



President & Chief Executive Officer and Senior Management Report May 17, 2022

Vice President – Integrated Health and Chief Nursing Executive

Our People

- Regular daily and weekly recruitment and operations meetings with CEO and team regarding resources, particularly in Nursing. Working to initiate travel teams of RNs to sites within May/June month as a priority. Areas to be covered include and not limited to acute, long-term care, and rural practice areas. 15 new grads also started in May 2022.
- Attended provincial Nursing Think Tank on April 4/5, 2022 – many ideas for improvement regarding recruitment/retention; work-life balance; and nursing lived experiences.

Quality Patient Experience

- Continued support and development of a virtual telehealth approach within the Lactation Consultant role. In addition, telehealth is facilitating neonatal support through various telehealth resources such as interactions within the neonatal intensive care unit (NICU) at the Janeway. Plan is to work with Physicians and key stakeholders to support a virtual team meeting with CH.

System Improvement

- Continued challenges with discharges from Acute Care sites before 11 am. During April 2022 at the James Paton Memorial Regional Health Centre, there were 198 discharges with the following distribution: 12% by 11 am, 39% between 11am -2 pm and 49% after 2 pm. Continued discussions with client flow team and operations regarding opportunities for improvement in these numbers to facilitate patient flow and bed utilization.
- On March 29, 2022, there was a privacy walkthrough in the ER at the Central Newfoundland Regional Health Centre (CNRHC) with our Senior Management Team patient care advisor and the Regional Privacy Analyst for Central Health. During the walkthrough, areas of improvement for possible privacy breaches were identified. For example, it was suggested that a plexi-glass type barrier be implemented around the ER desk area to reduce sound travel and observation of any private health information. Recommendations were also made to ensure exam room doors were closed when assessing patients and to have interview room doors closed when discussing patient information.
- Attended Miawpukek, ACOA, MUN Medicine and community partner stakeholder meeting on April 8, 2022. Discussions regarding innovation in practice settings and medical-nursing lab simulation opportunities.

Improved Health

- The new *CODE STROKE* registration process is working well. In addition to early registration while ambulance is enroute, *CODE STROKE BOXES* were developed as grab-and-go kits containing all

needed equipment to initiate *CODE STROKE* and documentation. Medication needed within a *CODE STROKE* is not included in the kits as it must be contained as per pharmacy regulations. This has been implemented uniformly at both Category A ER sites.

Vice President – Corporate Services & Provincial Shared Services Supply

Financial Services

The Yearend work is in progress for the audit and the auditors will start their work in May. As with other areas in the organization the finance department is struggling with vacancies of skilled employees. This has impacted workload and ability to meet deadlines.

Provincial Shared Services - Supply Chain

As of March 31, 2022, 45 of 49 (91%) of Supply Chain's established goals were accomplished in last the fiscal year. The remaining goals were inhibited by external factors (such as technology). The Supply Chain team has met with the Department of Health and Community Services during the period to discuss the strategy for the supply chain technology. software, Supply Chain is currently awaiting a response from the Department on approved next steps.

Supply chain is involved with the procurement process for the Health Information System (HIS) of the new Corner Brook Acute Care Centre. This is expected to eventually be a model for the rest of the province. Central Health is also providing executive representation on the Steering Committee.

Budgeting

The provincial Budget was announced April 7, 2022. This budget approved an increase in spending of \$17.6 million for Central Health and basically addressed the increased need for access to services. The main focus for the budget department is on preparation of the 2022-23 recast budget submission which is due by June 30th to the Department of Health and Community Services. The recast budget will be presented to the Board for approval before submission. Regular monitoring of the monthly financial results will resume around the end of June/early July.

Engineering and Support Services

Food Services

As noted in the finance area, recruitment is also an issue for this department particularly with skilled cooks and food operations supervisors throughout the region. This continues to take considerable effort to maintain food services at our sites.

Environmental Services

We have completed a review of the current regional laundry program and equipment; the report will be tabled for senior management to review in the near future.

Maintenance

Maintenance continues to have vacancies with certain trades, however the temporary reduction in projects

has resulted in layoffs in numerous locations for workers that are employed on projects. This is expected to turnaround as project work increases in activity.

Major Projects

New Long-Term Care Grand Falls-Windsor & Gander:

Again, we must report that the new LTC's were delayed due to concerns around the ongoing flooring issues in the Gander site and the cold-water temps at both facilities. We continue to work with Transportation and Infrastructure and ProjectCo.

Workforce Management Integrated Operations Center (IOC)

We have been working with the workforce management project team to identify a suitable location for the regional Integrated Operations Center. After site visits and evaluations, suitable space was identified in Grand Falls- Windsor at a location owned by the town. Central Health is working with the Town of Grand Falls-Windsor to get a lease in place and renovations completed for a June start date.

Vice President – People and Transformation

Our People

- The strategic workplan and the Strategic Planning Scorecard for 2021-22 (Year 2) have been updated with progress to-date noted.
- The Planning and Performance Team developed a Staff Appreciation Survey which went live on April 21st seeking ideas on ways Central Health can show its appreciation towards staff.
- A Central Health Virtual Leadership forum was held on April 27th. The agenda included presentations on Physician Recruitment/Retention, Resource/HR Planning, and Engagement Plan action plan. In addition, a representative from Homewood Health attending and completed a session with staff on Building Resilience.
- Communications is undertaking an educational campaign to help residents of Central Newfoundland better understand concepts such as diversion or closure of service, Health Hubs and Virtual ER.

RN Recruitment

- 12 experienced RNs have been recruited since January 1, 2022.
- 15 BN students (graduation for Spring 2022) have accepted positions with Central Health and are starting the first week in May.
- 2 RNs are currently being interviewed/offered by recruiters.

Recruitment

- Recruitment Steering Committee are holding regular meetings and have engaged in several recruitment initiatives:
 - Hired additional resources to connect with potential candidates
 - Developed promotional materials that can be shared throughout the country
 - Enhanced the working relationships with Community Advisory Committees and municipalities for promotion of Central Health Opportunities.

- Student placements have increased for May. BN students coming on site and will be looking at potential site visits or following up with educators to discuss CH.
- 7 Internationally Educated Nurses completing their clinical placements in Central Health beginning in August 2022.
- Central Health has engaged the assistance of travel teams of nurses to provide much needed relief and support of our Registered Nurses throughout the region. These travel nurses have started to arrive and work in our facilities and will continue to arrive over the next 12 months. The travel teams will be allocated around the region, based on nursing specialty skill set, and operational requirements.

System Improvements

- Green Bay Health scanning was implemented, March 2022, for records dated March 22, 2022 forward. This will mitigate record storage constraints at the site and increase availability of information across the continuum of care.
- The Employee Policy Review Group has been formed, membership consists of 18 employees from various program areas and sites. The goal of this group is to allow frontline employees to participate in and provide feedback concerning policy development at Central Health.
- The Planning and Performance Team have partnered with counterparts at NLCHI and the other 3 RHAs in procuring a common survey solution.
- Virtual Best Possible Medication History (BPMH) collection by pharmacy tech has expanded to now include BVP, TWI, and GBH sites. The plan is to further expand to all rural ERs throughout the organization.

Foundation Update

Aramark Healthcare Support

- Plans are underway for a Celebrity Chef Dinner/Gala with support from Aramark Healthcare. The event will take place on Wednesday October 26th in Gander and Thursday, October 27th in Grand Falls-Windsor.

Vice President – Medical Services

Pharmacy

- Continued expansion of the decentralized clinical pharmacy practice model which is underway at both regional health centers. Development of a thrombosis clinic for the region continues.
- Expansion of Best Possible Medication History (BPMH) collection to include virtual BPMH in rural sites. Twillingate and Baie Verte began on April 11th, expanded to include Springdale on April 25th. Consideration of this project for a Leading Practice in Central Health.
- JPM Pharmacy became the first hospital pharmacy in NL to receive NAPRA compliance in Sterile Compounding Standards in March 2022.

Laboratory

Walk-in or same day services now offered at all sites; appointments accommodated for sites where operations allow

- By the end of May 2022, all JPMRHC Pathology positions will be vacant, with implications for surgical services. Recruitment is ongoing. Interim supporting measures being explored:
 1. Expansion of Technologist duties to full scope within grossing room
 2. Possible rotational coverage and/or support by Pathologists based at CNRHC
 3. Telepathology use for case review and reporting

Medical Imaging

- A permanent full-time ultrasound technologist has been hired at JPMRHC to expand the program to a 5-technologist rotation, allowing optimal use of ultrasound technology for residents of Central Health
- Equipment upgrades at both JPMRHC and CNRHC for nuclear medicine and mammography expected in the coming months.
- Supply chain issues regarding Sulfur Colloid – a nuclear medicine material – which is used primarily for sentinel node biopsies in mastectomy/lumpectomy cases. There is a supply chain delay due to regulatory requirement changes in Canada. The latest update sees a resolution by July 25, 2022. We currently have enough supply to last until May 24. The supply issues are nationwide, and the vendor is working diligently to rectify the situation as quickly as possible.
- The provincial Medical Imaging Group has been working on key performance indicators for a provincial dashboard. The public will have access to the dashboard and statistical data from each region will be updated monthly.
- The Breast Screening Centre on Rowe Avenue in Gander achieved Canadian Association of Radiology Mammography Accreditation Program full accreditation for another three years. This is an amazing accomplishment achieved by a dedication to quality in equipment, reporting, positioning and patient satisfaction.

Cardiopulmonary and Rehabilitation Services

- Position for regional respiratory therapy to support virtual emergency services has been filled, will begin at the end of May
- Challenges anticipated over the summer with physiotherapy due to limited staff; attempting to manage waitlists before the summer arrives.
- Work ongoing regarding a Provincial Respiratory Care/COPD strategy

Medical Services:

Physician Positions (May 3, 2022)

*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	42	26.25	15.75	37.5%
GFW TOTAL PHYSICIANS	71.75	63.95	8	11.1%
GANDER TOTAL PHYSICIANS	64.1	53.7	10.4	16.2%
REGIONAL TOTAL FM	2	1.5	0.5	25.0%
TOTAL	178.05	143.9	34.15	19.2%

Summary of Gander

Sub-Specialty	CH Required # (FTEs)	Filled #	CH Deficit #
SPECIALTIES			
Anesthesiology	4	3	1
General IM	6	5	1
Opthamology	2	2	0
Neurology	0.6	0.6	
Diagnostic Imaging	4	3.6	0.4
Pathology	3	1	2
Pediatrics	3	3	
Psychiatry	1	1	
General Surgery	4	4	
Obstetrics/Gynecology	3	2	1
Orthopedics	4.5	4.5	
	36.1	29.7	6.4
FAMILY PRACTICE			
Community Family Medicine	14 (historical)	14	

Emergency	7	6	1
Hospitalist	3	1	2
Surgical Assist	2	2	
Psychiatry Clinical Associate	1	0	1
OBGYN Clinical Associate	1	1	
	28	24	4

Summary of GFW

Sub-Specialty	CH Required # (FTEs)	Filled #	CH Deficit #
SPECIALTIES			
Anesthesiology	4	3	1
General IM	6	5	1
Ophthalmology	1	1	
Otolaryngology	2	2	
Dermatology	1	0	1
Neurology	1	1	
Diagnostic Imaging	3	3	
Pathology	3	3	
Pediatrics	3	3	
Psychiatry	8	7	1
General Surgery	4	4	
Obstetrics/Gynecology	2.65	2.65	
Urology	2	2	
	40.65	36.65	4
FAMILY PRACTICE			
Community Family Medicine	21.8 (Historical)	20.8	
Emergency	5.5	5.5	
Hospitalist	2	0	2
	29.3	27.3	2

Summary of Regional Positions

Position	CH Required # (FTEs)	Filled #	CH Deficit #
Palliative Care	1	0.5	0.5
Care of the Elderly	1	1	
	2	1.5	0.5

Summary of Rural

Rural Location	CH Required # (FTEs)	Filled #	CH Deficit #
Baie Verte	4	1	3
Botwood	6	5	1
Buchans	1	1	0
Harbour Breton	3	0	3
Lewisporte	5	5	0
Springdale	5	2	3
St. Alban's	2	0	2
Brookfield	5	3	3
Fogo	2	1	1
Twillingate	6	4.25	1.75
Gambo	1	1	0
Glovertown	2	2	0
RURAL TOTAL PHYSICIANS	42	27.25	14.75