

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

Summary of August 23, 2007 Board Meeting

Public Presentations and Question and Answer Period

In the spirit of its commitment to public accessibility, the board of the Provincial Health Services Authority (PHSA) provides opportunities for the public to schedule presentations and to ask questions of the board prior to the beginning of every open board meeting.

There were no public presentations or public questions at the August 23 meeting.

PHSA Presentations

Gail Malmo, program director of the Aurora Centre at BC Women's Hospital & Health Centre, presented **Improving addictions treatment by addressing tobacco: The Aurora experience.**

The Aurora Centre is BC's largest women's-only treatment facility for drug and alcohol addiction. It provides residential and day treatment services with 29 beds and space for ten people in the day treatment program. It went completely tobacco-free in May 2006.

This change puts the Aurora Centre at the leading-edge of addictions treatment. The Centre took the approach that it should be helping its clients overcome all of their addictions, including nicotine. In addition, staff at the Aurora Centre had to agree to not smoke at work.

In the first year since the policy has been in place, the Aurora Centre has seen the following outcomes:

- Number of smokers coming into the program has remained the same.
- 95 per cent of clients entering the program support the smoke free policy
- The policy has had no impact on alcohol and drug treatment goals
- Upon completion of the program, 88 per cent of clients report that they want to stay smoke-free. Completion rates for the program are down approximately 10 per cent. This mirrors the experience in other US centres and in those centres, the downward trend corrects itself over time.

Dr. Peter Kirk, Dr. Gillian Fyles, Dr. Robin Love, Ms. Ann Syme, and Mr. Doug Ennals, members of the BC Cancer Agency/International Network for Cancer Treatment and Research, presented **Palliative Collaborative Group - Engaging developing countries in the creation of a global community of practice.**

In the coming years, the burden of cancer will shift to developing countries as they eliminate other infectious diseases. Based on current statistics, 75 per cent of new cancers will be in developing countries.

Many of these countries currently experience significant barriers to palliative care, including dislocation from rural societies, political instability, poverty, limited education, unrealistic fears regarding morphine and other pain relief medications, and inadequate access to health care.

The BC Cancer Agency and INCTR are working together to advance access to palliative care and reduce pain and suffering. This multidisciplinary collaborative has been working in recent years with cancer treatment centres in developing countries to develop regional palliative care centres, deliver educational programs, create appropriate clinical guidelines and consult with local practitioners to overcome barriers to palliative care.

In the past year, the team has been involved in initiatives in Nepal (Kathmandu and Bharatpur), India (Hyderabad) and Tanzania (Dar es Salaam). They are currently exploring opportunities to collaborate with health care providers in Brazil and Nicaragua.

Board Committee Reports

The **Quality and Access Committee** reported progress on the development of a comprehensive plan to measure patient satisfaction in all agencies. This will support new standards being implemented by the Canadian Council on Health Services Accreditation.

According to a recent review by the **Governance and Human Resources Committee**, the PHSA board is in compliance with governance standards established by the Province in 2006.

The Governance and HR Committee is focusing increasingly on the Human Resources department workforce strategy and looking at metrics that will assist the organization to understand if it has a competent and engaged workforce.

The **Audit** committee reported that in July, the PHSA board approved the appointment of KPMG LLP as auditor for the 2007/08 fiscal year.

The **Finance** committee reported that PHSA has a year-to-date surplus (as of June 28, 2007) of \$8.6 million. PHSA's financial forecast is for a balanced budget by fiscal year-end. PHSA's overall budget for 2007/08 exceeds \$1.4 billion.

Adjournment

The next meeting of the board in public is scheduled for October 25, 2007 in Prince Rupert.

Annual General Meetings

Immediately following its regular meeting, the PHSA board held its annual general meeting in accordance with its bylaws. Following a report to the members, PHSA Chair Wynne Powell tabled the *Stepsforward 2007* progress report. The board passed motions to approve the PHSA audited financial statements for the fiscal year 2006/07 and to appoint KPMG LLP as Auditor for the fiscal year 2007/08. The board also passed motions to re-appoint Lynda Cranston as secretary/treasurer of the PHSA board and Denise Turner as PHSA board vice-chair.

Annual general meetings for the five branch societies of the PHSA were held immediately following the PHSA AGM. These include the BC Cancer Agency Branch, the BC Centre for Disease Control and Prevention Society Branch, the BC Mental Health Society Branch, the BC Transplant Society Branch and the Children's & Women's Health Centre of British Columbia Branch. Motions were passed approving the audited financial statements for the fiscal year 2006/07 and appointing KPMG LLP as Auditor for the fiscal year 2007/08.

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