

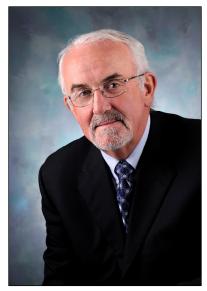
# Together we can

Strategic Plan 2011-2014



# Message from the Chair

On behalf of the Board of Trustees of Eastern Health, I present the strategic plan for 2011-14 which outlines our priority issues for the next three years. This strategic plan is consistent with Eastern Health's organizational values and builds on the achievements of our previous strategic plans.



Numerous internal and external factors influence Eastern Health's lines of business. Consequently, information from a wide variety of sources was included in the development of this plan. In particular, the organization has taken guidance from government's strategic directions. Eastern Health appreciates the input from its many key stakeholders who share the organization's desire to be a leader in health care and service delivery.

For the next three years, Eastern Health will focus on four priority issues: population health; quality and safety; access; and, sustainability. The related goals and objectives for each issue outlined in this plan will guide the organization toward achieving our vision of *Healthy People, Healthy Communities*.

Eastern Health is proud of the many accomplishments our employees, physicians and volunteers have achieved to date. We are fortunate to have so many dedicated individuals within the organization who strive to provide the highest quality care for our patients/clients/residents and their families. We anticipate and look forward to their continued commitment in 2011-14.

As Chair, my signature indicates the Board of Trustees' accountability for the development of this plan and achievement of its goals and objectives.

Michael O'Keefe

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Chair, Board of Trustees

Eastern Health

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# **Overview**

As the largest integrated health authority in Newfoundland and Labrador, Eastern Health serves a regional population of approximately 293,795 and provides the full continuum of health and community services, including public health, long-term care, community services and hospital care. Health and community-based services are offered through community-based offices, hospitals, nursing homes and medical clinics.

In addition to its regional responsibilities, Eastern Health is responsible for provincial tertiary level health services through both its academic healthcare facilities and provincial programs such as organ procurement and air ambulance. Eastern Health also partners with a number of organizations – particularly Memorial University of Newfoundland and College of the North Atlantic – to educate the next generation of health professionals, advance knowledge, conduct

research and improve patient/client/resident care.

For the fiscal year 2011-2012 the organization had a budget of approximately \$1.27 billion, over 13,000 employees, over 700 members of medical staff (approximately 200 of whom are employees) and benefitted from approximately 2,000 volunteers who provided 59,400 hours of volunteer work.



Foundations have a significant relationship with Eastern Health through their contribution of time and resources to raise funds for our facilities and services. Eastern Health's seven foundations are overseen by volunteer boards of directors: Burin Peninsula Health Care Foundation, Discovery Health Care Foundation, Dr. H. Bliss Murphy Cancer Care Foundation, Health Care Foundation, Janeway Children's Hospital Foundation, Trinity Conception Placentia Health Foundation and Waterford Foundation.

Auxiliaries also have an association with most of Eastern Health's facilities. These groups provide direct services (e.g., gift shops, volunteer resources) and help to raise funds for equipment and services.

# The Region

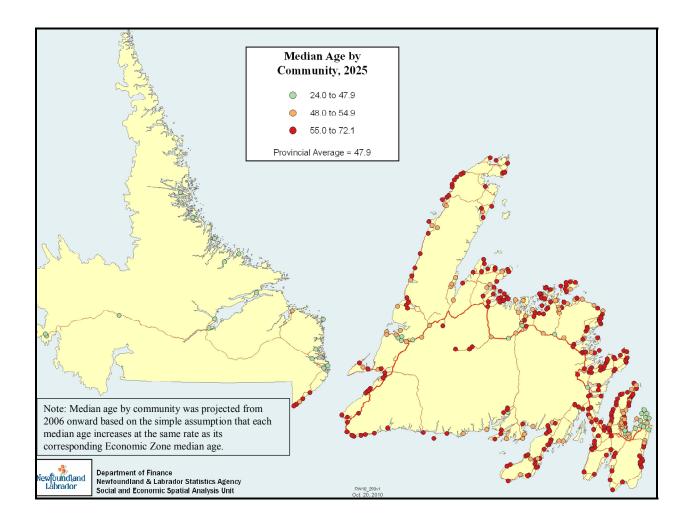
The geographic boundaries for Eastern Health include the island portion of the province east of (and including) Port Blandford. This area includes the entire Avalon, Burin and Bonavista Peninsulas as well as Bell Island, within a total of 21,000 km². Traditionally, the settlement patterns of this area have been tied to the fishing industry, which results in many small communities scattered along the coastline of these three peninsulas. The area also includes the provincial capital, St. John's, and the province's largest metropolitan area, the St. John's CMA (Statistics Canada Census Metropolitan Area). In total, the Eastern Health region includes 111 incorporated municipalities, 69 local service districts and 66 unincorporated municipal units. Eastern Health has sites in the communities noted on the map below:



According to the latest Census (2006), the geographic region served by Eastern Health has a population of 293,795 - an increase of 0.06% since the 2001 Census. The vast majority of the population growth and population density has been in the Northeast Avalon – particularly in St. John's and adjacent communities – while many rural parts of the region have experienced varying degrees of population decline.

Another significant aspect of the demographics is our aging population. Provincially, the median age in 2006 was 41.4 and by 2025 it is forecasted to be 47.9. The map below provides the median age by community, 2025.

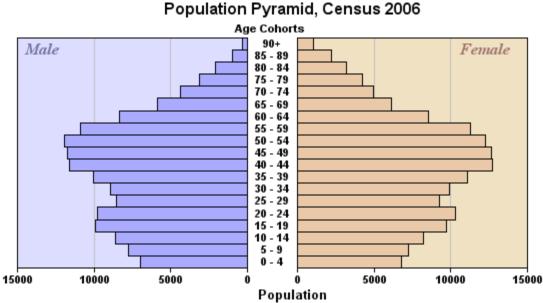
Figure 1: Median Age by Community, 2025



Source: Department of Finance, Government of Newfoundland and Labrador

The aging of the Eastern Health population can be seen in the population pyramid for this region.

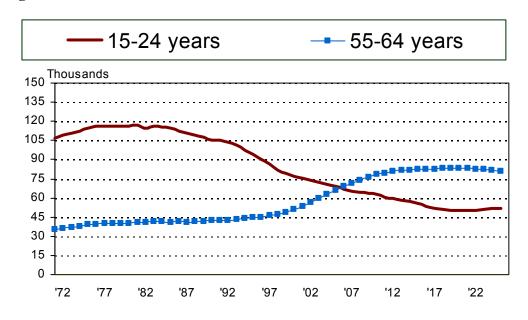
Figure 2: Population Pyramids, 2006



Source: Economics and Statistics Branch, Department of Finance

An aging population has a significant impact on the province's labour force, as the number of labour force entrants is projected to fall short of the number of retirees in the coming years. This is illustrated in the following graph:

Figure 3: Potential Labour Force Entrants and Retirees



Source: Economics and Statistics Branch, Department of Finance

to labour force.	emographics have a It is a dynamic par	rt of Eastern Hea	alth's external er	vironment that m	ust be
monitored quite in Appendix I.	carefully. Additio	nal information	about the demog	graphics of the reg	ion is found

# **Lines of Business**

Eastern Health's lines of business are the programs and services delivered to our patients/clients/residents and their families. These programs and services improve the health and well-being of individuals and communities throughout the entire continuum of health and at all stages of life. Eastern Health has four main lines of business:

### 1. Promote health and well-being

• Implement measures that promote and protect population health and help prevent disease and injury.

# 2. Provide Supportive Care

• Offer residential care options, community-based support and continuing care, home support and nursing home care for individuals.

## 3. Treat Illness and Injury

• Investigate, treat, rehabilitate and care for individuals with illness or injury.

### 4. Advance Knowledge

• Expand knowledge through research, education and knowledge mobilization.

Various health and community services are offered throughout the region and, in some cases, throughout the province. Each program and service has its own access criteria and local health providers work with individuals to determine the most appropriate services based on identified needs. A detailed listing of Eastern Health's lines of business is in Appendix II.

The organization delivers its program and services within fiscal capabilities and in accordance with the *Regional Health Authorities Act* and other relevant regulations. The *Regional Health Authorities Act* outlines the mandate and responsibilities of health authorities (Appendix III).

### **Provincial Mandate**

In addition to its regional mandate, Eastern Health has unique provincial responsibilities for tertiary level institutional services including:

- o Cancer Care
- o Cardiac and Critical Care
- o Child And Women's Health
- o Diagnostic Imaging
- Laboratory Services
- Mental Health and Addictions
- Rehabilitation
- o Surgery

In an effort to bring services closer to where people live the organization also administers provincial outreach programs:

- o Child Rehabilitative Clinics
- o Regional Cancer Centres
- o Satellite Systemic Therapy (Chemotherapy) Clinics

The organization also administers distinctive provincial services to other areas of the province, including:

- o Cardiac Genetics
- o Hyperbaric Medicine
- o Medical Control And Registration of Pre-Hospital Care Providers
- Neonatal Transport Team
- Provincial Air Ambulance
- o Provincial Equipment Program Community Living And Supportive Services
- Provincial Fertility Services
- Provincial Genetics
- o Provincial Insulin Pump Program (up to age 25 years)
- o Provincial Kidney Program
- o Provincial Organ Procurement Program
- o Provincial Pediatric Advice And Poison Control Lines
- o Provincial Pediatric Enteral Feeding Program
- o Provincial Perinatal Program
- o Provincial Post Adoptions Program
- o Provincial Synagis® Program Respiratory Syncytial Virus (RSV)
- Stem Cell Transplantation

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# **Primary Clients**

## Clients

Eastern Health's primary clients are the people of our geographic region and the people of Newfoundland and Labrador (for referred and tertiary level care) who avail of or who are impacted by our programs and services. Eastern Health recognizes the increasing diversity of the population and is committed to providing a health care system and workplace that respects diversity. The organization provides health care and service to out-of-province citizens when required and has a formal arrangement with the people of St.



Pierre et Miquelon who avail of our tertiary programs and services.

### **Partners**

Eastern Health's vision and values clearly illustrate the importance the organization places on partnerships. Partnerships are encouraged at multiple levels from direct program and service delivery to policy and advocacy. At the community level, for example, the Board of Trustees has held community stakeholder meetings and the organization has conducted several community health needs assessments. Eastern Health also collaborates with professional associations, regulatory boards, unions, school boards, police and ambulance service providers.

Eastern Health works very closely with officials from the Department of Health and Community Services on a variety of activities, from providing financial, waitlist, program and utilization information to collaborating on various provincial strategies. The four provincial regional health authorities work together and with the Newfoundland and Labrador Health Boards Association on a variety of shared priorities such as planning, professional development and information technology initiatives.

Education and research are collaborative endeavours. Eastern Health has partnerships with over 40 educational institutions and organizations to help educate the next generation of health providers. The organization has a particularly strong affiliation with Memorial University of Newfoundland in achieving its mandate of education and research. Eastern Health has permanent representation on the Board of Directors of both the Newfoundland and Labrador Centre for Applied Health Research (NLCAHR) and the Newfoundland and Labrador Centre for Health Information (NLCHI).

Eastern Health's many volunteers and auxiliaries are dedicated to enhancing the quality of life for patients/residents and their families. In addition to the efforts of approximately 2,000

individual volunteers, Eastern Health benefits from the commitment of volunteer agencies and community partners all through the region.

Eastern Health's many foundations play a tremendous role in the health care sector by assisting with specific health care equipment needs. We acknowledge the role of the Board of Directors, staff, and volunteers of each of our seven foundations: Burin Peninsula Health Care Foundation, Discovery Health Care Foundation, Dr. H. Bliss Murphy Cancer Care Foundation, Health Care Foundation, Janeway Children's Hospital Foundation, Trinity-Conception-Placentia Health Care Foundation, and the Waterford Foundation.

Eastern Health continues to enhance working relationships with a number of community-based groups that have been devolved to the organization. These groups provide a broad range of services including child care services (e.g., Daybreak Parent Child Centre), women's shelters (e.g., Iris Kirby House) and youth diversion (i.e. Burin-Placentia West Alternative Measures Program).

# **Values**

Eastern Health's core values provide meaning and direction to its employees, physicians, and volunteers in providing quality programs and services. In addition to the values and their definitions outlined below, key behaviours and outcomes are found in Appendix IV.

**Respect** Recognizing, celebrating and valuing the uniqueness of each

patient/client/resident, employee, discipline, workplace and community that

together are Eastern Health.

**Integrity** Valuing and facilitating honesty and open communication across employee

groups and communities as well as with patients/clients/residents of Eastern

Health.

**Fairness** Valuing and facilitating equity and justice in the allocation of our resources.

**Connectedness** Recognizing and celebrating the strength of each part, both within and beyond

the structure, that creates the whole of Eastern Health.

**Excellence** Valuing and promoting the pursuit of excellence in Eastern Health.

# **Vision**

The vision of Eastern Health is *Healthy People, Healthy Communities*.

This vision is based on the understanding that both the individual and the community have important roles to play in maintaining good health. Healthy communities enhance the health of individuals, and when individuals are healthy, communities are healthy overall.

Eastern Health holds a firm belief that communities have the



collective wisdom and ability to develop programs to promote healthy living and is committed to working with its many partners to achieve the vision of *Healthy People*, *Healthy Communities*.

# **Mission Statement**

The previous mission statement of Eastern Health's Board of Trustees was based on the recognition that the organization has been evolving since its inception in 2005. The 2011-17 mission statement reflects the organization's commitment to providing the best possible care and service to its patients/clients/residents, their families and communities. It also reflects the organization's commitment to a sustainable system and ties to the overall vision of *Healthy People, Healthy Communities*. The mission statement is written to incorporate six years, or two planning cycles (2011-14 and 2014-2017).

Mission: By March 31, 2017, Eastern Health will have improved programs and

services to increase its safety, quality, accessibility, efficiency and sustainability and to contribute to the overall health of the population.

**Measure:** Improved programs and services

### **Indicators:**

Increased safety and quality

- Increased rate of client satisfaction
- Improved access to selected services
- Improved employee engagement
- Balanced budgets
- Monitored outcomes in selected areas of population health

This mission statement and indicators support government's Strategic Directions: population health; access to priority services; and stability of health and community services. As outlined below, government's Strategic Directions are further supported in Eastern Health's goals and objectives.

# **Goals and Objectives**

The Board of Trustees has identified four priority areas to focus on in its strategic plan for 2011-14. Within each priority area, goals and yearly objectives have been developed, which will guide the organization for the next three years. Indicators associated with each of the goals and the first year's objectives provide a reference point to determine the organization's progress toward achieving these goals and objectives. Indicators for the second and third year of the plan will be developed in subsequent annual performance reports, as the progress of the first year will impact on the following years.

Government's Strategic Directions will be addressed through these priority areas and through various other planning processes within Eastern Health (Appendix V). The Strategic Direction of population health is reflected in Eastern Health's goal on population health. The Strategic Direction of access to priority services is consistent with Eastern Health's goal on access to clinical services. Government's Strategic Direction of accountability and stability of health and community services consistent with Eastern Health's goal around sustainability. Throughout all of this is a theme and focus on quality and safety.

# Strategic Issue One: Quality and Safety

Eastern Health has renewed its commitment to quality and safety in its 2011-14 strategic plan. Quality and safety is a key priority of the entire Board of Trustees and the whole of the organization. The Board devotes significant time to quality and safety issues.

Work has been ongoing throughout the organization to promote a healthy workplace and a culture of quality and safety, and this work



will continue to be strengthened over the next three years. Eastern Health has made significant progress toward implementing both clinical and occupational components of its Safety Plan in recent years. Frameworks have been developed around both *Quality* and *Occupational Health and Safety (OHS)* and significant components were implemented during 2008-11. Additionally, an occupational health and safety management system has been developed with significant policy and program work implemented during 2008-11. Further refinement of these frameworks will take place during the next three years and will include full implementation across the organization.

Research shows that organizations that report more occurrences usually have a more effective safety culture. Research has also found that there is a high degree of underreporting of occurrences and close calls<sup>1</sup>; however organizations should encourage reporting of occurrences and close calls since an organization cannot learn and improve if it does not know what problems exist. Ongoing efforts to fully implement the electronic occurrence reporting system will help the organization promote a stronger safety culture.

Through the Accreditation Canada<sup>2</sup> process, numerous quality and safety requirements are identified in Required Organizational Practices (ROPs). We will continue to strive to achieve full compliance with these ROPs across the organization and demonstrate evidence of improvement wherever possible.

<sup>&</sup>lt;sup>1</sup> According to the province's *Report of the Task Force on Adverse Health Events (2008)*, an occurrence is "An undesired or unplanned event that is: associated with the care or services provided to a client/patient/resident, and/or associated with risk to visitors, property or the organization; results from commission or omission; and includes close calls and problems in professional practice, products, procedures, and systems."

<sup>&</sup>lt;sup>2</sup> Accreditation Canada is a not-for-profit, independent organization that provides health organizations with an external peer review to assess the quality of their services based on standards of excellence (www.accreditationcanada.ca).

We will continue to monitor progress during 2011-14 by tracking key indicators and reporting regularly to the Executive Team and the Board of Trustees. Program and policy work will also continue over the next planning cycle.

Eastern Health's strategic issue of Quality and Safety aligns with government's Strategic Direction: Accountability and Stability of Health and Community Services.

Goal: By March 31, 2014, Eastern Health will have increased the safety and quality of

its programs and services for the benefit of its patients/clients/residents,

employees, physicians, volunteers and students.

**Measure:** Increased quality and safety of programs and services

### **Indicators**

• Increased safety and quality of programs and services, as evidenced by:

- o Decreased rate of unscheduled readmission to selected services
- o Decreased Alternate Level of Care days as a percentage of total patient days
- o Decreased rate of MRSA infection
- o Increased rate of hand hygiene compliance
- o Improved Safer Healthcare Now!<sup>3</sup> performance measures selected by the organization
- o Increased rates of medication reconciliation implementation and compliance
- o Decreased Worker's Compensation hours per Full Time Equivalent position (FTE)
- Decreased lost time incident rate
- o Decreased median duration of Worker's Compensation claims

**Objective 1:** By March 31, 2012, Eastern Health will have refined its 2011-14 Safety Plan (clinical and occupational health and safety).

**Measure:** Refined 2011-14 Safety Plan

### **Indicators:**

Refined the Quality Framework to address the clinical components of the Safety Plan

- Refined the Occupational Health and Safety Framework of the Safety Plan
- Further established selected baseline measures, which include:
  - o Baseline measures of reporting of adverse events, occurrences and close calls
  - o Baseline measure of readmission to selected services
  - o Baseline measure of Alternate Level of Care days as a percentage of total patient days
  - o Baseline measure of MRSA infection
  - o Baseline measure of hand hygiene compliance
  - o Baseline measures of *Safer Healthcare Now!* performance measures selected by the organization
  - o Baseline measure of implementation of medication reconciliation across the region

<sup>&</sup>lt;sup>3</sup> Safer Healthcare Now! is a patient safety initiative aimed at reducing preventable adverse events and deaths in Canadian hospitals (<a href="http://www.saferhealthcarenow.ca">http://www.saferhealthcarenow.ca</a>)

- o Baseline measure of medication reconciliation compliance in sites where implemented
- Baseline measure of Worker's Compensation hours per Full Time Equivalent position (FTE)
- o Baseline measure of lost time incident rate
- o Baseline measure of median duration of Worker's Compensation claims
- **Objective 2:** By March 31, 2013, Eastern Health will have monitored its Safety Plan and further established professional peer review.
- **Objective 3:** By March 31, 2014, Eastern Health will have demonstrated effectiveness of its Safety Plan and further established regular clinical audits in all clinical programs.

# **Strategic Issue Two: Access**

Access to clinical health services has been identified as a significant issue throughout the organization and is, indeed, tied to quality and safety. Wait times are challenging in a number of areas for many reasons.

Availability of beds in both acute and long-term care and the shortage of health professionals in various programs are often cited as the major factors associated with access. However, the Board of Trustees is cognizant of other aspects that



can help increase efficiencies in the system and ultimately improve accessibility.

Eastern Health has been working closely with the Department of Health and Community Services and other stakeholders to establish appropriate wait time benchmarks. Research into best practices also helps determine acceptable wait times and utilization of evidence will assist decision makers, health care providers and clients to understand the complexities associated with access to priority health care services.

Numerous strategies have been undertaken to meet, exceed and/or maintain benchmarks, many of which are national; however further work is needed to refine these strategies, identify appropriate targets and develop new approaches to improve access over time. While the issues are complex, they do present opportunities for Eastern Health to emerge as a leader in responding to the challenges and barriers and to set an example from which other organizations can benefit.

Eastern Health is generally able to respond to urgent and emergent needs in a timely way, yet wait times for non-urgent referrals to programs and specialists have been identified as a major concern. As such, non-urgent wait times in a number of areas have been chosen as a focus of the 2011-14 strategic plan.

The Board of Trustees has underscored the importance of access by choosing it as a strategic priority for the 2011-14 plan. This strategic issue is in line with government's Strategic Direction: Access to Priority Services.

**Goal:** By March 31, 2014, Eastern Health will have improved access to identified programs and services.

**Measure:** Improved access

### **Indicators**

- Improved access in the following identified areas:
  - o Decreased wait time for access to long-term care beds
  - o Decreased wait time for non-urgent primary mental health and addictions
  - Decreased wait time for specialists (non-urgent orthopedics, rheumatology, psychiatry)
  - Decreased wait time for therapeutic outpatient, community-based services and community supports (non-urgent)
  - o Decreased wait time for knee replacement
  - o Decreased wait time for hip replacement
  - o Decreased wait time for hip fracture surgery
  - o Decreased wait time for cataract surgery (for patients who are at high risk)
  - o Decreased wait time for Coronary Artery Bypass Graft (CABG) surgery
  - o Decreased wait time for cancer treatment (radiation)
  - o Decreased wait time for breast, bladder, colorectal, lung, and prostate cancer surgeries
  - Decreased wait time for Diagnostics (Magnetic Resonance Imagine [MRI], Computerized Axial Tomography [CT], Ultrasound, Endoscopy, Cardiac Echocardiogram)
  - o Improved rate of patients who left without being seen in the Emergency Room

**Objective 1:** By March 31, 2012, Eastern Health will have refined strategies to reduce wait times in identified areas and to increase efficiency in under-utilized areas.

**Measure:** Refined strategies

### **Indicators:**

- Refined strategies to improve access and increase efficiency, with baseline measures to include:
  - o Baseline wait time for access to long-term care beds
  - o Baseline wait time for non-urgent primary mental health and addictions
  - o Baseline wait time for specialists (non-urgent orthopedics, rheumatology, psychiatry)
  - Baseline wait time for therapeutic outpatient, community-based services and community supports (non-urgent)
  - o Baseline wait time for knee replacement
  - o Baseline wait time for hip replacement
  - o Baseline wait time for hip fracture surgery
  - o Baseline wait time for cataract surgery (for patients who are at high risk)
  - o Baseline wait time for Coronary Artery Bypass Graft (CABG) surgery
  - o Baseline wait time for cancer treatment (radiation)
  - o Baseline wait time for breast, bladder, colorectal, lung, and prostate cancer surgeries

- o Baseline wait time for Diagnostics (Magnetic Resonance Imagine [MRI], Computerized Axial Tomography [CT], Ultrasound, Endoscopy, Cardiac Echocardiogram)
- o Baseline rate of patients who left without being seen in the Emergency Room
- **Objective 2:** By March 31, 2013, Eastern Health will have completed implementation of strategies to reduce wait times in identified programs/services and increase efficiency in under-utilized programs/services.
- **Objective 3:** By March 31, 2014, Eastern Health will have monitored strategies toward meeting and/or exceeding national benchmarks where they exist.

# Strategic Issue Three: Sustainability

Sustainability refers to making the best use of Eastern Health's resources – both fiscal and human. This involves efforts to increase the effective use of resources and to ensure that the practices we have in place today do not compromise Eastern Health's financial well-being in future. The need to ensure good stewardship around financial and human resources is a priority for the Board.



One of the greatest impacts on the health system comes from changing demographics. Between the Census years of 1996 and 2006 the Eastern Health region experienced dramatic increases in older age groups while younger age

Eastern Health region experienced dramatic increases in older age groups while younger age groups declined. At the same time, there are regional disparities whereby some communities have experienced growth in the numbers of young families. Such shifting demographics have a major impact on the types of services we offer and how these services are delivered. From a human resource perspective, recruitment and retention continues to be a challenge, particularly as Eastern Health's workforce ages.

Financially, costs are increasing and the organization has a responsibility to operate within the budget that it is provided. We continually respond to increasingly diverse needs and competing priorities with existing resources. We work closely with the provincial government by bringing forward information to address identified needs, generally through the annual budget review process.

Despite the challenging environment, however, Eastern Health is unwavering in its commitment to provide the highest quality care. Our greatest strength is the dedication of our employees, physicians, volunteers and Board of Trustees as we strive to attain our vision of *Healthy People*, *Healthy Communities*.

The Board of Trustees of Eastern Health is very committed to the sustainability of the organization. This strategic issue is in keeping with government's Strategic Direction: Accountability and Stability of Health and Community Services.

**Goal:** By March 31, 2014, Eastern Health will have strengthened its sustainability

through the efficient utilization and monitoring of its fiscal and human resources.

**Measure:** Strengthened sustainability

### **Indicators:**

- Balanced budgets
- Decreased HR vacancy rate in selected areas

**Objective 1:** By March 31, 2012, Eastern Health will have identified where efficiencies can be improved to optimize patient/client/resident care.

Measure Identified efficiencies

### **Indicators:**

- Identified opportunities for efficiencies through a benchmarking and consultation process
- Developed baseline measures, which include:
  - o Budget variance across the region
  - o Baseline HR vacancy rate in selected areas
- **Objective 2:** By March 31, 2013, Eastern Health will have implemented strategies to improve and monitor efficiency in identified programs.
- **Objective 3:** By March 31, 2014, Eastern Health will have demonstrated efficiencies in identified programs.

# **Strategic Issue Four: Population Health**

Population health is a term that describes the overall health of a community rather than of an individual. This approach focuses on a wide range of factors within and outside of the health care system that can influence health. These factors are known as the "determinants of health" and include such things as housing, education, literacy, social support networks, employment and income and healthy child development. The population health approach involves individuals, communities, schools, workplaces, and all levels of government.



Strategic investments to promote and protect health, prevent ill health and injury and reduce inequities have the potential to have a measurable impact on the health of the population served by Eastern Health. In an integrated population health approach we work to achieve best possible health outcomes for individuals, groups and the population. Diminishing the burden of chronic disease, reducing the risk factors which increase the likelihood of developing health problems, and promoting healthy lifestyles will contribute to an overall improvement of the health of the population.

Eastern Health will continue to work with government, other organizations and community partners to promote, protect and improve the health of the population. Investments in upstream<sup>4</sup> strategies will enable the health system to support better outcomes for individuals and communities, and use health care resources more effectively.

This strategic issue is in line with government's Strategic Direction of Population Health.

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<sup>&</sup>lt;sup>4</sup> Upstream investments are interventions that address the root causes of a population health problem or benefit. In many cases, upstream action addresses social, economic and environmental conditions (Public Health Agency of Canada, 2011)

**Goal:** By March 31, 2014, Eastern Health will have implemented strategies using a population health approach to support better health outcomes for individuals and communities.

**Measure:** Implemented strategies

### **Indicators**

- Improved opportunities to communicate the principles of population health with internal and external stakeholders
- Improved opportunities for programs and services to implement preventive approaches to health
- Improved collaboration with all levels of government and community partner agencies across various sectors
- Improved mechanisms for public involvement
- Improved mechanisms to implement an evidence-based approach to policy development
- Increased monitoring of outcomes in selected areas of population health, which include:
  - o Rate of physical activity
  - o Breastfeeding initiation rate
  - o Breastfeeding duration rate
  - o Rate of participation (by age) for screening for colorectal cancer
  - Rate of seasonal influenza immunization rate in targeted populations (i.e., high risk due to chronic disease, seniors aged 65+, children aged 6 months 5 years and Eastern Health staff)

**Objective 1**: By March 31, 2012, Eastern Health will have begun implementing Chronic Disease Prevention and Management and Cancer Control Strategies

**Measure**: Begun implementation of strategies

### **Indicators:**

- Implemented initial strategy components which include:
  - o Increased opportunities for stakeholder consultation
  - o Increased collaboration with government and community partners
  - o Increased opportunities to address barriers
  - o Improved opportunities to identify and reach vulnerable populations
  - o Identified baseline measures of selected areas of population health, which include:
    - Baseline rate of physical activity
    - Baseline rate of breastfeeding initiation
    - Baseline rate of breastfeeding duration
    - Baseline rate of participation (by age) for screening for colorectal cancer
    - Baseline rate of seasonal influenza immunization rate in targeted populations (i.e., high risk due to chronic disease, seniors aged 65+, children aged 6 months - 5 years and Eastern Health staff)

**Objective 2**: By March 31, 2013, Eastern Health will have expanded population based initiatives to address healthy living.

and service d	cirvery towards i	reducing inequi	nes in the popul	auton.	

# Conclusion

This strategic plan clearly outlines the direction that Eastern Health will be taking in the next three years, which is closely aligned with the Strategic Directions of government. By choosing the four priority issues of quality and safety, access, sustainability and population health, the organization will focus its efforts over the next three years to bring about improvements in a number of identified areas.



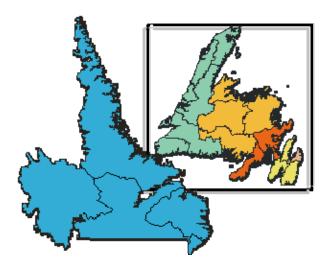
The goals, objectives and indicators for these four priorities were developed based on careful consideration and input from a variety of sources. They include specific performance measures by which we will closely monitor our progress on a yearly basis.

The 2011-14 strategic plan will be widely communicated to our internal and external stakeholders. It is a living document that will guide the organization over the next three years as we strive to achieve our vision of *Healthy People*, *Healthy Communities*.

# **Appendix I – Demographic Information**

The province is divided into 20 Economic Zones, six of which are in Eastern Health's region<sup>5</sup>:

- Zone 15 Discovery Regional Development Board (Clarenville-Bonavista area, population 28,355)
- Zone 16 Schooner Regional Development Corporation (Burin Peninsula, population 21.600)
- Zone 17 Mariner Resource Opportunities Network Inc. (Northwest Avalon, population 39.850)
- Zone 18 Avalon Gateway Regional Economic Development Inc. (Southwest Avalon, population 7,310)
- Zone 19 Northeast Avalon Regional Economic Development Board (including Bell Island, population 188,265)
- Zone 20 Irish Loop Regional Economic Development Board (Southeast portion of the Avalon, population 8,410)



All but one (Zone 19, Northeast Avalon) have experienced varying percentages of population decline from 2001 to 2006. Most notably, Zones 18 (Southwest Avalon) and 16 (Burin Peninsula) experienced a 10.1% and 8.9% decline respectively. Over the same period, the entire province experienced a population decline of 1.5% (505,470 in 2006, down from 512,930). The declining population trend in some parts of Eastern Health mirrors a similar trend in the rest of the province.

The birth rate (8.9 per 1,000 population) for Newfoundland and Labrador in 2008/09 is the lowest in the country. Likewise the fertility rate (1.46) for 2009 is the lowest in the country, most likely due to out-migration of women of child-bearing age and an aging population. However the

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<sup>&</sup>lt;sup>5</sup> All population numbers included in this section are based on the 2006 Census as found in <a href="https://www.communityaccounts.ca">www.communityaccounts.ca</a>

NL population projection system (POPPS)<sup>6</sup> provides high, medium, and low scenario assumptions for fertility, mortality, and migration rates based on anticipated improvement in economic conditions in the province. Using high scenario assumptions one can see positive effects on the provincial population. For example, assuming significant in-migration as a result of major industrial projects, the fertility rate is expected to increase to 1.63 by 2025 and life expectancy will increase by 2.6 years and 2.5 years for males and females respectively by 2025. Similarly, net in-migration is expected to increase by 2025 due to the need for more workers to fill new jobs but also to replace baby boomers as they retire.

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<sup>&</sup>lt;sup>6</sup> Economic Research & Analysis Division, Department of Finance, Government of Newfoundland and Labrador, 2010

# Appendix II - Lines of Business

# 1. Promote Health and Well-Being

Eastern Health implements measures that promote and protect population health and help prevent disease and injury. The primary initiatives in this line of business include: Health Protection; Health Promotion; Disease and Injury Prevention; Health Surveillance and Population Health Assessment.

### a. Health Protection

Health protection includes the regulatory framework, programs and services for the control of diseases and protection from public health threats. Health protection identifies, reduces and eliminates hazards and risk to the health of individuals and communities. Health protection is delivered within the context of current legislation, where applicable.

The major categories of service include:

- Immunization
- Communicable disease surveillance and control
- Environmental Health Services (conducted in cooperation with Government Services Center (GSC))
- All hazards emergency planning (AHEP)

### **b.** Health Promotion

Health promotion is the process of enabling individuals, families and communities to increase control over and to improve their own health. Health promotion programs and services involve the work of many internal and external partners working together to focus on:

- Building healthy public policy (e.g., smoke free policies)
- Strengthening community action (e.g., Regional Wellness Coalitions)
- Creating Supportive Environments (e.g., safe walking routes within communities)
- Supporting development of personals skills (e.g., child and family health programs)
- Re-orienting health services to focus on prevention and early intervention (e.g., through partnerships with community agencies, engaging the public through the media)
- Re-orienting health services to focus on population health as well as individual health outcomes
- Health Service Delivery (e.g., Healthy Baby Clubs, Child Health Clinics)

# c. Disease and Injury Prevention

Many illnesses can either be prevented or delayed and injuries can be avoided. Actions include programs and services that are focused on eradicating, eliminating or minimizing the impacts of disease and disability. Programs and services vary depending on the incidence or potential for disease, illness or injury identified in particular areas of the region.

The major categories of service include but are not limited to:

- Screening (e.g., child development screening, cervical screening)
- Falls prevention
- Chronic disease prevention and management

### d. Health Surveillance

Health surveillance involves the systematic and ongoing collection, analysis and dissemination of public health data. Intended for early detection and control of outbreaks and identification of disease trends that cause illness, this assists with our understanding of the impacts and efforts to improve health and reduce the impact of disease.

# e. Population Health Assessment

Population health assessment identifies the factors that underlie good health and those that create risks. These assessments lead to better services and policies. Initiatives include community health needs assessments and health status reports.

# 2. Provide Supportive Care

Eastern Health offers residential care options, community-based support and continuing care, home support and nursing home care for individuals based on assessed needs. These services are provided in select locations and in some cases may be means-tested and/or criteria-based. There is occasionally a relationship with other government agencies such as the Department of Human Resources, Labour and Employment for subsidized funding to supplement program funding.

# a. Individual, Family and Community Supportive Services

These programs provide financial and supportive services and case management for individuals of all ages with assessed needs. The program focuses on supporting individuals, families and caregivers and promotes community inclusion, independence, safety and well-being. Services are limited and some may be based upon both a financial assessment and an individual's ability to pay for such services.

The main categories of services are included below:

- Alternate residential options, home support, medical supplies, and assessment and placement services for nursing homes, personal care homes, palliative care and behavioural supports.
- The *Neglected Adults Service* investigates and follows up on referrals of neglect as defined under the *Neglected Adults Act*.
- *Day Support* provides individuals who continue to live in the community with a day-based service that includes health, education, social and recreational activities within a supportive group setting.
- *Community Behavioural Services* is a behavioural support and training program offered to individuals with developmental challenges.
- *Direct Home Services* offers a family-centred, home-based, early intervention program for families of infants and preschool children who have delayed development.

### b. Short-term Adult Residential Care

This program involves short respite stays for individuals. The services are offered in selected locations.

• Respite care enables caregivers to avail of respite for defined periods with potential for extension in specific circumstances.

# c. Long-term Adult Residential Care

This long-term program provides residential nursing home care for individuals who require ongoing support due to their disability, frailty, or chronic illness. This involves a single entry system where an individual's needs are assessed and matched with available placements as appropriate.

The major categories of services involve the following:

- Eastern Health has a number of operating arrangements with its long-term care beds for people assessed as having high level needs. In certain areas of the region, beds are part of nursing homes while in other areas they are part of hospitals or medical clinics.
- Personal Care Homes are operated by private owners but are licensed and monitored through Eastern Health. These homes provide care for residents assessed as having low level needs.
- Through *Alternative Family Care Placements* Eastern Health approves care giver homes and monitors and supports placements of individuals who require care.
- Eastern Health owns and manages a limited number of cottages in various areas of the region.

# 3. Treat Illness and Injury

The organization investigates, treats, rehabilitates, and cares for individuals with illness or injury. The clinical intent of these services is to treat illness and injuries, relieve symptoms, reduce the severity of an illness or injury, and educate patients. Additionally, we provide care at the beginning of life (new born care) and at the end of life (palliative care).

Services are offered in a variety of locations throughout the region, depending on factors such as the level of care required (primary, secondary or tertiary), access to health professionals and access to appropriate facilities. Certain services are self-referred, while others require a referral from a health professional. The organization offers services through a variety of inpatient and outpatient settings.

The key aspects are outlined as follows:

- Outreach Services offer selected clinical services throughout the region and some parts of the province. These include outreach clinics for cancer care, mental health and specialized children's services (e.g., physiotherapy).
- Throughout the region, people have access to *Primary Health Care*. The main form of primary care is through fee-for-service physicians who operate their own offices independently of Eastern Health. In many other cases, physicians work within one of Eastern Health's facilities to provide primary care. There are also a growing number of primary health care projects in which physicians and other health professionals work in a coordinated manner to offer care.
- Through *Community Health Centres*, health professionals provide assessment and care in a medical clinic setting within certain areas of the region.

- Regional Cancer Centres are staffed by Eastern Health employees, and patients are visited by specialists of the Cancer Care Program who work closely with local physicians. These centres are located in Gander, Grand Falls and Corner Brook.
- Regional Hospitals throughout the Eastern Health catchment area provide both primary and secondary level care. The primary disciplines are ambulatory, emergency, diagnostic imaging, general surgery, gynecology, laboratory medicine, obstetrics and medicine. These services are provided by multidisciplinary teams of health professionals.
- *Tertiary Hospitals* are located in St. John's and provide primary, secondary and tertiary level services. These tertiary facilities are academic healthcare facilities that accept referrals and transfers from all parts of the province for both inpatient and outpatient services. The majority of these specialty services are listed in the footnote.<sup>7</sup>
- Throughout the region, *Rehabilitation Centres* provide patient rehabilitation following an illness or injury. The Miller Centre and the Janeway Children's Hospital and Rehabilitation Centre provide specialized rehabilitation services.
- *Patient Transport* provides both ground and air transport of patients. These services are conducted by both pubic and private operators and include ambulance and client transport for medical services.
- Mental Health and Addictions Services are offered to those who are experiencing mental
  health problems, mental illness, or difficulties with alcohol, drugs, gambling, or are
  affected by someone else's use. These services range from health promotion-based
  programs to diagnosis and treatment (both inpatient and outpatient) to follow- up
  services. There are strong links with community-based partners such as advocacy
  groups, self-help groups, employment and housing.
- *Home visits* are another mechanism for health professionals to deliver care within the community setting.

# 4. Advance Knowledge

Eastern Health is dedicated to advancing research, education and knowledge mobilization. With its many academic links, the organization plays a key role in ensuring that the next generation of health professionals has opportunities to gain relevant educational experience. Staff and physicians are encouraged to seek the best information and knowledge from multiple sources and to incorporate quality evidence into their practice. As well, the organization is committed to ensuring that the issues faced in daily practice bring about innovative research and learning.

Education and research are collaborative endeavors, and overall success depends upon partnerships with affiliated organizations, particularly Memorial University of Newfoundland. Eastern Health also has close ties with the College of the North Atlantic and has affiliation agreements with numerous other post secondary institutions across the country and further

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Medical, Surgical and Radiation Oncology; Cardiac and Critical Care; Specialized Diagnostics – Laboratory Medicine, Imaging, Nuclear Medicine, Pathology; Children and Women's Health – Specialty Pediatrics, Gynecology, Obstetrics, Pediatric Critical Care, Perinatology Medicine – Allergy &Immunology, Emergency Medicine, Endocrinology & Metabolism, Family Medicine, Gastroenterology, General Internal Medicine, Geriatrics, Haematology, Nephrology, Pharmacy, Respirology, Rheumatology; Surgery – Anaesthesia and Perioperative Medicine, Cardiac Surgery, Dentistry, General Surgery, Neuro Surgery Ophthalmology, Orthopaedics, Otolaryngology, Plastic Surgery, Thoracic Surgery, Urology, Vascular Surgery; Psychiatry - child/adolescent psychiatry geriatric psychiatry, adult and general psychiatry, forensic psychiatry.

abroad to provide student placements within clinical settings. Additionally, Eastern Health has permanent representation on the Board of Directors of the Newfoundland and Labrador Centre for Applied Health Research (NLCAHR) and the Newfoundland and Labrador Centre for Health Information (NLCHI).

The main categories within this area are listed below:

- Education of the next generation of health care providers is offered through affiliation agreements with numerous educational institutions. These arrangements enable students to study and participate in fieldwork experiences. Eastern Health's primary educational partnerships are with Memorial University of Newfoundland and College of the North Atlantic, in addition to various universities, colleges, and other educational institutions that educate many of our staff.
- The *Patient Research Centre* provides for the coordination and implementation of clinical trials. During 2010-11, the centre was actively involved in over 100 clinical trials in cardiology, child health, clinical epidemiology/nephrology, endocrinology, gastroenterology, hematology, neurology, respirology, rheumatology, women's health and medical oncology.
- The *Centre for Nursing Studies (CNS)* offers LPN, BN, Nurse Practitioner and various continuing education programs. During the 2010-11 fiscal year, the CNS graduated 101 students from the Bachelor of Nursing (Collaborative Program) and graduated 46 students from the Practical Nursing Program.
- *Continuing Education* is offered throughout Eastern Health in various formats. We also partner with other health boards and community agencies to offer training to health professionals and the general public.

# **Appendix III: Mandate**

Eastern Health is responsible for the delivery and administration of health services and community services in its health region and provincially as designated by the Minister of Health and Community Services. The organization will deliver its programs and services within fiscal capabilities and in accordance with the *Regional Health Authorities Act* and other relevant regulations. The *Regional Health Authorities Act* outlines the responsibility of health authorities as the following:

# **Responsibility of Authority**

- 16. (1) An authority is responsible for the delivery and administration of health and community services in its health region in accordance with this Act and the regulations.
  - (2) Notwithstanding subsection (1), an authority may provide health and community services designated by the minister on an inter-regional or province-wide basis where authorized to do so by the minister under section 4.
    - (3) In carrying out its responsibilities, an authority shall:
      - (a) promote and protect the health and well-being of its region and develop and implement measures for the prevention of disease and injury and the advancement of health and well-being;
      - (b) assess health and community services needs in its region on an on-going basis;
      - (c) develop objectives and priorities for the provision of health and community services which meet the needs of its region and which are consistent with provincial objectives and priorities;
      - (d) manage and allocate resources, including funds provided by the government for health and community services, in accordance with this Act;
      - (e) ensure that services are provided in a manner that coordinates and integrates health and community services;
      - (f) collaborate with other persons and organizations, including federal, provincial and municipal governments and agencies and other regional health authorities, to coordinate health and community services in the province and to achieve provincial objectives and priorities;
      - (g) collect and analyze health and community services information for use in the development and implementation of health and community services policies and programs for its region;
      - (h) provide information to the residents of the region respecting
        - the services provided by the authority,
        - how they may gain access to those services, and
        - how they may communicate with the authority respecting the provision of those services by the authority;
      - (i) monitor and evaluate the delivery of health and community services and compliance with prescribed standards and provincial objectives and in accordance with guidelines that the minister may establish for the authority under paragraph 5 (1)(b); and

comply with directions the minister may give.

# **Appendix IV: Eastern Health Values**

Value	Key Behaviours
I. RESPECT	Outcome: WELLNESS
Definition: Recognizing, celebrating and valuing the uniqueness of each patient/client/resident, employee, discipline, workplace and community that together are Eastern Health.	<ul> <li>→ We show consideration and appreciation for all people who are part of Eastern Health.</li> <li>→ We treat our patients/clients/residents and each other with dignity.</li> <li>→ We adhere to rigorous standards of privacy and confidentiality.</li> <li>→ We show caring through consideration, compassion, and good will toward each individual who is part of Eastern Health.</li> <li>→ We know that the wellness of patients/clients/residents, employees and communities is dependent on feeling respected and valued, and we act according to that knowledge.</li> <li>→ We encourage and facilitate the balance of work and personal life, knowing that respect for self is as important as respect for others.</li> <li>→ We recognize that in an integrated and holistic health care system, the individual components (people, disciplines, work places, and communities) are unique and valuable; we do not encourage a one-size fits all approach.</li> <li>→ We are aware that health and wellness are influenced by the environment, and we take steps to prevent harm to the environment and promote a sustainable natural environment.</li> </ul>
II. INTEGRITY	Outcome: OPENNESS AND ACCOUNTABILITY
Definition: Valuing and facilitating honesty and open communication across employee groups and communities as well as with patients/clients/residents of Eastern Health.	<ul> <li>→ We recognize that the value of integrity requires being open and honest about our understandings, beliefs and actions.</li> <li>→ We believe that accountability for our actions is key to integrity because any action by an individual who is part of the Eastern Health system will affect the rest of the system.</li> <li>→ We value and demonstrate honesty in our interactions with patients/clients/residents and employees and in our communications with the general public, political leaders and the media.</li> <li>→ We consult with other team members, disciplines, and communities to encourage positive change in planning and policy development.</li> <li>→ We listen to others and demonstrate that we have heard by taking action.</li> <li>→ We take an approach of collaborative partnership across patient/client/resident groups, employee groups and</li> </ul>

Value	Key Behaviours
	communities.  → We are honest about our strengths and our limitations.  → We welcome discussion with the general public through our engagement with our political leaders and the media; we listen, we inform, and we learn through those discussions.  → We recognize and celebrate the fact that we are accountable to each other, to those in other employee groups, to our patients/clients/residents, and to our communities.
III. FAIRNESS	Outcome: STEWARDSHIP
<b>Definition:</b> Valuing and facilitating equity and justice in the allocation of our resources	<ul> <li>→ We are responsible in our management of our resources;</li> <li>→ We value and facilitate the just allocation of resources across patient/client/resident groups, employee groups, and communities.</li> <li>→ We encourage excellence in best practices for using our resources wisely.</li> <li>→ We act with the interests of future generations in mind.</li> <li>→ We believe individuals and communities are empowered to articulate their own best interest.</li> </ul>
IV. CONNECTEDNESS	Outcome: STRENGTH THROUGH DIVERSITY
Definition: Recognizing and celebrating the strength of each part, both within and beyond the structure, that creates the whole of Eastern Health.	<ul> <li>→ We respect the distinct knowledge and contribution of different aspects of the Eastern Health system.</li> <li>→ We encourage and facilitate team work and collaboration across employee groups and communities.</li> <li>→ We promote a spirit of open communication with the general public through active and positive engagement with our political leaders and the media.</li> <li>→ We work to promote the integration of various parts of our system through communication and collaboration.</li> <li>→ We facilitate communication and sharing of information and ideas within parts of the system.</li> <li>→ We facilitate and promote internal and external communication, consultation and collaboration.</li> <li>→ We recognize that the cultural, social, economic and environmental contexts of our various geographical communities affect, and are affected by, the work of Eastern health, and we act with this in mind.</li> <li>→ We feel connected with the system of Eastern Health in a broad and holistic sense.</li> <li>→ We recognize that Eastern Health is its patients/clients/residents,</li> </ul>

Value	Key Behaviours
	employees, work places, and communities, and we are loyal to this whole.
V. EXCELLENCE	Outcome: DYNAMIC GROWTH
Definition: Valuing and promoting the pursuit of excellence in Eastern Health.	<ul> <li>→ We encourage and facilitate the ongoing professional and personal development of each individual who is part of Eastern Health.</li> <li>→ We provide opportunities to students and facilitate continuing professional development across employee groups and communities.</li> <li>→ Our growth is collaborative in intent: We continually expand our knowledge by learning from different perspectives across patient/client/resident groups, disciplines, and communities.</li> <li>→ We recognize that employee competency is essential to excellence in performance and client satisfaction.</li> <li>→ We promote safety for all.</li> <li>→ We encourage capacity building within our communities to facilitate health and wellness.</li> <li>→ We provide feedback to each other in order to refine best practices in health care.</li> <li>→ We recognize that our goal is optimal wellness for patients/clients/residents, employees and communities and we act according to that goal.</li> </ul>

# **Appendix V: Government Strategic Directions**

Each Strategic Direction is comprised of a number of focus areas, which will be addressed through various planning processes of Eastern Health.

Strategic Direction 1: Population Health Outcome: Improved Population Health

	Population Health				
Focus Areas of the Strategic		Ad	ldressed by		
Direction 2011-2017		Eastern Health's strategic plan	Operational plan	Work plan of a branch/ division within Eastern Health	
Aboriginal Health				V	
Cancer Care		V			
Communicable Disease, including sexually transmitted disease			V		
Chronic Disease Management		V			
Environmental Health				V	
Health Emergency Management			<b>√</b>		
Healthy Aging		V			
Healthy Eating/ Physical Activity		V			
Injury Prevention		V			
Maternal/Newborn Health		V			
Smoking Rates And Protection from Environmental Smoke				√ 	
Wellness		V			

# Strategic Direction 2: Access to Priority Services Outcome: Improved accessibility to priority services

	Access to Priority Services					
Focus Areas of the Strategic Direction	Addressed by					
2011-2017		Eastern Health's strategic plan	Eastern Health's operational plan	Work plan of a program within Eastern Health		
Access Management		√				
Long Term Care and Community Supports		V				
Mental Health And Addictions Services		V				
NLPDP – Pharmacare Initiatives				V		
Pre Hospital / Emergency			V			
Rural Health				V		

# Strategic Direction 3: Accountability and stability of health and community services

Outcome: Improved system performance and sustainability

Facus Areas of	Improved Accountability and Stability in the Delivery of Health and Community Services within Available Resources						
Focus Areas of the Strategic Direction	Addressed by						
2011-2017		Eastern Health's strategic plan	Eastern Health's Operational plan	Work plan of a program within Eastern Health			
Clinical / Administrative Guidelines / Program Standards			V				
Evaluation of Legislation, Programs and Services				<b>√</b>			
Health Research				V			
Information Management and Technology			٧				
Performance Measurement/ Monitoring		V					
Provincial Health Human Resources		√ V					
Quality and Safety		<b>√</b>					





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