

**Vancouver Island  
Health Authority  
(Island Health)**

**2020/21 – 2022/23  
SERVICE PLAN**

**July 2020**



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## Board Chair Accountability Statement

Vancouver Island Health Authority (Island Health) recognizes and acknowledges the Kwakwaka'wakw, Nuu-chah-nulth, and Coast Salish peoples are the traditional stewards of the lands upon which Island Health is situated, where we all live, work and play. The First Peoples' relationship to these lands is of continued importance to health and wellness. As we continue to work toward rebuilding our relations we do so with respect and humility.



The *Island Health 2020/21-2022/23 Service Plan* was prepared under the Board's direction in accordance with the *Health Authorities Act*. The plan is consistent with Government's strategic priorities and fiscal plan. The Board is accountable for the contents of the plan, including what has been included in the plan and how it has been reported. The Board is responsible for the validity and reliability of the information included in the plan.

All significant assumptions, policy decisions, events and identified risks as of July 20, 2020 have been considered in preparing the plan. The performance measures presented are consistent with the *Budget Transparency and Accountability Act*, and Island Health's mandate and goals; and focus on aspects critical to the organization's performance. The targets in this plan have been determined based on an assessment of Island Health's operating environment, forecast conditions, risk assessment and past performance.

A handwritten signature in cursive script that reads "Leah Hollins".

Leah Hollins  
Island Health Board Chair  
July 29, 2020

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## Organizational Overview

Island Health is one of five regional health authorities established by the Province of British Columbia under the [Health Authorities Act 2001](#). Island Health provides health care to over 850,000 people across a widely varied geographic area of approximately 56,000 square kilometres. This area includes Vancouver Island, the Gulf and Discovery Islands, and part of the mainland opposite northern Vancouver Island. Many rural and isolated communities in our region are accessible only by water or air.

### Governance and Leadership

A ten-member, government-appointed Board of Directors governs Island Health. The Board's primary responsibility is to lead the health authority to deliver high quality, responsive and effective health and care services as efficiently as possible. The Board also provides leadership to guide Island Health's activities in support of the Government's health system priorities and strategies in accordance with the direction provided through the Government's annual [Mandate Letter](#). More information on the role of the Board is available here: <https://www.islandhealth.ca/about-us/accountability/organization/our-board-directors>, in alignment with the Crown Agency and Board Resourcing Office's board governance disclosure requirements.

Working with the Board, and headed by our President and Chief Executive Officer, the Island Health Executive Leadership Team provides leadership in planning, delivering and evaluating health and care services in Island Health in collaboration with the government. The Island Health Board and Executive Team are responsible for meeting the health needs of the population in an effective and sustainable manner. (See <https://www.islandhealth.ca/about-us/accountability/organization/our-executive-team>). Created from the shared core beliefs of our staff, medical staff, volunteers, and Board of Directors, Island Health's vision, *Excellent health and care for everyone, everywhere, every time* and values of **Courage, Aspire, Respect and Empathy** guide us in providing the highest quality health and care services to the populations we serve.

### Services We Provide

We deliver many types of services for residents, clients and patients across the entire life span including public health, children and youth care, seniors care and wellness, long-term and community care, primary care, specialized short-term care at local hospitals and health centres, mental health and substance use services, and end-of-life care. Working with our partners in the community, including the First Nations Health Authority and Métis Nation BC, we are able to meet most of the health and care needs of our population; only rarely must people seek specialized services outside of Island Health.

#### Island Health has...

- Over 2,500 medical staff
- Over 23,000 staff
- Over 4,000 active volunteers & auxiliaries
- Over 150 facilities
- 1,764 acute care & rehab beds
- 6,626 long-term care beds & assisted living units
- 1,492 mental health & substance use beds, including shelter beds where Island Health staff provide supports

## Strategic Direction and Alignment with Government Priorities

The Government of British Columbia remains focused on its three strategic priorities: making life more affordable, delivering better services, and investing in a sustainable economy. Health Authorities are essential to achieving these priorities by providing quality, cost-effective services to British Columbia families and businesses.

Additionally, where appropriate, the operations of Island Health will contribute to:

- Implementation of the [Declaration on the Rights of Indigenous Peoples Act](#) and the [Truth and Reconciliation Commission Calls to Action](#), demonstrating support for true and lasting reconciliation; and,
- Putting British Columbia on the path to a cleaner, better future – with a low-carbon economy that creates opportunities while protecting our clean air, land and water as described in the [CleanBC](#) plan.

By adopting [the Gender-Based Analysis Plus](#) lens in budgeting and policy development, Island Health will ensure that equity is reflected in their budgets, policies and programs.

Island Health is committed to achieving the strategic goals and priorities established by the Ministry of Health outlined in the [2020/21-2022/23 Ministry of Health Service Plan](#), supporting the goals and objectives set forth in the [2020/21-2022/23 Ministry of Mental Health and Addictions Service Plan](#) and government mandate set out in the Island Health Mandate Letter.

In alignment with government’s direction and in collaboration with many partners, Island Health is transforming the health system to better meet the needs of the people we serve. We are committed to ensuring a focus on service delivery areas requiring strategic repositioning, supporting the health and well-being of British Columbians through the delivery of high-quality health services, and delivering an innovative and sustainable public health care system.

Island Health is aligned with the Government’s key priorities:

Government Priorities	Island Health Aligns with These Priorities By:
Delivering the services people count on	<ul style="list-style-type: none"> <li>• Ensure a focus on service delivery areas requiring strategic repositioning, (Goal 1) including:                             <ul style="list-style-type: none"> <li>○ a primary care model which provides comprehensive, coordinated and integrated team-based care linked to specialized services (Objective 1.1); and,</li> <li>○ improved access to a range of services (Objectives 1.2, 1.3, and 1.4).</li> </ul> </li> <li>• Support the health and well-being of British Columbians through the delivery of high-quality health services (Goal 2), including:                             <ul style="list-style-type: none"> <li>○ population health, health promotion, and illness and injury prevention services (Objective 2.1);</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ health services for the underserved and/or marginally-housed population (Objective 2.2);</li> <li>○ Indigenous experience, health, and quality of care at Island Health (Objective 2.3); and,</li> <li>○ acute and ambulatory care services at Island Health (Objective 2.4).</li> </ul>
<p>A strong, sustainable economy</p>	<ul style="list-style-type: none"> <li>● Deliver an innovative and sustainable public health system (Goal 3), including:             <ul style="list-style-type: none"> <li>○ care team safety and wellness (Objective 3.1);</li> <li>○ a staffing mix to support high-quality care (Objective 3.1); and,</li> <li>○ virtual &amp; technology-enabled care to better serve people living throughout the service area (Objective 3.2).</li> </ul> </li> <li>● Learn and adapt from experiences to improve services and sustainability (Objective 3.3).</li> </ul>

## Strategic Context

Island Health has a relatively healthy population. The average life expectancy, at 82 years, is among the highest in the world. The population of Island Health is expected to increase to over 990,000 by 2041. Currently, 11 percent of our population is 75 years or older, and this population is estimated to more than double by 2041 to over 194,000 (24 percent of the population). There is also substantial variation in health status across communities, with a 8.2 year difference in life expectancy between the regions with the highest and lowest life expectancies. In our rural areas and Indigenous communities, people often experience increased barriers and poorer health status and have unique health needs and considerations. A larger percentage of Island Health's population (7.56 percent) identify as Indigenous compared to 6 per cent for the province<sup>1</sup>. There are presently 50 First Nations in the Island Health service area, belonging to three First Nations cultural families, generally grouped by language:

- Coast Salish (largely on the south Island, but goes as far north as Comox)
- Nuu-chah-nulth (all along the west coast of Vancouver Island)
- Kwakwaka'wakw (Strathcona/Campbell River and north Island area)

There are also six Métis Chartered Communities within the Island Health region, and six Friendship Centres, which are multi-service urban Aboriginal centres providing support and services to Indigenous peoples who live in urban locations on Vancouver Island.

In the spirit of the [United Nations Declaration on the Rights of Indigenous Peoples](#), the [Métis Nation Relationship Accord II](#), and the [Calls to Action of the Truth and Reconciliation Commission](#), Island Health works with the First Nations Health Authority, Métis Nation BC and other Indigenous partners to ensure coordinated planning and service delivery is culturally appropriate and supportive of Indigenous health and wellness.

Island Health, like other jurisdictions in British Columbia, is experiencing two public health emergencies. The first public health emergency is related to opioid overdoses and deaths. For current data on illicit drug toxicity deaths in Island Health and all of British Columbia, please see the BC Coroner's Office [reporting page](#). The second is related to the COVID-19 pandemic. To date, Island Health has identified cases of COVID-19 through laboratory diagnoses and epidemiological links; unfortunately, people have both been hospitalized and died as a result of infection. For current COVID-19 data on Island Health and all of British Columbia, please see the [BC Centre for Disease Control COVID-19 dashboard](#).

Both emergencies continue to be critical challenges facing Island Health and both have a disproportionate impact on some of the most vulnerable populations living in Island Health's service

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<sup>1</sup> Statistics Canada, Census of Population, 2016. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/index-eng.cfm>



area.

Within this context, we recognize the need to shift how we think about health care and health and wellness to better respond to the needs of our changing population. This includes working closely with community partners to improve access to care for our most vulnerable populations and to address the broader social conditions which influence health.

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

This service plan reflects the strategic priorities established by the Ministry of Health set out in the Island Health Mandate Letter. Island Health is transforming the health care system to better meet the needs of its population in cooperation with many partners.

The priorities build from previous plans and focus on service delivery areas requiring strategic repositioning, supporting the health and well-being of British Columbians through the delivery of high-quality health services, and delivering an innovative and sustainable public health care system.

### **Goal 1: Ensure a focus on service delivery areas requiring strategic repositioning**

Island Health's care model is based on a patient-centred systems approach to improving quality of care, collaboration, and integration across the care continuum. The cornerstone of the model is integration or linkage of full-service family practices with health authority primary and community care services. The provision of integrated team-based care is supported where appropriate with the establishment of Urgent & Primary Care Centres, Community Health Centres and coordinated access to specialized services for both seniors and people needing mental health and/or substance use care.

Island Health is committed to strengthening community-based services for seniors and others with complex care needs. The result is more likely to be improved health outcomes, improved patient and provider experience, and decreased reliance on acute care hospitals when people receive the primary and community-based care they need, when they need it. Island Health acknowledges the impacts on people whose procedures were delayed as a result of the pandemic.

We also recognize the importance of timely access to quality treatment for patients, and are committed to meeting the goals set out by the Ministry of Health's Surgical Renewal Strategy. This includes focusing on patients who had their surgery postponed due to the COVID-19 response, continuing to reduce wait times for surgical and diagnostic procedures, and optimizing the efficiency of existing resources while providing integrated, person-centred services.

### **Objective 1.1: A primary care model which provides comprehensive, coordinated, and integrated team-based care linked to specialized services**

Island Health is committed to the continuing development of Primary Care Networks as a means to

further team-based care. These are formed by linking family practices with Island Health teams of care professionals, either within or linked with the practice, to deliver longitudinal, comprehensive, and co-ordinated care for patients. Depending on the approved design, Primary Care Networks will be staffed with a combination of General Practitioners, Nurse Practitioners, and nursing and allied health care providers.

Efforts are underway at Island Health to establish additional Urgent & Primary Care Centres and Community Health Centres as part of the broader initiative to create Primary Care Networks. These centres will further increase access to care for unexpected, but non-life-threatening, health concerns requiring same-day treatment. The Urgent & Primary Care Centres complement existing walk-in clinics and provide care for more complex clients.

Island Health is also strengthening its coordinated access to specialized care particularly focusing on complex medical and/or frail patients, including seniors.

Frail seniors require a range of health supports, especially when frailty is combined with chronic disease, which can profoundly impact independence. Island Health is increasing its focus on increasing access to home and community care services for seniors to improve their outcomes and reduce avoidable emergency department visits and hospitalizations.

**Key Strategies:**

- In partnership with Divisions of Family Practice, plan and implement approved Primary Care Networks, including expanding access to team-based services for low-risk maternity care.
- Open three new Urgent & Primary Care Centres.
- Partner with First Nations Health Authority to support the development of First Nation-led Primary Care initiatives.
- Work with partners to implement new or significantly refreshed and expanded Community Health Centres and ensure linkages with Primary Care Networks.
- Establish additional coordinated access to specialized care for seniors and patients with complex medical needs, with a focus on rapid response.
- Increase access and improve quality for home-based services in the following areas: home support, community-based professional services, and community-based caregiver supports.
- Improve and expand hours of service for clients to access 24/7 palliative and end-of-life services.

Performance Measure	2016/17 Baseline	2018/19 Actual	2019/20 Actual	2020/21 Target	2021/22 Target	2022/23 Target
1.1 Number of people with a chronic disease admitted to hospital per 100,000 people aged 75 years and over <sup>1,2</sup>	2,753	2,527	2,453	2,481	2,466	2,451

<sup>1</sup> Data Source: Discharge Abstract Database, Health Sector Information, Analysis and Reporting Division, Ministry of Health.

<sup>2</sup> P.E.O.P.L.E 2019. Note that the baseline and targets for this performance measure may not reflect what was reported in previous service plans as this performance measure incorporates provincial population estimates (P.E.O.P.L.E.) that are updated annually by BC Stats.

### **Linking Performance Measures to Objectives:**

- 1.1 This performance measure tracks the number of seniors admitted to hospital with select chronic diseases such as asthma, chronic obstructive pulmonary disease, heart disease, and diabetes. People with these chronic diseases need the expertise and support of health care providers to manage their disease in the community in order to maintain functioning and reduce complications which will require more medical care. This proactive disease management reduces unnecessary emergency department visits, hospitalizations, and diagnostic testing.

### **Discussion:**

- 1.1 As part of the broader objective of strengthening community-based health care and support services, health care professionals are working to provide more appropriate care in the community and at home in order to help seniors with chronic disease to remain as healthy as possible.

### **Objective 1.2: Enhance care for seniors living in long-term care**

Island Health is committed to enhancing care for seniors through improvements in long-term care. COVID-19 has highlighted the importance of providing high-quality, dignified care and support in long-term care homes.

### **Key Strategies:**

- Protect residents from infectious agents, including COVID-19, and avoid outbreaks at long-term care homes.
- Increase appropriate health and care supports such as primary care and specialist care, Point of Care Testing, and mobile diagnostics to people living in long-term care.
- Strengthen long-term care services to ensure seniors receive dignified and quality care, including identifying specific improvement initiatives with contracted care providers.
- Redesign the admission process to long-term care homes.

Performance Measures	Baselines	2018/19 Actuals	2019/20 Actuals	2020/21 Targets	2021/22 Targets	2022/23 Targets
1.2a Potentially inappropriate use of antipsychotics in long-term care <sup>1</sup>	26.4% (2017/18)	25.7%	25.5%	22.5%	20.0%	18.0%
1.2b Average direct care hours per resident day across the health authority <sup>2</sup>	3.13 (2016/17)	3.21	3.27	3.36	3.36	3.36

<sup>1</sup> Data Source: Canadian Institute of Health Information, Health Sector Information, Analysis and Reporting Division, Ministry of Health

<sup>2</sup> Data Source: Ministry of Health

**Linking Performance Measures to Objectives:**

- 1.2a Improvements in appropriate health and care supports for people living in long-term care homes are designed to improve the quality of care, including respect, safety, appropriateness and effectiveness in the care provided.
- 1.2b Strengthened long-term care services which improve the dignity and quality of care are enabled by maintaining standard levels of direct care hours per resident day.

**Discussion:**

- 1.2a This performance measure seeks to identify the percentage of long-term care residents who are taking antipsychotic drugs without a diagnosis of psychosis. Antipsychotic drugs are sometimes used to manage behaviours associated with dementia. Use of these drugs without a diagnosis of psychosis may compromise safety, dignity, and quality of care.
- 1.2b This new performance measure identifies the average direct care hours per resident day, across all long-term care homes in the health authority and reflects government’s commitment to strengthen the quality of services and provide the best day-to-day assistance to seniors living in long-term care homes.

**Objective 1.3: Improve access to treatment and recovery for mental health and substance use services**

Mental health and substance use services focus on collaboration across programs, organizations, and sectors to improve services for vulnerable populations. For vulnerable and hard to serve populations, our focus is on severe and persistent mental health and substance use issues. Island Health is strengthening its coordinated access to specialized services for individuals requiring mental health and/or substance use care.

**Key Strategies:**

- Establish additional coordinated access to specialized services for people requiring mental health and/or substance use supports and care.
- Redesign the Victoria Mental Health Centre and Intensive Care Management Teams to improve access.
- Advance COVID-19 readiness plans for mental health & substance use clients by increasing virtual care access to services.
- Implement a recruitment strategy for psychiatrists.
- Strengthen outpatient/community addictions services and preventative programs.
- Support timely and appropriate access to acute and tertiary mental health & substance use services for both adults and children/youth.

Performance Measure	2017/18 Baseline	2018/19 Actual	2019/20 Actual	2020/21 Target	2021/22 Target	2022/23 Target
1.3 Percent of people admitted for mental illness and substance use who are readmitted within 30 days, 15 years or older <sup>1</sup>	12.5%	13.9%	14.2%	12.4%	12.3%	12.2%

<sup>1</sup> Data Source: Discharge Abstract Database, Health Sector Information, Analysis and Reporting Division, Ministry of Health.

**Linking Performance Measures to Objectives:**

- 1.3 This focuses on one aspect of the effectiveness of community-based supports to help persons with mental health and/or substance use issues receive appropriate and accessible care, and avoid readmission to hospital. Other components include good discharge planning and maintaining the appropriate length of stay in a hospital.

**Discussion:**

- 1.3 Programs aimed at improving access in the community for persons with mental health and/or substance use issues, combined with effective discharge planning, can help reduce hospitalizations for people with severe and complex mental health and/or substance use issues. Central to these efforts is building a strong system of primary and community care, including coordinated access to specialized care, which enhance capacity and provides a continuum of care options to people who need them.

## **Objective 1.4: Provide timely access to appropriate surgical procedures, medical imaging services and gastrointestinal endoscopies**

Preparing British Columbia's health-care system for COVID-19 meant making the difficult decision to postpone all non-urgent scheduled surgeries on March 16, 2020. This action was a necessary step to prepare for the potential surge of patients requiring critical care due to the virus, and to ensure health-care capacity if needed. On May 19, 2020 Island Health resumed these surgeries<sup>3</sup>.

These postponements resulted in a significant setback in the previous gains made in increasing patients' access to surgery and reducing the time they had to wait. To keep up with new demands for surgery and complete the surgeries lost to COVID-19, the Ministry of Health launched its commitment to surgical renewal.

### **Key Strategies:**

Island Health is committed to achieve the goals of surgical renewal and will work with the Ministry of Health to develop plans to achieve the following five strategies of renewal:

1. Focus on patients by calling all patients who had their surgery postponed due to COVID-19 or were waitlisted prior to the resumption of surgeries to confirm they are still willing and able to come for surgery, and by prioritizing patients whose surgeries must occur in less than four weeks; patients who have had their surgery postponed; patients who have waited more than twice their targeted wait time; and patients whose surgeries can safely be conducted as day procedures or outside of the main operating room;
2. Increase surgeries through generating efficiencies, extending hours, operating on weekends, optimizing operations over the summer, opening new or unused operating rooms, and, increasing capacity at contracted private surgical clinics that agree to follow the *Canada Health Act* and not extra bill patients;
3. Increase essential personnel through focused recruitment, additional training, and evaluation and implementation of new models of care;
4. Add more resources; and,
5. Report on the progress of these efforts. Island Health will work with the Ministry of Health to monitor and report regularly on the progress made as strategies are implemented.

Island Health recognizes this is challenging work, requiring us to adapt to learnings from COVID-19 and to implement new ways of delivering our surgical services. This work is also highly vulnerable to future resurgences of COVID-19 expected in the fall/winter, which will again impact our hospitals and the ability to perform surgical procedures.

In addition, Island Health will continue to focus on ensuring patients have timely access to high quality, appropriate and culturally safe medical imaging and gastrointestinal endoscopy services by committing to:

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<sup>3</sup> Under surgical renewal, as of late 2020, Island Health has completed 94 percent of their surgeries that were postponed. This work will continue to catch up, not only on postponed cases, but to meet patient needs now and into the future.

- Expedite capacity and service enhancements to address postponed services during the initial COVID-19 response; and,
- Reduce wait times by optimizing existing resources, streamlining business processes, reducing inappropriate / unnecessary procedures, and actively monitoring and managing waitlists.

## **Goal 2: Support the health and well-being of British Columbians through the delivery of high-quality health services**

Island Health is committed to protecting and promoting the health of the population, including the health of people traditionally underserved by the health system, and delivering the services people count on by continuing to improve and strengthen a range of important health services. Additionally, this Goal addresses implementation of the [United Nations Declaration on the Rights of Indigenous Peoples](#), and the [Truth and Reconciliation Commission of Canada: Calls to Action](#) which are central to the delivery of high-quality, culturally-safe health services across the province.

### **Objective 2.1: Enhance population health, health promotion, and illness and injury prevention services**

Overall health and wellness is influenced by many factors including education, income, housing and healthy living. Island Health continues to explore new approaches and opportunities to support improved health for the population we serve. This includes working with a wide range of public and private partners, service agencies, local non-profit organizations, all levels of government, the education sector, Indigenous leaders, businesses, and residents. Effective partnerships provide the collective wisdom and experience to achieve common goals, including new ways to promote health and wellness and prevent disease.

The imperative for this work is embodied in British Columbia's response to the COVID-19 pandemic. Public Health services form the backbone of the response, keeping British Columbians healthy and protected from disease.

#### **Key Strategies:**

- Mitigate the impacts of COVID-19 by implementing surveillance, early detection, screening, testing and contact tracing plans.
- Collaborate with Indigenous communities to ensure appropriate and effective surveillance and testing approaches.
- Implement, if appropriate, a mass-immunization plan.
- Partner with the Ministry of Health and other Health Authorities to standardize business processes and inspections for drinking water facilities and food premises/establishments.

- Analyze and respond to the secondary impacts of COVID-19 on the population living across Island Health.
- Partner with local governments and First Nations on climate change adaptation planning.
- Continue to refresh, implement and report on [\*Promote, Protect, Prevent: Our Health Begins Here. BC's Guiding Framework for Public Health.\*](#)
- Engage local governments and other key stakeholders to support healthy communities.
- Facilitate new approaches to harm reduction and overdose prevention with local government, community partners and First Nations.

Performance Measure	2017/18 Baseline	2018/19 Actual	2019/20 Actual	2020/21 Target	2021/22 Target	2022/23 Target
2.1 Percent of communities that have completed healthy living strategic plans <sup>1</sup>	53%	53%	61%	56%	61%	67%

<sup>1</sup> Data Source: Health Authority Annual Community Survey, Population and Public Health Division, Ministry of Health

### Linking Performance Measures to Objectives:

2.1 Island Health partners with local communities to support the development of healthy living strategic plans. These plans provide a framework within which local improvements to the health of each community’s population can be made. Island Health’s support of Community Health Networks enables the achievement of these improvements.

### Discussion:

2.1 This performance measure focuses on the proportion of communities which have developed and are implementing joint healthy living strategic plans in partnership with Island Health. 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.

### Objective 2.2: Provide health services for the underserved and/or marginally-housed population

Across the world, the COVID-19 pandemic has disproportionately infected and killed people who are disadvantaged and marginalized. Many members of these population groups are also affected by the opioid overdose public health emergency. Island Health is committed to working with its many partners to provide health and social services to underserved and marginally-housed people living within its service area, in order to improve their health and wellness.



**Key Strategies:**

- Provide sustainable health supports for underserved populations in long-term housing.
- Provide harm reduction services such as Overdose Prevention Services, Managed Alcohol Program, and Pandemic Prescribed Risk Mitigation (Safer Supply) to the underserved population.

**Objective 2.3: Improve Indigenous experience, health, and quality of care at Island Health**

Indigenous populations in British Columbia have a poorer overall health status than the rest of the population. Island Health recognizes the need for continued engagement, improved communication between all partners, increased opportunity to learn about trauma and Indigenous peoples, and the need to decolonize health system policies and protocols. Island Health's [Aboriginal Health Strategic Plan](#) includes strategies to address health inequities of the Indigenous population within the framework of seven Calls to Action set out in the 2015 report of the Truth and Reconciliation Commission. We are working closely to support our Indigenous partners, including First Nations Health Authority, Métis Nation BC, and Aboriginal Friendship Centres, as they lead many of these initiatives. Island Health continues to embed cultural safety and cultural humility throughout the organization and implement the Partnership Accord Commitments to directly improve services for Indigenous populations.

**Key Strategies:**

- Begin the creation of a framework to explore meaningful reconciliation with the Coast Salish, Nuu-chah-nulth and Kwakwaka'wakw families.
- Support shared decision-making with First Nations in service planning and delivery activities and support the achievement of the [Tripartite First Nations Health Plan](#), the [BC Tripartite Framework Agreement on First Nation Health Governance](#), the *Ministry First Nations Health Authority Letter of Mutual Accountability*, First Nations' [Regional Health and Wellness Plans](#), and [Partnership Accords](#).
- Improve coordination of health care planning and service delivery between the Ministry of Health, Island Health and First Nations Health Authority, as well as other Indigenous service organizations, to improve health outcomes for urban/away-from-home individuals and families.
- Initiate engagement and planning for the development and implementation of an Indigenous Self-Identifier.
- Begin to establish First Nation clinic access to Island Health's Electronic Health Record.

## Objective 2.4: Improve acute and ambulatory care services at Island Health

Working in partnership with care providers, patients and their families Island Health will advance hospitals as places of treatment and healing where patients remain for the time necessary to support acute care needs. The highest level of quality will be met across our hospital services through a commitment to constant improvement.

### Key Strategies:

- In partnership with Northern Health, develop service model for implementation of Hospital at Home model across BC.
- Finalize response plan in preparation for future increases in COVID-19 infections, including the establishment of surge capacity.
- Create high-acuity units at the Royal Jubilee Hospital, Victoria General Hospital and Nanaimo Regional General Hospital.
- Improve medication safety by implementing standardized medication history processes across Island Health.
- Develop discharge planning processes and a transport contingency plan in collaboration with First Nations Health Authority, Provincial Health Services Authority, First Nations, and Métis partners.
- Align the acquisition of, and the review of pharmaceuticals with provincial and national standards.
- Work collaboratively with the Ministry’s Pharmaceutical Services Division and Provincial Health Services Authority to ensure patients have timely access to high-quality, appropriate and cost-effective pharmaceutical therapies and services.

Performance Measure	2017/18 Baseline	2018/19 Actual	2019/20 Actual (Q2)	2020/21 Target	2021/22 Target	2022/23 Target
2.4 Rate of <i>C. difficile</i> cases associated with reporting facilities per 10,000 inpatient days <sup>1</sup>	3.6	2.7	2.6	3.1	3.0	2.9

<sup>1</sup> Data Source: Provincial Infection Control Network of BC (PICNet)

### Linking Performance Measures to Objectives:

- 2.4 Island Health actively monitors *C. difficile* and other infections in acute care facilities, and updates evidence-based infection prevention and control guidelines on an ongoing basis. Island Health continuously works to reduce infections and further improve the quality of care and safety for patients and healthcare providers.

## **Discussion:**

2.4 *Clostridium difficile* (*C. difficile*) is a bacterium which can pose a health risk for people who are taking antibiotics or who have weakened immune systems acquired while in hospital. It has adverse effects on the health of patients and often leads to costly excess hospital stays. Tracking trends of *C. difficile* infection provides a way to assess a hospital's ability to minimize the risk of spread of infection through measures such as proper hand hygiene, environmental cleaning and the judicious use of antibiotics.

## **Goal 3: Deliver an innovative and sustainable public health care system**

Island Health is committed to providing sustainable services through the effective use of human resources, digital and information technology, efficient budgets, and meaningful and productive interjurisdictional partnerships to improve organizational capacity and performance that enables service delivery.

### **Objective 3.1: Improve care team safety and wellness, and provide a staffing mix to support high-quality care**

Island Health is participating in provincially-led health human resources planning processes to support high-skilled health workforce needs and priorities. This work, in combination with Island Health cross-sector initiatives and organization-wide strategies, aims to increase the organizational capacity to enable effective, quality population and patient and family-centred health and care.

Having a safe work environment is key to staff satisfaction and well-being. Island Health is committed to improving the environment for our patients and care teams through advancements in violence and injury prevention.

### **Key Strategies:**

- Ensure adequate capacity and skills to respond to potential future surges of COVID-19, including increasing occupational health and safety supports for staff and medical staff.
- Act consistently with the Workplace Violence Prevention Framework and Policy Directive, collaborate with the Ministry of Health to improve measures to protect the health and safety of health care workers.
- Working with the Ministry of Health and the Health Employers Association of BC, continue to implement the Canadian Standards Association's Standard on Psychological Health & Safety.
- Advance recruitment strategies including support for new care pathways and services, and hard-to-fill positions which support Island Health's key strategies.
- Implement the updated [Aboriginal Recruitment and Retention Strategy](#) to increase the percentage of Indigenous Island Health staff at all levels of the organization.

- Continue to collaborate with the Ministry of Health and Health Authorities to develop a comprehensive health authority senior executive leadership development plan.

Performance Measure	2016 Baseline	2018 Actual	2019 Actual	2020 Target	2021 Target	2022 Target
3.1 Nursing and allied professionals overtime hours as a percent of productive hours <sup>1</sup>	3.9	4.1	4.5	<= 3.9	<= 3.9	<= 3.9

<sup>1</sup> Data Source: Health Sector Compensation Information System (HSCIS), Health Employers Association of British Columbia.

### Linking Performance Measures to Objectives:

3.1 Overtime is a key indicator of the overall health of a workplace. Maintaining overtime rates despite the expected growth in demand, helps promote both patient and caregiver safety while also reducing unnecessary costs to the health system. A number of strategies are underway to optimize, support and retain the existing health workforce such as promoting health and wellness in the workplace and building and supporting interdisciplinary team-based care.

### Discussion:

3.1 The measure compares the amount of overtime to the overall amount of time worked by unionized professional nurses, including Registered Nurses and Registered Practical Nurses, and allied health professionals, including occupational therapists, physiotherapists, medical laboratory technologists, clinical/hospital pharmacists, and medical radiation technologists.

### Objective 3.2: Enhance virtual & technology-enabled care to better serve people living throughout the service area

Island Health is committed to enhancing virtual care and technology-enabled care, including the person-centred Electronic Health Record: all clinical documentation, orders, and results from across the continuum of health care services Island Health provides, in order to enhance the capacity of Island Health to serve people living throughout the service area. During emergencies such as the COVID-19 pandemic, these technology solutions enable care to be provided safely, in a setting which is both appropriate and safe for both the person and team of care providers.

### Key Strategies:

- Enable “virtual-first” models of care and embed home health monitoring in care pathways.
- Increase functional capability and adoption of patient portal.

- Expand Electronic Health Record implementation and functionality to support new care pathways and services.
- Implement the Innovation Acceleration Strategy by continuing to build organizational capacity, revising governance processes, and completing required infrastructure.
- Work with the Ministry of Health and Provincial Health Services Authority to develop a *Health Sector Digital and IMIT Investment Strategy and Roadmap for 2021/22-2030/31*.
- Implement British Columbia's Office of the Chief Information Officer requirements to improve cybersecurity preparedness.
- Proactively manage information system vulnerabilities and implement additional controls to manage cybersecurity risks.

### **Objective 3.3: Learn and adapt from experiences to improve services and sustainability**

In order for Island Health to successfully navigate the complex environment, and meet mandated requirements, leaders and care teams must adapt to the scale and pace of change, public health emergencies and ongoing societal changes. This includes ensuring a safe environment for everyone who receives or provides care at Island Health, the improvement of processes which underpin the delivery of care, and the ongoing sustainability of those services.

#### **Key Strategies:**

- Develop and implement phase one of an anti-racism strategy at Island Health.
- Work with the Aboriginal Health Council and Partnership Accord Steering Committee to identify short term actions to be taken while awaiting recommendations from Justice Turpel-Lafond's review.
- Work collaboratively with key service partners who play a critical role in the health system including Professional Colleges, Doctors of BC, Professional Associations, Health Sector Unions, Contracted Services Providers and Post-Secondary Training Institutions.
- Support initiatives underway to increase the use of research evidence in operational policy, planning and practice, including the Strategy for Patient-Oriented Research Support Unit and the Academic Health Sciences Network and the Ministry of Health's [\*Putting our Minds Together: Research and Knowledge Management Strategy\*](#).
- Renew executive governance, leadership and operational processes to support the design and delivery of quality health services, including the integration of a Gender-Based Analysis+ (GBA+) lens in decision-making.
- Manage within budget allocation and improve productivity, while maintaining a strong focus on quality service attributes, by strengthening budget and cost management systems and reporting.

## Resource Summary

(\$ millions)	2019/20 Actual	2020/21 Budget	2021/22 Plan	2022/23 Plan
<b>OPERATING SUMMARY</b>				
Provincial Government Sources	2,631.129	2,676.613	2,765.794	2,809.195
Non-Provincial Government Sources	139.642	165.402	168.473	171.645
<b>Total Revenue</b>	<b>2,770.771</b>	<b>2,842.015</b>	<b>2,934.267</b>	<b>2,980.840</b>
Acute Care	1,529.362	1,510.676	1,557.118	1,577.727
Long-Term Care	434.415	457.874	478.228	486.297
Community Care	334.290	373.584	387.040	396.299
Mental Health & Substance Use	207.487	211.669	215.612	219.114
Population Health and Wellness	69.695	69.517	71.730	73.088
Corporate	195.033	218.696	224.539	228.315
<b>Total Expenditures</b>	<b>2,770.282</b>	<b>2,842.015</b>	<b>2,934.267</b>	<b>2,980.840</b>
<b>Surplus (Deficit)</b>	<b>0.489</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>
<b>CAPITAL SUMMARY</b>				
Funded by Provincial Government	29.9	30.3	40.3	33.2
Funded by Regional Hospital Districts, Third Parties, Foundations, Internal Funds and all other sources	44.6	59.8	44.3	31.1
<b>Total Capital Expenditures</b>	<b>74.5</b>	<b>90.1</b>	<b>84.6</b>	<b>64.3</b>

\* Further information on program funding and vote recoveries is available in the [Estimates and Supplement to the Estimates](#).

## Major Capital Projects

Capital investment ensures health infrastructure is maintained and expanded to meet a growing population with increasing needs for health services. Capital assets such as buildings, information systems and equipment are key components of health care delivery and must be acquired and managed in the most effective and efficient manner possible. Funding for these assets is primarily provided through the Provincial government and through partnerships with Regional Hospital Districts, Hospital Foundations and Auxiliaries.

Island Health bases the development of its Capital Plan on the following principles:

- Capital investments must support the strategic direction of the Province and organization;
- Investments must be backed by a rigorous examination of service delivery options and a business case analysis;
- Our use of existing infrastructure must be maximized and non-capital alternatives must be explored before new investments are made; and,
- Our spending on capital assets must be managed within fiscal limits.

The following list is Island Health’s approved capital projects over \$20 million currently underway:

Major Capital Projects (over \$20 million)	Targeted Completion Date (Year)	Costs Incurred to Mar 31, 2020 (\$ millions)	Estimated Cost to Complete (\$ millions)	Approved Anticipated Total Capital Cost of Project (\$ millions)
<b>Nanaimo Regional General Hospital Intensive Care Unit Replacement</b>	2023	0.8	33.0	33.8
A new Intensive Care Unit is needed to improve: staff and patient safety; patient privacy; care team communication; care process efficiency; and patient healing. The new 12-bed unit will be located on the second floor of a new two-storey building. The shelled-in space on the main floor has been identified for a future 12-bed High Acuity Unit.				

## Significant IT Projects

A significant IT project is one where the capital investment on a single project exceeds \$20 million in total or \$10 million in one fiscal year.

IMIT Project (exceeds \$20 million in total or \$10 million in one fiscal year)	Targeted Completion Date (Year)	Costs Incurred to Mar 31, 2020 (\$ millions)	Estimated Cost to Complete (\$ millions)	Approved Anticipated Total Capital Cost of Project (\$ millions)
<b>IHealth – Next Generation Electronic Health Record</b>	2021	97.9	2.4	100.3
<p>Island Health has long recognized the role of the Electronic Health Record (EHR) in the quality, safety, and experience of care, and has been advancing the reach and functionality of its Cerner-based EHR since 1999. The foundational capabilities of the Cerner-based EHR are currently implemented across Island Health’s acute, ambulatory, long term care, and mental health services.</p> <p>Through IHealth, Island Health is extending the reach and capabilities of its EHR to create a single, integrated, and advanced EHR across the continuum of services Island Health provides. The IHealth scope includes 1) the implementation of advanced EHR functionality, including Computerized Provider Order Entry (CPOE) and electronic clinical documentation, to actively support and guide clinical decision-making based on best evidence and standards; 2) implementation of the Cerner-based EHR across Island Health’s Home Care Services and targeted Primary Care clinics, creating a single, integrated record which can be accessed across sites, programs and services; and 3) introduction of the MyHealth Patient Portal which will provide patients with access to their personal information and enable interactions with the Island Health care team.</p>				



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

For more information about Island Health, please visit: [www.islandhealth.ca](http://www.islandhealth.ca)  
or contact:

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