

2025-2026

Annual Report

Health and
Community Services





MESSAGE FROM THE MINISTER

I am pleased to present the 2025-26 Annual Performance Report for the Department of Health and Community Services. In accordance with the requirements of a Category 1 entity under the **Transparency and Accountability Act**, the report outlines the department's accomplishments in the categories of population health, recruitment and retention, and system transformation during the final year of the department's 2023-26 Strategic Plan. As Minister of Health and Community Services, I acknowledge that I am accountable for the preparation of this report, the accomplishments of specific goals and objectives, and any variations contained within.

In 2025-26, the department, in partnership with NL Health Services, took significant steps to ensure that everyone, no matter where they live, can access care when they need it. Accomplishments include:

- Opening the new modern Mental Health and Addictions Centre.
- Expanding access throughout the province to preventive breast cancer and colon cancer screening through MyHealthNL.
- Expanding vaccine and diabetes supports.
- Opening a new Urgent Care Centre to increase access to care for urgent non-life-threatening conditions and to reduce strain on emergency departments.
- Making significant progress toward an integrated provincial ambulance system.
- Developing the nurse practitioner funding pilot model to ensure that residents of this province who see a nurse practitioner for medically-necessary services can do so for free.

The Provincial Government will continue to take meaningful action to ensure better health care for all of us. I look forward to working with my colleagues in the department to improve access to family doctors and nurse practitioners, reduce travel barriers, support health care providers and provide mental health and addiction care throughout the province.

Sincerely,

A handwritten signature in black ink that reads "Joedy Wall".

Hon. Joedy Wall

Minister of Health and Community Services

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DEPARTMENTAL OVERVIEW

The Department of Health and Community Services is responsible for setting the overall strategic direction and priorities for health and community services throughout Newfoundland and Labrador.

The Department provides leadership, coordination, oversight, and support to the provincial health authority, Newfoundland and Labrador Health Services (or NL Health Services), as well as other organizations that deliver programs and services throughout the province. It works to ensure the quality, efficiency, and effectiveness of the health system.

The Department is also responsible for administering and funding insured medical and hospital services, dental and pharmaceutical programs, and education and training initiatives, including seats and bursaries for students in selected health professions and technical fields. These efforts support capacity-building and contribute to a stable, sustainable health workforce.

Mandate

The Department of Health and Community Services' mandate is to provide leadership and direction for effective and efficient delivery of health and community services.

Vision

The Department of Health and Community Services' vision is for individuals, families and communities to achieve optimal health and well-being.

Primary Clients

The Department works closely with NL Health Services to support the delivery of health and community services across the province. It also collaborates with a wide range of stakeholders, including educational institutions, unions, research centres, community-based organizations, Indigenous Governments and Organizations, municipalities, regulatory bodies, and various boards and commissions.

In addition, the Department engages in partnerships and joint initiatives with the federal government, other provincial and territorial governments, and a broad range of health-related organizations to advance shared priorities and strengthen the overall health system.

Lines of Business

The Department's main lines of business include:

1. Policy, Planning, Program Development and Support – The Department provides a leadership role for developing policies, legislation, and plans. This includes programs under legislative frameworks, such as communicable diseases, environmental health, the Hospital Insurance Plan, the Medical Care Plan (or MCP), and the Newfoundland and Labrador Prescription Drug Program. The Department is also responsible for legislation pertaining to the regulation of health professions. Finally, the Department is responsible for managing programs not under a legislative framework, including Indigenous health, chronic disease control, emergency preparedness, health care workforce planning, mental health and addiction services, and wellness and health promotion.
2. Monitoring and Reporting – The Department performs regular monitoring and evaluation of legislation, programs, plans and funding outcomes as an important mechanism to help maintain the effectiveness of the health and community services system.

3. Provincial Public Program and Services Administration – While the Department does not directly deliver most health care services, there are programs for which the Department provides direct supervision, control and service delivery. This includes the provision of bursaries and incentives to students in select training programs according to established criteria, distribution and storage of vaccines, grants for select community agencies, payment and remuneration for medical services, dental services, public drug programs, and other similar programs, records of immunizations, and the storage and distribution of the National Emergency Strategic Stockpile.

Additional information on the Department of Health and Community Services, its mandate and lines of business can be found at: <https://www.gov.nl.ca/hcs/departments/>.

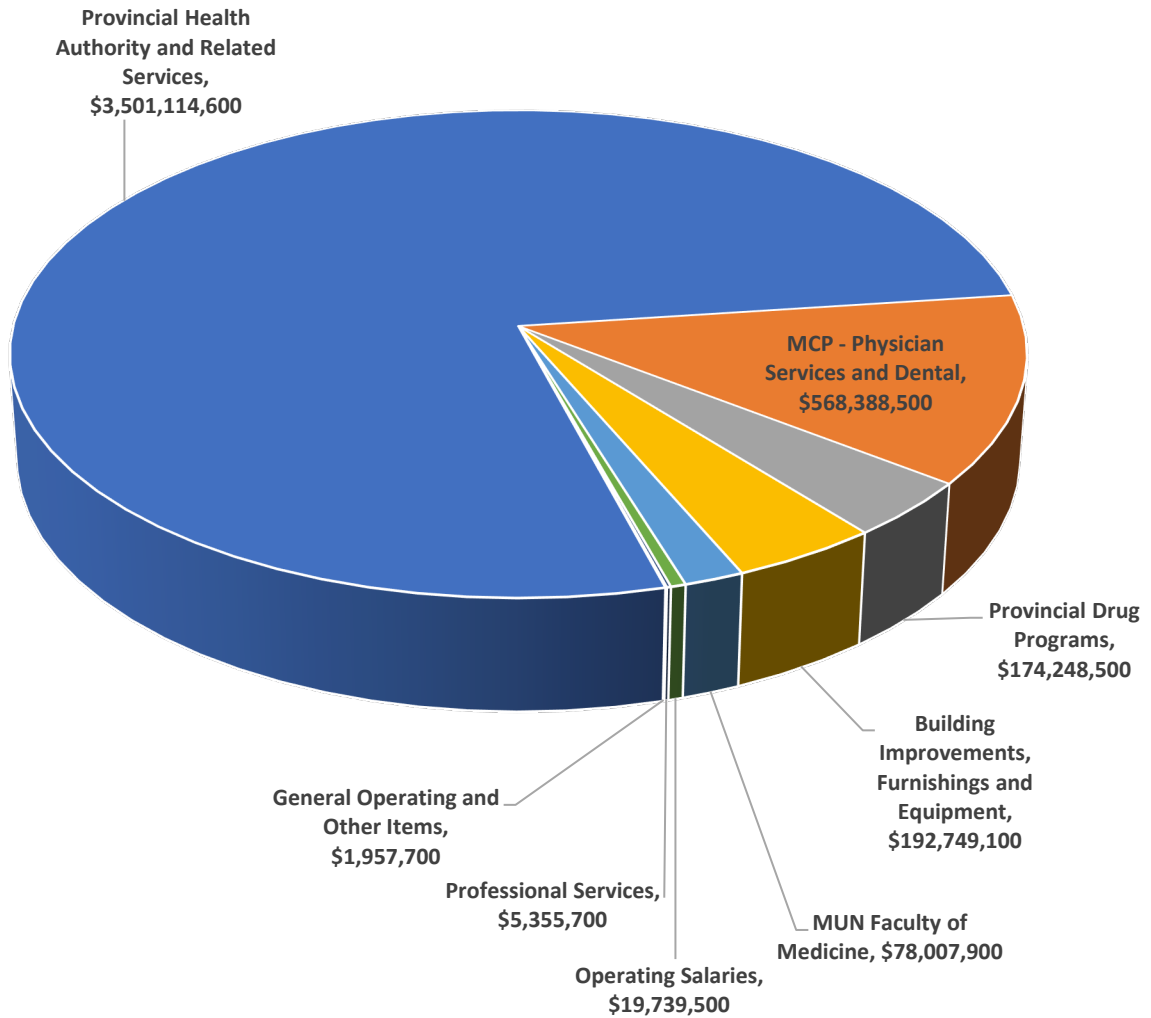
Staff and Budget

As of March 31, 2026, the Department employed 259 staff in four locations across the province: Confederation Building – West Block (177), Major's Path in St. John's (33), Grand Falls-Windsor (37), and Stephenville (12).

Division	# of Positions	Budget
Minister's Office	5	\$ 509,200
Executive Support	12	\$ 1,484,000
Communications	4	\$ 373,100
Financial Services	16	\$ 561,800
e-Health and Information Management	8	\$ 855,100
Administrative Support (e.g. office supplies, postage, copier charges)	n/a	\$ 897,200
MCP St. John's	10	\$ 485,800
MCP Grand Falls-Windsor	37	\$ 2,141,400
Audit Services	14	\$ 1,100,900
Pharmaceutical Services	21	\$ 1,654,400
NLPDP Assessment Office	12	\$ 612,900
Physician Services	16	\$ 1,558,200
Regional Services	13	\$ 981,100
Provincial Blood Coordinating Program	5	\$ 362,300
Infrastructure Management	1	\$ 110,700
Public Health	27	\$ 2,825,000
Mental Health and Addictions	14	\$ 1,093,800
Primary Health Care	5	\$ 422,500
Policy and Planning and Evaluation	12	\$ 1,325,800
Health Workforce Planning	6	\$ 547,900
Data Governance and Privacy	7	\$ 622,100
Air and Road Ambulance	9	\$ 1,132,600
Recruitment and Retention	5	\$ 518,500
Total	259	\$ 22,176,300

Health System Expenditures

Budget 2025-26 - \$4,541,561,500



HIGHLIGHTS AND PARTNERSHIPS

During 2025-26, the Department advanced a number of initiatives, including in partnership with federal/provincial/territorial committees and organizations, other Provincial Government departments and agencies, NL Health Services, municipalities, educational institutions and community-based groups. Below are some highlights of the work undertaken in 2025-26.

New Mental Health and Addictions Centre Opened in Newfoundland and Labrador

In April 2025, the new Mental Health and Addictions Centre opened in St. John's, replacing the 170-year-old Waterford Hospital. The Mental Health and Addictions Centre provides a modern environment for patients that is patient-centered and more conducive to recovery and healing, enabling patients to integrate into the community and live a life of meaning and wellness. The new 102-bed facility complements other mental health and addictions inpatient services throughout the province, including 14 acute care rooms at the Health Sciences Centre, six beds in Labrador, 24 beds in Central Newfoundland, and 20 beds in Western Newfoundland, allowing patients in all regions of the province to receive care closer to home.

MyHealthNL App Expanded to Include Self-Referral for Colon Cancer and Breast Cancer Screening

In May 2025, the Provincial Government and NL Health Services expanded services available on the MyHealthNL app with the addition of self-referral forms for breast cancer and colon cancer screening. Allowing residents to self-refer via the app means that Newfoundlanders and Labradorians have an additional way to easily access preventive care and can receive timely guidance and follow-up information.

Launched Digital App Library for Mental Health and Addictions Support

In June 2025, Newfoundland and Labrador became Canada's first province to launch a Mental Health and Addictions App Library to further increase access to supports and services for individuals experiencing mental health and addictions challenges.

The digital library includes apps that have passed the Mental Health Commission of Canada's Assessment Framework for Mental Health Apps. This helps to ensure access to safe, evidence-based, and equitable apps related to mental health, substance-use health, addictions, and wellness.

Improving Labour Mobility for Licensed Practical Nurses

In June 2025, the Government of Newfoundland and Labrador removed labour mobility exceptions to make it easier for licensed practical nurses from other parts of Canada to work in the province. Following a national review of training standards and discussions among provincial regulators, the Provincial Government implemented a policy change to remove labour mobility barriers with other Canadian provinces and territories for licensed practical nurses. Removing these barriers helps strengthen the province's health care workforce by allowing qualified licensed practical nurses to begin working in Newfoundland and Labrador more quickly, with fewer licensing delays or administrative barriers.

Launch of Continuous Glucose Monitoring Access for Individuals with Gestational Diabetes

In July 2025, the Provincial Government, in partnership with NL Health Services, launched the expanded continuous glucose monitoring program to include individuals with gestational diabetes mellitus. This followed a program expansion in May 2025 to include all individuals living with Type 1 diabetes who met the medical and income-testing criteria. This initiative supports improved health outcomes and aligns with the National Diabetes Framework.

New Family Care Team and Transitional Care Unit Announced in Corner Brook

In July 2025, the Provincial Government announced the establishment of a new Family Care Team at the Corner Brook Community Health Centre to provide primary care to residents in the region. The initiative supports improved access to primary care through interdisciplinary teams that include physicians, nurse practitioners, nurses, pharmacists, social workers, and other professionals. At the same time, the Provincial Government

announced a 15-bed transitional care unit and 30 long-term care beds. The project aims to improve patient flow through the health-care system, support seniors and individuals recovering from acute illness, and increase access to community-based care.

Construction Started on New Family Care Team Locations in Port aux Basques and Grand Falls-Windsor

In August 2025, construction began on new Family Care Team facilities in Port aux Basques and Grand Falls-Windsor to improve access to community-based health care services. Family Care Teams bring together a range of health professionals to provide collaborative care. These facilities will include treatment spaces for health professionals and visiting providers; patient exam, interview, consultation, education and treatment rooms; and counselling rooms.

Shingles Vaccine Expanded for All Residents Aged 50 and Over

Starting September 1, 2025, the shingles vaccine became available at no cost to all individuals aged 50 years and over. The expansion followed a phased approach, in which, as of June 1, 2025, the shingles vaccine was offered to residents aged 65 and over and immunocompromised residents between the ages of 50 and 64. The increased access to the shingles vaccine helps ensure improved health and well-being for more seniors and older adults in the province. It also helps ensure that high-risk populations receive protection against shingles and related health complications, reducing hospital visits, physician consultations, and pain management treatments.

Provincial Government Reached Milestone in Improving Provincial Ambulance System

In September 2025, a contract valued at \$561.7 million was awarded to Medavie Health NL to design, manage, and operate a new, integrated road and air ambulance service to March 31, 2035. The initiative aims to improve response times, enhance workforce training and recruitment, strengthen service coordination, and optimize resource use across Newfoundland and Labrador. Under the contract, Medavie Health NL is responsible for operational management of ambulance services, integrated dispatch

services, road ambulance infrastructure, community paramedicine expansion, and working with the Provincial Government and NL Health Services on the development of a province-wide helicopter emergency medical service.

New Family Care Teams for Bonne Bay-Port Saunders, Conception Bay South, and the South Coast of Labrador

In September 2025, new Family Care Teams for Bonne Bay-Port Saunders, Conception Bay South, and the South Coast of Labrador were announced. The teams are expected to increase access to primary health care for those communities and surrounding areas. The Bonne Bay-Port Saunders is operational and planning continues for the remaining sites.

New Urgent Care Centre Opened

In January 2026, a new Urgent Care Centre opened at Unity Health Centre, 28 Stavanger Drive, St. John's, expanding access to timely care for patients with urgent, non-life-threatening illnesses and injuries while helping to reduce pressure on emergency departments. Patients can receive care from a multidisciplinary team of nurses, physicians, nurse practitioners, social workers, and other health professionals for conditions such as minor injuries, skin infections, burns, respiratory illnesses, stomach-related illnesses, and urinary tract infections. Diagnostic and treatment services, including bloodwork, X-rays, casting, and stitches, are also available on site.

The facility also houses an ambulatory health hub, providing appointment-based outpatient services such as an eye clinic, cardiac diagnostic testing, and adult outpatient anticoagulation management. Together, these services improve access to community-based health care and strengthen the continuum of care for residents in the metro region.

Vision Care Benefits Increased for Long-Term Care and Community Support Services Clients

Effective January 1, 2026, the Provincial Government increased vision care benefits for clients receiving long-term care and community support services, helping improve

access to essential eye care for seniors and other eligible individuals. The enhanced benefits include \$100 for eye examinations, \$290 for single-vision eyeglasses, and \$350 for bifocal eyeglasses. The benefit increase aligns with similar enhancements previously introduced for income support recipients through the Department of Social Supports and Well-Being, ensuring greater consistency in vision care coverage across programs. This initiative reflects the Government's commitment to supporting seniors, particularly those with lower incomes, by improving access to health-related services that promote independence, well-being, and quality of life.

REPORT ON PERFORMANCE

In consideration of the strategic directions of the Provincial Government, as well as the Department's mandate and financial resources, the Department of Health and Community Services identified three key priorities for the 2023-26 planning cycle:

1. Population Health
2. Recruitment and Retention
3. System Transformation

The Department of Health and Community Services focused on targeted initiatives that help to improve health outcomes of all Newfoundlanders and Labradorians, while it continues to implement strategies to modernize the health care system and recruit and retain health professionals. This Annual Performance Report will focus on the reporting of results for the 2025-26 objective in each of these three priority areas.

Strategic Issue 1: Population Health

The Department of Health and Community Services remains dedicated to improving the health and well-being of individuals, families, and communities throughout Newfoundland and Labrador. The Department continues to advance initiatives that support a transformed health care system centered on prevention, early intervention, and equitable access to quality care.

In 2025-26, the Department advanced several key initiatives aimed at addressing the social determinants of health and reducing health inequities. These initiatives were guided by the goal and objective outlined below.

Goal

By March 31, 2026, the Department of Health and Community Services will have implemented initiatives that address the social determinants of health and improve population health and wellness outcomes for the people of Newfoundland and Labrador.

2025-26 Objective

By March 31, 2026, the Department of Health and Community Services will have continued to support initiatives aimed at improving population health and wellness.

Indicators:

Indicator	Results
Increased access to medical withdrawal management services	The Provincial Government continued to enhance access to medical withdrawal management services through investments in both community-based and inpatient care. Through the Provincial Alcohol Action Plan: Reducing Harms and Costs in Newfoundland and Labrador (2022-2027), home-based alcohol withdrawal management services were established to support individuals in their communities and improve access to care. Additional efforts included funding to enhance inpatient withdrawal management services at The Recovery Centre, as well as planning for new withdrawal management beds at Humberwood Treatment Centre and the future inpatient addictions treatment facility in Labrador.
Began establishing sober living recovery homes	In March 2026, the Government of Newfoundland and Labrador approved \$1.1 million in funding for five organizations to participate in the Sober Living Home Pilot Project. The pilot will

Indicator	Results
	provide substance-free, supportive living environments for individuals who require additional structure and support to maintain their recovery and facilitate reintegration into community life.
Expanded access to health care services and supports for residents of the province	Three Family Care Teams became fully operational in 2025-26 for a total of 23 Family Care Teams operational in the Health Zones. The Health Accord NL recommended a total of approximately 35 Family Care Teams. The Provincial Government's current focus is on strengthening the existing teams.
Reduced wait times for substance use and addictions inpatient treatment	While there was no direct decrease in wait times, there was a reduction in the waitlist by filling short-notice beds to reduce vacancies. Due to the increase in referrals for service, no noticeable wait time reduction has been seen. Efforts to reduce wait times for publicly funded inpatient addictions treatment continued through coordinated admissions and waitlist management processes across provincial treatment centres. Collaboration between The Recovery Centre, Humberwood Treatment Centre, and The Grace Centre maximized treatment capacity by filling short-notice vacancies and minimizing vacant beds.

Indicator	Results
Drafted Health in All Policies Framework	The Department completed engagement with other departments to inform the drafting of a Health in All Policies Framework. In addition, the Department has drafted a health and well-being lens for policy development; provided education to staff from the Department of Social Supports and Well-Being on topics such as the health and well-being lens, Health in All Policies, and social determinants of health; and developed a draft of a health equity impact assessment tool.
Completed the Population Health Assessment analysis	The Department has completed its analysis and is finalizing the Population Health Assessment report.
Increased rates for community-based service providers	A \$2 wage increase for Mental Health support workers was introduced in January 2026, bringing the hourly rate from \$17.05 to \$19.05. Please see the Department of Seniors' Annual Report for additional updates related to community-based service providers.
Increased options for community-based continuing care	During the period from April 1, 2025 to March 31, 2026, there were approximately 1,690 active Strongest Family Institute clients, with a monthly average of 301 visits. There was an

Indicator	Results
	average of 1,240 Doorways visits per month between April 2025 and March 2026. Mental health services delivered through 811 recorded 15,004 calls between April 2025 and February 2026. 66.9 per cent of all 811 calls from April 2025 to March 2026 were returned within 30 minutes, based on statistics provided directly by 811/Fonemed. In addition, the number of youth Doorways locations in schools reached 31 by March 31, 2026, increasing the options for youth to access services While the number of Doorways locations in correctional facilities gradually declined, with Correctional Health bringing counselling in-house by hiring social workers, the number of school locations have increased substantially. Please see the Department of Seniors' Annual Report for additional updates related to community-based continuing care.
Began the establishment of a Provincial Human Papillomavirus Screening (HPV) Program	The Cervical Screening Initiatives Program of the Provincial Cancer Care Program partnered with the Lab Medicine

Indicator	Results
	Program, gynecologists, primary care providers and the Department of Health and Community Services to plan for phased-in implementation of HPV screening in cervical cancer screening. Phase one would include HPV primary screening for individuals 50-69 years of age, while phase two would include everyone starting at age 25. Implementation of HPV primary screening will change screening intervals to every five years beginning at age 25 as opposed to every three years beginning at age 21 for cytology (pap) screening. An Implementation Committee was established and responsible for oversight of planning for HPV primary screening implementation. Two working groups were also established: • The Laboratory Protocols Working Group was responsible for the development of laboratory processes and human resource requirements; and, • The Follow-up Guidelines Working Group developed clinical pathways and guidelines.

Indicator	Results
	The Implementation Committee and Working Groups had representation from partners throughout the province. Cervical Screening Initiatives worked on an engagement and education plan for health care professionals and the public. This work included development and distribution of education materials, materials for social media opportunities, website updates, and a strategy for engagement with key partners such as Family Care Teams and primary care providers. Any cervical screening data up to March 31, 2026, would encompass HPV testing as a reflex (secondary test) as per the clinical guidelines at that time.

2023-2026 Goal Indicators

From 2023-2026, the Department made significant advancements on its goal indicators, outlined below.

Indicators	Results
Increased early intervention programs for children and youth (e.g. Strongest Families)	The Department increased early intervention through funding the development of new and existing early intervention programs. There was an increase in the number of Doorways locations in schools from 12 to 31. There were 4,654 new referrals to the Strongest Families Institute.
Increased supports to help seniors age in place	The Aging Well at Home Grant was introduced in 2024-25. Applications for the program opened in July 2024 and closed on February 28, 2025. In January 2025, the financial eligibility criteria for the grant expanded, resulting in a significant increase in the number of applications submitted. There were 6,958 grants approved for a total of \$2.8 million.
Increased options for adult day programming	The Adult Day Program, established in 2023, provides out-of-home respite and support with social and recreation for individuals with cognitive and physical impairments. While the program did not expand in 2024-25, an evaluation of the program was conducted from April 2024 to March 2025 to determine success and options for expansion in other personal care homes across the province.

Increased access to mental health and addictions services	Access to mental health and addictions services was increased through: • Increasing the number of Doorways locations in schools from 12 to 31; • Funding five community-based organizations to begin planning for sober living homes for individuals who require structure and support to maintain recovery and prepare them to successfully reintegrate back into the community following inpatient substance use/addictions treatment; • Opioid dependence treatment (ODT) hub expansion to provide services for alcohol use disorder; • Increased staffing at The Recovery Centre to increase capacity to admit people, and funding to support bed expansion at Humberwood Addictions Treatment Centre for inpatient withdrawal management; • Expanded provincial virtual mental health supports and outreach postvention services for survivors of suicide loss; • Addition of another Provincial Mental Health and Addictions Systems Navigator position (now there are two full-time navigators); and,
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	• Creation of five new housing liaison support worker positions for Assertive Community Treatment (ACT) teams and Flexible Assertive Community Treatment (FACT) teams – one per health zone to support clients with finding and securing stable housing options.
Increased access to Newfoundland and Labrador Prescription Drug Program (NLPDP)	Newfoundland and Labrador signed the National Strategy for Drugs for Rare Diseases agreement in November 2024 which broadened access to new pharmaceuticals for rare diseases. To help improve access to the drugs under this Strategy, the financial eligibility criteria of the NLPDP Assurance Plan was modified. The Assurance Plan maximum allowable net family income threshold of \$150,000 annually has been removed for individuals seeking coverage for any drug therapy that falls under this National Strategy.
Initiated the development of provincial standards for six of the Public Health Core Programs by 50 per cent	Draft standards for all six Public Health Core Programs have been developed. Indicators for the standards will be developed over the next year.
Completed a provincial population health assessment that will inform a five-year public health plan	The Department has completed its analysis and is finalizing the Population Health Assessment report.
Continued a Health in All Policies approach to address the social	Work underway in the Department in drafting tools to aid in health equity

determinants of health through government policies that guide actions beyond the health sector	impact assessments. The Department completed engagement with other departments to inform the drafting of a Health in All Policies Framework.
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Strategic Issue 2: Recruitment and Retention

The Department of Health and Community Services continues to prioritize the recruitment and retention of health care professionals to ensure a strong, sustainable workforce capable of meeting the evolving health care needs of Newfoundlanders and Labradorians. Recognizing the importance of building local capacity, the Department has implemented a range of initiatives to support students, attract new professionals, and retain existing staff across the health system.

In 2025-26, the Department advanced several key initiatives aimed at addressing the recruitment and retention gaps. These initiatives were guided by the goal and objective outlined below.

Goal

By March 31, 2026, the Department of Health and Community Services will have continued to implement policies and programs that directly support and improve recruitment and retention initiatives that lead to a stable workforce to ensure we are globally competitive.

2025-26 Objective

By March 31, 2026, the Department of Health and Community Services will have implemented initiatives that recruit and retain an increased number of health care professionals for the provision of health care services and contribute to a robust and stable workforce.

Indicator	Results
Continued to implement key health workforce strategies that support the Health Human Resources Framework	The Department released the Provincial Health Human Resources Plan. The Department funded the creation of Work In Health NL, a dedicated office

	within NL Health Services that is responsible for strategic recruitment and retention of difficult-to-fill and international health professionals. The Nursing Core Staffing Review is aimed at achieving deliverables, such as recommendations to optimize nursing staffing levels and improve how care is delivered in the province. Five medical school seats for Newfoundland and Labrador students at Memorial University were added in September 2025, bringing the total number of seats to 90 for students from the province.
Updated Health Workforce Modelling Tool and projections for selected health professional groups	The Department continues to work with NL Health Services to conduct workforce projections for health professions based upon the modelling tool developed through the Health Human Resources Plan.
Continued to build a minimum data set with key indicators for health workforce planning	NL Health Services continues to send workforce data, including current employees, vacancies, new hires, and separations to create a Minimum Data Set. The Minimum Data Set allows up-to-date reporting and use in workforce planning activities to inform recruitment

	and retention strategies and workforce planning. Key Performance Indicators were developed by the Department and NL Health Services to monitor and track success of recruitment and retention initiatives. Implementation of these indicators is underway.
Continued to develop and implement strategies that build quality workplaces and support retention	The Department implemented a Community Recruitment and Retention Program that allowed municipalities, Indigenous Governments and Organizations, and groups of eligible applicants to submit proposals for funding up to \$15,000 for activities that support recruitment and retention of health professionals. Work began on a Nursing Core Staffing Review to conduct detailed analysis of client, staffing, and organizational factors that contribute to the workload of nurse practitioners, registered nurses, licensed practical nurses and personal care attendants in select NL Health Services locations across the province.
Continued to utilize and build recruitment initiatives to target difficult-to-fill positions	The Provincial Government, through NL Health Services, continues to offer competitive incentives for difficult-to-fill positions. Examples include bursaries,

	signing bonuses, Come Home incentives, family practice incentives, and Family Care Team incentives. Approximately 300 internationally educated nurses were successfully recruited as registered nurses through recruitment missions to India and Dubai. These nurses are working mostly in locations outside St. John's.
Continued to engage and support students in health education programs	NL Health Services has ongoing engagement with health professional students inclusive of a dedicated recruiter located at Memorial University's Faculty of Medicine. NL Health Services successfully recruited 288 Bachelor of Science in Nursing students who graduated in the province in spring 2026, which equates to 93 per cent. Recruitment continues beyond March 31, 2026, for those graduating. The Department and NL Health Services continue to utilize bursaries and other incentives to support students and to target difficult-to-fill positions. New initiatives funded by the Department in 2025-26 include:

	- Enhanced bursaries of \$50,000 for students completing years four and five of the Doctor of Psychology program with a three-year return-in-service; - Enhanced bursaries of \$50,000 for the 2026 and 2027 graduates of Memorial University's Doctor of Pharmacy program; and, - Tuition relief for paramedicine students completing the Primary Care Paramedic and Advanced Care Paramedic Programs at College of the North Atlantic and Keyin College.
Continued to engage high school students to promote health professions as careers of choice	The Department, in collaboration with NL Health Services, post-secondary institutions, unions, and the Department of Education and Early Childhood Development continued in-person and virtual engagement with high school students across the province to inform and educate about careers in health care programs. 42 schools were visited in April and November of 2025 with many professionals participating, including nuclear medicine technologists, laboratory assistants and technologists, registered nurses, licensed practical nurses, cardiology technicians,

	ultrasound technologists, dietitians, paramedics, social workers and occupational therapists.
Formalized seat purchases for select out-of-province health education programs	In March 2026, the Province signed a five-year agreement with Dalhousie in Nova Scotia to purchase additional seats for various health profession education programs for Newfoundland and Labrador students for 2026-27 to 2030-31.

2023-2026 Goal Indicators

From 2023-2026, the Department made significant advancements on its goal indicators, outlined below.

Indicators	Results
Increased number of seats and graduates in post-secondary health educational programs	Between 2023 and 2026, ten additional seats were added to Memorial University Medical Program, five seats were added for internationally trained physicians in Memorial's Family Medicine Residency Program beginning in 2023, and two seats were added for internationally trained physicians in Memorial's Internal Medicine Residency Program beginning in 2025. In addition, in 2023, seats in the Nurse Practitioner Program doubled. The Department also purchased additional academic seats at Dalhousie University for Newfoundland and Labrador students.

Strengthened the practice ready assessment (PRA) program for physicians	There is ongoing collaboration with the Department, NL Health Services, the College of Physicians and Surgeons of Newfoundland and Labrador, Memorial University's Faculty of Medicine and Practice Ready Assessment-NL (PRA-NL) to strengthen the pathways to licensure and practice for internationally trained physicians through the PRA-NL program.
Implemented clinical skills and training assessment program for physicians	This goal indicator has not been implemented, as the current priority is to strengthen the pathways to licensure and practice for internationally trained physicians through the PRA-NL program.
Continued work with health profession regulatory bodies to streamline licensing processes	Two categories of physician registration were created, Clinical Assistant and Associate, which will help enhance the pool of physicians available for licensure in the province. In addition, the College of Physicians and Surgeons of Newfoundland and Labrador created a pathway for internationally trained practitioners who are trained and licensed in select countries: • <u>Family Medicine</u>: Jurisdictions approved by the College of Family Physician of Canada include Ireland, United Kingdom, United States and Australia.

	• <u>Specialists</u>: Jurisdictions approved by the Royal College of Physicians and Surgeons Canada include Ireland, United Kingdom, United States, Australia, New Zealand, South Africa. The College of Registered Nurses of Newfoundland and Labrador also launched an expedited pathway for applicants who have been educated in jurisdictions where the nursing education and regulatory framework align with that of Canada.
Continued work with Newfoundland and Labrador Health Services to establish a strategy to build quality workplaces	The Department released the province's first long-term Health Human Resources Plan, including workforce projections and recommendations focused on retention, recruitment, and workforce sustainability. In addition, work began on a Nursing Core Staffing Review to assess nursing workload and staffing requirements in selected areas of the province.
Implemented national and international recruitment initiatives	Approximately 300 internationally educated nurses were recruited as registered nurses through recruitment missions to India and Dubai. These nurses are working mostly in locations outside St. John's. In addition, since 2024, 60 licensed practical nurses from

	Jamaica have been recruited by NL Health Services.
Reduced number of vacancies in Newfoundland and Labrador Health Services	Registered nurse vacancies in NL Health Services are down from a high of 11.9 per cent in April 2023 to 4.8 per cent in March 2026. Licensed practical nurse vacancies in NL Health Services are down from 14.7 per cent in April 2023 to 5.0 per cent in March 2026.
Increased support to communities for recruitment and retention	The Community Recruitment and Retention Incentive Program launched in February 2025, which allowed municipalities, Indigenous Governments and Organizations, and groups of eligible applicants to submit applications for funding to assist with actions that support recruitment and retention of health professionals. In addition, a community toolkit was launched in January 2025, designed to provide information and resources for creating welcoming communities for health care professionals.
Implemented incentives for health care professionals based on identified need.	A variety of recruitment and retention incentives are available for a number of health professional occupations, inclusive of Come Home incentives, signing bonuses, bursaries, and more.

Strategic Issue 3: System Transformation

Transforming the health care system remains critical to meeting the evolving needs of individuals and communities throughout Newfoundland and Labrador. The Department of Health and Community Services continues to focus on creating a more integrated, responsive, and sustainable system that ensures people receive the right care, at the right time, from the right provider. Maintaining an appropriate balance across community and acute care, rural and urban services, and virtual and in-person delivery remains a key priority.

In 2025-26, the Department advanced several key initiatives aimed at advancing the health care system. These initiatives were guided by the goal and objective outlined below.

Goal

By March 31, 2026, the Department of Health and Community Services will have improved health care delivery for the people of Newfoundland and Labrador by providing a more balanced and efficient health care system.

2025-26 Objective

By March 31, 2026, the Department of Health and Community Services will have continued to implement initiatives that improve health care delivery and rebalance the health care system.

Indicators:

Indicators	Results
Continued development of Health Information System Project	Work completed to launch and operationalize the Health Information System, commonly referred to as CorCare. This includes:

	• Implementation of a learning management system to support training of staff; • Recruitment of trainers to train people on how to navigate the system; and • Completed trial runs and rehearsals in preparation for it going live on April 25, 2026.
Increased number of patients connected to a Family Care Team	As of March 31, 2026, 91,674 patients were connected to Family Care Teams, which is a 16.71 per cent increase from 78,550 on March 31, 2025. Of this number, 62,512 patients are attached. In 2025, the Department moved to reporting attachment, which means that an individual has a most responsible provider such as a family physician or nurse practitioner to provide longitudinal primary care.
Increased access to virtual care, including Virtual Primary Health Care, Virtual Emergency Care, and Virtual Urgent Care services	Teladoc provides access to virtual primary care for residents of the province without a family physician. 32,379 appointments were made between April 2025 and March 2026. This in an increase of 37.36 per cent from from 23,500 completed between April 2024 and March 2025. Teladoc also provides virtual emergency rooms and virtual urgent care services throughout the province. From April 2025

	to March 2026, a total of 8,073 virtual emergency room encounters were recorded. This is an increase of 103.97 per cent from 3,958 in 2024-25. There was also an 82.12 per cent increase in virtual urgent care encounters, with a total of 6,161 recorded from April 2025 to March 2026, compared to 3,383 encounters in 2024-25. 811 Healthline has enhanced access to primary care for residents of the province through virtual nurse practitioner appointments, which resulted in 86,783 encounters in 2025-26, with 96 per cent of these encounters completed by a nurse practitioner. This is an increase of 40.2 per cent from 2024-2025 (61,900 encounters).
Increased number of accounts on MyHealthNL	In the 2025-26 fiscal year, there were 46,115 new accounts. Since the launch of MyHealthNL in 2024 and up to March 31, 2026, 171,021 individuals in the province have access to MyHealthNL.
Expanded the Comprehensive Respiratory Care Program	As of March 31, 2026, the Comprehensive Respiratory Care Education Clinic noted the following service expansions: <u>INSPIRED Program:</u> • 159 new patients with Chronic Obstructive Pulmonary Disease

	(COPD) who were frequent health system users, signed up for the 12-month INSPIRED Program from April 1, 2025, to March 31, 2026. This is an increase from 119 patients the previous year, representing a 34 per cent increase in volume; • 70 per cent of eligible participants had immunization facilitated for influenza, COVID-19, and pneumococcal disease; • 57 per cent were prescribed an Action Plan that provides education on how to identify and manage acute COPD; • 31 per cent of patients who used inhalers were identified as making one or more inhaler use errors, and the identified errors were corrected. • 65 per cent of eligible participants created an Advanced Health Care Directive; • Of the 119 participants who completed 12 months of the INSPIRED Program in this fiscal year, there were demonstrated outcomes of: ○ 202 fewer emergency room visits; ○ 76 fewer hospital admissions; and ○ 592 fewer bed days; and, • Predicted COPD admission cost savings from the INSPIRED Program are \$703,350.00 for the period of April
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	1, 2025, to March 31, 2026. This is based on an average cost of \$9,254.60 per COPD-related hospital admission and 76 fewer hospital admissions over the 12-month period. This is an improvement from the previous fiscal year, which saw 52 fewer hospital admissions and savings of \$481,240.00, demonstrating a \$222,110.00 additional cost deferral in the latest fiscal year. <u>Comprehensive Respiratory Care Education Clinic:</u> • 1,170 patients were seen by a respiratory therapist in a one-time, in-clinic appointment for self-management tools, respiratory assessments, and education (e.g., inhaler review). This is a 49 per cent increase from the previous fiscal year, when 784 patients were seen; • 894 of those patients completed spirometry, which allows providers to assess lung function and diagnose lung disease (e.g., COPD and asthma). This is a 43 per cent increase from 625 patients in the previous fiscal year; and, • 728 patients were removed from the acute care spirometry waiting list,
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	which represents a 50 per cent increase from 487 in the previous fiscal year. Patients are being seen across all zones (810 in Eastern Urban, 181 in Eastern Rural, 92 in Central, two in Western, and 85 in Labrador-Grenfell). <u>Pulmonary Rehabilitation Program:</u> • Pulmonary Rehab is an integral component of COPD care; • The 8-week program aims to reduce shortness of breath, improve endurance and physical conditioning, and improve quality of life; and, • 56 new patients enrolled in the 8-week pulmonary rehab program during the fiscal year. This is up from the previous fiscal year by 14 new enrollments. <u>Neuromuscular Respiratory Care:</u> • The Comprehensive Respiratory Care Program expanded services to provide support for a broader range of neuromuscular diseases. Seven patients were managed in their home setting with linkages to subspecialty care teams.
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Expanded Integrated Youth Services	The Department and partners continued to expand integrated youth services. For example, Choices for Youth opened a new integrated youth services hub in the Western Zone, and has plans to expand to Labrador-Grenfell Zone, Central Zone and Eastern Rural Zone. In addition, Doorways in schools expanded to a total of 31 Doorways locations, as of March 31, 2026.
Opened two new urgent care centres (UCC)	One urgent care centre opened on Stavanger Drive (UCC East) in January 2026, and recruitment continued for the providers required to operationalize the UCC West (850 Topsail Road, Mount Pearl). In addition, the Provincial Government has requested NL Health Services begin planning for the UCC CBS.
Awarded the Integrated Ambulance Service contract, with the selected proponent commencing management of all integrated air, ground and dispatch operations for the next ten years	The contract was awarded to Medavie Health NL, which allowed NL Health Services to enter into an agreement for Integrated Emergency Health Services in September 2025. In 2025-26, Medavie hired local management resources to oversee ground, air ambulance and dispatch operations, consolidate sub-contracting, commence reporting. Medavie is on target to implement

	improved aviation services by the end of the transition period in February 2027.
Increased the amount of the fertility subsidy to support more individuals to access fertility services	The fertility subsidy was initially \$5,000 per cycle up to a maximum of three cycles. The provincial Budget 2025 approved an additional \$3,250,000 to increase the IVF/Fertility Subsidy Program up to \$20,000 which could be used over a person's lifetime. This increase took effect March 18, 2025.
Improved access to Cardiovascular and Stroke Care	Continuous improvements are being made to the delivery of equitable, timely, and quality cardiovascular and stroke care across Newfoundland and Labrador. Examples include: • A fourth cardiac catheterization (cath) room opened on October 6, 2025, which has increased patient volumes; • Radial lounge recovery space opened February 2026 to support cath lab patients whose procedures are performed via the radial artery (opposed to femoral artery); • Heart Force One (HF1) continues to transport low acuity cardiac patients to the cath lab via a same-day fly in/fly out service; • Two protected inpatient beds weekly established to admit cardiac patients not suitable for HF1;

	• Increased access to cardiac surgery through full complement of cardiac surgery team (surgeons, perfusionists, registered nurse first assistant); realignment of operating room scheduling; increased operating room capacity; • Travel clinics are occurring for cardiology and vascular; • Endovascular Thrombectomy (EVT) implemented province-wide effective January 2025; • The Province's use of clot-busting medications (thrombolytics) for appropriate stroke patients continued to attain national benchmark; • Clinical pathways have been established to support timely access to specialty care (e.g. ST-Elevation Myocardial Infarction (STEMI) alert, Code Stroke); • Cardiovascular and Stroke Navigators were put in place in December 2025 to support continuity of care for patients who have had cardiac surgery, vascular surgery and specific stroke treatments, including Endovascular Treatment and/or thrombolytics;
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	• The partnership with March of Dimes Canada through the After Stroke Program was extended; and, • There is an ongoing partnership with the Heart and Stroke Foundation, including continued funding for the FAST (face, arms, speech, time) campaign.
Reduced wait times for MRI appointments across the province	Two new MRI scanners are now operational at the Unity Health Centre on Stavanger Drive, bringing the provincial total to eight operational MRI scanners. A commitment was made to add four additional MRI scanners in the province, starting with one scanner in Happy Valley-Goose Bay and another in Grand Falls-Windsor in an effort to reduce wait times for MRI appointments. As of March 2026, there were 5,239 patients waiting for non-urgent MRI appointments, and the wait time (90th percentile) is 125 days in Western Zone, 370 days in Central Zone, and 466 days in Eastern Zone. CorCare implementation modified the methodology used to calculate MRI wait times. As a result, current MRI wait-time data may not be directly comparable with data reported prior to implementation.

Expanded access to Mobile Primary Health Care	Mobile Primary Health Care has not been expanded, but mobile primary health care outreach continues to be part of the primary health care service delivery model across NL Health Services Zones, ranging from mobile units operating in the Easter Urban Zone to outreach and pop-up clinics within Family Care Team sites and other locations in rural zones. NL Health Services reports on the various types of mobile and outreach primary health care activities which occur within all Zones. Activities range from outreach in the downtown urban core, health promotion activities, to sexually transmitted and blood born infections clinics in Labrador. NL Health Services acquired two recreational vehicles in 2024 to retrofit for mobile primary health care. Discussions are ongoing between Nunatsiavut Government, Innu First Nations, departmental officials and NL Health Services on viability and next steps for using these recreational vehicles to deliver mobile primary health care in Labrador, which is a model that emerged as an option through co-design and engagement.
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Implemented a Child Youth Community Health model	Foundational work has been completed to advance the Child and Youth Community Health (CYCH) model, which is a system-wide, shared initiative involving multiple government departments (Health and Community Services, Education and Early Childhood Development, Justice and Public Safety and Social Supports and Well-Being) and organizations (Conseil scolaire francophone provincial and NL Health Services). The CYCH model is premised on strong interorganizational collaboration, requiring these partners to align priorities, governance structures and service delivery approaches to transform how services are organized and delivered to support child/youth outcomes. Key achievements to date include: • the public announcement of the CYCH model on September 5, 2025; • the establishment of integrated executive-level governance; • a shared vision, scope and integrated approach; and • the development of draft frameworks and supporting documentation for the model's five core components. The CYCH model is now transitioning from design to engagement and
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	implementation planning. Engagement activities have been ongoing and will be expanded to help refine the model, support frameworks, and inform change management and coordinated implementation across partners. Evaluation will occur concurrently with engagement and implementation activities, and the model will be continuously refined to incorporate emerging evidence, best practices and insights gained through ongoing quality improvement efforts.
Increased access to PET Scans	In 2024, two additional PET-CT scanners were announced for hospitals in the province. A PET-CT became operational at the Health Sciences Center in April 2025 to complement the existing PET-CT at that site (for a total of two PET-CTs now operational at the Health Sciences Centre). The second newly announced PET-CT is expected to be installed at the Western Memorial Regional Hospital once NL Health Services successfully completes the clinical trial requirements and stringent national standards set by the Canadian Nuclear Safety Commission and Health Canada, resulting in a drug establishment license.
Decreased wait times for Autism Diagnosis	Wait times for autism diagnosis have remained consistent as increases in

	service capacity have generally kept pace with growing demand for assessments. Ongoing efforts are focused on improving access, enhancing assessment pathways, and ensuring timely diagnoses for children and families. The Department is actively working with federal partners and NL Health Services to address concerns related to accessing autism diagnostic assessments, with a focus on improving timeliness, consistency and service availability.
Increased access to services provided by Sexual Assault Nurse Examiners	The Sexual Assault Nurse Examiner (SANE) Program is a team of nurses who provide medical and forensic assessment of sexual assault victims. The Provincial SANE Coordinator with NL Health Services provides training, mentorship, and continuing education to nurse examiners across the province. These nurses provide critical care and support services for individuals who have been sexually assaulted. NL Health Services trained an additional 20 SANEs in the 2025-26 fiscal year which increased the overall number of SANEs provincially from 98 to 110. This increase in 20 was offset by eight staffing turnovers and retirements. SANEs are located in 32 communities across the

	province which includes the addition of five communities over the past year (Carbonear, Baie Verte, Forteau, Cartwright, St. Lewis). Work is underway to develop an agreement to expand the collection and storage of anonymous forensic kits provincewide, which is currently available in St. John's and Corner Brook.
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2023-2026 Goal Indicators

From 2023-2026, the Department made significant advancements on its goal indicators, outlined below.

Indicators	Results
Increased number of Family Care Teams	Family Care Teams were increased. As of March 31, 2026, there were 23 Family Care Teams operationalized. This is up from six Family Care Teams in March 2023.
Reduced number of patients waiting to be attached on the provincial patient Registry (Patient Connect NL)	The number of patients waiting to be attached on Patient Connect NL has increased over time from approximately 50,900 in January 2024 to approximately 66,800 as of March 31, 2026. A reason for this increase is that as of November 2023, in order to access services through Teladoc, individuals had to sign up through Patient Connect first. Teladoc provides virtual primary care for residents of the province without a family physician.

	The increase is also as a result of new individuals no longer having access to a primary care provider because their primary care provider may have closed their practice, moved or retired. As well, while the number of people waiting to be attached increased, the number of individuals actually attached to a Family Care Team increased from 41,318 to 62,512 during the period of April 30, 2024, to March 31, 2026.
Decreased usage of non-emergent visits to emergency departments	The Department undertook efforts to divert non-emergent visits away from emergency departments, such as through opening a new urgent care center and continuing to support implementation of Family Care Teams. In addition, a provincial Virtual Care Program was established to increase capacity of primary and emergency health care delivery. This program was also expanded to urgent care and emergency care. The 811 HealthLine also allows individuals to speak to a registered nurse 24 hours a day, seven days a week. Nurse practitioner appointments are also available by video and phone.

	Through these initiatives, there was a 14 per cent decrease in the number of non-urgent emergency department visits in 2025-26 compared to the previous fiscal year.
Increased access to primary care through implementation of a virtual care strategy	811 Healthline has enhanced access to primary care for residents of the province through virtual nurse practitioner appointments. Teladoc provides access to virtual primary care for residents of the province without a family physician.
Increased health care access points through professions with an expanded scope of practice, including pharmacists and nurses	Family Care Teams were established to increase access to health care through professions with an expanded scope of practice.
Reduced wait times for surgery	From 2023 to 2026, NL Health Services has implemented several key recommendations of the Provincial Surgical Task Force. Access to joint replacement surgeries was enhanced through initiatives, such as travelling orthopedic surgical teams, same-day surgery programs, and short-stay orthopedic pilot. As a result, the number of patients waiting longer than the benchmark decreased by 24 per cent for hip replacements and 20 per cent for knee replacements compared to the prior fiscal year.

	In cardiac surgery, NL Health Services recruited and retained a full complement of surgeons and highly specialized surgical staff increasing surgical capacity. By March 2026, 93 per cent of isolated coronary artery bypass graft (CABG) surgeries were completed within the national benchmark, up from 68 per cent in March 2024. Other initiatives included implementation of centralized intake for joint replacement and cataracts; increasing operating room utilization and optimizing hospital bed capacity.
Implemented a new Health Information System across the province	Work was done to operationalize a new health information system, referred to as CorCare, which was implemented and launched through NL Health Services. In preparation for the launch on April 25, 2026, trainers were hired to train and familiarize people with the new system. A trial run took place in February 2026 to ensure the system was fully functional in time for the launch.
Consolidated ambulance services	Ground ambulance services and provincial dispatch were consolidated under NL Health Services in June 2024. Integrated Emergency Health Services, including air ambulance operations, was established under a single management

	contract with Medavie Health NL in September 2025.
Implemented a Provincial Data Governance Model	Work was initiated for this indicator; however, given other priorities for the Department of Health and Community Services, this project was paused.
Increased access to virtual care for underserved populations	Increased access to virtual care across the province by providing virtual primary care to residents without a primary care provider and expanding virtual care options to include virtual urgent care and virtual emergency care across the province to provide equitable access to care for underserved populations.
Increased access to community-based supports and care services.	Community-based care options, including urgent care clinics, expanded primary care services, and mobile clinics are being promoted to offer more accessible and affordable alternatives to emergency departments.

OPPORTUNITIES AND CHALLENGES

The Department of Health and Community Services has significant opportunities to improve health outcomes and strengthen the health system through continued government investment. Planned investments in diagnostic equipment, acute care capacity, urgent care services, mental health and addictions supports, and public health initiatives provide opportunities to improve access to care, reduce wait times, and enhance service delivery across the province. Recruitment and retention initiatives, including expanded education and training opportunities, targeted workforce strategies, and reduced reliance on agency staffing, can help stabilize the health workforce and support the delivery of quality care. The Department is also well positioned to advance health equity through greater engagement with Indigenous communities, enhanced regional input into decision-making, expanded vaccine programs, and increased use of health data to support evidence-based planning and identify emerging health needs.

At the same time, the Department faces several ongoing challenges that may impact progress. Health workforce shortages and high vacancy rates across key professions continue to affect access to primary care, specialized services, diagnostic testing, emergency care, and long-term care. Increasing demand for health services, driven in part by an aging population and rising complexity of care needs, places additional pressure on the health system. Newfoundland and Labrador's vast geography and dispersed population create persistent barriers to equitable access, particularly in rural and remote communities. Long wait times, infrastructure and service capacity constraints, and the need to recruit and retain qualified staff to support new facilities and equipment remain significant concerns. Addressing health inequities linked to social determinants of health and ensuring the long-term sustainability and efficiency of the health system will require continued collaboration across government, health system partners, and communities. To address these challenges, the Department's 2026-2029 Strategic Plan focuses on the three strategic goals below:

Strategic Goals for 2026-2029

1. Access to Health Care

Increase equitable access to health care for the people of Newfoundland and Labrador by increasing health system efficiency and decreasing wait times.

2. Recruitment and Retention

Contribute to stabilizing the health care workforce by directly supporting and improving recruitment and retention initiatives.

3. Healthy Communities

Implement health care initiatives that positively influence social determinants of health for the people of Newfoundland and Labrador.

FINANCIAL INFORMATION

	Department of Health and Community Services 2025-26 Fiscal Year		
	Actual Expenditure	Operating Budget	Original Budget
Minister's Office	\$ 497,687	\$ 509,200	\$ 509,200
General Administration	\$ 20,774,452	\$ 22,118,500	\$ 22,679,700
Memorial University Faculty of Medicine	\$ 77,907,900	\$ 78,007,900	\$ 78,007,900
Drug Subsidization	\$ 178,967,730	\$ 184,090,200	\$ 178,112,500
Medical Care Plan	\$ 703,934,840	\$ 703,182,200	\$ 568,388,500
Provincial Health Authority and Related Services	\$ 3,625,299,799	\$ 3,632,285,900	\$ 3,501,114,600
Building Improvements, Furnishings and Equipment	\$ 189,588,943	\$ 192,749,100	\$ 192,749,100
Total Department	\$ 4,796,971,351	\$ 4,812,943,000	\$ 4,541,561,500

Expenditure and revenue figures included in this document are based on public information provided in the Report on the Program Expenditures and Revenues of the Consolidated Revenue Fund for Fiscal Year Ended March 31, 2026.

