



**NL Health
Services**

STRATEGIC PLAN

2023 ▶ 24

Meet Newfoundland and Labrador Health Services Board of Trustees

Newfoundland and Labrador Health Services (NL Health Services) is governed by a voluntary Board of Trustees. Each member brings their own unique background and experience to help ensure the delivery of safe, high-quality care for our patients, clients, residents, and families within our region.



Robert B. Andrews,
Chairperson



Michelle
Baikie



Dr. Catherine
Bradbury



Janet
Bradshaw



Sharon
Forsey



Edward
Goudie



Dr. Colleen
Hanrahan, Ph. D.



Tara
Laing



Candace
Matthews



David
Oxford



David
Peddle



Dr. David
Sutherland



David
Thornhill



Lloyd
Walters

Message from the Board Chair



With pleasure and the endorsement of my fellow trustees, I present the inaugural Strategic Plan for NL Health Services. In Accordance with the **Transparency and Accountability Act**, this plan defines the Vision, Mission, and Values and summarizes the strategic priorities of our new health authority for 2023-2024. In alignment with the strategic directions of the Government of Newfoundland and Labrador and the recommendations / Calls to Action of Health Accord NL, this Strategic Plan is our one-year roadmap to guide the transition to one unified provincial health entity.

Amid significant change in the provincial health system, we must embrace the opportunities before us. The amalgamation of Central Health, Eastern Health, Labrador-Grenfell Health, Western Health and the Newfoundland and Labrador Centre for Health Information into a united NL Health Services provides an opportunity for improved standardization, integration and collaboration across the province. We recognize as well that, although NL Health Services is a provincial entity, we must consider the unique geography and the local context of all five provincial zones, the rural and remote areas of our province, Indigenous communities, and the different approaches to health care that are required. As a Board of Trustees, we are committed to addressing the diversity of health issues that exist, to drive our health authority to be inclusive of the beliefs and cultures of all people of our province and to strive towards a goal of health equity.

The Strategic Plan being presented is a one-year plan and represents the immediate work identified as we establish a single provincial health authority (PHA) while simultaneously continuing all health-care services throughout the province. Our strategic priorities – Transformation, Our People, Access, and Quality - have been identified in consultation with our health professionals and managers and various stakeholders including our communities. As we transition to years two and three of this planning cycle, we will solidify our organizational strategy based on continued and extensive engagement with our staff and partners.

The challenges before us are enormous, but we are confident that the professionalism and talent of our workforce makes us more than up to the task. Our vision is “Health and Well-Being - Every Person - Every Community” and in striving towards this, NL Health Services will work to embed the core values of **Innovation, Compassion, Accountability, Respect, and Excellence (I CARE)** in everything we do.

This letter and my signature below indicate the Board of Trustees’ accountability for the preparation of this Strategic Plan and for achieving the objectives outlined therein.

A handwritten signature in black ink, appearing to be 'R. Andrews', written in a cursive style.

Robert Andrews KC
Board Chair

NL Health Services Executive Team



David Diamond,
Chief Executive Officer



Lynette Oates,
Chief - Public
Engagement and
Communications



Joanne Pelley,
Vice President and
Chief Operating Officer
– Central, and Provincial
Chief Nursing Officer



Ron Johnson,
Vice President and
Chief Operating Officer
– Eastern Urban



Debbie Walsh,
Vice President and
Chief Operating Officer
– Eastern Rural



Teara Freake,
Vice President and
Chief Operating Officer
– Western



Antionette Cabot,
Vice President and
Chief Operating Officer
– Labrador Grenfell
(April 1 - September 1,
2023)



Sandy Penney,
Vice President and
Chief Operating Officer
– Labrador Grenfell
(effective September 4,
2023)



Kenneth (Ken) Baird,
Vice President –
Transition



Scott Bishop,
Vice President –
Corporate Services and
Chief Financial Officer



Steve Greene,
Vice President – Digital
Health and Chief
Information Officer



Dr. Gena Bugden,
Vice President –
Medical Services



Kelli O'Brien,
Vice President –
Quality and Learning



Debbie Molloy,
Vice President –
Human Resources



Darla King,
Vice President –
Transformation
(Well-being)



Cassie Chisholm,
Vice President –
Transformation
(Health Systems)

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Overview

Announced as part of Budget 2022, the Government of Newfoundland and Labrador initiated the process of amalgamating Central Health, Eastern Health, Labrador-Grenfell Health, Western Health, and the Newfoundland and Labrador Centre for Health Information (NLCHI) into one entity, Newfoundland and Labrador Health Services (NL Health Services). The transition to a single, unified PHA was undertaken to integrate and streamline provincial programs and services to become more efficient and effective in our health-care delivery across the province.

NL Health Services provides a broad range of programs and services to the people of Newfoundland and Labrador through a large suite of facilities, clinics, and community services, overseen by the five zones: Central, Eastern-Rural, Eastern-Urban, Labrador-Grenfell, and Western. See Appendix A for a detailed organizational profile, structured by zone.

The annual operating budget is approximately \$3 billion, with most of its revenue coming from provincial plan funding through the Department of Health and Community Services. Other notable revenues include inpatient and outpatient revenue, recoveries and the Medical Care Plan (MCP). Major expenditures include salaries, direct client payments, drugs, and diagnostic and therapeutic services.

By leveraging new and existing partnerships to accelerate research and innovation, NL Health Services aims to make substantial progress toward achieving the goals and objectives outlined in this Strategic Plan. Using data to measure outcomes, the organization will focus its efforts to excel in each of the strategic priority areas and regularly assess performance. Through its dedication to performance improvement, NL Health Services endeavours to position itself as a leading Canadian health-care organization.



Delivering health services to more than
510,550 Newfoundlanders and Labradorians



Approximately
22,500 employees,
1,050 physicians, and
2,700 volunteers



Operating in **5** geographic zones throughout Newfoundland and Labrador



Approximate budget
\$3 billion

This Strategic Plan aligns with the strategic directions of the Government of Newfoundland and Labrador which continues to move the province toward a future that has healthier people and a more efficient public sector.

Please visit NLHealthServices.ca/our-organization/ for more information on NL Health Services' mandate and lines of business.

Lines of Business

The **Provincial Health Authority Act** outlines the mandate and responsibilities of NL Health Services (see Appendix B).

NL Health Services accomplishes its mandate through four lines of business:

- Promoting Health and Well-Being
- Providing Supportive Care and Rehabilitative Services
- Treating Illness and Injury
- Advancing Knowledge and Transforming Health Systems

The lines of business are outlined in Appendix C.

Values

The core values of NL Health Services: **Innovation, Compassion, Accountability, Respect, and Excellence (I CARE)** represent a guiding framework for all employees, physicians, volunteers, and leadership. Our values enhance our people and family-centred care philosophy, where the person we serve, and their family are at the heart of every decision we make and every action we take. Values influence all decision making and encourage us to strive for excellence as we support the health and well-being of the people of Newfoundland and Labrador.



▶ **Innovation**

We are creative and collaborative. We use the talent and ideas of our employees and partners in seeking solutions.

▶ **Compassion**

We are kind, caring and committed to people-centred care.

▶ **Accountability**

We are honest, transparent, responsible and serve with integrity. We build relationships based on open communication.

▶ **Respect**

We are inclusive and embrace diversity. We provide care in ways that are fair and reflective of the knowledge, values, beliefs and cultures of the people we serve.

▶ **Excellence**

We deliver safe high-quality care and measure our performance in pursuit of continuous improvement.

Vision / Mission

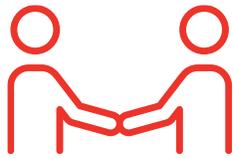
The vision of NL Health Services is:



Health and Well-Being.
Every **Person**. Every **Community**.

This vision highlights the important role that residents and communities throughout the province play in promoting and achieving improvements in health and well-being. NL Health Services works collaboratively with residents, communities, and partners to achieve this vision.

The mission of NL Health Services is:



Working together to improve health outcomes through an innovative, integrated and sustainable health system.

Planning Process

The 2023-24 Strategic Plan was developed inclusive of the health care needs of all people in Newfoundland and Labrador.

With the creation of a PHA, it was important that NL Health Services develop an inaugural Strategic Plan to set organizational priorities and direction that appropriately incorporate the unique needs of the zones and NLCHI, while transforming the health-care system to more efficiently and effectively meet the needs of the residents of Newfoundland and Labrador.

As such, to support the three-year 2023-26 strategic planning cycle, NL Health Services has developed a planning process to identify our first-year strategic priorities, along with the relevant objectives and key progress indicators. Our planning process drew from the extensive internal and external engagement completed by the four legacy Regional Health Authorities (RHA) and NLCHI throughout recent years. The planning process also drew on a multitude of regional, provincial, and national sources to identify emerging local and national trends. This supports the strategic priorities of the Department of Health and Community Services. During the 2023-24 fiscal year, NL Health Services will develop an internal and external engagement plan to support the refinement of years two and three of the Strategic Plan.

The year one planning process is outlined in full in Appendix D.

Key Stakeholders and Primary Clients

NL Health Services' primary clients are the residents of Newfoundland and Labrador, who avail of its services and programs across the continuum of care. Clients cover the entire life span, from prenatal to children and youth, adults and seniors, to end-of-life care. They range from the healthy population to those with specific health needs, such as individuals with acute illness and/or chronic disease. In addition, NL Health Services provides tertiary-level programs and services to the people of Saint-Pierre-et-Miquelon and those who travel to the province and avail of services.

Partnerships are integral to NL Health Services' vision, values and operations, from direct program and service delivery to policy and advocacy. To effectively and efficiently meet the needs of clients, in keeping with the lines of business, the Board of Trustees, staff, physicians, advisors, and volunteers within NL Health Services work collaboratively with a broad range of partners including:

- The Department of Health and Community Services and other government departments and agencies, both provincially and federally;
- Indigenous governments and organizations;
- Foundations and auxiliaries;
- Professional associations;
- Unions and advocacy groups;
- Non-profit, non-governmental, and community-based organizations/groups;
- Advisory committees and volunteer boards;
- Rotaries, Boards of Trade, businesses and service providers, and chambers of commerce;
- Family resource centres;
- Community youth networks;
- Schools, school boards and post-secondary institutions;
- Municipal, provincial and federal government representatives including local service districts, municipal councils, and elected officials;
- Provincial and federal organizations that support activities in research and innovation; and
- General public.

NL Health Services continues to be committed to Indigenous health and availing of opportunities to strengthen its relationships with Indigenous partners including Miawpukek First Nation, Mushuau Innu First Nation, Nunatsiavut Government, NunatuKavut Community Council, and Qalipu Mi'kmaq First Nation, Sheshatshiu Innu First Nation, as well as other local organizations.

Strategic Issues

1



TRANSFORMATION

2



OUR PEOPLE

3



ACCESS

4



QUALITY



STRATEGIC ISSUE ONE: **Transformation**

Transformative change must occur in order to build a more sustainable and well-balanced health-care system that meets the needs of the population now and in the future. It requires bold steps to pave new pathways, create and integrate modern mechanisms and structures, and seek new networks and opportunities.

The health-care system, as originally designed, is not sustainable for today's population and health-care

needs. A shift in the way the system previously operated is needed to better address current challenges and leverage opportunities. Through the amalgamation of the four RHAs and NLCHI to one PHA, the groundwork has begun. This fundamental change will lead to a more cohesive and integrated health-care service that is both responsive to immediate needs and forward-thinking.

NL Health Services will be innovative in its quest to align and strengthen the provincial health-care system through new strategic frameworks and strategies and a re-designed organizational structure. The organization will seek to decrease its environmental impact, be digitally enabled for system efficiency and data governance and improve its fiscal position through sound financial and resource management.



Objective Year One (2023-24)

By March 31, 2024, NL Health Services will have established innovative integration mechanisms and structures to improve provincial collaboration, standardization and sustainability.

Indicators for Year One Objective

- ▶ **Developed, approved and implemented a Health Transformation Framework**
 - Increased # of Strategic Health Networks¹
 - Increased # of Service Integration Teams²

- ▶ **Developed, approved and implemented a Health System Innovation Framework aimed at improving outcomes for patients**
 - Increased # of clients enrolled in health research studies
 - Estimated gross domestic product (GDP) growth invested within the province as a result of increased innovation
 - Increased # of innovation projects initiated

- ▶ **Developed, approved and implemented a Digital Technology and Data Governance Strategy that mitigates cyber security risks**
 - Health Information System contract in place
 - Project team resources are successfully secured
 - Project kick off is successfully achieved

- ▶ **Established and finalized organizational structure**
 - Front-line management structure in place within the fiscal year
 - Maintained a neutral cost of operations

¹ Strategic Health Networks (SHNs) are inter-professional groups with a provincial scope and mandate to drive clinical and operational improvements in health outcomes and service delivery. SHNs bring people together, across professional groups and geographic locations or zones, to apply a provincial, strategic, and evidence-based lens to address identified issues and reduce unwanted variation in practices, processes, and outcomes and to support quality, consistency, and system sustainability.

² Service Integration Teams (SITs) will be established to support programs that are delivered through a zone-based leadership model where SHNs are not in place. SITs will offer a mechanism for provincial coordination around operational issues, risk and quality improvement activities, implementation activities, and provide an avenue for zone counterparts to exchange information, problem-solve, discuss day-to-day operational issues, and collaborate on issues of mutual relevance.



STRATEGIC ISSUE TWO: **Our People**

Our People are NL Health Services' greatest strength. They are approximately 26,000 employees, physicians and volunteers who work together and partner with individuals and families, to provide safe quality care throughout Newfoundland and Labrador. They bring compassion and expertise to services and programs in hospitals, long-term care homes, and communities every single day.

Providing a healthy workplace that is inclusive, psychologically and physically safe, runs with optimal staffing and volunteer levels, and delivers opportunities to learn and grow, is key to retaining and recruiting talent. It is also inextricably linked to a quality patient experience.

COVID-19, world-wide labour shortages, and a significant number of employees approaching and reaching retirement, have impacted the sustainability of the workforce. Vacancy rates are at an all-time high, affecting employee and physician morale and placing strain on some program and service delivery areas.

NL Health Services will be steadfast in its retention and recruitment efforts, strengthening the overall employee experience to support a healthier and more sustainable workforce. The organization will strive to create a safe, engaged and inclusive culture that unites employees, physicians and volunteers from across the province and supports their physical, mental and emotional well-being. To support the process of amalgamating five organizations to one PHA, NL Health Services will work in partnership with its union partners on transition agreements.





Objective Year One (2023-24)

By March 31, 2024, NL Health Services will have enhanced focus on recruitment and retention strategies to support a safe, engaged and inclusive work culture.

Indicators for Year One Objective



Developed, approved and implemented recruitment and retention strategies

- Reduction in physician attrition rate
- Reduced physician vacancies in category B Emergency Rooms³



Developed, approved and implemented an action plan to measure and address Psychological Health and Safety

- Established a baseline for psychological health and safety of employees, physicians, and volunteers
- Worked with union partners to negotiate transition agreements

³ A category B Emergency Room offers 24-hour care, with a physician on-call after hours and limited diagnostics.



STRATEGIC ISSUE THREE: Access

Accessibility to health services is an important determinant of health. To achieve the best possible health outcomes, people require the ability to see the most appropriate health-care provider, in the most suitable care environment, in a timely manner, without barriers, regardless of one's geographic location within the province. This means being able to obtain the health care that one needs, such as an appointment with a family physician, a walk-in counselling service for mental health and



addiction concerns, or an emergency care service, all within a reasonable timeframe. Individuals and families also need to be empowered with the skills and ability to understand and navigate the health-care system as it pertains to one's own health-care journey.

Community Health Needs and Resources Assessment surveys were completed during 2022-23. People in the province identified access as a challenge, particularly in the area of primary health care. Our health system is under considerable pressure due to an increased demand for services and a changing population demographic. Newfoundland and Labrador is an aging province, with higher instance of chronic diseases such as high blood pressure, diabetes and Chronic Obstructive Pulmonary Disease (COPD) when compared to the rest of Canada. The younger population in Newfoundland and Labrador has decreased due to outmigration in the 1990s and a declining birth rate in many areas of the province (Health Accord NL, 2022). The province also has a large geographical landmass, with communities dispersed throughout, including many rural and remote locations. These reasons, coupled with the effects of the global pandemic and a world-wide shortage of health-care workers, have left many people without access to a primary health-care provider, an important first step in preventative health care and chronic disease management. Emergency departments are experiencing a high volume of non-emergency visits that would otherwise be managed by primary health-care providers. In some cases, due to human resource challenges, emergency rooms are closed, and residents are

diverted to another location. Longer than normal wait times for certain appointments and procedures, as well as the number of no shows for appointments, remain a concern.

NL Health Services is committed to increasing access to services and reducing wait times. In alignment with the needs of people of the province, work will begin in key priority areas using innovative approaches to improve timely access to the most appropriate level of care and service and strengthen processes and tools to minimize unnecessary barriers such as missed appointments which lead to unfilled appointments. The organization will also strengthen its wayfinding and navigation resources to support quality and timely access to information.



Objective Year One (2023-24)

By March 31, 2024, NL Health Services, will have commenced redesign of its community-based and hospital-based service delivery for better balance and improving access to remote and rural locations of the province.

Indicators for Year One Objective

- ▶ **Implemented mechanisms to support booking, cancelling and rescheduling of appointments**
 - Increased # of programs or services using central booking
 - Increased # of programs or services using automated notification system

- ▶ **Implemented alternative and/or innovative ways to provide the most appropriate level of care/services**
 - Increased individuals attached to Family Care Teams
 - Increased # of approved Family Care Teams established
 - Decreased Alternate Level of Care days
 - Improved sustainability of Emergency Departments through increased use of virtual care

- ▶ **Increased volume of hip and knee replacements and cataract surgeries performed**

- ▶ **Improved health system navigation for patients**
 - Expanded access to health system navigation resources
 - Established organization standards for wayfinding



STRATEGIC ISSUE FOUR: **Quality**

Quality refers to safe care that improves the health outcomes and care experiences of patients, residents, clients, and families. It requires robust standards and processes delivered by a healthy and sustainable workforce in an environment that is inclusive and respectful of all. It integrates equitable access to health services and information and reflects the voice of the patient and family in the care provided.



Accreditation Canada's Quality

Framework outlines eight dimensions of quality: population focus, accessibility, safety, work-life, client-centred services, continuity, appropriateness, and efficiency. Access, continuity and work-life are addressed in the Access and Our People priority areas. These dimensions, along with people-centred care, contribute to a safe and efficient care model that serves individuals, families, and whole communities.

NL Health Services is committed to delivering the highest level of quality safe care. Using the dimensions of quality, the organization will be innovative in its approach to improving services and programs and reducing risk. This will be achieved through integrated frameworks and performance measures using valid, reliable, and meaningful information. NL Health Services will seek to build meaningful partnerships with Indigenous people and communities and continue to embed the people-centred care approach as a philosophy of care. This priority is aligned with the Health Standards Organization (HSO)'s standards of excellence and the National Framework for Quality and Patient Safety, led by the Canadian Patient Safety Institute and HSO.



Objective Year One (2023-24)

By March 31, 2024, NL Health Services will have initiated activities to improve all dimensions of quality to ensure the right service is being offered to the right person, in the right place, at the right time.

Indicators for Year One Objective

- ▶ **Developed, approved and implemented an Integrated Quality and Learning Health and Social System Framework**
 - Developed, approved and implemented the Quality Action Plan including relevant quality measures
 - Improved compliance to required timelines for access to data and decision support to support a learning health and social system

- ▶ **Developed, approved, and implemented an Integrated Risk Management (IRM) Framework**
 - Completed the organizational IRM Profile including relevant measure

- ▶ **Implemented the Just Culture Program**
 - Completed the roll-out of Just Culture training across all zones

- ▶ **Identified and built on existing mechanisms to improve meaningful partnerships with Indigenous peoples and communities**
 - Established an Office of Indigenous Health and Cultural Safety
 - Developed formal communication processes with each Indigenous people

- ▶ **Improved mechanisms to promote meaningful engagement of patients, families and communities**
 - Increased meaningful involvement of Patient Family Advisors and Community Advisory Committee members
 - Established Regional Health Councils

Appendix A: Organizational Profiles

Labrador-Grenfell Zone

Please visit the [website](#) for a full listing of facilities with contact information.

Hospitals/ Health-Care Centres

- [Labrador West Health Centre](#)
- [Labrador Health Centre](#)
- [Charles S. Curtis Memorial Hospital](#)

Long-Term Care

- [John M. Gray Centre and Complex](#)
- [Happy Valley-Goose Bay Long-Term Care Home](#)

Population Served

Approximately **34,930** people reside in the Labrador-Grenfell Zone,^[3] including three Indigenous groups: Nunatsiavut Government, Innu Nation, and NunatuKavut Community Council.

Geographic Boundaries

The Labrador-Grenfell Zone covers Labrador and all communities north of Bartlett's Harbour on the Northern Peninsula.

Western Zone

Please visit the [website](#) for a full listing of facilities with contact information.

Hospitals/ Health-Care Centres

- [Sir Thomas Roddick Hospital](#) in Stephenville
- [Western Memorial Regional Hospital](#) in Corner Brook
- [Dr. Charles L. LeGrow Health Centre](#) in Port aux Basques
- [Bonne Bay Health Centre](#) in Norris Point
- [Calder Health Centre](#) in Burgeo
- [Rufus Guinchard Health Centre](#) in Port Saunders

Long-Term Care

- [Corner Brook Long-Term Care Centre](#) in Corner Brook
- [Bay St. George Long-Term Care Centre](#) in Stephenville Crossing
- [Western Long-Term Care Home](#) in Corner Brook
- [Corner Brook Protective Community Residences](#) in Corner Brook (There are four separate bungalows)

Population Served

Approximately **73,415** people reside in the Western Zone.^[4]

Geographic Boundaries

The Western Zone’s geographical boundaries are from Port aux Basques southeast to Francois, northwest to Bartlett’s Harbor, and on the eastern boundary north to Jackson’s Arm.

Central Zone

Please visit the [website](#) for a full listing of facilities with contact information.

Health-Care Centres / Long-Term Care by Location

Baie Verte, Green Bay, Buchans

- A.M. Guy Memorial Health Centre
- Baie Verte Peninsula Health Centre
- Green Bay Health Centre
- Valley Vista Senior Citizen's Home

Gander Area

- James Paton Memorial Regional Health Centre
- Lakeside Homes

Grand Falls-Windsor Area

- Carmelite House
- Central Newfoundland Regional Health Centre
- Grand Falls-Windsor Long-Term Care

Lewisporte, Exploits, Coast of Bays

- Connaigre Peninsula Health Centre
- Dr. Hugh Twomey Health Care Centre
- Lewisporte Health Centre
- Protective Care Residence

Isles of Notre Dame, Kittiwake Coast

- Bonnews Lodge
- Dr. Y.K. Jeon Kittiwake Health Centre
- Fogo Island Health Centre
- Notre Dame Bay Memorial Health Centre

Population Served

Approximately **88,610** people reside in the Central Zone.^[5]

Geographic Boundaries

The Central Zone extends from Charlottetown in the east, Fogo Island in the north, Harbour Breton in the south, to Baie Verte in the west.

Eastern – Rural Zone

Please visit the [website](#) for a full listing of facilities with contact information.

Hospitals/ Health-Care Centres

- [Bonavista Peninsula Health Centre](#)
- [Dr. A. A. Wilkinson Memorial Health Centre](#)
- [Placentia Health Centre](#)
- [U.S. Memorial Health Centre](#)
- [Burin Peninsula Health Care Centre](#)
- [Carbonear General Hospital](#)
- [Dr. G.B. Cross Memorial Hospital](#)

Long-Term Care

- [Dr. Walter Templeman Health Care Centre](#)
- [Golden Heights Manor](#)
- [Bonavista Bungalows Protective Community Residence](#)
- [Carbonear Long-Term Care Facility \(Pte. Josiah Squibb Memorial Pavilion\)](#)
- [Dr. Albert O’Mahony Memorial Manor](#)
- [Clarenville Protective Community Care Residence](#)
- [Blue Crest Nursing Home](#)

Population Served

Approximately **119,497** people reside in the Eastern Rural Zone.^[2]

Geographic Boundaries

The Eastern Rural Zone includes Bell Island, Bonavista Peninsula, Burin Peninsula, Clarenville and area, Conception Bay Centre/Holyrood, Placentia area-Cape Shore, Southern Shore, St. Mary’s Bay and Trinity-Conception.

Eastern – Urban Zone

Please visit the [website](#) for a full listing of facilities with contact information.

Hospitals/ Health-Care Centres

- [Dr. L.A. Miller Centre](#)
- [Health Sciences Centre](#)
- [Janeway Children's Health and Rehabilitation Centre](#)
- [St. Clare's Mercy Hospital](#)
- [Waterford Hospital](#)

Long-Term Care

- Caribou Memorial Veterans Pavilion
- Agnes Pratt Nursing Home
- [Salvation Army Glenbrook Lodge](#)
- [Pleasant View Towers](#)
- [Saint Luke's Homes](#)
- [St. Patrick's Mercy Home](#)

Population Served

Approximately **206,779** people reside in the Eastern Urban Zone.^[8]

Geographic Boundaries

The Eastern Urban Zone includes the Northeast Avalon/St. John's metro region which is comprised of:

1. Bauline, Pouch Cove, Flatrock
2. Conception Bay South, Foxtrap, Manuels
3. Petty Harbour-Maddox Cove
4. Logy Bay, Middle Cove, Outer Cove, Torbay
5. Mount Pearl
6. Paradise
7. Portugal Cove- St. Philip's
8. St. John's

^[8] Source: https://www.lghealth.ca/wp-content/uploads/2021/11/2020-21-AR_Final_Sept-22.pdf

^[2] When website bed counts differed from the environmental scan in the 2020-21 Annual Performance Report (APR), the APR numbers were used.

^[3] Source: Statistics Canada (2022). Census of Population 2021. Access from Community Accounts on June 6, 2023. https://nl.communityaccounts.ca/profiles.asp?_vb7En4WVgaSzyHE

^[4] Source: Statistics Canada (2022). Census of Population 2021. Access from Community Accounts on June 6, 2023. https://nl.communityaccounts.ca/profiles.asp?_vb7En4WVgaSzyHI

^[5] Source: Statistics Canada (2022). Census of Population 2021. Access from Community Accounts on June 6, 2023. https://nl.communityaccounts.ca/profiles.asp?_vb7En4WVgaSzyHM

^[7] An individual's age is their age as of March 31, 2020. Population estimates are derived from the MCP Beneficiary Registry for 2019/20 Fiscal Year. Counts are based on active Health Care Numbers for NL residents only using the following criteria: Eligibility Date less than or equal to March 31, 2020 and Termination Date is greater than or equal to April 1, 2019; Termination code within the following group: 30 Work permit expired; 31 Student visa expired; 32 Visitors permit expired; 33 Ministers permit expired; 34 Immigration documents expired; 35 Refugee document expired; 36 Child of immigrant parent; 62 Permanent Resident Document; 90 Children in care (CYFS); 98 Re-registration

^[8] An individual's age is their age as of March 31, 2020. Population estimates are derived from the MCP Beneficiary Registry for 2019/20 Fiscal Year. Counts are based on active Health Care Numbers for Newfoundland and Labrador residents only using the following criteria: Eligibility Date less than or equal to March 31, 2020 and Termination Date is greater than or equal to April 1, 2019; Termination code within the following group: 30 Work permit expired; 31 Student visa expired; 32 Visitors permit expired; 33 Ministers permit expired; 34 Immigration documents expired; 35 Refugee document expired; 36 Child of immigrant parent; 62 Permanent Resident Document; 90 Children in care (CYFS); 98 Re-registration

Appendix B: Mandate

The NL Health Services mandate is derived from the **Provincial Health Authority Act** and its regulations. NL Health Services is responsible for the delivery and administration of health services and community services in Newfoundland and Labrador, in accordance with the above-referenced legislation and other relevant legislation and regulations. The Provincial Health Authority Act outlines the responsibility of health authorities as the following under sections 19 and 20:

Responsibilities of authority re: health and community services

1. The authority is responsible for the delivery and administration of health and community services in the province in accordance with this Act and the regulations.
2. In carrying out its responsibilities, the authority shall
 - a. promote and protect the health and well-being of persons in the province 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 on an ongoing basis;
 - c. develop objectives and priorities for the provision of health and community services which meet the needs of the province and which are consistent with the objectives and priorities established by the minister;
 - 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, 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 the province;
 - h. provide information to the residents of the province respecting
 - i. the services provided by the authority,
 - ii. how they may gain access to those services, and
 - iii. how they may communicate with the authority respecting the provision of those services by the authority;
 - i. monitor and evaluate the delivery of health and community services and compliance with
 - i. standards,
 - ii. objectives, and
 - iii. guidelines established or adopted under paragraph 5(1)(b)

- j. develop and maintain standards of care for the delivery of provincial programs;
- k. oversee accountability for health outcomes through monitoring and reporting on quality, safety and performance;
- l. in conjunction with the minister, implement a provincial strategy for recruitment and retention of health professionals;
- m. comply with the direction for the delivery and administration of health and community services set by the minister;
- n. report to the minister on matters related to the delivery of health and community services when requested; and
- o. comply with directions the minister may provide.

Responsibilities of authority re: information management

1. The authority is responsible for:
 - a. providing assistance and support to individuals, communities, other health service providers and policy makers at federal, provincial and regional levels to enhance the health and well-being of persons in the province through the planning and delivery of health and community services by
 - i. developing, operating and managing a comprehensive and aligned information system that fully integrates and uses data and health information from all components of the health and community services system for the delivery of health-care and health system planning,
 - ii. developing data and technical standards and keeping them up-to-date,
 - iii. managing provincial health data and information assets,
 - iv. preparing health reports and conducting applied health research and evaluation, and
 - v. providing health analytics and decision support services;
 - b. protecting the privacy of individuals whose personal information or personal health information is collected, used, disclosed, stored or disposed of by the authority in accordance with the *Access to Information and Protection of Privacy Act, 2015* and the *Personal Health Information Act*;
 - c. monitoring and evaluating the development, operation and management of an information system and compliance with
 - i. standards,
 - ii. objectives, and
 - iii. guidelines established or adopted under paragraph 5(1)(b);
 - d. providing the minister with information, when requested, to enhance the health and well-being of persons in the province through the planning and delivery of health and community services; and
 - e. carrying out other responsibilities prescribed by the regulations.
2. The information system referred to in subparagraph (1)(a)(i) shall

- a. protect the confidentiality and security of personal information and personal health information that is collected, used, disclosed, stored or disposed of by the authority;
 - b. provide accurate and current information;
 - c. be efficient and cost-effective; and
 - d. be flexible and responsive to the changing requirements of the system.
3. In carrying out its responsibilities the authority shall comply with directions the minister may provide.

Appendix C: Lines of Business

NL Health Services provides a continuum of programs and services for the people of Newfoundland and Labrador. These programs and services are based in acute care, long-term care and community settings. Inherent in all lines of business is the need for learning and education in its broadest context. An interdisciplinary team of health professionals, support staff and partners provide the care and services required to meet the mandate of NL Health Services.

NL Health Services accomplishes its mandate through four lines of business:

- Promoting Health and Well-Being
- Providing Supportive Care and Rehabilitative Services
- Treating Illness and Injury
- Advancing Knowledge and Transforming Health Systems

It is important to note that programs and services may fall under one or more headings above. Provincial programs and services will work collaboratively across all zones to support the delivery of integrated, high-quality health-care services. It is recognized that there may be further realignment of programs and services within NL Health Services during the life of this Strategic Plan. Lines of business are delivered within the context of current legislation, where applicable. The lines of business are outlined in detail below.

Outline of Lines of Business

Promoting Health and Well-Being

NL Health Services implements measures that promote and protect population health and help prevent disease and injury. The primary initiatives in this line of business include population health assessment, surveillance and epidemiology; growth and development in the early years; health promotion; health protection; and disease and injury prevention.

Population Health Assessment, Surveillance and Epidemiology

Population health assessment, surveillance and epidemiology ensure programs and services are informed by population health data and respond effectively to current and evolving conditions that contribute to the public's health and well-being. Population health assessment is the process of assessing the changing strengths, vulnerabilities, and needs of communities. Surveillance is the process of collecting health data to track diseases, the health status of populations, the determinants of health, and differences among populations. Assessment and health surveillance include the information collected to inform all public health work. They rely on the science of epidemiology, which focuses on describing health and disease in populations rather than in individuals.

Epidemiology contributes information essential for understanding the determinants of health and for developing and evaluating public health programs.

Growth and Development in the Early Years

Supporting growth and development in the early years incorporates programs and services to optimize the well-being of children, youth and families in a variety of settings (home, school, community) through the creation and reinforcement of supportive environments and practices during the preconception to early years of children's development.

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

- Maternal child health care
- Services to families of infants, preschool and school age children who have or are at risk of delayed development

Health Promotion

Health promotion is the process of implementing a range of social and environmental interventions that enable people and communities to increase control over and to improve their 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 personal skills (e.g., child and family health programs)
- Re-orienting health services to focus on prevention and early intervention (e.g., through engaging the public and partnerships with community agencies, such as self-management programs and youth outreach services)
- Re-orienting health services to focus on population health as well as individual health outcomes (e.g., addressing the determinants of health and health inequities)
- Supporting health service delivery (e.g., Healthy Baby Clubs, Child Health Clinics)

Health promotion activities are integrated throughout all lines of business within NL Health Services.

Health Protection

Health Protection involves the protection of individuals, groups and populations through expert advice and effective collaboration to prevent and mitigate the impact of infectious disease, environmental, chemical and radiological threats. Health protection involves

using the latest evidence to advance knowledge and guide practice and uses surveillance data to monitor the health of the population. Health protection includes the regulatory framework, programs and services for the control of diseases and protection from public health threats. Health protection is delivered within the context of current legislation, where applicable.

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

- Communicable disease prevention and control
- Environmental public health support
- Emergency preparedness and response

Disease and Injury Prevention

Many illnesses can either be prevented or delayed and injuries avoided. Prevention services offer early intervention and best available information to members of the public to prevent the onset of disease, illness and injury, and/or the deterioration of well-being. 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 specific areas.

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

- Health surveillance
- Screening (e.g., breast, cervical, colorectal, and prostate)
- Noncommunicable disease and injury prevention
- Chronic disease prevention and management

Providing Supportive Care and Rehabilitative Services

NL Health Services provides broad ranging supportive care services across the continuum of care and lifespan within legislation, provincial guidelines, organizational policies, and resources. This includes the provision of residential care options, community-based support, special assistance and continuing care, home support, personal care home and nursing home care for individuals based on assessed needs. These services are provided in select locations and in some cases may be subject to clinical and/or financial assessment. There is occasionally a relationship with other Provincial Government agencies for subsidized funding to supplement programs. Supportive care promotes the safety, health and well-being of the individual by supporting the existing strengths of the individual, family and community. The main categories within this area are listed below:

Individual, Family and Community Supportive Services

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

- Services to clients with physical/development disabilities or other cognitive

impairments

- Services to clients experiencing psychosocial concerns (e.g., disruption of family functioning, lack of social support, mental health or substance use concerns, violence)
- Adult protection services
- Home support services
- Health-care supplies and equipment (e.g., oxygen, ostomy supplies, bathing supports, and drug cards)
- Home care, respite, convalescent, and palliative/end-of-life care

Long-Term Care and Residential Services

Long-term care and residential services encompass an extensive range of the organization's supports and partnerships including:

- Long-term care homes
- Seniors' cottages and congregate living
- Protective community residences
- Personal care homes
- Alternate family care
- Cooperative Living
- Therapeutic residences
- Hostel accommodations

Rehabilitative Services

The organization offers a variety of rehabilitative services for individuals following illness or injury. These services are offered in selected locations through a referral process and include:

- Post-acute nursing services both in clinic and home settings
- Rehabilitation services such as physiotherapy, occupational therapy, speech-language pathology, audiology and social work
- Rehabilitation centres and inpatient programs
- Restorative care (inpatient post-acute) program

Treating Illness and Injury

NL Health Services investigates, treats, rehabilitates and cares for individuals with illness or injury. The clinical intent is to apply interventions that will reduce the severity of an illness or injury, preserve and improve the health of the individual, provide comfort measures and to educate and inform patients. Additionally, we provide care at the beginning of life (newborn care) and at the end of life (palliative care).

Services are offered in a variety of locations throughout the province, 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. These services are provided by multidisciplinary teams of health professionals, through a variety of inpatient and outpatient settings. The main categories within this area are listed below:

Primary Health Care

Primary health care is typically an individual's first point of contact with the health-care system and can encompass a range of community-based services essential to maintaining and improving health and well-being throughout an individual's lifespan. Both salaried and fee-for-service physicians and salaried nurse practitioners work within one of the organization's facilities or operate their own independent offices to provide primary health care. There are also a growing number of primary health-care projects in which physicians, nurse practitioners, and other health professionals work in a coordinated manner to offer care.

Ambulatory Care

Services include day procedures, surgical day care, endoscopic services, diagnostic and laboratory services, specialist clinics both regular (e.g., medical and surgical) and visiting (e.g., nephrology), diabetes education, cardio-pulmonary services, nutritional services and a variety of clinical support services.

Emergency Care

Services consist of hospital emergency services including emergency room services and the monitoring of community-based, private provider and hospital-based emergency medical services. In addition, patient transport provides both ground and air transport of patients, conducted by both public and private operators and includes ambulance and client transport for medical services.

Medical Services

Services include internal medicine, family medicine, psychiatry, pediatrics, obstetrics, nephrology, neurology, dermatology, medical oncology including chemotherapy, physiatry, gastroenterology, cardiology, intensive care, renal dialysis, and palliative care.

Mental Health & Addiction Services

Services range from health promotion-based programs to diagnosis and treatment (inpatient, outpatient and residential) to follow-up services. There are strong links with community-based partners such as advocacy groups, self-help groups, employment and housing. 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.

Surgical Services

Services include anesthesiology, general surgery, orthopedics, urology, ophthalmology, otolaryngology, obstetrics and gynecology, colposcopy, vascular and dental.

Tertiary Hospitals

Tertiary hospitals provide primary-, secondary- and tertiary-level services. These hospitals are academic health-care 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 footnote⁴.

Advancing Knowledge and Transforming Health Systems

NL Health Services is dedicated to advancing research, education and knowledge dissemination. The organization will continue to utilize evidence-based practices to transform the health system into an efficient and effective model of service that positions NL Health Services as a leading Canadian health-care organization. The main categories within this area are listed below:

Education

The organization plays a key role in ensuring that the next generation of health professionals has opportunities to gain relevant educational experience. Education of the next generation of health-care providers is offered through affiliation agreements with numerous educational institutions within the province, across the country and further abroad. These arrangements enable students to study and participate in fieldwork experiences. Staff and physicians are encouraged to seek the best information and knowledge from multiple sources and to incorporate evidence into their practice. Continuing education for NL Health Services' staff, physicians, volunteers, and advisors is offered throughout the organization in various formats. NL Health Services also partners with other government departments and community agencies to offer training to health professionals and the public. In addition, the Centre for Nursing Studies and Western Regional School of Nursing offer Practical Nursing, Bachelor of Science in Nursing and various continuing education programs.

⁴ 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, hematology, nephrology, pharmacy, respirology, rheumatology; surgery – anesthesia and perioperative medicine, cardiac surgery, dentistry, general surgery, neurosurgery, ophthalmology, orthopedics, otolaryngology, plastic surgery, thoracic surgery, urology, vascular surgery; psychiatry - child/adolescent psychiatry, geriatric psychiatry, adult and general psychiatry, forensic psychiatry.

Research and Innovation

NL Health Services is committed to ensuring that the issues faced in daily practice bring about research and innovation to find creative health-care solutions. The Patient Research Centre provides for the coordination and implementation of clinical trials and all zones support applied health research projects. Research and innovation are collaborative endeavours and overall success depends upon partnerships with patients, staff, suppliers, the academic community, funding agencies, private enterprise, the technology sector, and many others that wish to improve the health and well-being of people in this province.

Planning and Performance

The organization regularly assesses its performance as part of the strategic planning and accreditation processes, as well as through an array of planning, evaluation, and quality improvement frameworks and practices. By employing an integrated approach to quality and using data to measure outcomes, the organization is able to determine where to focus its efforts to transform service delivery and provide exemplary high quality care experiences and best possible outcomes for all Newfoundlanders and Labradorians.

Data and Information Services

Includes the delivery of a full range of information products and services in support of health system management including health analytics, data access, applied health research, evaluation, performance improvement, clinical efficiency, data and information management, business intelligence, decision support, and data quality and standards. Data and information services support health system management and transformation through information, obtained through health analytics, evaluation and business intelligence, as part of a comprehensive approach to supporting system transformation that also includes an emphasis on building capacity in the system for continuous quality improvement.

Digital Health Services

Services include the delivery of information technology and eHealth services applied in the health-care system to provide quality care. A key area of service, eHealth, refers to all of the electronic, communication and technology tools used to share health and administrative information provided across NL Health Services. eHealth tools provide more accurate and reliable data and are designed to facilitate better sharing and interpretation of health information among health professionals involved in a person's care regardless of location. In turn, improved access to this information supports improved health-care delivery, decision-making and policy development.

Major programs include but are not limited to:

- HEALTHe NL, the provincial electronic health record

- eDOCSNL, a program that supports the implementation, adoption and use of the provincial electronic medical record solution in participating health-care provider offices across the province
- Virtual care, a suite of services used to connect individuals to health-care providers who are not located in the same community, as well as to overcome other barriers to accessing in-person care. Services include telehealth, home-based telehealth, remote patient monitoring, telepathology, and virtual emergency room services, among others.

Transformation

NL Health Services is committed to transforming the provincial health-care system into a more sustainable and well-balanced system that meets the needs of the population now and in the future. A health transformation framework will outline the resources and supports for transformation including a health advisory council, transformation office, strategic health networks, and service integration teams.

Strategic Health Networks (SHNs) are inter-professional groups with a provincial scope and mandate to drive clinical and operational improvements in health outcomes and service delivery. SHNs bring people together, across professional groups and geographic locations or zones, to apply a provincial, strategic, and evidence-based lens to address identified issues and reduce unwanted variation in practices, processes, and outcomes and to support quality, consistency, and system sustainability.

Service Integration Teams (SITs) will be established to support programs that are delivered through a zone-based leadership model where SHNs are not in place. SITs will offer a mechanism for provincial coordination around operational issues, risk and quality improvement activities, implementation activities, and provide an avenue for zone counterparts to exchange information, problem-solve, discuss day-to-day operational issues, and collaborate on issues of mutual relevance.

Appendix D: The Planning Process

The year one planning process included the following phases:

1. Establish the Context: Jurisdictional Scanning and Engagement Activities:

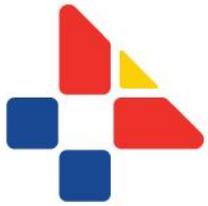
- a. Sources reviewed - general:
 - i. Health Accord NL recommendations
 - ii. Contextualized Health Research Synthesis Program research prioritization
 - iii. RHA & NLCHI Transition documents / communication / governance / internal data
 - iv. Current RHA & NLCHI strategic directions / work ongoing
 - v. Strategic directions of government
 - vi. Quintuple aim for health-care improvement
 - vii. PHA quality framework (draft)
- b. Sources reviewed - prior engagement activities:
 - i. Community Health Assessments
 - ii. Results from other existing surveys & engagement sessions
 - iii. Transition questionnaire for the Board of Trustees
 - iv. Input from the executive management committee
 - v. Input from client and family advisors
 - vi. Branding survey results
 - vii. Strategic planning survey results

2. Validate Strategic Priorities:

- a. Strategic planning committee
- b. Executive management committee
- c. Board of Trustees
- d. Client and family advisors

3. Plan Development / Implementation (2023-2026)

- a. Establish planning cycle
- b. Establish working groups
- c. Assign leads for strategic goals
- d. Monitor progress
- e. Facilitate engagement



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