

# President & Chief Executive Officer and Senior Management Report March 28, 2023

## **Vice President – Integrated Health and Chief Nursing Executive**

### **Our People**

- Non-Invasive Cardiology at Central Newfoundland Regional Health Centre (CNRHC) Staffing shortages continue to limit the number of outpatient appointments however, booking processes have been reviewed and a new practice approach has been implemented to ensure urgent patients are seen in a timely manner. In addition, continued work with the Physician team regarding processes to support stress test bookings.
- Staff Appreciation Day took place on March 3<sup>rd</sup> and 6<sup>th</sup>. The pizza was appreciated by all staff.

#### **Quality Patient Experience**

- Audiology Department is fully staffed and there is a significant decrease in appointment wait times. Notably there is an improvement in meeting and surpassing national benchmarks for all P1, P2 & P3 appointments. There is also a 33% decrease in P4 wait time since October 2022.
- Patient Advisors were invited to the Regional Pastoral Care Committee meeting to discuss wording
  of the question regarding Clergy Visitation on admission. Changes based on feedback received, will
  be updated in the near future.
- The reinstatement of walk-in services at Central Newfoundland Regional Health Centre (CNRHC) and James Paton Memorial Regional Health Centre (JPMRHC) has been widely accepted by clients of outpatient collection services. The change occurred on January 10, 2023, due to resource challenges associated with the appointment booking process. To date there has been no increase in complaints and/or negative feedback regarding the changed approach. The Laboratory Medicine Program continues to look at ways to effectively incorporate the option of appointments for those seeking outpatient blood collection.

#### System Improvement

- Community Advisory Committee (CAC) in Gander area working through a Strength-Weakness-Opportunity-Threat (SWOT) analysis of the CAC priorities to develop action plans. The Primary Health Care Leadership (PHC) team also met to discuss the JPMRHC action plan to supplement these priorities.
- The new standard operating procedure for our Site Huddle is proving to be very efficient. The extra
  members (staffing, infection control, dispatch, social work) are providing on the spot information
  and guidance, helping with patient flow and daily challenges at CNRHC and JPMRHC.

#### **Improved Health**

- Public Health Nurses (PHNs) have had an increased presence in their assigned schools this school
  year. Since the Christmas break PHNs have reported significant increase in demand for education
  sessions in schools particularly around nutrition and sexual health. Consultants that are responsible
  for health promotion have been engaging with the nurses and developing new
  presentations/resources to meet the needs of the health promotion requests.
- Health promotion requests from community groups have also increased throughout the regions. After a significant absence from this work during the pandemic PHNs have been working within their communities to re-establish partnerships and engage community groups.
- The Central Wellness Coalition recently reviewed the winter community grants submission. 17 grants applications were approved funding for a total of \$12,700. Grants were approved for a variety of exciting initiatives across the region such as community gardens, active agers groups, mindfulness meets for seniors, and food preparation sessions for students.

## Vice President - Corporate Services & Provincial Shared Services Supply

#### **Overall**

March is a transition month as we prepare for the year end for close out of the books for Central Health as well as for the new provincial health authority. The announcement of the new executive structure has meant a number of activities related to the setting up of financial reporting for the new provincial authority as well as a handoff from Centrals' VP corporate Services to the provincial VP Corporate Services. Central Health continues to work with the Department of Health and Community Services on the cleanup of various program cash flows as well as estimating the final expenditure position for the Authority. The human resource challenges as well as the continuation as response to the Covid19 pandemic has had major impacts on spending with the increase in use of agency nurses and higher uses of personal protection equipment (PPE). Total expenditures for this fiscal year are expected to reach \$464 million up from \$432 million in the prior year. As noted earlier this increase is directly related to the human resource shortage, continuation of PPE supplies as well as wage contract increases. The following are highlights for this period in specific areas.

### Provincial Shared Services – Supply Chain

Supply Chain has been working to support a number of large procurement initiatives. These include its own provincial storage and distribution of supplies pram, the new Health Information System as well as increasing number of goods and services under contract. It also has been participating in work needed for the new provincial authority.

#### **Budgeting**

The Budgeting Department is also involved with the new health authority transition as the budget transforms into a zone budget from a standalone organizational budget. The final budget is expected to be announced in late March 2023 with the tabling of the Government of Newfoundland and Labrador's budget.

#### **Financial Services**

The Finance Department is transitioning from the tax reporting that needed to be done in February, to gearing up for the March year end. Work is also ongoing in transitioning to the new provincial health authority finance structure.

### **Engineering and Support Services**

Engineering and Support services continues to have a number of areas that will see improvements being put in place over the coming months. These are;

- Working with the province on low carbon footprint initiatives by being approved for seven (7) low carbon projects, of which one which will be completed with by the end of 2023.
- Deployment of electronic housekeeping recording system that will allow more time to concentrate on the housekeeping function and improve documentation.
- Working on the plan for Regional Office decommission, and improvement in quality as well financial resources used in providing space for a variety of corporate services.
- Proceeding to implement new retail food services at Central Newfoundland Regional Health Centre and James Paton Memorial Health Centre that should be completed by June.

### **Vice President – People and Transformation**

- In partnership with People & Culture, community recruitment sessions were completed at the NL Employment Centers, GFW and Gander, January 17 and 31, 2023 to target administrative professionals in the respective areas. In GFW, a total of 27 individuals attended the event, with 12 of those meeting all required qualifications. The onboarding process is currently underway. In Gander, a total of 28 individuals attended the event with onboarding currently underway.
- In February 2023, the organization hosted training for leadership throughout the region in the Incident Command System 200. The two-day in-person event was attended by 17 participants throughout the region and supported increased knowledge and skills in emergency preparedness and response.
- Emergency Planning Coordinator and Regional Manager of Protection Services met with local police leadership to discuss partnership in universal code response. The meeting was successful and laid the foundation for further consultation with additional codes requiring a police response.
- The first education sessions related Harassment Free Workplace Initiative was launched on LEARN and communicated to all staff on February 27, 2023.
- UpToDate subscription went live February 1st, providing CH employees and physicians access to the world's leading evidence-based clinical decision support resource.
- Planning for Volunteer Appreciation events in April 2023, and youth career day in collaboration with Recruitment.
- Start of MOAB (Managing of Aggressive Behavior) has gone live with the first training sessions scheduled for March 2023. This MOAB training will help assist our frontline staff dealing with the potential Aggressive Behaviours they encounter.
- The following is an overview of recent activities undertaken by the Employee Experience Team.

Recruitment Highlights 2023			
Location Total			
New Hires – New Grads RN's (2023 Start Date)			
CNRHC Float	4		
Twillingate	4		
Harbour Breton	1		
Springdale	1		
JPMRHC Ortho	1		
JPMRHC General Surgery	3		
Experienced RN Hires			
CNRHC ER	2		
CNRHC Casual DU	1		
JPMRHC ER	1		
JPMRHC Float	1		
Belloram PHC/CCNC	1		
Fogo Island	1		
Other			
CNRHC Occupational Therapy	1		
Twillingate Physiotherapy	1		
Harbour Breton Social Work	1		

## **Systems Improvements**

- Scanning was implemented at BVP Health Care Center on Jan 25/26, 2023. Consultation is
  occurring concerning strategic implementation of scanning at additional sites, including
  Twillingate and Harbour Breton to support virtual ER services and HIM coding and abstracting
  functions.
- CHRSP (Contextualized Health Research Synthesis Program) Priority Setting Meeting On March 1, 2023, leaders across the province were invited to attend a priority setting meeting for new PHA, facilitated by CHRSP.

#### **Quality Patient Experience**

 Accreditation - Central Health was scheduled to participate in the Accreditation Canada Survey September 2023. Due to the upcoming changes to one Provincial Health Authority the Accreditation Canada Survey has been rescheduled to June 2023. After the survey in June of 2024, a new accreditation cycle for the Provincial Health Authority will begin in 2025 and conclude in 2028.

#### **Foundations**

• We are happy to report that a successful fundraising telethon was held in Springdale on February 5<sup>th</sup>. Prior to the telethon we had \$30,000 received for the bus campaign. On the day of the telethon we received \$55,000 in donations. Since then, we also received another \$5,000. We have almost reached our goal of \$105,000 – only \$12,000 remaining. The wheelchair bus is due to arrive in April.

- The date of the SCHF Mother's Day Radiothon will be Wednesday, May 10 from 1pm to 5pm. It will be held virtually again this year with the radio hosts using Teams to connect to the foundation in Grand Falls-Windsor to broadcast the event over the radio.
- **DynaCad Breast Imaging Software** Our Foundation has committed to support the purchase of new breast imaging software for the in James Paton Memorial Regional Health Centre for our 2023 Radiothon project. DynaCad is the market leader in software for MRI breast imaging. It aids in real-time image analysis in 3D for detecting breast cancer. It allows radiologists to report on lesion location including distance from nipple, skin, chest wall and the lesion's overall diameter. This is valuable information should surgery be required; the breast imaging software will enhance our current service and provide a path to MRI guided breast biopsy in our region currently those patients are being sent to St John's. Cost \$120,000 completed Government matching letter to send.

## **Vice President – Medical Services**

### **Physician Positions**

- Numbers are reflective of a snapshot in time and not indicative of resignations received or future anticipated needs due to leaves of absences etc. For example, there is an Internist hired at JPMRHC, but they have not started yet. This would not yet be appreciated in this report.
- Total number of physician FTE positions refers to the total number of salaried physician positions in Central Health in addition to the estimated number of FFS positions. It is important to note that FFS positions are based on historical numbers in a given specialty. FFS positions can vary considerably and the ideal number of FFS physicians for specialists and family medicine have not been determined for CH.
- Total number of filled physician FTE positions reflects the physicians occupying the positions at the present time. It does not account for upcoming movement resulting from resignations pending.
- Total number of physician vacancies refers to a position where there is no full-time physician in the position at the present time. The position is vacated. However, it does not reflect if there is a physician hired to move into the position. Physicians off on extended leave would not appear as a vacancy.

#### **Summary of Central Health Region**

	CH Required # (FTEs)	Filled#	CH Deficit #	Vacancy Rate
RURAL TOTAL PHYSICIANS	41	18.25	22.75	55.49%
GFW TOTAL PHYSICIANS	86	58.6	27.4	31.86%
GANDER TOTAL PHYSICIANS	73.60	44.80	28.8	39.13%
REGIONAL TOTAL FM	1.5	0.5	1.0	66.7%
TOTAL	202.1	122.15	79.95	39.56%

Sub-Specialty	CH Required # (FTEs)	Filled#	CH Deficit #		
SPECIALTIES					
Anesthesiology	4	3	1		
General IM	6	3	3		
Opthamology	2	2	0		
Neurology	0.6	0.6	0		
Diagnostic Imaging	4	2.2	1.8		
Pathology	3	1	2		
Pediatrics	3	2	1 (mat leave)		
Psychiatry	1	1	0		
General Surgery	4	3	1		
Obstetrics/Gynecology	3	2	1		
Orthopedics	5	5	0		
TOTAL	35.6	24.8	10.8		
	FAMILY PRACTICE				
Community Family Medicine	25	12	13		
Emergency	4	4	0		
Emergency Double Coverage	2	1	1		
Hospitalist	3	3	0		
Surgical Assist	2	0	2		
Psychiatry Clinical Associate	1	0	1		
OBGYN Clinical Associate	1	0	1		
TOTAL	38	20	18		

Summary of GFW

Sub-Specialty	CH Required # (FTEs)	Filled#	CH Deficit #
	SPECIALTIES		•
Anesthesiology	4	3	1
General IM	7	5	2
Opthamology	1	1	0
Otolaryngology	2	2	0
Dermatology	1	0	1
Neurology	1	1	0
Diagnostic Imaging	4	3	1
Pathology	3	3	0
Pediatrics	3	3	0

Psychiatry	8	8	0
General Surgery	5	5	0
Obstetrics/Gynecology	4	2.6	1.4
Urology	2	2	0
TOTAL	45	38.6	6.4
Family Physicians			
Community Family	30	13*	17
Medicine			
Emergency	5	5	0
Emergency Double	2	1	1
Coverage			
Hospitalist	3	1	2
Surgical Assist	1	0	1
TOTAL	41	20	21

<sup>\*</sup>There are 13 physicians who participate in community family medicine however they are not all full time.

## **Summary of Regional Positions**

Position	CH Required # (FTEs)	Filled# (FTEs)	CH Deficit # (FTEs)
Palliative Care	0.5	0.5	0
Care of the Elderly	1	0 (maternity leave)	1
TOTAL	1.5	0.5	1.0

## Summary of Rural

Rural Location	CH Required # (FTEs)	Filled # (FTEs)	CH Deficit # (FTEs)
Baie Verte	4	0	4
Botwood	6	4	2
Buchans	2	0	2
Coast of Bays	5*	1	4
Lewisporte	4	4	0
Springdale	5	2	3
Brookfield	5	1	4
Fogo	2	0	2
Twillingate	6	4.25	1.75
Gambo/ Glovertown/	2	2	0
Eastport			
RURAL TOTAL PHYSICIANS	41	18.25	22.75