

*Province-wide solutions.
Better health.*

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February 23, 2005 (**February 17, 2005 Board Meeting**)

Public Question and Answer Period

The Provincial Health Services Authority (PHSA) held its second Public Question and Answer Period (Public Q&A) in conjunction with the meeting. In the spirit of its commitment to public accessibility, the board has decided to incorporate a 30 minute Public Q&A prior to the beginning of every open board meeting. To help ensure the Public Q&A runs as smoothly as possible for the benefit of everyone, the board has outlined a number of procedures for the sessions:

- The board will respond to written questions received up to the day before the meeting, or questions provided in writing as members of the public register for the Public Q&A.
- After reading the question aloud, the board or management will respond.
- If the board and management do not have sufficient time or information to respond to questions, they will respond in writing following the meeting.

The Provincial Health Services (PHSA) Board Brief summarizes the board meetings of the PHSA. It is sent to PHSA agencies, government, media and other stakeholders to keep them informed about the activities of the PHSA.

PHSA Presentations

Dr. Stuart MacLeod, VP Academic Development at PHSA, presented on the critical importance of research in child and youth health. Only approximately 10 per cent of research dollars are focused on research related to children.

Dr. Andy Coldman, Leader of Population & Preventive Oncology with the BC Cancer Agency, provided a presentation on screening for colo-rectal cancer. Colo-rectal cancer accounts for 13 per cent of all cancers in BC leading to 11 per cent of all cancer deaths in the province. Dr. Coldman reviewed literature regarding effectiveness and acceptability of different

screening approaches. Based on current Ministry of Health guidelines there are 1.1 million BC residents eligible for screening. The BC Cancer Agency has submitted a proposal for colo-rectal cancer screening to the PHSA priority setting process. Decisions regarding these priorities will be made as part of the development of the 2005/06 Provincial Health Services Authority operating plan.

Dr. Liz Whynot, President of BC Women's Hospital & Health Centre, presented on the Maternity Care Enhancement Project. The project was formed to develop a sustainable model for maternity care in BC, in partnership with the BC Medical Association and the Ministry of Health and included consultation with numerous stakeholder groups. Recommendations include supporting development of a woman centered maternity care pathway; collaborative, team-based support for maternity care; sustainment of practitioners and examination of long-term strategies to enhance collaborative care; Ministry of Health Services supporting development of a coordinated, comprehensive education plan; health authorities supporting collaborative models of maternity care at regional and local levels; Ministry of Health Services supporting formation of formal collaboratives; and a process to monitor and ensure progress in supporting local collaborative models to support maternity care in BC.

CEO Update

The **Emergency Department of BC Children's Hospital** received 3,836 patient visits during the month of December 2004, the highest number of patient visits since the department opened.

BC Women's Hospital & Health Centre, on behalf of the Ministry of Health Services, has led a process to complete the **Maternity Care Enhancement Project**, resulting in a framework for a provincial plan to sustain maternity services. The resulting report, "Supporting Local Collaborative Models for Sustainable Maternity Care in BC" provides a blueprint for action and has been well received by all parties.

Construction is ongoing for the Positron Emission Tomography (PET) Centre of Excellence located at the BC Cancer Agency's Vancouver Centre. **The PET Centre of Excellence will begin clinical operations in May, 2005.** As part of the Riverview Redevelopment Project, **19 Riverview Hospital patients transferred to the Sandringham Care Centre** located in the Vancouver Island Health Authority between December 2004 and January 2005. The newly renovated, third-party operated facility in

Victoria offers geriatric specialized residential and tertiary rehabilitation beds.

The BC Provincial Renal Agency has seen continued growth in the number of peritoneal dialysis (PD) patients. Peritoneal dialysis, conducted in the patient's home, is an option within the independent dialysis program. In the past year, **the number of PD patients has increased 9 per cent** – well above the Canadian average of 5 per cent. The largest growth (17 per cent) was seen in Fraser Health.

A purchasing agreement with the Medbuy Group is achieving savings through group purchasing efforts. For example, a **multi-year contract for supplies**, equipment and related services to support home and community-based peritoneal dialysis (PD) treatments **will save more than \$2 million**.

Board Committee Reports

The Finance Committee reviewed the Provincial Health Services Authority year-to-date financial performance. As of Period 10, the Provincial Health Services Authority's financial performance is significantly better than planned, with a year-to-date surplus of \$16.5 million. The majority of the favourable variances are related to timing issues and the Provincial Health Services Authority projects to end the year with a balanced budget.

The Governance & HR Committee is developing a work plan to assist in ensuring its compliance with the Governance and Disclosure Guidelines for Governing Bodies of BC Public Sector Organizations recently released by the Board Resourcing and Development office of the provincial government.

The Quality & Access Committee reported on its plan to review pharmacies at Provincial Health Service Authority agencies, and on the recruitment of a medical geneticist who should be able to assist with reducing the waitlist for medical genetics. The Quality & Access Committee also reported on the very favourable progress of the BC Renal Agency. The growth in kidney disease has dropped from an annual rate of 12 per cent to 8-10 per cent, primarily due to earlier intervention and increasing options for independent dialysis.