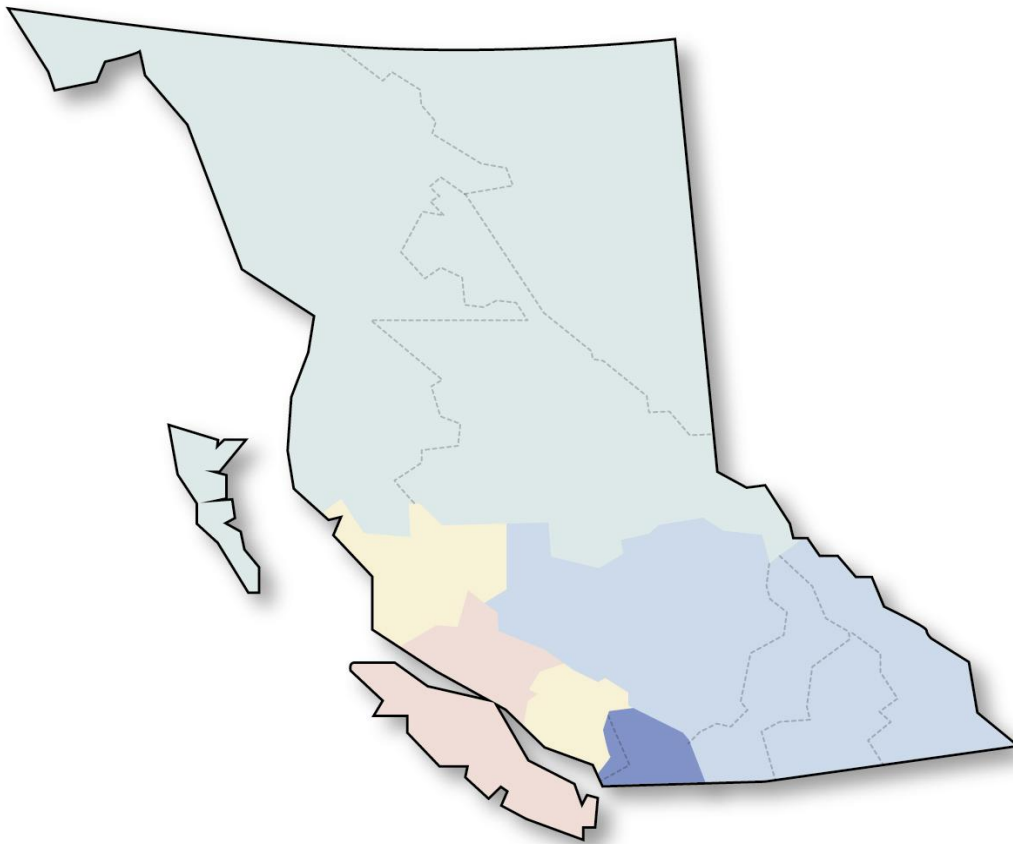


September 2005

# Health Authority Redesign Accomplishments A Four-Year Picture

## Fraser Health

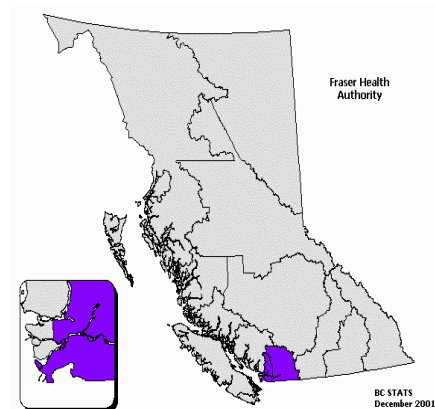


# FRASER HEALTH

## Health Service Redesign

British Columbia is planning a health care system where high quality health care is available to everyone – where services are timely, affordable and sustainable, for today and future generations.

Since 2002, when government streamlined 52 health regions with competing or overlapping mandates into six health authorities, the province has been able to maximize the resources available for direct patient care. Five regional health authorities now have responsibility for planning and delivering local health services, such as public health, mental health, residential, home and hospital care. The Provincial Health Services Authority oversees provincial and highly-specialized health services, such as the BC Cancer Agency.



A strong economy and sound fiscal management have enabled the province to increase health care spending by \$3.8 billion between 2001 and 2007. Strategic investments, based on best practices and innovative approaches to local challenges, are improving health authorities' ability to respond to patients' needs. As British Columbia moves forward into the 21<sup>st</sup> century, lifestyle choices – in nutrition, physical activity, non-smoking and responsible use of alcohol – will be the foundation of keeping our population healthy and our health care system sustainable.

## Fraser Health

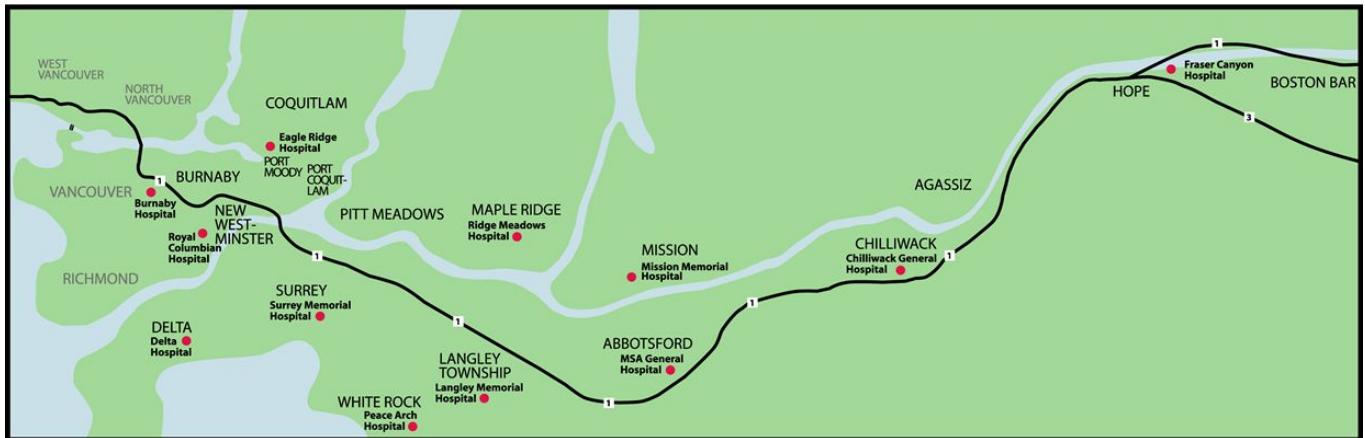
Fraser Health provides health care services to approximately 1.469 million<sup>1</sup> residents, from Burnaby to Boston Bar. This is B.C.'s largest and fastest growing health authority. Fraser Health has more than 22,000 employees and nearly 2,000 physicians.

Some of Fraser Health's key redesign initiatives include:

- reducing waiting times for patients in emergency departments who require hospital admission;
- increasing access to key diagnostic tools such as MRI and CT;
- increasing capacity and access in the home and community care sector to meet the needs of more Fraser Health residents and also alleviate pressure on the acute care system;
- establishing new primary health care sites;
- increasing access to community mental health resources and addiction treatment services. For example, Fraser Health is an active participant in information campaigns to combat the use of crystal meth in many of our communities;
- to meet the health information needs of a culturally diverse and large ethnic population, providing timely access to spoken language interpreter services and a wide variety of translated patient education materials to patients in any acute or community Fraser Health site; and
- investing in academic partnerships, a student database system, academic development of Fraser Health employees, research and clinical innovation and the advancement of professional practice.

<sup>1</sup> BC Vital STATS, B.C. Ministry of Management Services, PEOPLE 29 (July 1, 2004).

## Acute Care Services



Health authorities and the Provincial Health Services Authority are designing a network of acute care that includes centres of excellence for specialized services and community hospitals or treatment centres for basic emergency services.

Fraser Health's network of acute care facilities will give residents, including seniors and people with disabilities, better access to acute care services in their own region. This network will guide health authority decision making about capital investment, equipment location and staffing patterns.

Specialized acute services will be consolidated to provide a focus for specialists, along with the professional and technical resources needed to support patient access and quality care. E-health (electronic health) procedures, such as transmitting live photos of a patient's condition to a practitioner at a major health care centre, will be used to bring quality care to those who live at a distance from larger communities.

### Delivering Acute Care Services in Fraser Health

Accomplishments since 2001 include:

#### Medical Technology

- Diagnostic imaging has put in place significantly more MRI (magnetic resonance imaging) and CT (computed tomography) services at all Fraser Health hospitals.
- Installed direct digital radiography equipment at Peace Arch Hospital. This increases capacity of radiology services overall. This initial installation establishes the template for implementation at other sites across Fraser Health.
- Replaced 24 ultrasound units across 11 sites, providing the latest in technology and improving efficiency and ergonomics for employees.
- Replaced and or added 11 radiology diagnostic C-arm devices across eight sites.
- Replaced seven nuclear medicine machine gamma cameras at Surrey Memorial and Royal Columbian sites.

#### Regional Initiatives

- Began implementation, now well underway, of a filmless medical imaging system. The picture archiving and communications systems (PACS) is on line in Fraser North and Fraser East, with Fraser South connection to be completed in 2005. This is one of North America's largest, fully integrated PACS installations. Once in place, it will eliminate the need to process and manually transport X-rays, thereby improving the clinical decision time for physicians. As of August 2005, Fraser Health has 10 of 12 sites fully functioning on PACS.
- Increased access to renal care. The recently-implemented renal care initiative, offering a unique model of disease management for kidney patients, is the result of a new partnership between Fraser Health,

the Provincial Health Services Authority (PHSA) and Baxter Corporation. Patients with kidney disease now have:

- enhanced access to health care professionals;
- more collaboration and management of their individual cases; and
- access to treatments that help patients live healthy, independent lives and reduce hospital visits.
- Increased government funding in 2003/04 and 2004/05 to allow Fraser Health to address specific wait lists and provide increased cardiac surgeries, hip and knee replacement surgeries and diagnostic procedures, such as CT scans and MRIs.
- All 12 acute sites have implemented the alternate level of care classification system (ALCCS). Data connected in Meditech systems across all sites provides real time snapshots of all alternate level of care clients, their history during their acute stay and their length of stay.
- Paramedics in an emergency room/50-day pilot study at Surrey Memorial and Royal Columbian hospitals in spring 2005 employed strategies that reduced ambulance wait times. The data gathered incorporated aspects of quality, safety, satisfaction and cost, in addition to reduced BC Ambulance Service waiting times, and will inform further initiatives targeted at reducing ambulance wait times.
- Implemented action plans to improve response to winter surges when demands for acute health services are known to increase.
- Implemented hospitalist programs at multiple acute sites to care for patients who are admitted without a designated physician.
- Began an acute care capacity initiative. A comprehensive review of acute care services will identify future acute care requirements and recommend a size and service configuration that accommodates projected population growth, changes in clinical practices and repatriation of services from other health authorities.
- Added convalescent care beds in Fraser communities.
- Sub acute programs are accessible across Fraser Health communities. The program frees up acute beds, provides appropriate levels of care and speeds recovery for patients who require rehabilitation before returning home.

#### Fraser East

- Opened the Chilliwack Eye Centre at Chilliwack General Hospital, providing more elective services (primarily cataract) and freeing resources for other surgical services at Matsqui-Sumas-Abbotsford (MSA) Hospital and Chilliwack General Hospital.
- Sub acute medical or rehabilitation treatment is now available in Abbotsford, Chilliwack and Hope sites to serve Fraser East communities. This program frees acute beds, provides appropriate levels of care and speeds recovery for patients who require rehabilitation before returning home.
- Addressing surgical wait lists in the Abbotsford-Mission and Maple Ridge areas by scheduling day surgeries in a newly-renovated operating room at the Mission Hospital.
- Subsequent to the December 2004 announcement, began construction of the new 300-bed Abbotsford Regional Hospital and Cancer Centre. A series of open houses, hosted by project partners, began in Abbotsford and is underway across Fraser East communities to inform the public about improved access to acute care services. The new hospital will centralize several medical disciplines and enhance patient care, access and scheduling by allowing the co-ordination of multiple specialist visits and diagnostic testing for patients at one location.
- Opened a single-room maternity centre at Chilliwack General Hospital.
- Investing in new equipment and renovations at MSA Hospital in Abbotsford and Mission Memorial Hospital emergency department to improve services for patients and working conditions for employees.
- Opened 10-bed Christine Morrison Hospice Residence, located on the third floor of Mission Memorial Hospital.
- Hope Health Services was approved by UBC and the BC Academic Health Council as a site for 2005 for an inter-professional rural education experience for five multi-disciplinary health practitioners. The students will work closely with rural health practitioners.
- Meditech's client server blood bank module was implemented in all four Fraser East labs, improving both patient safety and efficiency of operations.

### Fraser North

- Attracted national and international interest in a rapid recovery program for cardiac surgery patients at Royal Columbian Hospital. The program was presented at national and international conferences. It has been purchased by a Copenhagen hospital and Winnipeg's St. Boniface General Hospital, a national leader in heart health research. Saskatoon has also expressed interest in this program.
- Opened a state-of-the-art angiography interventional unit at Royal Columbian Hospital in January 2005. During the design of this facility, significant new developments in technology were realized by equipment manufacturers, including direct digital (flat panel) imaging, increased use of 3D imaging and digital image reconstruction. The new unit has been described as a "world class facility" by Philips Medical Systems Canada. It is the only angiography unit of its kind in Canada to be equipped with this high level of technology. The unit will enable Fraser Health to meet the needs of a growing population, care for a greater percentage of its patients within its own facilities and help to reduce wait times for surgeries in the area.
- Reduced wait times through the development of a new day unit in the cardiac catheterization laboratory at Royal Columbian Hospital. Wait times have been reduced from six to two months, with same day service for urgent cases.
- Reduced patient wait lists by 50 per cent with the addition of CT scanners at Eagle Ridge and Ridge Meadows Hospitals.
- Upgraded the oncology clinic at Burnaby Hospital. It is now five times larger, offering enhancements to traditional cancer care.
- Established a tertiary hospice palliative care unit at Burnaby Hospital in May 2003.
- Opened a new monitored care unit and expanded operating room hours at Eagle Ridge Hospital in February 2004.
- Opened a new breast imaging and bone densitometry department at Royal Columbian Hospital in October 2004. This program now enjoys a larger, better integrated space and newer technology, with care provided by many of the same professionals who previously offered these services at Saint Mary's Hospital.
- Opened a newly-located tuberculosis clinic next to the Royal Columbian Hospital with Fraser Health's and the BC Centre for Disease Control's support (October 2004).
- Construction is to begin in September 2005 on the expansion of the emergency department and the upgrading and consolidation of ambulatory care services at Ridge Meadows Hospital.
- Additional services developed at Burnaby Hospital in 2004 include opening of a sixth operating room, a progressive weaning unit and a 25-bed sub acute unit.
- Two new beds were added to open a 15-bed sub acute unit at Eagle Ridge Hospital in summer 2005. This unit expects to treat approximately 400 patients annually.
- Construction of a new building has begun adjacent to Ridge Meadows Hospital, to be completed in 2006. The new building includes 148 suites for long-term residential care to replace the aging Allouette and Creekside Manors, the consolidation of two home health offices and a new 10-patient hospice residence.

### Fraser South

- Through pioneering work at Delta Hospital, created a new medical device called Thermablate EAS that is now available to treat menorrhagia (excessive menstrual bleeding). This condition affects 20 per cent of women worldwide and is the leading cause of iron deficiency anemia. Delta Hospital was the first in the world to use the research prototype and is the first site in North America to use the commercial version. Dr. Douglass Yackel donated the instrument to the hospital upon its approval by Health Canada last year.
- Pastoral volunteers now perform services every second Sunday for residents of Sikh faith at Surrey Memorial Hospital's Dainard Pavilion.
- Expanded two haemodialysis units at Newton community dialysis unit. Since 1999, Surrey Memorial Hospital has more than doubled, from 16 to 33, the number of hemodialysis stations. The units will serve patients in Surrey, White Rock, Delta, Langley and beyond.
- Construction of a \$6 million emergency department expansion at Delta Hospital begins in September 2005. The project will more than double emergency space, complete with isolation rooms for dealing with SARS and other serious communicable diseases.

- Launched an interim 4,000 square foot expansion of the emergency department at Surrey Memorial Hospital, to be completed in October 2005, and opened 12 new sub acute beds and 18 geriatric medical beds in the hospital in 2005.
- Peace Arch Hospital served as Fraser Health's pilot site for the Provincial Health Services Authority asthma protocol initiative. The pilot has been most successful in reducing wait time to treatment and increasing effective patient care outcomes. Implementation of this protocol throughout Fraser Health emergency rooms is scheduled for 2005/06.

## **Mental Health and Addiction Services**

British Columbia is reforming mental health and addiction services to improve the health and functioning of people with mental disorders and/or problematic substance use, their families and the communities in which they live. Mental health reform will:

- encourage the use of best practices based on reviews from other Canadian institutions and around the world;
- bring together community supports to better serve clients; and
- provide provincial tertiary services for those who require hospital or specialized care.

The recent alignment of addiction services with mental health services offers new opportunities for improving access and responsiveness of care.

## **Mental Health and Addictions Reform in Fraser Health**

Key initiatives in Fraser Health include:

- Progress on the Riverview project. Construction is underway on the 24-bed Cottonwood facility as part of the Riverview redevelopment project.
- Expanding community mental health services including services for people with concurrent disorders and those with eating disorders, seniors' mental health, psychosocial rehabilitation, case management and early psychosis intervention for adolescents and young adults.
- A mental health housing leader was hired to move forward on mental health housing redesign.

Accomplishments since 2001 include:

### Regional Initiatives

- Completed the region's first integrated mental health and addictions plan in December 2003.
- Allocated additional funding to increase the capacity of community mental health services (2003/04 and 2004/05).
- Hired 12 concurrent disorders therapists as one of the first clinical steps towards linking mental health and addictions services. The goal is to increase awareness and understanding of concurrent disorders through client involvement and through training sessions and networking opportunities.
- Developed a best practices document for dealing with crystal meth use and evaluating treatment models for youth addictions.
- Ensuring seven days a week psychiatric liaison nursing coverage in all emergency departments.
- Expanded shared care initiatives in supporting general/family practitioners in addressing both mental health and problematic substance use.

### Fraser East

- Announced a partnership with Chilliwack Addiction and Prevention Services to provide outpatient alcohol and drug services in Chilliwack.
- Developed a new addictions outreach service for youth, provided by Hope Community Services and funded by Fraser Health and the Ministry for Children and Family Development. The service will support youth who have experimented with substance use.

- Annualized funding for school-based prevention.
- Implemented nine withdrawal management beds. Funding is in place for the 10th bed to open when space permits.
- Implemented an early psychosis intervention program and adolescent crisis response team.

#### Fraser North

- Relocated Burnaby mental health services into the former Cascade residence at Burnaby Hospital in July 2003. With some renovations, the 30-year-old Cascade facility provided a valuable opportunity to move mental health services from leased to owned space. The move has enabled staff to strengthen services by consolidating the care they provide.
- Communities within Fraser Health are participating in various initiatives and needs assessments to learn more about the issues related to homelessness. An outreach worker has been hired in Burnaby to gather information from homeless individuals and co-ordinate the efforts of Burnaby Health Services and community agencies.
- Restored Cliff Block, a heritage building in New Westminster, as a housing development for individuals at risk for homelessness. Officially opened in October 2003, the building provides 23 units of subsidized housing and support services for some of the city's most marginalized and vulnerable citizens. The project combines contributions from Canada Mortgage and Housing Corporation and BC Housing with financial support from Fraser Health, the City of New Westminster and Lookout Emergency Aid Society. Onsite staff provide services to support residents as they transition to a more stable and healthy lifestyle. The building also includes a community outreach program, which helps ensure those in need have access to shelter, food and health treatment.
- Implemented an early psychosis intervention program and expanded adolescent crisis response team.

#### Fraser South

- Launched an early psychosis intervention public awareness campaign in January 2003 through a \$30,000 commitment from the Peace Arch Hospital Foundation. The public awareness campaign targets physicians, other health care providers, schools and the general public through the distribution of brochures, posters and a six-month bus and newspaper ad campaign to promote a new web site, [www.psychosissucks.ca](http://www.psychosissucks.ca), geared to teenagers.
- Expanded Maple Cottage Detox Centre from 22 to 30 beds and relocated Surrey services. This provides better access to withdrawal management services for problematic substance use for men, women and youth. Maple Cottage is licensed to accommodate six youths (expanded from three), from 14 to 18, requiring detoxification services.
- Expanding the early psychosis intervention program to include provincewide training to assist child and youth mental health clinicians and physicians to provide early psychosis services, especially in rural areas. The program, a collaborative, community-based initiative between Fraser Health and the Ministry of Children and Family Development, began in May 2000. It serves Surrey, Delta, Langley and White Rock.

### **Home and Community Care**

Seniors and people with disabilities want to live as independently as possible, for as long as possible. Today's seniors are healthier and living longer than ever before. They want more choices for housing and care that respect their independence.

As British Columbia's population grows and ages, health authorities are modernizing home and community care services to:

- provide clients living at home with services that enable them to remain independent and in their own homes;
- reduce wait times for residential care – average waits are now 60 to 90 days, compared to up to a year or more in past;
- make residential care available to seniors and people with disabilities with the most complex health care needs;

- provide affordable living options, such as assisted living and supportive housing, for independent clients; and
- provide sensitive, compassionate end-of-life care.

The province is adding 2,762 new care beds and units by December 2006 and will meet its commitment to develop 5,000 new care spaces by 2008. They include a mix of residential care beds and independent living options.

New residential care beds are being developed where needed and outdated residential care facilities upgraded to meet modern care standards for British Columbians who require 24/7 professional nursing care. To respond to the demand for more choices, new independent living options are also being created. Assisted living units are being developed for seniors who can direct their own care and supportive housing units with home support for seniors who need a lower level of care. Home care and home support services are being enhanced across the province for seniors who live at home.

Research and feedback from seniors' care experts, and seniors themselves, support B.C.'s approach – today's seniors want options besides traditional nursing homes as they age. These changes will ensure care services for seniors and people with disabilities are sustainable, value consumers' needs and expectations and provide the right care in the right setting.

### **Home and Community Care Services in Fraser Health**

Recognizing both a significant growth in the general population it services and a growth in the elderly population, Fraser Health has worked to develop a sustainable home and community care service system that provides services that are more appropriate, efficient and effective in meeting clients' assessed needs.

Key initiatives are:

- expanding and redeveloping residential care;
- expanding home health professional and home support resources;
- expanding end-of-life care through dedicated clinical teams and hospice residences;
- implementing 1,176 assisted living units to create enhanced housing and care options for seniors. As of Sept. 1, 2005, 370 units are open and by March 31, 2006, 616 units will be open;
- increasing availability of equipment and supplies to support clients being cared for in their own homes; and
- implementing standardized assessment and care planning tools for improved long term care case management.

These initiatives will ensure resources are used effectively and provide the best mix of services and support for people across the Fraser Health region.

Accomplishments since 2001 include:

#### Regional Initiatives

- Expanding and redeveloping residential care. Fraser Health has 314 new complex care beds in development. Co-ordinating 23 redevelopment projects to upgrade physical facilities to improved standards.
- Rapid progress is being made towards adding 1,176 new assisted living units as care options for seniors and people with disabilities. In partnership with BC Housing and local non-profit and private providers, Fraser Health has so far awarded contracts for the construction of 912 new units in 11 communities from Delta to Hope. More than 360 of these units were in operation by the end of 2004. In conjunction with the assisted living initiative, Fraser Health is implementing a "campus of care" model, which places assisted living units on the same site as residential care units.
- Increased funding for specialized services within complex care, including ventilator dependent units, specialized care units, services for the young disabled and dialysis.

- Expanding end-of-life care through dedicated clinical teams and hospice residences. The number of patients receiving palliative care at home is expected to increase significantly in Fraser Health.
- Increasing availability of equipment and supplies to support clients being cared for in their own homes.
- Implementing standardized assessment and care planning tools for improved long term care case management.
- Expanding home health professional and home support resources.
- Increased acquired brain injury group home and day care capacity by \$2.5 million.
- Enhanced clinical staff across Fraser Health to improve coverage for evenings and weekends.
- Established 11 community-based, interdisciplinary consultation teams to provide expert support to primary providers, such as home care nurses and family physicians caring for patients in the community
- Established an after-hours response program in partnership with the BC Nurseline, which provides advice and support to patients and families living at home once home health offices are closed.

#### Fraser East

- Opened 10 assisted living units at Logan Manor in Agassiz in 2003 and 10 at Riverside Manor in Hope in 2004.
- Opened Parkholm Place in Chilliwack, the first program of its kind in Fraser East, with a dedicated interdisciplinary team of health professionals to meet the comprehensive needs of frail seniors in an adult day program. Made possible by renovations to the former Parkholm Lodge, this centre now includes several clinic rooms where patients can be seen by a designated physician, as well as a nurse for foot care and wound care. Enhancements to rehabilitation areas allow for physiotherapy and occupational therapy assessments and treatments, as well as a hydrotherapy pool.
- Completing 40 assisted living units at The Waverley in Chilliwack.
- Developing 60 new residential care beds in Chilliwack.
- Opened 10 new palliative hospice beds at Mission Memorial Hospital in 2005.

#### Fraser North

- Opened 59 assisted living units for seniors at Nikkei Home and 40 at Dania Home. These were the Lower Mainland's first publicly funded assisted living units.
- Opened a new tertiary-level, 10-bed palliative care unit at Burnaby Hospital in April 2003 for patients facing life-limiting illness and difficult-to-manage symptoms. The first of its kind in the region, the unit is a regional referral centre for patients in Burnaby, New Westminster, the Tri-Cities, Pitt Meadows and Maple Ridge. An interdisciplinary team delivers care.
- Redeveloping Allouette Manor and Creekside Manor extended care units, also in Maple Ridge.
- Officially opened 45 new assisted living units at Royal Crescent Gardens in Maple Ridge in 2005.
- Constructing a new, 70-unit assisted living, cottage-type development at Hawthorne Care Centre in Port Coquitlam.

#### Fraser South

- Opened 20 new assisted living units at Augustine House in Delta in January 2004.
- Opened 60 new assisted living units at The Gateway in Surrey in 2005.
- Opened 10 new hospice beds at the Langley health service campus and another 10 new hospice beds at the Shirley Dean Pavilion in Surrey, both in 2005.
- Launched construction on the Czorny Centre, a 36-bed residential and outpatient centre in Surrey for people with Alzheimer dementia, in January 2005.
- Launched construction of 68 assisted living units at Kinsmen Place in Delta in April 2005.
- Broke ground for the addition of 30 residential care beds at Hilton Villa in Surrey in April 2005.
- Launched construction of 72 assisted living units at Progressive Intercultural Services Society in Surrey in April 2005.

- Funding 75 of 101 residential beds at Fleetwood Place residential care facility in Surrey and 60 assisted living units at the adjacent Fleetwood Villa.
- Awarded 70 new residential care beds in South Surrey.

## **Primary Health Care Services**

Primary health care is the foundation of the health system. Primary health care is where the majority of British Columbians receive their care in any year. General practitioners most often provide the care and are the gatekeepers to networks of other health care services, specialist care and community resources.

British Columbia health authorities have received \$48 million of a \$73.5 million allocation from Health Canada's primary health care transition fund. Fraser Health's portion of these funds is \$13.6 million over a four-year period.

The fund has been used to initiate the renewal and sustainability of the province's primary health care system. Renewal will improve appropriate patient access to care, achieve optimal patient health outcomes and enhance health care practitioners' professional satisfaction.

Over the past four years, health authorities have focused on:

- working with family practitioners to develop modern primary health care delivery models and networks;
- improvements in chronic disease management by using structured collaboratives, technology-enabled decision support and patient registries;
- the development of standards for electronic medical summaries and the electronic chronic disease management toolkit;
- an increase in the application of evidence-based prevention in primary health care, based upon the principles of the Canadian Task Force on Preventive Health Care; and
- training patient leaders, who then teach self-management to other patients who live with chronic conditions.

## **Designing Primary Care Services in Fraser Health**

Fraser Health is working with physicians and other care providers to improve access and health outcomes for people at risk, including adults with mental disorders, hard-to-reach populations and those with complex or chronic diseases.

Accomplishments to 2005 include: the transition of 10 group practices to enhanced family practices; the participation in two provincial chronic disease collaboratives; chronic heart failure collaborative; and the diabetes collaborative. In August 2005, Fraser Health procured the EMR information system.

Accomplishments since 2001 include:

### Fraser East

- Opened the Agassiz Community Health Centre in October 2003. The centre provides a team of four family physicians, a primary care nurse and other health professionals.

### Fraser South

- Opened the Fraser hepatitis service in January 2004 at the North Surrey public health unit. The new service is composed of physicians, public health nurses and a social worker/addictions counsellor.
- Opening the Maxxine Wright Community Health Centre in Surrey, providing housing and health services for pregnant high risk women and their children.

## Population Health and Wellness

Effective health promotion, disease prevention and public health services are vital to a population's well-being. British Columbia is striving to improve public health care and lead the way in healthy living and physical fitness in North America.

Health authorities are participating with the Ministry of Health in defining a core set of prevention and protection programs government will provide. The project will also identify best practices that support population health and wellness. Consultations beginning in 2002/03 have resulted in government developing a list of priorities for protection and prevention programs.

Population health focuses on improving people's health through prevention of disease, injury and disability. Prevention is key to the health system's sustainability. Public health services protect the public from health or safety risks to their self, food, water and environment.

### Public Health Care Services and Health Promotion Initiatives in Fraser Health

Accomplishments since 2001 include:

- Fraser Health implemented strategies to encourage people in our communities to make healthy choices in pregnancy, nutrition, tobacco use, exercise and weight management.
- Implemented an aboriginal health plan. Significant reductions in infant mortality rates are noted among First Nations populations. The plan involves multiple health initiatives between Fraser Health and First Nations groups.
- Launched a community health grant program in 2004 and repeated it in 2005. Dozens of community groups have received grants of up to \$10,000 to conduct health surveys, workshops and health education projects on such subjects as healthy diet, effective parenting, aging and living with disabilities. The value of these community-level investments is multiplied many times over by the volunteer energy and expertise that the recipients bring to their work.
- Established an HIV/Aids service plan, which identifies key objectives, strategies and outcome indicators in four areas: partnership; prevention; early identification, linkage to treatment and care; and community support services.
- With community partners, purchased and implemented the in motion strategy in Abbotsford, a community-wide fitness program in schools, workplaces and public spaces that is challenging the residents of British Columbia's sixth-largest city to increase their level of physical activity.
- Through partnerships with all 22 municipalities in its service area, significantly strengthened capacity to respond to West Nile Virus.
- Streamlined and standardized approaches to child and adult care facility licensing as a means of monitoring the health and well-being of these vulnerable individuals.
- Taking the lead in planning and the community's response to potential public health emergencies, such as influenza pandemic and mass casualty emergencies. The health authority is partnering with municipalities and multiple public safety agencies. Fraser Health's completed pandemic influenza plan is available on its website.
- Building internal capacity to monitor immunization rates for two year olds.
- A specialized communicable disease control team and safe drinking water team were created to ensure effective management of these two areas of critical responsibility.
- Fraser Health's medical health officers played a major role in revising national guidelines for SARS surveillance, case definitions and public health management. National SARS guidelines are now translated into Fraser Health-wide policies and procedures.
- Increased screening for dental health, hearing and targeted vision in 2005/06.
- Changes to legislation, which came into force in June 2005, regarding the management of sewage systems created opportunities for Fraser Health to make improvements to ground water protection and introduce best practices in sewage management improvements.
- Flu immunizations for residents of residential care facilities are above benchmarks for 2004/05.

- Streamlined health protection operations by introducing standardized information management. For example, a vendor obtaining a permit to sell food at a community market previously obtained separate permits from multiple environmental health officers. Revised practices eliminate the need for duplication.
- A new community-based medication management program was launched in Fraser Health in April 2005. Pharmacists conduct home visits for high risk clients, especially seniors recently discharged from hospitals. They identify potential drug-related problems, such as negative drug interactions or side effects and make recommendations to reduce problems (for example, prescribing pre-measured, blister-packed medications or eliminating unnecessary medications). A program of this magnitude is the first of its kind in North America and has been implemented in White Rock, Burnaby and Abbotsford-Mission health service areas.

## Health Care Professionals

- Fraser Health had 1,158 general practitioners and 732 specialists in 2003/04.<sup>2</sup>

## Corporate Support Services

Accomplishments since 2001 include:

- Invested more than \$1.3 million in 2002/03 for specialty nursing education to improve the skill level of nurses employed at Fraser Health.
- Budgeted \$1.5 million for specialty nursing education in 2003/04.
- Invested in an undergraduate nurse employment program to increase the number of graduating nurses who come to work with Fraser Health.
- Continued to develop return-to-work initiatives to support nurses who are returning to work after an illness or injury.

# GENERAL CONTACTS

**BC HealthGuide / BC NurseLine** <http://www.bchealthguide.org>

1 866 215-4700 Toll-free in B.C.

1 866 889-4700 Deaf and hearing impaired, toll-free in B.C.

604 215-4700 In Greater Vancouver

**Dial-a-Dietician** [www.dialadietitian.org](http://www.dialadietitian.org)

1 800 667-3438 Toll-free in B.C.

604 732-9191 In Greater Vancouver

**BC Smoker's Helpline** [www.healthservices.gov.bc.ca/tobctrl/reduction.html#help](http://www.healthservices.gov.bc.ca/tobctrl/reduction.html#help)

Please note the Ministry of Health website address will be changing to: [www.health.gov.bc.ca](http://www.health.gov.bc.ca). If you are unable to locate the above websites, please try the new address.

<sup>2</sup> MSP Information Resource Manual Fee-For-Service Payment Statistics 2003/2004, Information Resource Management, Knowledge Management and Technology, B.C. Ministry of Health Services; Population Extrapolation for Organizational Planning with Less Error 28 (PEOPLE 29), BC Stats, B.C. Ministry of Management Services.

# HEALTH AUTHORITY CONTACTS

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The numbers in this document reflect the latest available data as of printing.

Please note data changes daily as the planning and delivery  
of health care services progresses.