

# Fraser Health Authority

## 2014/15 ANNUAL SERVICE PLAN REPORT



For more information on the  
**FRASER HEALTH AUTHORITY**

Suite 400, Central City Tower  
13450 102<sup>nd</sup> Avenue  
Surrey, B.C. V3T 0H1

Telephone: 604-587-4600  
Facsimile: 604-587-4666

or visit our website at  
[www.fraserhealth.ca](http://www.fraserhealth.ca)

## Board Chair's Message and Accountability Statement



*The 2014/15 Fraser Health Authority Annual Service Plan Report* was prepared under the Board's direction in accordance with the *Health Authorities Act* and the Performance Reporting Principles for the British Columbia Public Sector. The Annual Report is consistent with Government's strategic priorities and strategic plan, and the Ministry of Health's goals, objectives and strategies. The Board is accountable for the contents of the plan.

The service plan was framed by three goals:

- supporting the health and wellbeing of British Columbians,
- delivering a system of responsive and effective health care services, and
- ensuring value for money.

The service plan also set out the priority areas of action undertaken to deliver on each of the three goals. Among the activities undertaken were:

- the strengthening of partnerships with the Ministry of Health, First Nations Health Authority, Divisions of Family Practice and municipalities in pursuit of improving health and wellbeing;
- the re-orientation toward patient centredness, investments to enhance community based services and care, and improving surgical waitlists and access to quality diagnostics in pursuit of delivering responsive and effective services; and
- in partnership with Lower Mainland health authorities and with the Ministry, delivery of an accessible, responsive, evidence-informed, sustainable pharmaceutical management and delivery program as part of the pursuit of value for money.

This report on progress presents performance measures that are consistent with the Ministry of Health's mandate and goals, and focus on aspects critical to the organization's performance. Additional indicators are available in [Our Healthcare Report Card](#) which measures and guides improvements at Fraser Health, and each hospital.

A handwritten signature in black ink, appearing to read 'Karen Matty'.

Karen Matty  
Board Chair

November 25, 2015

## **Table of Contents**

Board Chair’s Message and Accountability Statement.....	3
Purpose of the Organization.....	5
Strategic Direction and Context.....	6
Strategic Direction .....	6
Strategic Context.....	6
Report on Performance .....	8
Goals, Objectives, Strategies and Performance Results .....	8
Financial Report.....	20
Management Discussion and Analysis .....	20
Resource Summary Table .....	20
Major Capital Projects .....	21
Appendix A: Health Authority Contact Information .....	24
Appendix B: Hyperlinks to Additional Information .....	24

## Purpose of the Organization

As one of five regional health authorities in British Columbia, Fraser Health organizes and operates a system for health and delivers public health, hospital, residential, community-based and primary health care services. Fraser Health's legal authority is specified by the *Health Authorities Act*. Fraser Health partners with the two non-geographic health authorities (Provincial Health Services Authority and the First Nations Health Authority) on service delivery that transcends the geographic boundaries of Fraser Health.

The Ministry of Health (Ministry) appoints nine directors to the board to govern Fraser Health. Its governance approach is guided and assessed by *Best Practice Guidelines* and *Governance and Disclosure Guidelines for Governing Boards of British Columbia Public Sector Organizations*. The board provides oversight to ensure Fraser Health fulfills its vision and purpose and operates in accordance with its values. Additional board accountability and governance practice information is available at [www.fraserhealth.ca/about-us/leadership/board-of-directors](http://www.fraserhealth.ca/about-us/leadership/board-of-directors).

Central to the vision and mission of Fraser Health is the optimization of the health status of its residents. Enjoying good health and a high quality of life throughout the course of one's lifetime is a consequence of many factors, including access to quality education, meaningful employment, supportive family and friends, community environments and making healthy lifestyle choices. Serving this mission are over 22,000 staff members, over 2,500 physicians and 6,500 volunteers working in partnership in very diverse work settings from hospitals, to mental health centres, public health units and services in ambulatory clinics and in homes. Fraser Health's purpose and services are further detailed at [www.fraserhealth.ca](http://www.fraserhealth.ca).

Availability of performance based information is key to increasing accountability. In September 2014, Fraser Health began the regular production and release of Health Care Report Cards which include organization and site based measures. Since the initial release, awareness and use of the Report Cards have steadily increased at the hospital, program, public, governance and operational levels. The performance information they contain is informing decisions and driving improvement in focused areas across the organization. *Our Health Care Report Cards* are available at [www.fraserhealth.ca/about-us/transparency/reportcard](http://www.fraserhealth.ca/about-us/transparency/reportcard).

## Strategic Direction and Context

### *Strategic Direction*

In February 2014, the Ministry released [Setting Priorities for the B.C. Health System](#) that identified goals, priorities and enabling strategies for the health system. The Ministry also framed efforts to improve health care in terms of the triple aim (Institute for Health Improvement) of improving the health of populations, improving the patient and provider experience of care and reducing the per capita cost of health by focusing on quality and the efficiency of care delivery.

The [Taxpayer Accountability Principles](#) were included with the 2014/15 Government Letter of Expectations Addendum for Fraser Health, and address efficiency, accountability, appropriate compensation, service, respect and integrity. The principles are built into Fraser Health's ongoing business to ensure decisions made reflect the priorities and values of government and their shareholders – the citizens of B.C.

The health system is a complex network of interdisciplinary teams of skilled professionals, organizations and groups that work together to provide value for patients, the public and taxpayers. The key challenge is to deliver a high-performing sustainable health system (from prevention to end-of-life care) in the context of significant growth in demand.

Health authority planning follows the strategic direction for the health system as outlined in *Setting Priorities for the B.C. Health System*. Patient-centred care is a central facet of all health service delivery, as is a renewed focus on performance management and prioritizing cross sector actions to realize an overall improvement in the quality and sustainability of the B.C. health system:

- Improving quality of care for seniors with complex health issues and patients with mental illness and/or addictions while reducing hospitalizations
- Improving access to surgical services and procedures
- Improving delivery of rural health services

Fraser Health works collaboratively with the Ministry of Health and other system partners to implement actions identified in the health system policy discussion papers released in February 2015.

### *Strategic Context*

Although the B.C. health system effectively meets the majority of the population health needs, it continues to be challenged by an increasing demand for health services. The most significant drivers of rising demand are the aging population, the increasing need to provide care to frail seniors, a rising burden of illness from chronic diseases, mental illness and cancer and advances in technology and pharmaceuticals driving new costly procedures and treatments. The pressure is compounded by the need for new care delivery models by health professionals and health care workers, and the need to maintain and improve the health system's physical infrastructure (i.e. buildings, equipment and information technology). In the current economic climate it is even more important for the health system to find new and creative ways to ensure the resources available for health care services are used effectively and in ways that most benefit the people of B.C.

Fraser Health has made meaningful progress in improving services across a range of areas over the past several years, however some service areas continue to fall short of targets and require significant effort in collaboration with the Ministry and other system partners to identify and implement sustainable solutions. These areas include:

- a) access to family physicians and primary care in many communities,
- b) providing access to child and youth mental health services and effectively treating some adult patients with moderate to severe mental illnesses and/or addictions,
- c) proactively responding to the needs of the frail elderly who may require complex medical supports and assistance with activities of daily living in order to remain living in the community,
- d) emergency department congestion in some large hospitals,
- e) long wait times for some specialists, diagnostic imaging, and elective surgeries,
- f) stress on access to inpatient beds in some hospitals, and
- g) responding to the changing needs of patients in residential care in terms of dementia.

## Report on Performance

The Ministry of Health Mandate Letter directs Fraser Health to ensure value for taxpayers while providing responsive and effective health services.

Fraser Health enjoys a productive working relationship with the Ministry of Health, and routinely engages with Ministry staff to ensure government direction on strategic and operational priorities is understood. This collaborative approach is aligned with the requirements of the *Taxpayer Accountability Principles*, and enabled Fraser Health to make significant progress against a number of 2014/15 action items including:

- Strengthened budget management at site levels;
- Enhanced report cards and productivity reports at the site level;
- Establishment and implementation of policy outlining accountabilities, responsibilities and budget variance protocols including escalation to the Board;
- Implementation of a strong process to control and monitor staff hiring;
- Keeping the Board Governance and Human Resource Committee well apprised of executive and excluded compensation requirements, issues and impacts;
- Evolution and enforcement of a new Standards of Conduct Policy covering Board to front-line level decisions and activities;

This 2014/15 Annual Service Plan Report reflects results Fraser Health achieved in support of system wide goals, priorities and strategies of the Ministry of Health as set out in *Setting Priorities for the B.C. Health System*. The Ministry of Health articulates three goals for the health system:

1. Support the health and well-being of British Columbians.
2. Deliver a system of responsive and effective health care services across British Columbia.
3. Ensure value for money.

Underlying these goals and objectives is the principle of patient and family centred care: a sustained focus on shifting the culture of health care in B.C. to put patients at the centre, which will drive policy, accountability, service design and delivery in the coming years.

### ***Goals, Objectives, Strategies and Performance Results***

#### **Goal 1: Support the health and wellbeing of British Columbians**

People living in British Columbia and in Fraser Health are among the healthiest people in the world. Providing choices and supports for people to invest in their health will protect this excellent health status for the majority of residents while also helping those who do not enjoy good health, or who are at risk of diminishing health from factors such as poor diet, obesity, physical inactivity, injuries, tobacco use and problematic substance use. In collaboration with the Ministry of Health and its government and non-governmental partners, Fraser Health will promote health as a valued outcome of policies and programs in order to make long term sustainable changes for improved health.



**Objective 1.1: Implement targeted and effective primary prevention and health promotion.**

Chronic disease is the largest cause of death and disability, represents the largest proportion of the burden of disease, and drives a significant part of downstream health costs. Evidence suggests that, over time, a primary prevention and health promotion agenda can make progress in improving the overall health of the population, preventing or delaying the onset of chronic conditions and improving the overall quality of life.

**Strategies**

• **Priority Area: Prevention and Promotion**

- Work in partnership with the Ministry of Health and other partners to build and deliver the next phase of *Healthy Families BC*, the provincial chronic disease and injury prevention plan, that focuses on providing evidence-based programs, services and interventions to address major risk and protective factors across the life cycle.
- Work in partnership with the Ministry and other partners to update and continue to implement *Healthy Minds, Healthy People: A Ten-Year Plan to Address Mental Health and Substance Use in British Columbia* to ensure alignment with the plan’s focus on prevention and supporting mental well-being.
- Improve health outcomes and wellbeing for Aboriginal individuals by working with Fraser Health communities, the new First Nations Health Authority, the new health plan and respecting the commitments outlined in the British Columbia Tripartite Framework Agreement. Fraser Health is collaborating with partners to offer training on youth suicide prevention, intervention and supporting healthy living activities to encourage positive behavioral change.
- Work in partnership with the Division of Surrey/North Delta to improve the health of the South Asian community through the South Asian Health Centre. This work will help Fraser Health to better understand and manage chronic conditions and offer targeted education on healthy eating and encouraging positive behavioral change.
- Support Community efforts on comprehensive healthy living plans to support healthy living through planning, policy, built environments and other mechanisms.

**Performance Measure 1: Healthy communities**

Performance Measure	2011/12 Baseline	2014/15 Target	2014/15 Actual	2015/16 Target	2016/17 Target
Percent of communities that have completed healthy living strategic plans	40%	45%	80%	50%	70%

**Data Source:** Survey, ActNow BC Branch, Population and Public Health Division, Ministry of Health.

### **Discussion**

This performance measure focuses on the proportion of the 162 communities in British Columbia that have developed and are implementing joint healthy living strategic plans in partnership with their health authorities. Community efforts to support healthy living through joint planning, policy, and collaborative action are critical to improving the quality of life of individuals where they live, work, learn and play. Sustained community level actions will decrease risk factors and promote protective factors for chronic diseases and injury.

With 80% of communities having a completed health living strategic plan in 2014/15, Fraser Health exceeded the target.

## **Goal 2: Deliver a system of responsive and effective health care services across British Columbia**

Fraser Health is committed to providing the best possible quality of care and service, which means the care people receive responds to their needs and will lead to the best health outcomes. Fraser Health must proactively address the increasing needs of the population due to aging, a rising burden of illness from chronic disease and an increased prevalence of frailty by providing integrated care in the community. Managing care in the community effectively will reduce demands on emergency departments, acute care hospitals and residential care. Innovation in care processes, roles, policies and practices will be key to significant continuous improvement

### **Objective 2.1: Strengthen commitments to patient-centered care**

In order to deliver more responsive and effective health care services, Fraser Health needs to become a more patient and family centred organization. This requires leadership and a commitment to change the organization's culture to view patients and families as equal members of the care team with the right to participate in decisions affecting the planning, delivery and evaluation of care. Fraser Health defines Patient Care as: "The patient and family is at the heart of every decision: empowered to be equal partners in their care, valuing their needs, preferences and cultural beliefs". Every patient will be treated with respect, caring, trust and dignity, have access to information, participate in their care, and collaborate as a true member of the healthcare team.

Fraser Health will strive to hardwire patient centred care into its health service delivery systems, board and executive management decision making to improve the patient experience and achieve improved population and patient outcomes. Over the coming three years as the Board moves forward with its plan it will ensure that it systematically examines the patient experience when redesigning services and will promote shared values around creating a quality patient experience through recognition, respect, empathy, compassion and dignity.

## Strategies

- **Priority Area:** *Patient Centeredness*

- Identify and implement ways to incorporate patients into all Fraser Health work, including Patient Advisory groups to draw their insights and advice in Fraser Health continuous improvement efforts throughout the system.
- Partner with PHSA to develop a framework to create culturally safe environments building on existing work within Fraser Health.
- Strengthen Fraser Health methods and processes for gathering insights about care experiences through real time surveys, interviews and patient focus groups.
- Improve Fraser Health response to concerns by patients about their care through appropriately translated materials.
- Increase information flow and personal access to health data to empower patients to be full partners in actively managing their health concerns.

### **Objective 2.2: Strengthen the system of primary and community care built around inter-professional teams, processes and functions to better prevent and manage chronic conditions.**

The roles of family physicians, nurse practitioners, primary and community care professionals and support staff are central to supporting patients suffering from frailty, chronic diseases, mental health and substance use conditions. A focus on effective inter-professional teams and healthy partnerships between care providers and health care administrators will facilitate better care for all British Columbians, and particularly those who are more vulnerable.

## Strategies

- **Priority Area:** *Capacity for care across all sectors*

- Work in partnership with the Divisions of Family Practice to implement a system of inter-professional health teams at the community level, improving access to primary health care with a strong focus on populations and individuals with high health and support needs: people with chronic diseases, mental illnesses and substance use, people with significant disabilities and the frail senior population.
- Support the GP4ME Attachment work within Fraser Health's ten Divisions of Family Practice and General Practice Services Committee (GPSC) so that Fraser Health residents who want a family physician can access one.
- Work with the Divisions of Family Practice and community medical specialists to implement and/or reinforce targeted chronic-disease patient pathways and improved care planning.
- Improve access to addictions treatment, including creating additional 30 addictions spaces by 2017.
- Invest in community based resources to respond to needs in home care, assisted living and residential care. Specifically, incrementally increase the age adjusted use of home support hour hours particularly in Fraser Health South and Fraser Health North.
- Rebalance and maximize acute and community Mental Health and Substance Use

capacity through key strategies such as increasing assertive outreach capacity for high users of acute care and early intervention and crisis response services for youth and young adults.

- Work in partnership with the Ministry to continue implementing the Provincial End- of-Life Care Action Plan, including the availability of hospice spaces.

## Performance Measure 2: Managing Chronic Disease in the Community

Performance Measure	2009/10 Baseline	2014/15 Target	2014/15 Actual	2015/16 Target	2016/17 Target
Number of people with a chronic disease admitted to hospital per 100,000 people aged less than 75 years (ACSC admissions rate)	234	234	254	221	200

**Data Source:** Discharge Abstract Database, Business Analytics, Strategies and Operations Branch, Health Sector Planning and Innovation Division, Ministry of Health.

### Discussion

This performance measure tracks the number of people with select chronic conditions, such as asthma, chronic obstructive pulmonary disease, heart disease and diabetes, who are admitted to hospital. People with chronic conditions need the expertise and support of family physicians and other health care providers to manage their disease in order to maintain their functioning and reduce complications that would require more medical care. Proactive disease management reduces hospitalizations, emergency department visits, some surgeries and repeated diagnostic testing, all of which helps to maintain quality of life for people with chronic conditions, and help to control the costs of health care. As part of a larger initiative to strengthen community-based health care and support services, family doctors, home health care providers and other health care professionals are working together to provide better care in the community and at home to help people with chronic disease to remain as healthy as possible.

With a rate of 254 people with a chronic disease admitted per 100,000 aged less than 75 years, Fraser Health fell short of the target. Factors contributing to the challenge include Fraser Health's population experiencing a higher rate of many chronic diseases than other health authorities, gaps in community based services for chronic disease management and patient difficulties in navigating the services.

Work to improve is well-underway across services and the care continuum. This includes enhancing community based services, improving discharge planning and post-acute follow up, and adding supports to avoid unnecessary hospital admissions. In addition and in partnership with Fraser Health, Divisions of Family Practice are concentrating focus on supporting the chronic condition population by advocating for navigators, health education and counselling.

### Performance Measure 3: Home Health Care and Support for Seniors

Performance Measure	2013/14 Baseline	2014/15 Target	2014/15 Actual	2015/16 Target	2016/17 Target
Rate of people aged 75+ receiving long term home health care and support per 1,000 people	77	79	83	82	85

**Data Source:** P.E.O.P.L.E. 2013 population estimates for baseline, P.E.O.P.L.E. 2014 population estimates for 2014/15 actual, BC Stats; Home and Community Care Minimum Reporting Requirements (HCCMRR) Data Warehouse, Business Analytics, Strategies and Operations Branch, Health Sector Planning and Innovation Division, Ministry of Health.

#### Discussion

This performance measure tracks the rate of seniors (aged 75+ yrs) who receive long term home health care services such as case management, light housekeeping, assisted living and adult day services. While the majority of seniors experience healthy aging at home, there is a growing need for community care options to support people who need supports to manage daily living tasks. This support helps people manage chronic disease and frailty, and may prevent falls or other incidents that potentially can result in hospital care or require a move to a residential care setting. As part of a larger initiative of strengthening community-based health care and support services, the health authorities are expanding home health care services and ensuring that seniors at higher risk are made a priority in the provision of care. This focus, combined with the use of technology to aid in monitoring wellbeing, can significantly improve quality of life and other health outcomes for seniors.

With 83 people aged 75+ receiving long term home health care and support per 1,000 in 2014/15, Fraser Health exceeded the target.

#### Objective 2.3: Strengthened interface between primary and specialist care and treatment.

In a high functioning health system, patients with conditions requiring specialist services experience seamless and timely access to the services they need. A priority area for further improvement is the ability of family physicians to facilitate timely access to specialist levels of care for their patients when needed.

#### Strategies

- Collaborate with the Divisions of Family Practice and the Ministry to implement process changes for ensuring timely access to medical and surgical specialty consultation in communities across Fraser Health.
- Utilize patient focused funding initiatives and delivery models to improve access and outcomes in medical and surgical services.

## **Objective 2.4: Provide timely access to quality diagnostics.**

Access to evidence-informed diagnostic services is critical to seamless and timely care. As demand for diagnostic imaging and laboratory testing rises, continuous improvement in both quality and cost are important elements of a sustainable strategy for the health system.

### **Strategies**

- Continue to work with Lower Mainland health authorities and the Ministry to strengthen diagnostic imaging as an integrated provincial system, enhancing access to appropriate services such as MRI and CT exams through evidence-informed ordering guidelines and improved coordination to reduce unnecessary duplicate testing.
- Complete the implementation of voice to text technology, dramatically improving the timelines of diagnostic imaging electronic results report availability.
- Complete the implementation of Fraser Health wide electronic report delivery, dramatically improving diagnostic imaging electronic report timelines.
- Work with Lower Mainland health authorities and the Ministry to strengthen laboratory services, including continuous improvement to quality, coordinate investments in new technology and optimize value for money.

## **Objective 2.5: Renewed role of hospital in the regional health care continuum.**

Acute care is the largest and most expensive sector in the health care system. Within this sector, the use of hospitals is changing. Advances in technology and techniques have led to less use of inpatient beds for surgical recovery as outpatient day surgery has increased. A majority of the inpatient bed capacity in many hospitals is now used for Fraser Health's growing population of frail seniors, and Fraser Health must ensure those services are delivered appropriately for those patients. There is a need and opportunity to better link the acute care system to the regional and community systems, improve provincial coordination, and ultimately improve the quality of acute care services delivered to B.C. patients.

### **Strategies**

- Implement strategies and best practices to improve patient flow starting with reducing demand in emergency departments, transitions through the acute care sector and transitions into the community.
- Strengthen the accountability structures and relationships at Fraser Health hospital sites with Fraser Health teams, programs and physicians to identify opportunities to improve patient flow and manage resources.
- Strengthen infection prevention and control with the implementation of hand hygiene, best practice infection prevention and outbreak management protocols and antimicrobial stewardship.
- Implement action plans to address quality and safety across all acute care sites and programs, including addressing nursing sensitive adverse event rates, especially hospital acquired pneumonia and urinary tract infections.

- Reduce the actual length of stay in Fraser Health hospitals to the expected length of stay as calculated by Canadian Institute for Health Information.
- Improve access and reduce wait times for scheduled surgery, CT and MRI, and admission to an inpatient bed from the emergency department.

#### Performance Measure 4: Access to Surgery

Performance Measure	2013/14 Baseline	2014/15 Target	2014/15 Actual	2015/16 Target	2016/17 Target
Percent of non-emergency surgeries completed within 26 weeks	89%	92%	87%	93%	95%

**Data Source:** Surgical Wait Times Production (SWTP, Site 130), Business Analytics, Strategies and Operations Branch, Health Sector Planning and Innovation Division, Ministry of Health.

**Notes:**

1. The total wait time is the difference between the date the booking form is received at the hospital and the date the surgery is completed. The day the booking form is received at the hospital is NOT counted.
2. Periods when the patient is unavailable (e.g., travelling) are excluded from the total wait time.

#### Discussion

In the last several years, British Columbia's health system has successfully reduced wait times for cataract, hip and knee replacement, hip fracture and cardiac surgeries. Expanded surgical activity and patient-focused funding combined with continuous effort to foster innovation and efficiency in British Columbia's hospitals, will improve the timeliness of patients' access to an expanding range of surgical procedures. This performance measure will track the proportion of non-emergency surgeries that are completed within 26 weeks, although many surgeries are completed in a much shorter time frame.

With 87% of non-emergency surgeries completed within 26 weeks in 2014/15, Fraser Health fell short of the target. Factors contributing to the challenge included capped capacity, shortages of anesthetists and nurses, and competing focus on two other important imperatives: ensuring patients needing hip fracture surgery get it within 48 hours, and eliminating patients waits of more than 52 weeks for surgery.

Additional investment in surgery in 2015/16 is aimed at improving wait time performance.

## **Objective 2.6: Increased access to an appropriate continuum of residential care services.**

The populations requiring residential and assisted living care have varied health and social care needs; these include dementia, cognitive behavioral disorders, acquired brain injury and multiple chronic conditions requiring long term respiratory and/or nutritional supports. The complexity of care has increased appropriately shifting long term and stable conditions to a residential setting outside of a hospital setting. A key priority of the health care system is to work with partners to ensure the right mix of services for frail seniors and others that best meet the needs of patients.

### **Strategies**

- Work in partnership with the Ministry to develop and implement residential care models and quality standards for patients with dementia and younger populations with special needs such as chronic severe mental illness.
- Work with the Seniors Advocate to improve the home and community care system to better address the needs of B.C.'s seniors who require these services, including strengthening protections from abuse and neglect.
- Work in partnership with the Ministry to expand home support and technology for home health monitoring services to help seniors stay at home longer.
- Develop plans to increase capacity for specialized populations such as the medically complex and peritoneal dialysis.
- Incrementally increase access to residential care and specialty residential beds per 1,000 population 75+ rate over the coming three years in order to improve access to care and to meet the provincial guideline of 75 beds per 1000.

## **Goal 3: Ensure value for money**

To ensure value for money in the health system, Fraser Health must ensure health system resources are used in the most efficient and effective way possible. On a strategic level, this includes not only *what* services and initiatives are focused on but also *how* they are implemented. In the coming years, Fraser Health, the Ministry and other health organizations will collaborate on the effective implementation and management of a shared, consistent strategic plan for the health system with built-in accountability and attention to factors needed for success: change management capacity, ongoing quality improvement, effective leadership and an engaged workforce, information management systems and technologies, physical infrastructure and prudent budget management.

## **Objective 3.1: Evidence-informed access to clinically effective and cost-effective pharmaceuticals**

Pharmaceuticals play an important role in B.C.'s health care system. They treat and prevent the spread of disease, control pain, and can improve quality of life for many people. A continued focus on ensuring timely and evidence-informed access to pharmaceuticals that are safe, therapeutically beneficial and cost-effective will improve both patient care and value for money in the health system.



## Strategies

- In partnership with Lower Mainland health authorities and with the Ministry, deliver an accessible, responsive, evidence-informed, sustainable pharmaceutical management and delivery program.
- Implement opportunities for pharmacists and physicians to work together to improve the optimal use of drugs for best patient outcomes.
- Continue to implement strategies to ensure optimal drug safety throughout Lower Mainland health authorities.
- Implement a Utilization Management Program to reduce the inappropriate and unnecessary use of services and resources in all Fraser Health clinical and clinical support areas.

### **Objective 3.2: Align workforce, infrastructure, information management and technology resources to achieve patient and service outcomes.**

A high performing health system is one that uses its resources in the best way possible to improve health outcomes for patients. Ensuring the health system has sufficient numbers and the right mix of health professionals is key to providing the services that will meet British Columbians' needs now and in the future. Health care providers must also be appropriately supported by leadership, information management systems, technologies and the physical infrastructure to deliver high quality services as efficiently as possible.

## Strategies

- **Priority Area: *Staff and Physicians***
  - Work in partnership with the Ministry of Health to develop and implement an integrated provincial workforce strategy to ensure British Columbia has the required supply of health care providers, their skills are being used effectively and the health care workforce is engaged, skilled, healthy and well-led.
  - Recruit, retain and enable B.C.'s Nurse Practitioners to practice to their full scope.
  - Explore with physicians and staff strategies that foster an improvement culture, teamwork and communication at the unit and site level to address the significant quality issues identified in the Strategic and Operational Review.
  - Improve staff engagement and human resource management, and monitor and manage overtime, sick time, productive hours of care per patient and staff safety.
  - Continue to partner with PHSA to offer the Indigenous Cultural Competency training program, and also further develop diversity educational modules to promote patient centred care.
- **Priority Area: *Information Management & Technology***
  - Continue investing in information management and technology solution bundled into three areas:
    - Integration of person centric information across the continuum of care to optimize the quality of care and service delivery including a focus on

- strengthening and standardizing core clinical information processes.
- Support and enable the efficient and effective workplace to provide systems and information for improvement at the organizational, health system, and population health level.
- IT Infrastructure - sustain and grow technology infrastructure to support integrated and Province wide IM/IT solutions
- Build Fraser Health’s business analytics capabilities to support population health strategies, organizational performance and quality improvement.

**Performance Measure 5: Nursing Overtime**

Performance Measure	2010/11 Baseline	2014/15 Target	2014/15 Actual	2015/16 Target	2016/17 Target
Nursing overtime hours as a percent of productive nursing hours	3.8%	<=3.3%	3.5%	<=3.3%	<=3.3%

**Data Source:** Based on calendar year. Health Sector Compensation Information System (HSCIS). Health Employers Association of British Columbia (HEABC).

**Discussion**

This performance measure compares the amount of overtime worked by nurses to the overall amount of time nurses worked. Overtime is a key indicator of the overall health of a workplace as high rates of overtime may reflect inadequate staffing or high levels of absenteeism. Reducing overtime rates by addressing the underlying causes helps promote both patient and caregiver safety while also reducing unnecessary costs to the health system.

Although Fraser Health’s nursing overtime hours as a percent of productive nursing hours fell short of the target for 2014/15, at 3.5% it was a reduction from the 2013/14 nursing overtime rate of 3.8%. Among the challenging factors related to this measure are the patient flow and bed allocation initiatives underway, difficulties recruiting and retaining specialty trained nurses and the geographical location of certain sites relative to the potential labour pool.

Fraser Health has comprehensive overtime mitigation strategies in place including overtime best practices, guidelines and interpretation tools, recruitment tools and overtime and recruitment accountability frameworks.

### **Objective 3.3: Drive budget management, efficiency, collaboration and quality improvement to ensure sustainability of the publicly funded health system.**

An efficiently managed health system ensures resources are spent where they will have the best health outcome. A focus on budget management and efficiency, along with collaboration and quality improvement, must be continually pursued in partnership with health authorities and other stakeholders to ensure our publicly funded health system is effective and affordable for the citizens of British Columbia.

#### **Strategies**

- **Priority Areas:** *Accountability, Lower Mainland Collaboration, Governance and Operational Organization and Management, Budget Accountability*
  - Pursue opportunities for board governance improvements outlined in the Strategic and Operational Review, including strengthening the depth and breadth of quality of care materials that come to the Board and Senior Executive Team to ensure a fuller picture of quality across both programs and sites.
  - Review the program management model and ensure managers and care givers are provided with the tools to enable seamless and effective patient care and services.
  - Continue to drive clinical quality improvement throughout the health system, including:
    - Strengthening infection control practices throughout the system.
    - Strengthening medication safety for all patients, clients and residents.
    - Participating in National Surgical Quality Improvement Program (NSQIP) initiatives to improve patient outcomes.
  - Engage in collaborative planning with other Lower Mainland health authorities on select clinical services to achieve improved quality and patient outcomes, and continue consolidation of corporate, clinical support, purchasing and administrative functions to achieve savings and quality improvements across the province.
  - Further incorporate quality improvement strategies such as Lean Design principles across the health system to eliminate waste, improve services to patients and improve the quality, productivity and efficiency of health care processes.
  - Develop and strengthen cost management systems and build reporting capacity to ensure effective management of funds to achieve patient and service outcomes.
  - Continue to develop performance monitoring tools, management and reporting practices to assist clinical and management decision making and optimize health expenditures.

## Financial Report

### *Management Discussion and Analysis*

Fraser Health is committed to a balanced budget each year based on improving patient, resident and client quality, safety, access and experience. For the 2014/15 fiscal year, Fraser Health ended with a surplus of \$1.6 million on a budget of \$3,244.4 million (or 0.05% of budget). Further, Fraser Health's external auditors issued an unqualified audit opinion on the issued financial statements. The budget disclosed is the budget approved by the Fraser Health Board on June 27, 2014. In order to achieve a balanced budget, Fraser Health has a policy outlining accountabilities, responsibilities and variance control protocols along with variance follow-up protocols that include involvement of the Board's Finance and Audit Committee.

Revenues for the fiscal year totalled \$3,237.5 million of which \$3,097 million, or 96%, were received from Provincial government sources. The revenue from Provincial government sources was less than budget as a result of accounting adjustments related to certain employee benefit plans.

Acute care expenses exceeded budget as a result of higher than budgeted activity and the opening of capacity to manage hospital congestion issues. This was off-set by a positive budget variance in corporate expenses as a result of the accounting adjustments to certain employee benefit plans.

### Resource Summary Table

(\$ millions)	2014/15 Budget	2014/15 Actual	Variance
<b>Operating Summary (\$ millions)</b>			
Provincial Government Sources	3,115.0	3,097.0	(18.0)
Non-Provincial Government Sources	129.4	140.5	11.1
<b>Total Revenue:</b>	<b>3,244.4</b>	<b>3,237.5</b>	<b>(6.9)</b>
Acute Care	1,874.0	1,893.6	(19.6)
HCC – Residential	547.7	544.8	2.9
HCC – Community	289.5	289.1	0.4
Mental Health & Substance Use	225.9	228.7	(2.8)
Population Health & Wellness	80.2	79.1	1.1
Corporate	227.1	200.6	26.5
<b>Total Expenditures:</b>	<b>3,244.4</b>	<b>3,235.9</b>	<b>8.5</b>
<b>Surplus (Deficit)</b>	<b>-</b>	<b>1.6</b>	<b>1.6</b>
<b>Capital Summary (\$ millions)</b>			
Funded by Provincial Government	61.6	54.4	7.2
Funded by Foundations, Regional Hospital Districts, and Other Non-Government Sources	79.6	42.2	37.4

## ***Major Capital Projects***

Capital investment ensures that Fraser Health's infrastructure is maintained and expanded to meet the health services needs for a growing population. Capital investment includes facilities such as hospitals and residential and complex care buildings, medical equipment such as CT scanners, MRI's and surgical equipment and information technology and information management systems. Additional information related to many of the capital investments is available at [Building for Better Health Care](#).

Fraser Health's capital budget is conceived based on the prioritized needs of the health authority, the availability of funding and the priorities of government. Given the long lifespan of most capital investments, a three year capital expenditure plan is maintained.

Major capital projects currently underway or in planning include:

### **Surrey Memorial Hospital Critical Care Tower and Expansion Project - \$486.4 million.**

Investments in the new emergency department and critical care tower at Surrey Memorial Hospital are substantially complete. However, the expansion also includes renovations to the existing hospital which will add inpatient beds, create an expanded family birthing unit, including a second dedicated maternity operating room and expanding the pharmacy and sterile processing unit. The renovations to the existing hospital are expected to be completed in 2016/17. The funding sources for the total project are \$286.8 million from the Ministry, \$179.6 million of public-private partnership (P3) debt and \$20.0 million from the Surrey Memorial Hospital Foundation.

### **Royal Columbian Hospital Redevelopment Phase 1 - \$258.9 million.**

Phase 1 includes the building of a new Mental Health and Substance Use facility with 75 psychiatric beds and 12 outpatient clinics, a four level underground parkade, a new more efficient Energy Centre and relocation of the helipad. Completion date is targeted for spring 2019. The funding sources are \$249.8 million from the Ministry and \$9.1 million from the Royal Columbian Hospital Foundation.

### **Matsqui-Sumas-Abbotsford (MSA) Campus of Care - \$35.2 million.**

The Campus of Seniors Care is a 200 bed complex care residential facility, including a day program for older adults. It will replace 119 existing beds and allow for a transfer of 81 beds from other facilities. Estimated completion date is summer 2019. The funding sources are \$14.1 million from Fraser Valley Regional Hospital District, \$10.0 million from the Ministry and \$11.1 million from Fraser Health.

### **Peace Arch Hospital Emergency Department Expansion Project - \$20.0 million.**

This project will extend the building envelope to increase the size of the emergency department. Completion is targeted for autumn 2018. The funding sources are \$15.0 million from the Peace Arch Hospital Foundation and \$5.0 million from the Ministry.

### **Delta Hospital Diagnostic Imaging and Laboratory Services Expansion Project - \$12.5 million.**

This project will build a new 2 level addition to accommodate new Diagnostic Imaging and Laboratory Services. Completion date is targeted for spring 2018. The funding sources are \$7.5 million from the Delta Hospital Foundation and \$5.0 million from the Ministry.

**Peace Arch Hospital Medical Device Reprocessing Upgrade - \$11.2 million.**

This project will renovate the operating room and medical device reprocessing levels to support an upgraded case cart transportation system ensuring that CSA, Ministry and accreditation standards are met. Completion date is targeted for spring 2018. The funding will be provided by the Ministry.

**Peace Arch Hospital Electrical Upgrade - \$6.3 million.**

Installation of two new generators, electrical distribution equipment, and switchgear to upgrade the existing undersized generation system and allow for future growth of the hospital. A new generator building will also be constructed to house the new larger generators. Completion date is targeted for December 2015. Funding is being provided by the Ministry.

Other significant capital projects include:

**Langley Memorial Hospital electrical upgrade - \$4.9 million.**

This project includes electrical upgrades which redirect power to the new energy centre and back-feed power to the hospital. Completion date is targeted for summer 2017. The funding will be provided by the Ministry.

**Surrey Memorial Hospital operating room integration - \$4.3 million.**

Replace non-functional teleconferencing equipment, integration equipment, surgical video equipment and other medical devices and equipment. The funding will come from the Surrey Memorial Hospital Foundation (\$3.3 million) and Fraser Health internal capital funding (\$1.0 million).

**Surrey Memorial Hospital child adolescent psychiatric stabilization unit - \$4.0 million.**

This project will renovate space in the old emergency room to provide a 10 bed unit that will provide short stay assessment and crisis stabilization for children and youth. Completion date is targeted for spring 2017. The funding for this project will come from the Surrey Memorial Hospital Foundation (\$1.0 million) and Fraser Health internal capital funding (\$3.0 million).

**Physician care management system - Phase 1 - \$3.6 million.**

Desktop application to support physician workflow by providing an interactive desktop for patient rounding and alerts along with the ability to review patient information on personal web enabled hand held devices. Funding is from Fraser Health internal capital.

**Royal Columbian Hospital emergency trauma room - \$3.5 million.**

This project will create enhanced trauma capacity for RCH to fulfill its trauma and referral role within Fraser Health with improved patient care, particularly during times of congestion. Renovations within the ER will provide properly sized space to accommodate three patient bays and two negative pressure (isolation) rooms. Additional isolation capacity will improve patient safety and infection control. Completion date is targeted for October 2015. Funding is from the Ministry (\$3.3 million) and Royal Columbian Hospital Foundation (\$0.1 million).

**Surrey Memorial Hospital sprinkler upgrade - \$3.4 million.**

Upgrade sprinkler systems to buildings B and F and remediate Priority 1 deficiencies. As a condition to the approval of the Redevelopment permits, Fraser Health made a commitment to the City of Surrey to resolve these significant deficiencies. Funding is provided by the Ministry.

**Burnaby Hospital emergency department supertrack and cardiology renovation - \$2.7 million.**

Renovation to address space/infrastructure deficiencies in the ED Supertrack and adjacent areas in order to facilitate increased capacity, flow, compliance to standards and quality of service. The space will more than double from the current 95 square meters in order to create proper treatment zones. Expansion will be to a space created by a relocation of Cardiology and Rapid Access. Substantial completion was achieved in September 2014. Funding is from the Ministry (\$2.4 million) and Burnaby Hospital Foundation (\$0.3 million).

**Wireless system for infusion pumps - \$2.6 million.**

Provide safe patient care through the use of Smart Pump Technology. Infusion pumps are devices that deliver specific doses of fluids, including blood, nutrients and medications, into a patient's body in a controlled manner. Wireless capability is required to allow pumps to update the Drug Library and download CQI data wirelessly. Funded by Fraser Health internal capital.

**Queens Park electrical upgrade and generator - \$2.3 million.**

This electrical upgrade will meet the requirements of the master plan repurposing of the site which would include modifications to the building's HVAC systems which are best served at 600V. Components of the upgrade include replacing the following equipment which are at their end of life: switchgear, generator and unit substation. Final component is replacement of the High Voltage Service, which the City of New Westminster has informed FH, needs to be replaced. Substantial completion was achieved in January 2015. Funding is provided by the Ministry.

**Primary access regional information system - Phase 2 - \$2.2 million.**

PARIS Phase 1 established the foundation to share community health care information within FH Home Health, End of Life, Residential and Assisted Living and Mental Health & Substance Use Services. PARIS Phase 2 builds on the achievements of the first phase by extending the functional scope and establishing the common platform utilized across all community based health services. Funding is from Fraser Health internal capital.

**Royal Columbian Hospital emergency mental health and substance use space - \$2.0 million.**

Renovations to develop MHSU (Mental Health Substance Use) space that is more clinically appropriate. The current emergency department MH space is grossly inadequate with minimal opportunity for privacy or confidentiality. The MHSU area will provide increased capacity by creating two new seclusion rooms and space for six patient stretcher beds. Completion date is targeted for March 2016. Funding is provided by the Ministry.

## **Appendix A: Health Authority Contact Information**

For more information about Fraser Health please visit:

<http://www.fraserhealth.ca>

Or contact:

Fraser Health  
Corporate Office  
Suite 400 – Central City Tower  
13450 – 102<sup>nd</sup> Avenue  
Surrey, B.C. V3T 0H1

Telephone: 604-587-4600

Facsimile: 604-587-4666

## **Appendix B: Hyperlinks to Additional Information**

For more information, please visit:

[Fraser Health Authority 2014/15-2016/17 Service Plan](#)

[Fraser Health Authority 2015/16-2017-18 Service Plan](#)

[Fraser Health's Board Accountabilities and Governance Practices](#)

[Fraser Health's \*Our Health Care Report Card\*](#)

[\*Setting Priorities for the B.C. Health System\*](#)

[\*Healthy Families BC Policy Framework\*](#)