and equipment including oxygen, ostomy supplies, bathing supports and drug cards for example, within eligibility criteria
- Respite, convalescent and palliative care services both community and residential
- Chronic disease management

Long term care and residential services encompass an extensive range of Central Health supports and partnerships including:

- Long term nursing care homes
- Seniors cottages
- Personal care homes
- Alternate family care for children and adults
- Co-operative apartments
- Transition homes

Supportive services are delivered within the context of current legislation, where applicable.

3.4 Treating illness and injury

Central Health investigates, treats, and cares for individuals with illness and injury. These services are primary and secondary in nature and are offered in selected locations.

Hospital based services

- Medical services including internal medicine, family medicine, mental health, pediatrics, obstetrics, nephrology, neurology, dermatology and medical oncology
- Surgical services including anesthesiology, general surgery, orthopedics, urology, ophthalmology, otolaryngology, gynecology and limited vascular surgery
- Hospital emergency services including ambulance services and other client transport services
- Ambulatory services including day procedures, surgical day care, endoscopic services, diagnostic and laboratory services, specialist clinics both regular (medical and surgical, for example) and visiting (nephrology, for example), diabetes education, cardio-pulmonary services and nutritional services

Community based services

- Other treatment services by physicians, social workers, nurses and nurse practitioners including primary health care services in a number of health centres and community health centres
- Mental health and addictions services

3.5 Rehabilitation services

Central Health offers a variety of therapeutic or healing services for individuals following illness or injury. These services are offered in selected locations through a referral process and include:

- Post acute nursing services both in clinic and home settings
- Rehabilitation services such as physiotherapy, occupational therapy, and speech/language therapy

Values

Central Health's core values offer principles and a guiding framework for all employees as they work in their various capacities to support the health and well-being of the people served by Central Health. This is done within available resources except where otherwise directed by legislation. These core values and the related action statements are:

- **Accountability**

Each person demonstrates commitment through his/her contribution 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, services and practices through the development of their knowledge and skills and use of best practices.

- **Fairness**

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

- **Privacy**

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

- **Respect**

Each person provides opportunities for others to express their opinions in an open and safe environment.

Primary Clients and Related Expectations

Central Health provides programs and services to many clients. The primary clients are the citizens in the geographic area served by Central Health and all others who may require or are referred to Central Health's programs and services.

Central Health works in partnership with many others including various communities, community and advocacy groups, family resource centres, community youth networks, residential facilities, community and home support agencies, educational institutions, professional associations, unions and other government departments and agencies.

Central Health also has a contract with the Miawpukek First Nation of Conne River to help carry out their mandate. Supervision for the public health nurse and the child, youth and family services social worker; as well as monitoring of the environmental health program is provided.

Vision

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

Mission Statement

The mission statement for *Category 1 Government Entities* represents the outcome it is striving to achieve over two planning cycles. Central Health developed the following mission statement in February 2006 when the organization was new and integration of three former health boards was at the top of the agenda. While the statement remains unchanged, Central Health recognizes the work of its staff, managers, independent practitioners and volunteers in enabling integration while ensuring the continuous provision of quality services and programs as this mission is being accomplished. This mission is supportive of the strategic directions of the Department of Health and Community Services as found in Appendix A.

Mission:

By 2011, Central Health will have provided the best possible integrated health and community services and programs which respond to the identified needs of the people of central Newfoundland and Labrador within available resources.

Measure 1: Central Health provided the best possible integrated health and community services and programs

Indicators:

- Integrated services and programs are reflected in Central Health's organizational structure
- Budget integration is completed across services and programs
- Information systems are integrated across services and programs
- Policy integration is completed
- A primary health care model of service delivery is implemented in six sites

Measure 2: Central Health's programs and services are responsive to the identified needs of the population of the central region

Indicators:

- Completed environmental scan of the central region
- Completed needs assessment and satisfaction survey of the population of the central region
- Completed evaluation of selected existing services and programs
- Evaluation component will be part of any new programs and services
- Developed regional health services plan and implemented elements of the plan according to agreed upon measures with the Department of Health and Community Services

Measure 3: Central Health's programs and services are conducted within available resources

Indicators:

- An annual balanced budget, unless otherwise directed by the Department of Health and Community Services, while monitoring impact on programs and services
- Integrated regional budgeting processes
- Alteration or implementation of services and programs will include cost analysis, and will be within resources

Strategic/Governance Issues

Central Health has identified 5 priority issues upon which to focus over the next three years. These issues reflect the strategic directions of government, the mandate of Central Health and the health system needs for the central region. Each issue is accompanied by a goal which specifies the results expected at the end of the three year planning cycle and objectives to highlight annual milestones. The measures and indicators listed under each goal and objective are provided to facilitate the evaluation of achievement.

ISSUE ONE - System Alignment

Addressing the health care needs of citizens of the central region is challenged by ongoing changes in demographics and service delivery best practices. Traditionally, rural communities were served through the cottage hospital system, which had an array of primary and secondary care services offered to meet the needs of a remote population, in scattered communities along the coastal areas of the region served by Central Health. This system existed in a time when rural sites were truly isolated, communities were demographically young and the population base was of a size that enabled a diversity of services to be sustained.

Today the changing demographics of an aging population; the progressively declining population; and the increasing difficulty in recruiting health professionals is challenging health organizations to find new ways of aligning primary and secondary health care services to ensure they are sustainable in terms of both human and financial resources. Central Health commits to redefining its system of care delivery to ensure that the health needs of the citizens of the region served by Central Health are met, utilizing an approach that incorporates quality practice standards and the best use of resources. This issue supports the Department of Health and Community Services' strategic direction of improved accountability and stability in the delivery of the health and community services within available resources.

Goal: By March 31, 2011, Central Health will have developed recommendations for improved alignment of primary and secondary services, based on the most appropriate service, delivered at the most appropriate site, by the most appropriate care provider, in view of changing demographics, availability of resources and application of best practice principles.

Measure: Recommendations for the realignment of primary and secondary services for Central Health is accepted by the Board and submitted to the Department of Health and Community Services.

Indicators:

- An assessment plan for primary and secondary services is developed
- The assessment plan is implemented
- Recommendations for the realignment of primary and secondary services are submitted to the Department of Health and Community Services

Objective 1:

By March 31, 2009, Central Health will have developed an assessment plan to identify key client services, their location, and key issues related to the resources required for that service.

Measure: A written report is available to and accepted by the Board.

Indicators:

- A region wide primary and secondary service assessment plan is developed

Objective 2:

By March 31, 2010, Central Health will have implemented the primary and secondary service assessment plan utilizing a best practices approach, following primary health care principles and detailing current service location, key service resource issues, and current gaps in service.

Objective 3:

By March 31, 2011, Central Health will have developed recommendations for system realignment to be presented to the Department of Health and Community Services.

ISSUE TWO - ACCESS

Central Health recognizes that Newfoundland and Labrador and the four regional health authorities continue to achieve wait times at or near the nationally established benchmarks in the five priority areas. In the July 1, 2007 to September 30, 2007 reporting period, Central Health performed 100 per cent of all cataract cases within the 112 day bench mark and has continued to meet or exceed the 112 day access target since the first quarter of 2006-2007. Central Health continues its commitment to providing quality primary and secondary health care services in its designated region.

A key component to providing program and service quality is ensuring appropriate and timely access to health care services which are responsive to the changing needs of the population served. A significant barrier to appropriate and timely access is waiting time for diagnostic and treatment services. This barrier is related to the availability of resources, in particular, human resources. While the recruitment and retention of appropriate health providers is a national challenge, Central Health commits to continuing to work with the Department of Health and Community Services to improve access in its designated region. This issue supports the Department of Health and Community Services' strategic directions of improved accessibility to priority services and improved accountability and stability in the delivery of the health and community services within available resources.

Goal: By March 31, 2011, Central Health will have implemented mechanisms to support improved access to primary and secondary health care services within existing financial and human resources and with consideration to changing demographics and maintenance of quality services.

Measure: Mechanisms to support improved access to primary and secondary health care services are implemented.

Indicators:

- A report detailing identified access issues and strategies to overcome them is available to and accepted by the Board
- An enhanced and expanded wait time management system is implemented
- A comprehensive health human resources plan is developed

Objective 1:

By March 31, 2009, Central Health will have initiated a process to identify significant access issues in priority areas.

Measure: A report detailing significant access issues in Central Health is available to and accepted by the Board.

Indicators:

- An approach/process to conduct region wide access assessment is developed
- Expansion of the wait time management system to include wait time data collection in key identified areas is initiated
- Key components of a health human resources plan are developed

Objective 2:

By March 31, 2010, Central Health will have developed strategies to address priority access issues.

Objective 3:

By March 31, 2011, Central Health will have implemented strategies to improve access to primary and secondary health care services.

ISSUE THREE - INFRASTRUCTURE AND CAPITAL EQUIPMENT

Many of the buildings that house Central Health services and programs are older and have undergone redevelopment at various times. Changes in services, programs, technology and client and staff needs require attention and there is on-going discussion with the Department of Health and Community Services on these matters. Renewal and /or upgrading of our buildings will ensure we continue to meet building codes, fire and life safety standards and regulations. Similarly, equipment must be regularly renewed and/or upgraded to meet new standards of care and/or changes in best practices. Capital projects and capital equipment are expensive and require planning to ensure needs are identified and anticipated. This issue supports the Department of Health and Community Services' strategic direction of improved accountability and stability in the delivery of the health and community services within available resources.

Goal: By March 31, 2011, Central Health will have developed a comprehensive and prioritized infrastructure and capital equipment plan that is aligned with service delivery plans for the central region.

Measure: The infrastructure plan for Central Health is accepted by the Board and submitted to the Department of Health and Community Services and will guide/drive capital expenditure requests at Central Health.

Indicators:

- The environmental scan and inventory of infrastructure and capital equipment is available to the Board
- Criteria are developed for determining priorities in infrastructure redevelopment and capital equipment, based on impact statements and business cases
- An implementation plan is developed and items prioritized; and the comprehensive plan is communicated to the Department of Health and Community Services

Objective 1:

By March 31, 2009, the environmental scan and inventory of infrastructure and capital equipment at Central Health will be available to and accepted by the Board.

Measure: The environmental scan is accepted by the Board.

Indicators:

- An environmental scan and inventory of infrastructure and equipment is completed and available to the Board

Objective 2:

By March 31, 2010, criteria will be developed for determining priorities in infrastructure redevelopment and capital equipment, based on impact statements and business cases that are consistent with system alignment recommendations.

Objective 3:

By March 31, 2011, an implementation plan will be developed with items prioritized and the comprehensive plan will be communicated to the Department of Health and Community Services.

ISSUE FOUR –HEALTH PROMOTION & CHRONIC DISEASE MANAGEMENT

Central Newfoundland and Labrador has an aging population and a high incidence of chronic disease, as is the case in the rest of the province. The Provincial Healthy Aging Policy Framework³ estimates that within the next 10 years the percentage of persons over age 65 years in the province will rise from approximately 14 per cent in 2007 to 20 per cent by 2017, with an additional 45 per cent being over age 50 in the same year. Considering that 13 of the 20 most common chronic diseases are linked to age and that in 2005, about 95 per cent of Newfoundlanders and Labradorians 65 years and older had at least one chronic condition, preventing and managing chronic disease to enable self-care, enhance quality of life and reduce dependence on the health care system is desirable. Over the next three years, the Chronic Disease Management Strategy that is presently being developed by Central Health will be aligned with the provincial strategy that is

³ Department of Health and Community Services, Aging and Seniors Division, Government of NL, *Provincial Healthy Aging Policy Framework* http://www.health.gov.nl.ca/health/hlthaging/ha_policy_framework.pdf

being developed by the Department of Health and Community Services. This issue supports the Department of Health and Community Services' strategic direction of improved population health.

Goal: By March 31, 2011, Central Health will have an implementation strategy for chronic disease management for citizens of Central Newfoundland and Labrador, which is accepted by the Board.

Measure: A chronic disease management strategy for citizens of Central Newfoundland and Labrador is developed.

Indicators:

- The Provincial Chronic Disease Prevention and Management Strategy has been reviewed in the context of Central Health
- Focused areas for chronic disease management have been identified and prioritized
- An implementation plan for chronic disease management has been developed

Objective 1:

By March 31, 2009, Central Health will have reviewed the Provincial Chronic Disease Prevention and Management Strategy in the context of Central Health.

Measure: A report is completed on the review of the Provincial Chronic Diseases Prevention and Management Strategy as it applies to the Central Health context.

Indicators:

- A report on the review of the Provincial Chronic Disease Prevention and Management Strategy is available and accepted by the Board

Objective 2:

By March 31, 2010, Central Health will have identified and prioritized focused areas for chronic disease management in its designated region.

Objective 3:

By March 31, 2011, Central Health will have developed an implementation plan for chronic disease management.

ISSUE FIVE – ENSURING SERVICE QUALITY

Central Health is committed to providing quality programs and services to the citizens of central Newfoundland and Labrador. In doing so the Authority provides a seamless delivery of services and programs in an environment that is safe for clients and staff. Central Health is a participant in the national patient safety movement and contributes to provincial initiatives to enhance patient safety and minimize risk. The assurance of quality and safety is achieved by continuously monitoring and improving services and programs utilizing service quality indicators based on evidence-informed best practices. This issue supports the Department of Health and Community Services' strategic direction of improved accountability and stability in the delivery of the health and community

services within available resources with particular emphasis on quality management and patient safety.

Goal: By March 31, 2011, Central Health will have improved service quality by continuing to develop, define and implement service quality indicators which include client safety and risk assessment, across the continuum of services.

Measure: Service quality in selected and prioritized areas is evident in quarterly performance indicators to the Board and the 2010-11 Annual Report to the public.

Indicators:

- Service quality areas for action have been defined, identified and prioritized according to a selected assessment framework
- Service quality areas for action, as prioritized in 2009, have been initiated and implemented
- Service quality has been evaluated in selected and prioritized areas

Objective 1:

By March 31, 2009, Central Health will have defined, identified and prioritized the service quality areas for action according to a selected assessment framework. This will include consideration of non-traditional areas of performance measurement.⁴

Measure:

A comprehensive report card containing defined and prioritized service quality indicators is accepted by the Board.

Indicators:

- Quarterly reports on the status of the work are submitted to the Board Performance Improvement Committee

Objective 2:

By March 31, 2010, Central Health will have initiated and implemented service quality areas for improvement as prioritized in 2009.

Objective 3:

By March 31, 2011, Central Health will have evaluated service quality in selected and prioritized areas.

⁴ Non-traditional areas include those which may not be readily measured, as data may not be available. Consequently, recommendations from this work may include the need for data gathering in specific areas. As this measurement gap impacts on the work of Central Health, it is incumbent upon the Authority to identify the gaps in the availability of data.

Appendix A – Strategic directions
Appendix B – List of sites and contact information
Appendix C – Key contact information

APPENDIX A – STRATEGIC DIRECTIONS FOCUS AREAS

The directions related to the Department of Health and Community Services are provided below. Each strategic direction is comprised of a number of components, or focus areas. These focus areas will be addressed through the various planning processes of Central Health. Please review the location of the check marks to be sure they reflect the planning process that is responsible for the issue.

Government's Strategic Direction	Focus Areas of the Strategic Direction 2008-2011	This Direction is/was			
		Addressed in the:			
		to be addressed by entities reporting to the department	addressed in the authority's strategic plan	addressed in the authority's operational plan	addressed in the work plan of a branch/division within the authority
Improved population health	Obesity			√	
	Smoking rates and protection from environmental smoke				√
	Dental health of children				√
	Support for healthy aging			√	
	Aboriginal Health needs			√	
Strengthened public health capacity	Surveillance for communicable disease				√
	Health emergency plan for the HCS system			√	
	Environmental health policy			√	

Improved accessibility to priority services	Access to community-based mental health and addictions services			√	
	Access to appropriate primary health services		√		
	Home care and support services in the areas of end of life care, acute short term community mental health, case management, short term post discharge IV medications and wound management				√
	Options to support choices of individuals in need of long term care and community supports			√	
	Access to a strengthened Child, Youth and Family service			√	
	Access to quality early learning and child care				√
	Improved accountability and stability in the delivery of the health and	Identify and monitor outcomes for selected programs			

community services within available resources	Achievement of balanced budgets			√	
	Stabilize human resources		√		
	Quality Management and Patient Safety		√		

APPENDIX B – LIST OF SITES AND CONTACT INFORMATION

- A.M. Guy Memorial Health Centre
 Buchans
 (709) 672-3304

- Baie Verte Peninsula Health Centre
(709) 532-4218
- Bay d'Espoir Community Health Centre
(709) 538-3244
- Belleoram Community Health Centre
(709) 881-6101
- Bell Place Community Health Centre
Gander
(709) 651-3306
- Bonnews Lodge
Badger's Quay
(709) 536-2160
- Botwood Community Health Centre
(709) 257-4900
- Brookfield/Bonnews Health Centre
(709) 536-2405
- Carmanville Community Health Centre
(709) 534-2844
- Carmelite House
Grand Falls-Windsor
(709) 489-2274
- Central Health Regional Office
Grand Falls-Windsor
(709) 292-2138
- Central Newfoundland Regional Health Centre
Grand Falls-Windsor
(709) 292-2500
- Centreville Community Health Centre
(709) 678-2342
- Change Island Community Health Centre
(709) 621-6161
- Connaigre Peninsula Health Centre
Harbour Breton

(709) 885-2043

- Dr. Brian Adams Community Health Centre
Gambo
(709) 674-4403
- Dr. C.V. Smith Memorial Community Health Centre
Glovertown
(709) 533-2372
- Dr. Hugh Twomey Health Centre
Botwood
(709) 257-2874
- Eastport Community Health Centre
(709) 677-2530
- Fogo Island Health Centre
(709) 266-2221
- Green Bay Community Health Centre
Springdale
(709) 673-4714
- Green Bay Health Centre
Springdale
(709) 673-3911
- Hare Bay Community Health Centre
(709) 537-2209
- Hermitage Community Health Centre
(709) 883-2222
- James Paton Memorial Regional Health Centre
Gander
(709) 256-2500
- Lakeside Homes
Gander
(709) 256-8850
- LaScie Community Health Centre
(709) 675-2429
- Lewisporte Community Health Center

- Lewisporte Laboratory and X-Ray Clinic
- Mose Ambrose Community Health Centre
(709) 888-3541
- Musgrave Harbour Community Health Centre
(709) 655-2518
- New World Island Community Health Centre
(709) 629-3682
- North Haven Manor
Lewiporte
(709) 535-6767
- Notre Dame Bay Memorial Health Centre
Twillingate
(709) 884-2131
- Provincial Building Community Health Centre
Grand Falls-Windsor
(709) 292-1204
- Robert's Arm Community Health Centre
(709) 652-3617
- St. Alban's Community Health Centre
(709) 538-3738
- St. Brendan's Community Health Centre
(709) 538-3738
- Valley Vista Citizen's Home
Springdale
(709) 673-3911
- Victoria Cove Community Health Centre
(709) 676-2737

Senior Leadership Team

Karen McGrath

Chief Executive Officer

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Carole Dalton

Chief Operating Officer – Grand Falls-Windsor

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Sherry Freake

Chief Operating Officer – Gander

(709) 256-5531

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Heather Brown

Vice President, Rural Health

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Gander (709) 256-5405

Accounts receivable:

Grand Falls-Windsor (709) 292-2301

Gander (709) 256-5409