

measuring *for* EXCELLENCE



Annual Report 2019-2020



measuring *for* EXCELLENCE

Excellence is a standard of performance in Southern Health-Santé Sud.

It is a never-ending process measured every day and everywhere,
leading us forward in our quest to attain the highest levels of
quality, competence and effectiveness.

Because Excellence matters.

It's about the future, about change, about opportunity, about results,
about seeking to become better and,
always, always about People-Centred Care.

It is an on-going story of our deep and caring commitment
to serve all those who entrust their health to us.

Measuring for Excellence is about stewardship and about being accountable with our
patients, clients and residents, our leaders, our staff, our communities, our volunteers,
our partners, our colleagues and our stakeholders.

It is our north star aligning us with our vision and mission and our values.

Together leading the way for a healthier tomorrow with

INTEGRITY | COMPASSION | EXCELLENCE | RESPECT



Together we acknowledge that Southern Health-Santé Sud is located on the original lands of Treaty 1 and Treaty 3 territory and on the homelands of the Métis Nation. We respect the treaties that were made on these territories and acknowledge the harms and mistakes of the past. We dedicate ourselves to move forward collaboratively in partnership with First Nations, Métis, and Inuit peoples in the spirit of reconciliation. We also recognize that Southern Health-Santé Sud is diverse, is comprised of multiple cultures, and is a designated bilingual region.

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This report is available in alternative format upon request.

letter of transmittal & ACCOUNTABILITY

September 30, 2020

Honourable Cameron Friesen
Minister of Health, Seniors and Active Living

Dear Minister:

On behalf of the Board of Directors of Southern Health-Santé Sud, we respectfully submit our 2019-2020 Annual Report.

The document was prepared under the Board of Directors' direction and in accordance with the Regional Health Authority Act and directions provided by the Minister of Health, Seniors and Active Living. In compliance with appropriate legislative authority and government requirements, all material, economic and fiscal implications known as of September 30, 2020 have been considered in preparing this Annual Report. The Board of Directors has approved this report.

Sincerely,



Abe G. Bergen
Board Chair



27 025
square km

207 855
residents

20%
past 10-year
growth

20
rural municipalities

8
municipalities

7
First Nation
communities

6
towns/villages

4
cities



about us

An important gateway to the province from the U.S. international border, Southern Health-Santé Sud stretches from the 49th parallel up to the Trans-Canada Highway, from the Ontario border to Winnipeg, and then follows the southwest edge of Lake Manitoba down to the Pembina escarpment in the west.

Southern Health-Santé Sud provides health care services to residents across the region, as well as others beyond the boundaries who need access to services we offer. Committed to quality care, we maintain an accredited status, upholding the standards required by Accreditation Canada.

Today, 207 855 people live here tracing their ancestries to one or more ethnic groups. Southern Health-Santé Sud is proud of its multi-cultural heritage. Indigenous presence in the region can be traced over thousands of years. Long before the first explorers came to the region, nomadic Indigenous tribes roamed the area.

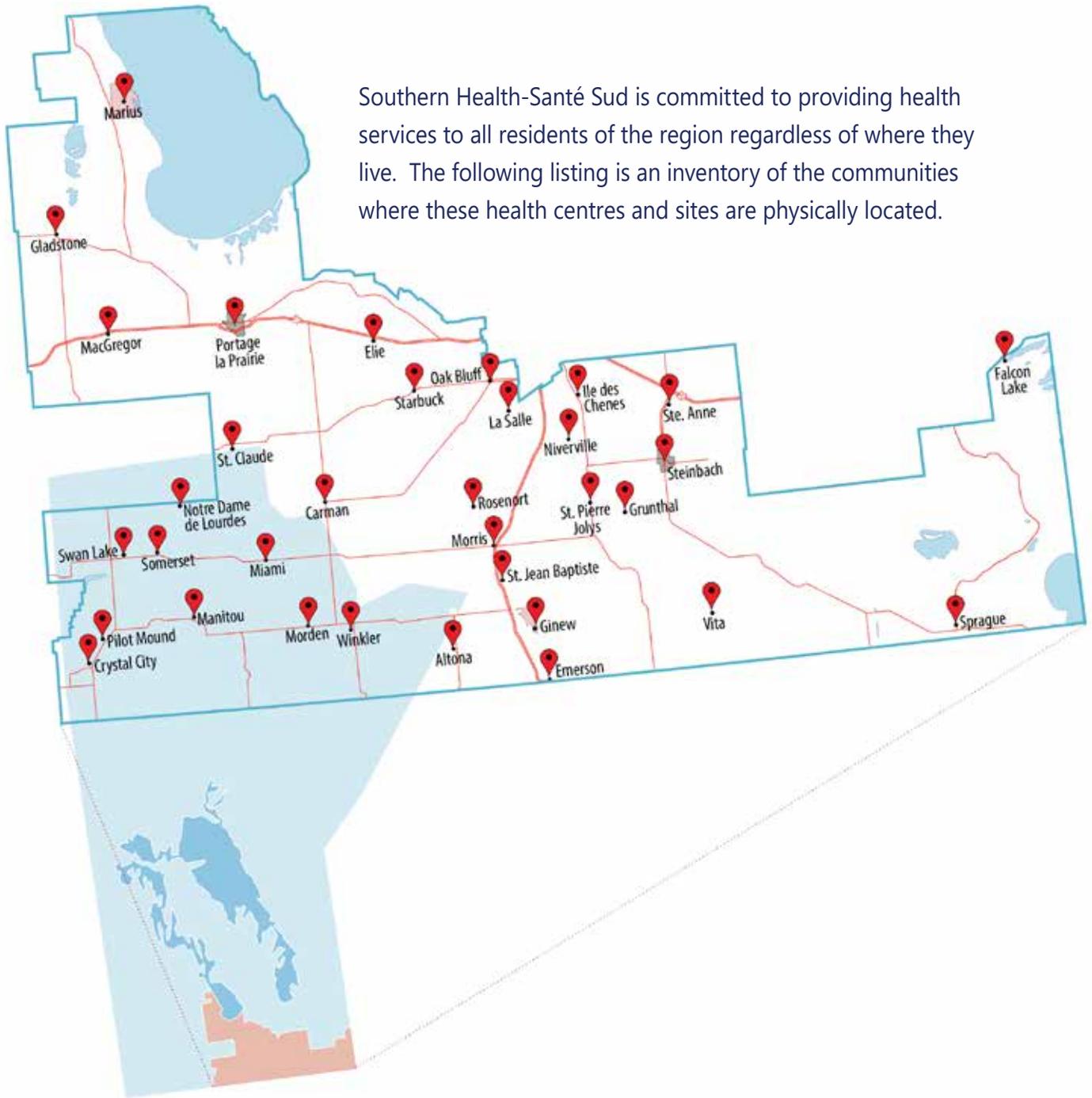
Provincially mandated as a designated bilingual regional health authority, Southern Health-Santé Sud respects the linguistic duality of Canada and undertakes to provide bilingual health care services to its francophone population.

A thriving region and the most populated of the rural health regions in Manitoba, Southern Health-Santé Sud ranks as one of the fastest-growing areas in the province. Over the past decade, it has grown by 20%, a growth rate which is the highest in the province. Two factors have played major roles in this impressive population growth: the region's above average birth rate, and a strong immigration movement from overseas and elsewhere in Canada.

There are 4 cities, 6 towns and villages, 8 municipalities, 20 rural municipalities, 1 unorganized territory, 61 Hutterite colonies, Métis and Francophone communities, a growing large Mennonite population as well as many other cultures. There are 7 First Nations communities: Long Plain First Nation, Dakota Plains Wahpeton First Nation, Swan Lake First Nation, Roseau River Anishinabe First Nation, Sandy Bay Ojibway First Nation, Dakota Tipi First Nation and Buffalo Point First Nation.

comprehensive access

Southern Health-Santé Sud is committed to providing health services to all residents of the region regardless of where they live. The following listing is an inventory of the communities where these health centres and sites are physically located.





HEALTH CENTRES

Altona | Carman | Crystal City | Emerson | Gladstone | MacGregor | Manitou | Morris
Notre-Dame-de-Lourdes | Portage la Prairie | St. Claude | St. Pierre-Jolys | Ste. Anne
Steinbach | Swan Lake | Vita | Winkler



MENTAL HEALTH

Altona | Carman | Crystal City | Gladstone | La Salle | MacGregor | Manitou | Morden | Morris
Niverville | Notre-Dame-de-Lourdes | Portage la Prairie | Sprague | St. Pierre-Jolys | Ste. Anne
Steinbach | Swan Lake | Vita | Winkler



EMERGENCY MEDICAL SERVICES SITES

Altona | Carman | Crystal City | Elie | Falcon Lake | Gladstone | Île-des-Chênes | MacGregor
Manitou | Morden | Morris | Niverville | Notre-Dame-de-Lourdes | Oak Bluff | Portage la Prairie
St. Pierre-Jolys | Ste. Anne | Steinbach | Swan Lake | Vita | Winkler



HOME CARE

Altona | Carman | Crystal City | Gladstone | MacGregor | Manitou | Morden
Niverville | Notre-Dame-de-Lourdes | Portage la Prairie | Sprague | St. Claude
St. Jean-Baptiste | St. Pierre-Jolys | Starbuck | Ste. Anne | Steinbach | Vita | Winkler



TELEHEALTH SITES

Altona | Carman | Gladstone | Notre-Dame-de-Lourdes | Portage la Prairie | Sprague | St. Claude
St. Jean-Baptiste | St. Pierre-Jolys | Ste. Anne | Steinbach | Swan Lake | Vita | Winkler



PERSONAL CARE HOMES

Altona | Carman | Emerson | Gladstone | Grunthal | MacGregor | Manitou | Morden | Morris
Niverville | Notre-Dame-de-Lourdes | Pilot Mound | Portage la Prairie | St. Claude |
St. Pierre-Jolys | Ste. Anne | Steinbach | Swan Lake | Vita | Winkler



PUBLIC HEALTH-HEALTHY LIVING

Altona | Carman | Elie | Gladstone | La Salle | MacGregor | Morris | Niverville | Pilot Mound
Portage la Prairie | Rosenort | Somerset | Sprague | St. Claude | St. Jean-Baptiste
St. Pierre-Jolys | Ste. Anne | Steinbach | Vita | Winkler



CLINICS (includes medical clinics, teen clinics, & QuickCare)

Altona | Carman | Crystal City | Elie | Emerson | Falcon Lake | Ginew | Gladstone
Île-des-Chênes | La Salle | MacGregor | Manitou | Marius | Miami | Morden | Morris | Niverville
Notre-Dame-de-Lourdes | Portage la Prairie | Somerset | St. Claude | St. Jean-Baptiste
St. Pierre-Jolys | Ste. Anne | Steinbach | Swan Lake | Vita | Winkler

message *from the* BOARD CHAIR



Abe G. Bergen
Board Chair

Excellence is not in short supply at Southern Health-Santé Sud. We see it. We feel it. We measure it in numerous ways. We are driven to seek it on a daily basis, for many good reasons...because we have a great and sacred purpose.

As we flipped the calendar page from March to April, 2019, a new fiscal year began once again in Southern Health-Santé Sud. And as we did so in the midst of broad system changes across the province, we remained steadfastly focused on our pursuit of excellence. It was 'the spring of hope', and as usual, throughout our organization the good work continued...

As it turns out, fiscal year 2019-2020 was remarkable in so many ways. Our results represent strong execution not only through a period of significant transformation but also with a new and fearsome challenge in the final days of 2019-2020 - one that goes by the name Novel Coronavirus. Spreading from China in an unprecedented fashion across the globe, the deadly virus reached Manitoba in March 2020.

They say that there are times in history when sudden events like this change everything. Things that were once thought inconceivable become reality. However, I believe there is one thing that did not and will not change in Southern Health-Santé Sud. Ours is a special place comprised of people who, in their commitment to making a difference, have a deep sense of responsibility and empathy for their community and those they serve. They excel in the many small things they do, day in and day out and when tough times arise, they shine.

We do not however forget the accomplishments of the past year because its success reminds us of what we can do despite the challenges that come our way. As Regional Health Authorities are shaped into Service Delivery Organizations, the public will continue to measure our services in much the same way as they measure other life experiences, by grading them and by examining data. At Southern Health-Santé Sud we will continue to make sure that we balance and validate the information we receive with sensitivity, compassion and a listening ear. Because when we blend the human element within our measurements, excellence is elevated.

This was evidenced in the accreditation survey this past year. Preparing for it was an intensive rigorous process with over 39 locations in our region surveyed. As anticipated, we did very well and our accreditation was reaffirmed. It is exhilarating to finally get your report card

back stamped with an excellent grade - an affirmation that the service quality we are delivering is excellent and recognized across Canada. It also acknowledges the exceptional work of staff across the region reflecting their dedication, their relentless focus on People-Centred Care and their resilience in the midst of these trying times. But excellence cannot be contained in a singular performance. Our success is a direct result of a team effort not only during accreditation but also in the cadence of daily work and now more than ever in difficult times.

As we close the book on fiscal year 2019-20, I am pleased to report that Southern Health-Santé Sud continues to perform well. A testament of our overall organizational performance, it is a positive sign as we begin a new decade with a solid foundation for future sustainability.

We were also very excited to break ground on two major construction projects that will enable more people to stay closer to home. Rest Haven, in Steinbach, and Boyne Lodge, in Carman, will be expanding to increase the number of care beds in our region by 123. Both facilities are expected to be complete by 2022. Another highlight this year has been the addition of heliports at Boundary Trails Health Centre and Hôpital Ste. Anne Hospital, enabling crews flying Shock Trauma Air Rescue Society (STARS) helicopters to land right next to the hospitals. All of these new structures will speed up transport of patients and enhance many aspects of health care delivery in our region.

The past year has blessed us with countless opportunities and accomplishments in governance and leadership. Our deliberations and decisions are anchored by a deep sense of duty and accountability toward our mission and vision. It is a responsibility that we hold in the highest regard. While the composition of our board's membership continues to

evolve, I am proud to serve alongside a fully engaged Board that has held fast to a standard of excellence with their active participation and counsel. This year, we welcomed two new members to our Board: Justin Bohemier and Adam Monteith. Cheryl McKittrick, who was a founding member of the Board of Directors since 2012, completed her last term in June 2019. As well, Elin Czeranko retired at the end of August, 2019. Their unique insights and perspectives strengthened our work, and we remain grateful for their contributions.

As a function of our stewardship role, we make it our business to focus on measuring excellence in partnership with Southern Health-Santé Sud's leadership. We are fortunate to have a group of thoughtful and hard-working professionals who bring both competence and character to their work. We offer our appreciation to Jane Curtis, CEO and her Senior Leadership Team for their valuable guidance and exemplary leadership throughout the year and especially in a time of crisis.

I have heard it said that in some very special places, excellence is something you can see and experience because it is honed to a state where it appears to happen effortlessly. This is what happens every day in Southern Health-Santé Sud.

I want to thank everyone for building a powerful response to care in our communities in good as well as in challenging times.



Abe G. Bergen

Board Chair
Southern Health-Santé Sud

board of DIRECTORS



Abe Bergen
Chair, Kleefteld



Terrie Porter
Vice Chair, Portage la Prairie



Debbi Bergner-Fortier
Letellier



Justin Bohémier
Lorette, Term started
April 1, 2019



Patricia Brennan
Oak Bluff



Ramona Coey
Lorette



Elin Czeranko
Langruth, Retired
August 31, 2019



Debbie Iverson
Carman



Dr. Desmond Leen
Niverville



Cheryl McKitrick
Crystal City, Retired
June 25, 2019



Adam Monteith
Morden, Term started
April 1, 2019



Konrad Narth
Zhoda



William Osachuk
Gardenton

governance: leading for EXCELLENCE

Appointed by the Minister of Health, Seniors and Active Living and in accordance with the Manitoba Regional Health Authorities Act, the Board of Directors is directly accountable for delivering, administering and allocating resources for health services to meet the needs of Southern Health-Santé Sud. By accepting this responsibility, Boards are accountable to the Minister such that actions and decisions must be aligned with the government's mandate and provincial plans, priorities, direction, and fiscal realities. The Board ensures that the region works closely with other service delivery organizations (SDOs) and with government to ensure that Manitobans receive timely, appropriate and seamless service to reflect the best possible integration and cooperation among service providers.

Members of the public are eligible to apply for appointment to the Board of Directors. Nomination forms and information are available at Southern Health-Santé Sud regional offices, or online at www.gov.mb.ca/health/rha/forms.html and may be submitted directly to a regional health authority office or to the Minister of Health, Seniors and Active Living.

Governance and Measurement

As part of their oversight or fiduciary role, the Board of Directors spends a considerable amount of time reviewing relevant data and key indicators which provide them with the information they need to fulfill their mandate. This data is most regularly presented in the form of dashboards with trend lines, benchmarks and action plans when required. National, provincial, regional and site-level data is provided to help provide oversight and to make key decisions for the organization.

The Board of Directors also spends considerable time evaluating its own effectiveness as individual board members, as a collective and of the Chief Executive Officer. This level of evaluation demonstrates the commitment to ongoing improvement efforts.



As part of the Accreditation Canada on-site survey that took place in May 2019, the Board of Directors also underwent a rigorous evaluation process. This third-party evaluation was to determine if the Board was compliant and meeting the standards of effective Boards. To view the final outcome of the survey, please visit the [Plans and Reports](#) section on the website. The surveyors found that 95% of the governance criteria was met.

Governance and Forward-Thinking

The Board of Directors also has a mandate to look ahead to ensure the organization is prepared for the future. A notable event from November 2019 was a full day workshop with Board members, Senior Leaders, Directors and Managers from across the organization. The workshop focused on People-Centred Care. An outcome of the workshop was the start of a people-centred care strategy unique to Southern Health-Santé Sud. The strategy will continue to be developed and implemented in the years to come. The topic of this day was chosen by the Board of Directors because there is recognition that a strategy will keep the organization focused on its key stakeholders: our patients, residents, clients and community members.

Governance Highlight from 2019/2020

The Board of Directors is committed to hearing from patients, residents, clients and community members across a spectrum of activities. This past year saw the launch of a Board Engagement Plan. Key stakeholder groups were identified in the region and Board members started attending meetings along with Senior Leaders from Southern Health-Santé Sud as guests to hear from stakeholders. When requested, Board members have shared organizational information and been able to spread data from the Community Health Assessment.



BOARD COMMITTEE MEMBERSHIP 2019-2020

Audit Committee

The Board agreed to continue meeting as 'Audit Committee of the Whole' for the two regular meetings per year: (1) to review the Scope of Audit; (2) to receive the Audited Financial Statements

Policy Review Committee

Pat Brennan (Chair), Abe Bergen, Ramona Coey, Justin Bohemier, and Bill Osachuk

Community Engagement Planning Committee

Dr. Desmond Leen (Chair), Debbie Iverson, Elin Czeranko, Cheryl McKitrick, Adam Monteith, and Terrie Porter

Regional Medical Advisory Committee (RMAC)

Debbi Bergner-Fortier and Ramona Coey

Finance Committee

Committee of the Whole

Quality & Patient Safety Committee

Committee of the Whole

Executive Committee

Committee of the Whole

message *from the* CEO & SENIOR LEADERSHIP TEAM



JANE CURTIS
Chief Executive Officer

Fiscal year 2019-2020 brought us into a new decade and with it a fierce healthcare challenge.

On March 11, 2020, the World Health Organization (WHO) declared COVID-19 a pandemic. No other recent epidemic has threatened global health on the scale that this new pathogen has.

Southern Health-Santé Sud is a healthcare organization. This is who we are. In the midst of this difficult time, our vision, our mission, our core values are unchanged. Why we do what we do is unchanged, but how we do it has changed. Stepping up and staring down this invisible threat, sometimes at great personal risk, health care workers are front and center.

And so, we begin with a message of heartfelt thanks, expressing our deepest gratitude to our healthcare team, the thousands of employees, medical staff and volunteers who have been working tirelessly and constantly

above and beyond since the start of our COVID-19 response. Your role has been vital to keeping each other safe in this time. It is said that great occasions do not make heroes; they simply unveil them to our eyes. We have seen heroes of kindness and compassion, heroes of perseverance and strength, heroes of healing and guidance, heroes of courage...

We are just so very proud.

While immersed in the fight against this pandemic, we do not forget our triumphs this past year, we do not want to overlook the accomplishments that occurred in 2019-2020 as demonstrated below...

At Southern Health-Santé Sud, you will find measures of excellence every day, everywhere and by everyone. From the ordinary to the extraordinary. From the small things and the big steps. We aim for excellence in all that we do.

In May 2019, 13 Accreditation Canada Surveyors conducted a rigorous assessment of Southern Health-Santé Sud. Using standards of excellence built upon best practices, they acknowledged the wonderful work that is being done in our region. They identified some key strengths including the pride people have in their work, their knowledge, their engagement and their determination in providing safe, client-focused care and services. Achieving our accredited status was, once again, a most gratifying outcome and a direct tribute to everyone involved. Yet, this status is not a conclusion, it is an on-going process that fosters continuous improvement in an effort to achieve excellence.

Health begins in our communities, so the Community Health Assessment (CHA) was

another important measurement tool released this year. Examining a combination of key health indicators, it provides a comprehensive overview of the health of residents in the region, and tells a compelling story. As noted further in this report on pages 28-29 and 46-49 the data indicate that our region attains overall health that is above the provincial average in many ways. However, as one of the fastest growing regions in the province, with a projected 25 percent increase in the next decade, the CHA is an indispensable tool for gaining a better understanding of our evolving population. It also provides a platform for continued conversations about health disparities and contributes to collaborative action planning around specific health challenges within our communities.

As conveyed in last year's annual report, we are in a significant moment of Health System Transformation designed to improve the quality, accessibility and sustainability of health services across the province. Although it is a multi-year process structured over three waves, considerable progress has already been achieved. We look back at 2019-2020 as the year of ground-breaking work, when legislation was introduced to enable integration across health organizations.

The first wave focused on the consolidation and realignment of responsibilities across health organizations. It is noted that the transition of thousands of staff to Shared Health is one of the largest changes to Manitoba's health system in a generation. While they continue to work very closely with overall operations in our region, the transition of Diagnostic Services, Emergency Medical Services (EMS) and Information and Communications Technology (ICT) in Southern Health-Santé Sud is now complete.

Another milestone was the release of the Provincial Clinical and Preventive Services Plan (PCPSP), a first for Manitoba. Focused on improved outcomes, responsiveness to patient needs, and cost improvement, the plan provides the framework for clinical service consolidation and consistent standards of care across the province. With transformation comes the potential for tremendous opportunity. We look forward to the roll-out of the Plan. (See side bar)

It bears repeating that Southern Health-Santé Sud staff have made a substantial and meaningful contribution to the transformation process over the past year. Excellence requires an organization to be nimble. Seconded staff have shown this by becoming actively engaged in advancing provincial projects and readily sharing their expertise. We applaud the

PROVINCIAL CLINICAL & PREVENTIVE SERVICES PLAN

The PCPSP will use resources in smarter and more modern ways, using a network of hubs that are staffed and equipped to meet the needs of Manitoba patients (see pages 20-22). This new approach will:

- Meet the needs of patients closer to home by coordinating where services are offered, including investments in improved care offered at home and in the community. This will increase access to primary care, prevention, support for chronic conditions, mental health and addictions, rehabilitation and improved home care.
- Reduce the need for patients to travel to Winnipeg for care by increasing the number of specialty services available locally, such as general surgery, intensive care and births.
- Help providers at smaller facilities care for their patients, by simplifying access to specialty consults and ensuring timely transfer or transport to other facilities when required.
- Improve information sharing, reducing the need for patients to repeat their story over and over.

innovative thinking that exists in our region and recognize that joining our partners in embracing change will only make us stronger. Not only does it ensure that the voice of our region is heard, but it provides a strong rural perspective in the discussions and planning activities.

We are proud of our continual efforts to keep stakeholders engaged as we work through transformation. Transparency is an integral part of relationship building and we make it a priority to share information with candor and respect.

Leadership development has been another important topic this year. With the help of some of our young leaders, we are at the forefront of developing a plan to enhance leadership development opportunities and ensure a meaningful approach by investing in the future leaders of this organization.

One thing remains unchanged, the depth of our commitment to people-centred care. As a health system and as caregivers, we aspire to serve all who entrust their health to us and we wish to maintain and deepen that trust. People are at the center of what we do. They are why we pursue excellence. To this end, over 100 leaders throughout the organization came together with the Board of Directors in the fall to challenge and reorient our current thinking about people-centred care. The discussion and the sharing of ideas were uplifting and productive. We will enter the new decade with a refreshing perspective focused on cultivating an enabling environment built on what we are already doing well.

It has been said about successful organizations that a convincing mark of excellence is how we manage our resources. The results in 2019-2020 re-affirm our ability to deliver a strong consistent performance even in very challenging conditions. We are delighted yet again, to have met our balanced

budget mandate, a precedence that bodes well for the future. The main driver behind this success continues to be an exemplary collaborative budgeting approach. We end one decade with a legacy of solid financial performance and begin another with a sound background in operational excellence.

Someone once said excellence is not an exception, it is a prevailing attitude. This attitude is reflected in our collective passion and drive to deliver results each and every day. It is the foundation of our organization. We can look back on 2019-2020 with satisfaction because at Southern Health-Santé Sud we do great work “together leading the way for a healthier tomorrow”.

We close our message where we started—with a sincere thank you. We have received an outpouring of community support in Southern Health-Santé Sud. Friends, family, and community members all over the region have encouraged us. Community partners, businesses, and individuals have made important contributions. We know that some decisions regarding COVID-19 have been difficult for clients, residents and families of residents in our care. We gratefully appreciate their understanding and cooperation. The wellbeing of our community is more resilient when people work together with shared purpose for a healthier tomorrow.

Even in the waning days of this fiscal year, there is no clear indication how long the pandemic will last, and what may come, however we try to embrace the future with a measure of optimism by anticipating new solutions and avenues of transformation.



Jane Curtis
Chief Executive Officer
Southern Health-Santé Sud

organizational structure



challenges & critical SUCCESS FACTORS

CRITICAL SUCCESS FACTORS

Critical success factors are often referred to as those things that **MUST** go well in order for an organization to succeed and require ongoing and strategic efforts for implementation. The region recognizes the essential nature of the following:

Patient & Public Engagement:

Partnerships at the individual, program, and organization levels are essential to the success of Southern Health-Santé Sud. Involved patients and other stakeholders result in health benefits to both individuals and communities. The organization is committed to building and maintaining these vital relationships through a continued focus on people-centred care, engagement and involvement.

Clear & Consistent Communication:

Pandemic planning and execution highlighted the importance of synthesizing information in a consistent and reliable way within the health region and between health regions. This critical success factor is strongly linked to patient safety.

Staff Engagement:

The workforce is an organizations' most valuable resource. Establishing a strong culture of communication, professional/leadership development and quality improvement is effective in recruiting and retaining staff members.

Southern Health-Santé Sud participates in ongoing risk identification, assessment, management, mitigation and monitoring work alongside all other Service Delivery Organizations in Manitoba. Program, regional and provincial-level risks are reviewed regularly with mitigation strategies and action plans rolled out as required.

At first glance, it might appear that a pandemic makes all identified risks invalid but the truth is, these risks remain the top risks to the organization and increases the potential impact exponentially.

The top 6 risks identified by Southern Health-Santé Sud in 2019/2020 are as follows:

- **Workforce Shortages:**
Aging workforce demographic, absenteeism and recruitment/retention
- **Increasing Costs:**
Rising costs of salaries, equipment, etc. paired with decreased operating revenue
- **Changes Related to Health System Transformation:**
Role and function uncertainty, managing effective change
- **Information Systems Challenges:**
Challenges related to efficiency and safety
- **Maintaining Community Relations:**
Uncertainty of health system changes on the impact to community and stakeholder partnerships
- **Increasing Wait Times:**
Challenges to health equity, consistent care, and patient flow

our strategic FRAMEWORK

OUR VISION

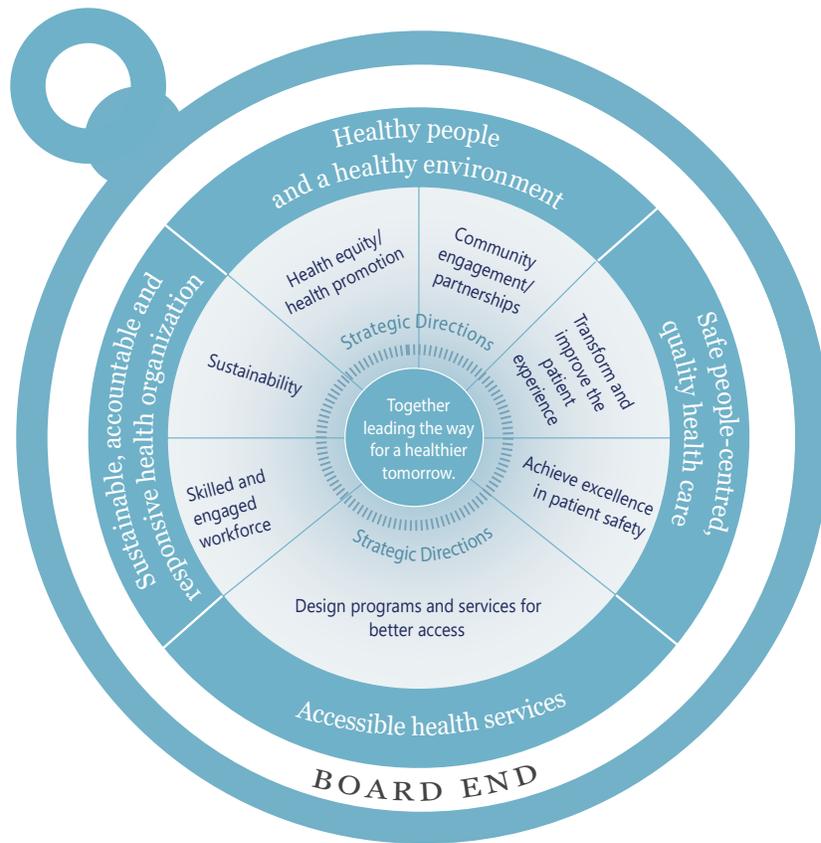
Together leading the way for a healthier tomorrow.

OUR MISSION

To support people and communities in achieving optimal health by providing innovative, sustainable and quality health services.

OUR VALUES

Integrity Compassion Excellence Respect



Four overarching Board ENDS provide a framework for elaborating Strategic Directions in the 2016-2021 Strategic Health Plan.

strategic directions

2016-2021

Optimize community engagement partnership opportunities through purposeful alignment with our vision.

Acknowledge that we all share the accountability for our own health as well as that of our community and that we can all contribute in some way to achieve better health outcomes.

Strengthen and focus our commitment on health equity and health promotion.

Embrace our community's diversity and strive to ensure health gains are shared by everyone in our region.

Design programs and services for better access and optimal service delivery.

Provide the right care at the right time in the right place by the right provider throughout the patient journey.

Transform and improve the patient experience.

Through our dedication to people-centredness and inspiration from our patients and families.

Achieve excellence in patient safety.

Focus on quality and inspiration from our patients and families.

Pursue sustainability through a diligent focus on continuous program review and evaluation.

Recognize the need for organization-wide fiscal responsibility and stewardship within the context of a rapidly expanding population and increasing demand for services.

Attract and retain a skilled and engaged workforce.

Engage with our employees, volunteers and physicians to provide for a progressive, respectful and safe work environment.

future DIRECTIONS



Southern Health-Santé Sud's key population characteristics create an opportunity for the health system to both meet evolving needs and set the standard for care. Our population is growing:

- Over the past decade, Southern Health-Santé Sud continues to have the fastest growing population in Manitoba. The population in Southern Health-Santé Sud has grown by 20% compared to 13% for Manitoba.
- Since 2012, the average annual growth rate has been 1.8%.
- Southern Health-Santé Sud's population growth is projected to reach a population of 250,000 by 2030 – an increase of 25% or 50,624 residents.

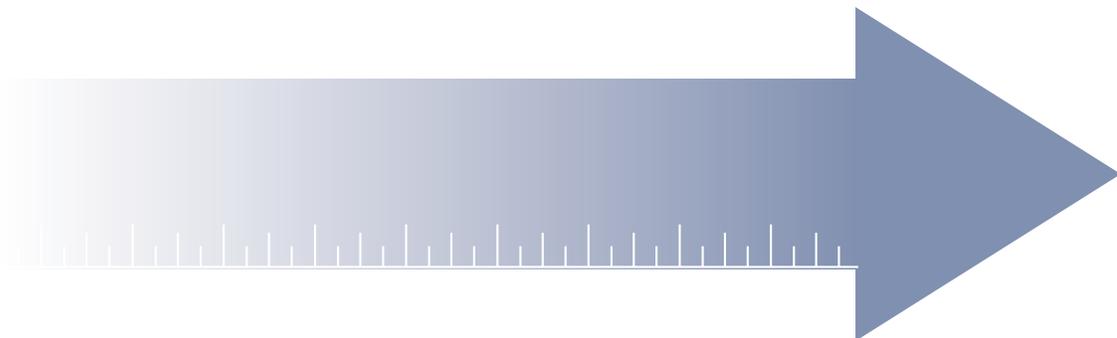
Projected to continue at a compelling rate, we will need to respond to specific health challenges that a diverse growing population requires. Most significant are volume increases already experienced in the last few years in self-and-family-managed care, cataract surgeries, hip/knee surgeries outpatient, cancer treatment, renal replacement therapies and other services.

Southern Health-Santé Sud residents want to have access to the right care, at the right time in the right place.

Along with our partners across the province, Southern Health-Santé Sud is fully immersed in Manitoba's health system transformation. As a service delivery organization (SDO) Southern Health-Santé Sud will continue to be responsible for the delivery of local health care services in a manner coordinated and consistent across other SDOs.

The Clinical and Preventive Services Plan released in 2019 is Manitoba's new approach to health care. This will require investments in health services available in local communities and changes to how and where some services are delivered. Key priorities include:

- reducing variation in clinical practice;
- building local capacity to manage chronic conditions and post-acute needs of patients, such as access to rehabilitation and remote monitoring programs; and
- focusing on preventive measures to improve health outcomes and reduce the need for acute services.



Manitoba's Clinical Preventive Services Plan Integrated Network Model

Source: [Shared Health/Soins communs](#)

The Integrated Network Model links local, district, intermediate, and provincial hubs and provides common service standards, capabilities and pathways for patients, providers and health system managers in the province.

The model will reconfigure care to improve the health and well-being of all Manitobans through provincial standards that elevate care and innovative approaches to ensure equitable care delivery. The key to success will be the development of appropriate, sustainable capacity at the local level and standardized pathways that streamline how patients and providers navigate the system. Provincial clinical governance will guide the development and monitoring of standards and pathways. By leading in connected care, Manitoba will optimize a hybrid digital and in-person care experience for everyone.

The network model is intended to facilitate the relationship between providers and the flow of patients in the province. It is not intended to create barriers or "gates" in the system, instead it will be used to create transparency and certainty of capabilities.

- 

Local Area Hub
Integrated network for prevention and screening, transitional care, community based support and rehab, and primary and community care.
- 

District Health Hub
Integrated network for low-moderate acuity, variable volume general medicine/surgery interventions/procedures, post acute treatment and emergency services.
- 

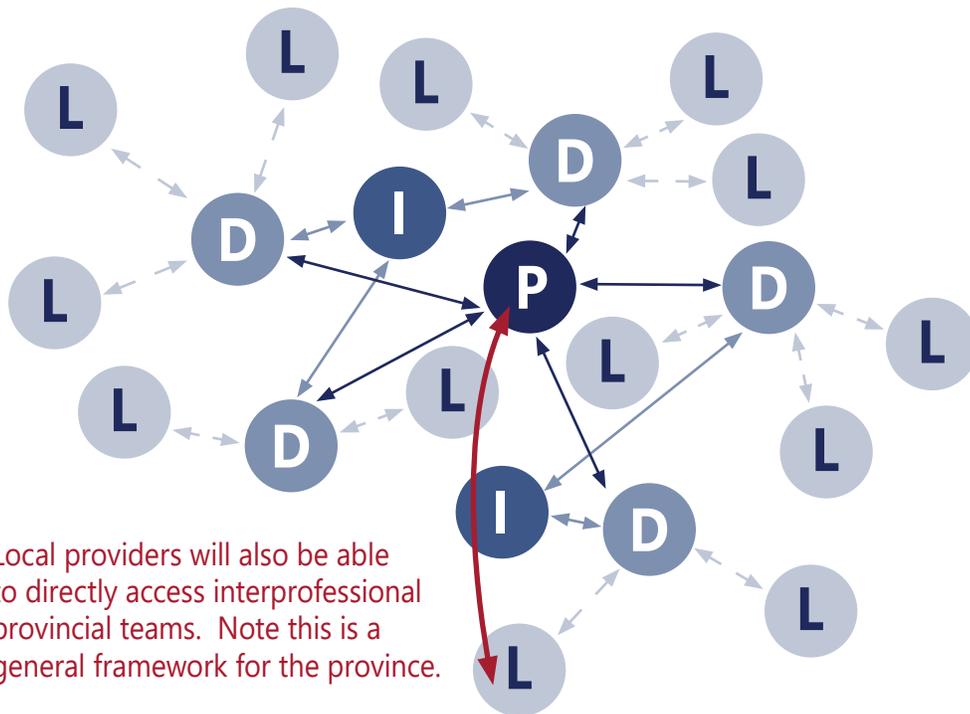
Intermediate Referral Hub
Integrated network for moderately acute/complex medicine, surgery, critical care, and emergency services.
- 

Provincial Referral Hub
Provincial integrated network for high-acuity, highly complex medicine, surgery, critical care, and emergency services.



The Integrated Network Model

Shared Health/Soins communs



annual achievements

2019-2020

Southern Health-Santé Sud's achievements in 2019-2020, as told in the following pages, are of measured excellence.



all hands on deck: COVID-19 PANDEMIC

The COVID-19 Community Testing Sites are an example of the power of teamwork. Once the concept was presented to the Southern Health-Santé Sud, it took less than five days for all three sites in Steinbach, Portage la Prairie, and Winkler to become operational as drive-through models. Walls needed to be torn down, doorways erected, hoarding put up, equipment and pathways to be installed, staff to be trained, supplies to be ordered, processes to be established and information systems to be prepared. This was no small feat. It involved staff from a multitude of departments and programs but is a real testament to the accomplishments that people can make when an “all hands on deck” is announced.



January 2020

The Southern Health-Santé Sud Board of Directors is made aware of the situation.

March 13, 2020

Incident Command Groups are established in the region to ensure a consistent approach in process. Bi-weekly meetings are launched across the organization.

January 13, 2020

The first case of COVID-19 is recorded outside of China.

February 3, 2020

Manitoba established a health system incident command structure.

March 11, 2020

World Health Organization declares a pandemic based on the alarming rates of spread and severity.

Provincial Health Leaders start putting emergency plans into action.

December 31, 2019

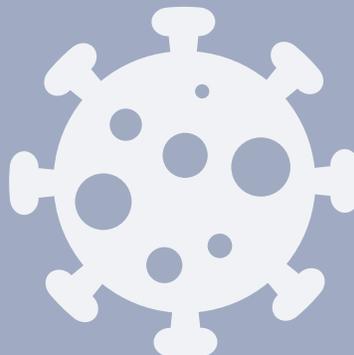
The first cluster of pneumonia was identified in China which was eventually recognized as a novel coronavirus.

January 17, 2020

Chief Provincial Public Health Officer makes novel coronavirus a reportable disease.

March 12, 2020

First case identified in Manitoba.





Setting up community testing site in Steinbach

March 20, 2020

First regional COVID-19 community testing site opens in Steinbach testing more than 50 people on its first day.

Weekly teleconferences are established with Senior Leadership and the Southern Health-Santé Sud Board of Directors to provide ongoing updates about operations.



Ready for testing.

March 18, 2020

First cases of COVID-19 discovered in Southern Health-Santé Sud region.

March 25, 2020

2nd regional community testing site opens in Winkler.

March 27, 2020

3rd regional community testing site opens in Portage la Prairie.

March 16, 2020

Limited visitor access in hospitals.

March 23, 2020

Suspended classes at Manitoba K-12 schools for three weeks.

March 27, 2020

First death in Manitoba.

March 17, 2020

Suspended visits to long-term care.

March 20, 2020

Province declares state of emergency. Public health orders issued to limit gatherings, hospitality premises, and closing gaming sites. Suspended child-care services to essential services only.

March 29, 2020

Manitoba surpasses 100 identified positive cases of COVID-19.

March 19, 2020

Suspended visits to hospitals.

March 31, 2020

Suspended classes at Manitoba K-12 schools indefinitely.



survey says... an ongoing commitment to **SAFE, QUALITY HEALTHCARE**



**ACCREDITATION
AGRÉMENT
CANADA**

May 5-10th, 2019 was a busy week in Southern Health-Santé Sud. Thirteen surveyors from across Canada came to the region and provided an independent, third-party assessment. Assessments are made using standards of excellence, which focus on providing the

highest achievable quality care for patients and their families covering a broad spectrum of health services. These standards are used across the world and help to identify what organizations are doing well and where there may be opportunities for improvement. It is an opportunity to demonstrate an organizations' ongoing commitment to safe, quality healthcare services.

While in Southern Health-Santé Sud, surveyors met with Board members, patients, community members, leadership and staff from across programs, services and departments and affiliate and community owned not-for-profit organizations in the region in 39 locations. It is important to note that the on-site survey is only one week of a 4-year cycle of continuous quality improvement.

Survey Says...

2019 Accreditation Canada survey results can be found in their entirety at www.southernhealth.ca but some of the strengths identified are:

- Direct care and service provided by staff is very client and family oriented.
- Acknowledgement of the Quality Improvement Framework and how it is incorporated in the region.
- Standardized approach to risk management across the region.
- Commitment and standardization of emergency and disaster preparedness.
- Effective system for incident reporting and review including regular reporting to the Board.
- A well-developed and supported ethics framework.
- Acknowledgement of a strong preventive maintenance program.
- National recognition of our approach and innovative practices to engage with Indigenous communities about health and access to health services.
- Progress identified in offering French language health services.
- Improvement in access to primary care and other health services, thus reducing wait times.



Southern Health-Santé Sud received valuable feedback from Accreditation Canada that is being used for quality improvement efforts across the region. The surveyor team commended the dedicated staff of the region and its affiliates who were proud of the services they provide to clients and communities. The following are just a few noteworthy quotes from the report:

“

Long-term care staff have a good culture of identifying and reporting safety incidents, along with mitigation strategies. Incidents are reviewed and actioned, and learnings shared. Incidents are also reported to the board on a quarterly basis. Disclosure is done with families and this is documented in the resident's record.

“

Southern Health-Santé Sud has a strong Infection Prevention and Control (IPAC) program that is led by a passionate, informed group of individuals who represent internal and external partners. The IPAC program has worked diligently to standardize equipment, policies, and procedures throughout the region in all facilities and departments.

“

The emergency program is part of the critical care and medicine team. The emergency teams across Southern Health-Santé Sud are engaged, caring, and patient-focused. Leadership is enthusiastic, knowledgeable, well-respected, and always looking to do better. Staff feel supported by the leaders and take great pride in providing person-centred care.

“

Patient and family engagement is formalized and coordinated through Cancer Care Manitoba (CCMB) [for cancer care services]. The acute oncology patient satisfaction survey hosted by CCMB is used to obtain input and feedback from patients and families. Eight patient/family advisors from Southern Health-Santé Sud are involved in the CCMB patient network.

community health assessment: A TRUE COLLABORATION

Coordinated provincially, members of our planning staff worked collaboratively with all other health regions and partners in a provincial process to develop the new Community Health Assessment (CHA) using a common template.

“We have worked together at a provincial level to develop a common template, definitions and a consistent way of presenting the health data,” says Janique Fortier, Decision Support Analyst who worked on the new CHA process.

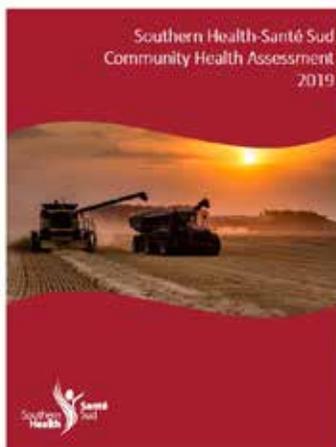


The provincial Community Health Assessment Network (CHAN)

Ales Morga, Regional Director of Planning and Evaluation says it’s making local and provincial planning more user friendly. “It is now easier for teams working on addressing population health needs to see differences and similarities between regions, to look at the findings across the province and to make better decisions.”

Covering a five-year period, the CHA is a vital document that presents an important snapshot of population health in our region. It provides a better understanding of health inequities, particularly in priority areas such as access to health care services, social and economic factors such as income levels, education and mental health, as well as the importance of engaging and working with communities to improve overall health outcomes for everyone across the region.

“This process has helped contribute to our understanding about health inequities so we can work towards removing some of the barriers that are keeping some populations healthier than others,” says Morga.



More Information

The new CHA contains more information than it has in the past, including the latest Statistics Canada 2016 census data, and results from the 2017-2018 Canadian Patient Experiences Survey-Inpatient Care, a standardized survey patients use to provide feedback about the quality of care they received during their most recent stay in a Canadian acute care hospital. The CHA also includes many more health indicators that provide information in areas like renal care and home care, for example.

Having staff actively involved in the process means they are very familiar with the information that the CHA contains and are now a valuable resource to our region and the Province. “Having somebody within the region that has developed expertise

and understanding of this information benefits the region and we can continue to help our partners, community members and staff find the information they need,” says Morga.



largest % population
growth in MB



life expectancy higher
vs. MB



highest projected increase for
renal therapies by 2030



lowest in MB for several
childhood vaccines

Key Findings

While the report contains more information than ever before, the authors summarize three key themes for our region.

First, Southern Health-Santé Sud has a diverse and growing population. Increasing by 9% in the past five years, it represents the largest percentage of growth in the province. Looking forward, the region has the largest projected growth with an anticipated increase of 25% by 2030.

Second, Southern Health-Santé Sud is one of the healthiest regions in Manitoba, despite increasing rates of some chronic diseases and Sexually Transmitted Blood Borne Infections. Life expectancy is among the highest in the province and the region is significantly better than the provincial average on many health outcomes. As the population grows and ages, more people are living with some chronic diseases. A notable finding reflects that with end-stage kidney disease, the region is projected to experience the highest increase in the province for renal therapies by 2024.

Third, even though Southern Health-Santé Sud has one of the healthiest populations in the province, disparities still exist in different geographical areas and across different population groups. Some of the factors affecting this inequity include wide income gaps across the region. Throughout the CHA report, it is clear that many indicators are strongly associated with income. The underlying causes of health inequities are largely social and economic in nature.

A More User-Friendly Approach

There have been some changes to the way in which we compile and present the CHA in our region, which is making the new CHA more tailored to the needs of different groups, programs and areas throughout the entire region.

“We have tried to make the 400-page report more meaningful and digestible for people to use in practice,” says Morga. “People can choose some of the indicators relevant to their program or community, and we can use them to produce more concise reports and infographics tailored to their specific needs.”

Measuring the health of our population forms the basis of our Strategic Health Plan to ensure excellence in the services and programs we provide and address the needs of the people in Southern Health-Santé Sud. For the full report and executive summary, visit www.southernhealth.ca.

excellence *in* PERSONAL CARE HOMES

Every two years, all licensed personal care homes (PCH) in Manitoba must undergo a review process to ensure that they meet minimum, regulatory standards. This past year, a number of our staff members were involved in the review process as part of a team that also included consultants from Manitoba Health, Seniors and Active Living.

“Our role was to provide information about our Health Region, but also to measure and assess our PCH facilities against the standards,” said Heidi Wiebe, former Regional Director of Seniors, Palliative Care and Cancer Care, who participated in the reviews. “This process ensures that residents living in our homes can be assured they have met the standards, and that there are good practices and planning in place to make sure they have a safe, comfortable and healthy environment.”



These reviews in PCHs ensure that we are providing an excellent standard of care among one of our most vulnerable populations.

Five Core Standards

In total, there are 26 standards, with five core standards for an Integrated Care Plan, the safe use of restraints, pharmacy services, building safety and security and ongoing staff development. These five core standards are always measured during the review process, with the other 21 divided into three ‘tools’ that are reviewed in rotation every two years.

There are a lot of individual measures within each standard, from things like physically testing water temperature at taps or ensuring proper protocols are followed for administering medications, to assessing dietary and laundry practices at sites. “We have seen substantial improvement in our overall measures and standards over the last six years,” said Wiebe. “So, we know that we have strong systems, practices, and documentation in place that translates to our residents in a positive way.”

Committed to Continuous Improvement

The review is part of a continual process of quality improvement, including twice yearly audits, that our staff commits to every day. “All of the client service managers at each of our PCHs in the region meet on a regular basis and we constantly review each of the standards measure by measure as a team, to assess how well are we meeting them, what do we need to do to improve, what are regional trends showing and so on,” said Wiebe. “Over the last six years, it has become part of our lived daily experience.”

weathering the storm *in* A STATE OF EMERGENCY



It's not uncommon to have snow on the Thanksgiving weekend in our province, but 2019 proved to be an extraordinary event for communities in southern Manitoba. A major snowstorm resulted in an unprecedented amount of damage to Hydro transmission lines and towers, leading to widespread

power outages. The heavy, wet snow and strong winds downed thousands of trees and made travel nearly impossible. Communication lines and water and sewer services were also negatively affected. The province declared a state of emergency in an effort to gain access to the necessary resources, supplies and materials needed to restore power.

The restriction of water and sewer usage in some communities complicated laundry, food preparation and hygiene. Road closures affected emergency, supply and courier services and many staff were unable to make it to work. Communication by landline and cell phones was difficult at some sites due to prolonged power outage that caused battery back-ups to become depleted.

As is the culture of Southern Health-Santé Sud, when difficult times arise, people come together for the care of clients, patients and residents. Many people came in on their days off to lend a helping hand, while some worked double or triple shifts when their colleagues couldn't make it in to work. There are always examples of excellence during times of crisis and this October snowstorm was no exception.

Lessons learned following this event have resulted in several changes to policy or processes. For example, facilities have reviewed their menus and are required to have a minimum of 72 hours of food and water on hand that can be easily prepared without hydro. All sites have done an inventory of their emergency kits and have identified and stocked an adequate number of flashlights. A review and simplification of emergency plans is also taking place based on lessons learned.



“huge relief” for expectant PARENTS OF TWINS



Over a decade went by without planned low-risk deliveries of twins taking place at Boundary Trails Health Centre (BTHC). Expectant parents were driving or needing to be transported several hours away to receive the care they needed in a tertiary centre. Team members at BTHC were determined to pull together to provide a needed service in a safe and caring environment by a well-trained and prepared team of health providers. Because of their efforts, the team has been recognized regionally and nationally with prestigious awards for its work in safely delivering twins.

To address the need for specialized training, the team turned to Salus Global’s moreOB program. The ‘MORE’ acronym in moreOB stands for Managing Obstetrical Risk Efficiently. This program is designed to create a culture of patient safety in obstetrical units and is centred around three pillars:

1. Interprofessional teamwork
2. Continuous Quality Improvement (CQI) framework
3. The application of validated and effective approaches (Simulation, Debriefing, etc.).

MoreOB has been implemented in Southern Health-Santé Sud since 2013 and has been instrumental in building capacity with teams through simulation and educational opportunities.

“Implementing twin deliveries is an opportunity to enhance patient-centred experiences.”

Good for Staff: Good for Families

Families are the ones benefiting most from this training and service. According to Willi Fochtberger, whose wife delivered twins by caesarean section at BTHC, the experience was “amazing. Everything went so smooth, and we were so happy.” He claims it was a huge relief to stay close to home.

Dr Ashley Dyson has led her team at Boundary Trails Health Centre, always keeping patients at the centre of their decisions. “Implementing twin deliveries is an opportunity to enhance patient-centred experiences. Keeping patients close to home and providing them with good care is important for the accessibility of safe, high quality care in the community,” said Dyson.

What’s Next?

All other Southern Health-Santé Sud obstetrical sites are working hard to implement triage on their wards for a more consistent approach for expectant families across the region. MoreOB simulations continue to be part of standard training processes for all sites.

“We are very proud of the work being done at Southern Health-Santé Sud,” said Catherine Gaulton, CEO of Healthcare Insurance Reciprocal of Canada. “It’s amazing to see safer care settings through the moreOB program.”



Doctor Ashley Dyson and Doctor Sahar Alhayjaa with a number of families that were able to deliver their twins at BTHC.

reducing wait times ADDITIONAL JOINT SURGERIES

Over time, we are seeing an increased and sustained demand for hip and knee surgeries as our population grows and ages in Manitoba. Reducing wait times for these procedures has become an ever-increasing priority. In Southern Health-Santé Sud, these specialized orthopedic surgeries occur in Boundary Trails Health Centre.

After much planning and outstanding work of our dedicated teams, the region successfully completed an additional 68 joint surgeries in 2019-20. This increase was a realignment of our resources which created several new permanent positions to support the additional surgeries, ultimately reducing the amount of time patients currently wait. As well, a new process has been trialed to identify hip arthroplasty patients that are medically appropriate for same day surgery or one-night admission, which would greatly reduce the length of post-operative stay for patients. With new advances in surgical practices, this not only improves patient care but offers opportunities to building a sustainable health system.

2018-2019

424 surgeries



2019-2020

492 surgeries

a team approach *to* PALLIATIVE CARE

What started as a project offered in one facility has become a permanent program that is now being rolled out in other parts of the region.

“CPCP is a weekly interprofessional forum with the goal of supporting individuals and caregivers dealing with difficult physical, psychosocial or spiritual symptoms,” says Cailin Gagnon, Services to Seniors program Specialist and CPCP program lead.

Any professional service provider in acute, long term or community care may request a consultation on behalf of a patient with the CPCP. Consultations are held via teleconference and bring together a regular team that includes physicians, nurses, social workers and others working in palliative care, homecare, rehabilitation and mental health services.

The inspiration for CPCP came from a similar program in British Columbia and is supported by the Canadian Home Care Association, which brought together 11 teams across Canada, providing them with tools, training and coaching to adapt the program to fit the needs of their own health regions.

“The ability to bring everyone together to talk about the case, have the same discussion and hear the same recommendation brings the team together, which ultimately supports better care for the patient and their family”

Connecting and Collaborating

Our region’s palliative care team already does a great job, but there are always situations that can benefit from an interprofessional approach.

“This program does a fabulous job of supporting individuals when there are concerns with things like mental health, occupational therapy, homecare or anything related to their care,” says Gagnon. “The ability to bring everyone together to talk about the case, have the same discussion and hear the same recommendation brings the team together, which ultimately supports better care for the patient and their family.”

“CPCP engages all the care partners, and it’s evolving to meet the health needs of our diverse populations to a collaborative design,” says palliative care nurse, Karen Schaak, part of the CPCP team. “It’s a great tool leading equitable care to urban, rural and remote communities throughout connected care. It’s also a great way to communicate with each other and collaborate together so that we can ultimately make the best care plan and share that responsibility.”

Not all referrals for CPCP have to be registered in palliative care, says Brigitte Remillard, Palliative Care Coordinator and facilitator for CPCP.

“It’s for anybody who could benefit from a review if they’ve got challenges,” she says. “It’s comfort-focused, so it’s also for people who are struggling earlier on in their disease, but perhaps not receiving active treatment, who can benefit from an interdisciplinary consultation.”

mental health services: THE POWER OF PARTNERSHIPS



Collaboration and partnerships are fundamental elements in providing excellence in the delivery of health services in Southern Health-Santé Sud. A great example is our relationship with Eden Mental Health Centre (Eden, pictured above): the only acute psychiatric hospital in our region.

When a 2018 provincial report into improving access and coordination of mental health and addictions services across Manitoba highlighted the need for security services at Eden, it was acknowledged that thoughtful consideration needed to be given to a collaborative approach in enhancing security. Until recently, Eden could not always admit all level of patients it is qualified to treat due to a lack of around-the-clock security presence at the facility.

There are times when staff had relied on local police for support or patients would have to go to another facility outside of the region if officers were unavailable. Eden also did not have the capacity or ability to accommodate all of the community's needs.

An agreement was designed between Eden, Southern Health-Santé Sud and the provincial government to share the cost of hiring two security officers, who now provide 24-hour security services at Eden, seven days a week, which has allowed Eden to provide expanded acute mental health care services, closer to home.

"It's been very beneficial in terms of expanding what we can deliver to the residents of our region. Families and friends can visit, offer support, and be a part of the treatment plan," says Dana Human, Eden Mental Health Centre Program Director. "It helps for a better flow for the individual to be in an acute in-patient mental health facility and to return successfully to the community where they reside."

Creating More Opportunities

The successful collaboration between our region and Eden has created other partnership opportunities. As an example, Human assumed a dual role as Southern Health-Santé Sud's Regional Director of Mental Health and Spiritual Care and Eden Mental Health Centre Program Director.

"Our two organisations were working so well together, and we share psychiatric services within our psychiatry team, so we thought if we continue that collaboration, we can improve client flow," says Human, who has previously worked in both organisations.

"It's created open communication with our community mental health workers and with Eden medical staff and other partners," says Human. "It's become one program and it's instrumental in improving access and patient care, and creating awareness of some of the other services that Eden provides like a public pharmacy and employment service. We've opened up those doors."

The eventual goal is to have a system where people are not showing up at the wrong door for the mental health services they need. "We have a 'no wrong door' vision and are working to make sure all the connections between different services and facilities are in sync," says Human.

life-saving dialysis treatment care EXPANDS SERVICES

The expansion of dialysis treatment services in Boundary Trails Health Centre (7 stations) and Portage District General Hospital (9 stations) was good news for dialysis patients in Southern Health-Santé Sud. This past March, in conjunction with the Manitoba Renal Program, the region extended hours at both sites into the evening three times per week, enabling care for an additional 12 clients as compared to the previous year. In total, there are 76 clients who receive dialysis within the region. The two units deliver on average a total of 912 treatments per month.



With the highest rate of end stage kidney disease in the country, Manitoba has a growing need for dialysis treatment across the province. About 14 per cent of Manitobans live with kidney disease and about one-third of them may develop kidney failure in their lifetime.

Dialysis is a medical treatment that involves “cleaning the blood” by slowly withdrawing it from the body, and passing it through an artificial kidney machine to remove fluids.

When loss of kidney function is permanent, a client must receive dialysis several times a week, or until kidney transplant occurs.

Each dialysis treatment can take several hours at a time and may be required several times a week.

In Southern Health-Santé Sud, almost 2,000 adults have a diagnosis of chronic kidney disease and, of those, 180 have end stage kidney disease. By 2024, the region is projected to have one of the biggest increases in the province in people living with end stage kidney disease who would need renal replacement therapy such as hemodialysis, kidney transplants, or home-based dialysis. An aging population, plus a growing population, and an increase in diabetes are a few of the key factors that may explain the projected increase. While we are preparing to treat more patients, it’s also important to prevent the disease. This requires more than the health care system alone.

Access to dialysis services closer to home with expanded hours will make a big difference in the lives of people who need these life-sustaining services.

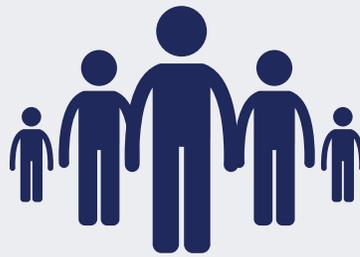
For more information about kidney health and the Manitoba Renal Program, please visit www.kidneyhealth.ca.

health care excellence EVERY DAY



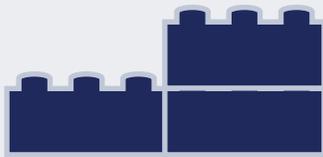
People-centred Care

In November, over 100 leaders, including Board members, Senior Leaders, Directors, and Managers, came together for a full day regional workshop on people-centred care (PCC). This marks a first step in developing a PCC strategy.



Expanded Community Mental Health

Community mental health expanded in our region with additional funded spaces for the online Strongest Families Institute and funding for the Enhanced School-based Mental Health in Portage and Steinbach.

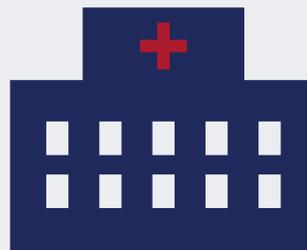


Building Blocks of Integrated Services

Buffalo Point First Nation and Southern Health-Santé Sud (SH-SS) collaborated on a Health Services Integration Fund Proposal which was approved by Health Canada. Work is underway to improve relationships and collaborate on service integration and enhancements for the community.

Leadership in Provincial Transformation

Over 50 SH-SS staff continue to support provincial work on the health system transformation.



Emergency Services 24/7 in Ste. Anne

After a year of reduced emergency services at Hôpital Ste. Anne Hospital, due to physician shortages, the ER resumed 24-hour services in January. The team in Ste. Anne now includes 7 physicians.



Helping to Improve Health Equity

Approximately 30 SH-SS staff participated in an Indigenous Identification Fair hosted by the Portage la Prairie Community Revitalization Committee in December and sponsored by Indigenous Services Canada. It is the first time a single event in Manitoba has offered such an array of government identification services in a single one-stop shop. SH-SS staff assisted people with Manitoba Health card applications: making a big difference in individuals' ability to access health care and when applying for other forms of identification.

Health Care Attendant Annual Education

26 education days were held with a total of 281 health care attendants participating. Sessions included a palliative care component.

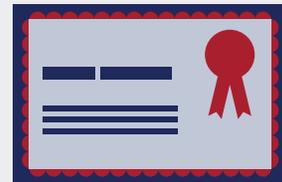


Culturally Safe Care

SH-SS has sponsored 98 staff members to take the online Manitoba Indigenous Cultural Safety Training. The program is designed to improve service providers' ability to develop and deliver culturally safe care.

Committed to Improvement

In January 2020, Lions Prairie Manor successfully met all the conditions required to obtain a full personal care home operating license. The Lions Prairie Manor Family Advisory Working Group, established in 2018, was recognized at the 2019 Annual Meeting for their leadership and commitment to improving patient centred care.



excellence in action: STAFF AWARDS

2019 Quality Service Awards

Quality Service Awards recipients are nominated by their peers for staff who embody Southern Health-Santé Sud core values of integrity, compassion, excellence and respect. They included three individual awards, a Service Excellence Team award, and the Chief Executive Officer Career Achievement Award.



Quality Service Award recipient Liliane Kolly



Quality Service Award recipient Maureen Owens



Quality Service Award recipient Debra McKay



CEO Career Achievement Award recipient Kim Dyck



The Respite Service & Care Team: recipient of the Service Excellence Team Award. Including staff from Envision, Bethesda Place, Home Care, and Bethesda Regional Health Centre.

Health Innovation for Patient-centred Care

The Health Innovation for Patient-centred Care award celebrates initiatives that have directly resulted in positive impacts to services at the point of care which are seen and felt by patients and the public. It recognizes innovative initiatives that result in improvements to processes, clinical approaches and advancing the culture of patient-centred care.



The Lions Prairie Manor Family Advisory Working Group: a team of family members and leadership who work collaboratively to improve the quality of life and care of the residents at the personal care home.



The Portage/Gladstone MyHealth Team for the Cardiac Rehabilitation Initiative, which is the first rural Cardiovascular Rehabilitation initiative of its kind within the province of Manitoba.



The Boundary Trails Health Centre (BTHC) MoreOB Team for facilitating uncomplicated, low risk twin deliveries.

Physician Emeritus

Physician Emeritus is a new annual honorary designation conferred upon retirees or semi-retirees in recognition of their contributions and accomplishments as physicians or surgeons within the region. The Regional Medical Advisory Council chooses a deserving recipient upon recommendation or nomination of a colleague or committee within the region.



Dr. V. Chandy Jacob recipient in recognition for his dedicated service as a physician and surgeon for over 50 years.

capital projects

Two Heliports Unveiled in Southern Health-Santé Sud

In the event of an emergency, excellent care must be timely. “When people’s lives are at stake every second counts,” says Jane Curtis, Southern Health-Santé Sud’s CEO. In 2019, the completion of two heliports in the region enhanced timely access to emergency care. The heliport at Hôpital Ste. Anne Hospital was unveiled in June and the E. & I. Krahn Heliport was unveiled at the Boundary Trails Health Centre between Morden and Winkler in December. The heliports, generously funded by community donations, provide air ambulance medical teams with a permanent place for helicopters to safely land when transferring critically ill or injured patients.



Construction and unveiling of the heliport at Hôpital Ste. Anne Hospital.



Unveiling of the E. & I. Krahn Heliport at the Boundary Trails Health Centre between Morden and Winkler.

Personal Care Home Construction in Carman and Steinbach

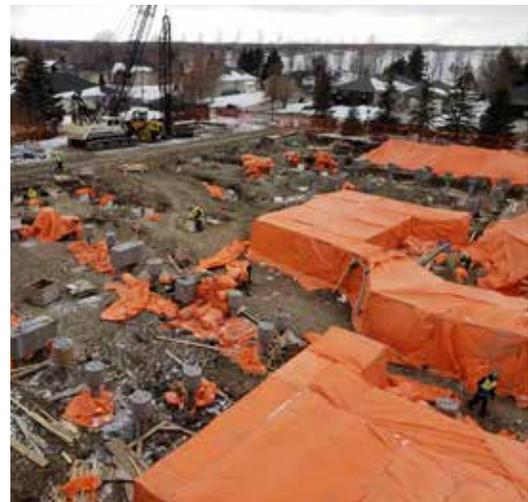
Construction on the new Boyne Lodge personal care home continued in 2019-2020, in partnership with Boyne Care Holdings. Phase 1 of the project is the construction of 79 new personal care home beds, which will replace the existing 70 bed Boyne Lodge. Construction is expected to wrap by February 2021, at which time phase 2 renovations of the existing Boyne Lodge will commence to provide approximately 30 more personal care home beds to make for a total of 110 beds in the facility.



Construction on the Rest Haven personal care home expansion in Steinbach officially began in October 2019. "People in Steinbach and its surrounding communities were eager to break ground on this much anticipated project at Rest Haven. This new space will allow more people to stay closer to home for long-term personal care," said Jane Curtis, Southern Health-Santé Sud CEO. Southern Health-Santé Sud and HavenGroup in partnership with the Bethesda Foundation developed the project proposal, which was approved and announced by the Minister of Health, Seniors and Active Living in the fall of 2017. The expansion will see the facility grow from 60 to 143 beds and is expected to be completed by late fall 2021.



Construction at Boyne Lodge personal care home in Carman.



Sod turning ceremony and construction for the Rest Haven personal care home in Steinbach.

by the numbers STATS AT A GLANCE

"Accurate information comes from quality data - Information becomes intelligence which in time turns into wisdom, if used in the right way." - Anonymous



measuring for excellence...

PERFORMANCE DRIVEN

Most of us share a strong collective interest in making sure our healthcare system works. Having a clear sense of where we are, where we need to go and how well we are doing in getting there is important. Basically, we want up-to-date information about key indicators on how the health system is performing.

Southern Health-Santé Sud understands that the collection and presenting of information on performance plays an important role in steering the health system towards better outcomes. A greater discernment of health needs lays the foundation for evidence-informed strategies in addressing those needs. Because healthcare is so complex however, the underlying challenge is to provide clear-cut data that is relevant, statistically sound and easy to interpret. Over the past decade, performance measurement and reporting have grown substantially and the focus is now on how best to summarize and present an extensive amount of data.

“Like other service delivery organizations (SDOs), Southern Health-Santé Sud inputs data into a provincially standardized monthly dashboard to monitor and measure key indicators,” says Ales Morga, who is the lead dashboard analyst for the region. “Reviewed on a monthly basis by the Board of Directors it is essentially a continuous process of checking actual performance against standards as well as detecting trends. It not only tracks issues about the health of our population but also monitors patient experience and safety, ensures management controls and financial sustainability, promotes accountability and guides decision-making. Additionally, system performance instruments such as the dashboard can help uncover potential or latent problems allowing the organization to amend processes in real-time if appropriate. It becomes a learning tool.”

Metrics also tell a story expressing complex ideas quickly. We dare say that numbers “are worth a thousand words”. And so, learn more about our performance by the numbers on the following pages.

fastest growing population in Manitoba



	# residents	% growth
2009	173 420	19.9%
2019	207 855	
2030	256 734	24.6%

a diverse population

13%
identify as Indigenous

11%
speak French well
enough to conduct a
conversation

living longer than the Manitoba average

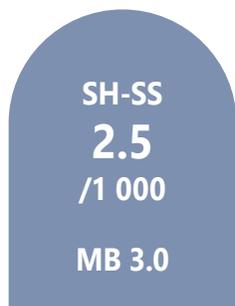


Life Expectancy higher vs. MB
2012-2016

SH-SS		MB
79.4 years	♂ (M)	78.5 years
83.9 years	♀ (F)	82.8 years

4%
identify as
visible minority

14%
have immigrant
status



Premature Deaths lower vs. MB
*Deaths before age 75 per 1 000 residents
in 2012-2016*

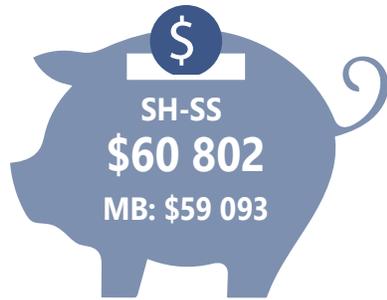
Most common causes for SH-SS:

1. cancer
2. circulatory diseases
3. injury and poisoning
4. respiratory diseases
5. digestive diseases

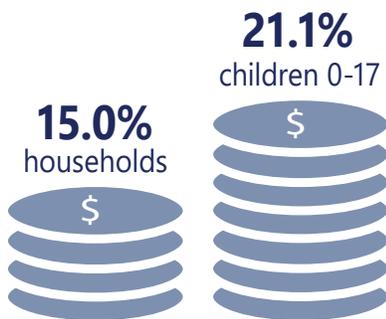
9%
speak German most
often at home

social determinants of health and equity gaps

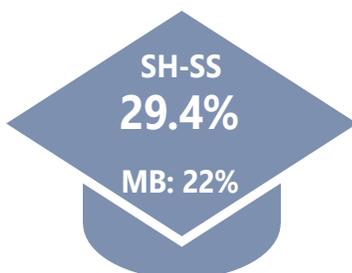
Even though Southern Health-Santé Sud has one of the healthiest populations in the province, disparities still exist in different geographical areas and across different population groups. Some of the factors affecting this inequity include wide income gaps across the region.



Median Household Income After Tax in 2015



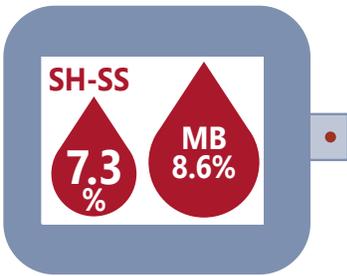
Live in Low Income in SH-SS in 2015



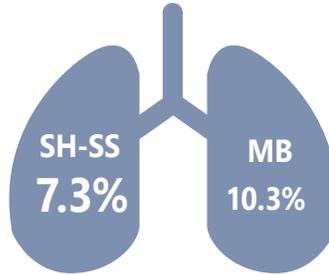
Education

% ages 15+ years with no high school diploma in 2016

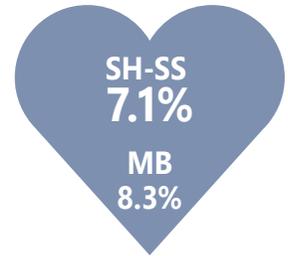
one of the healthiest regions in Manitoba



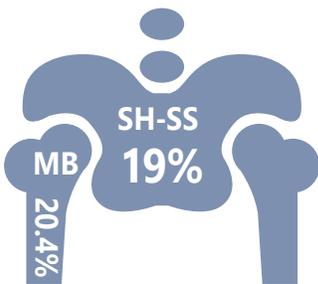
Diabetes Prevalence
lower vs. MB in 2014/15-2016/17
(diabetes incidence also lower)



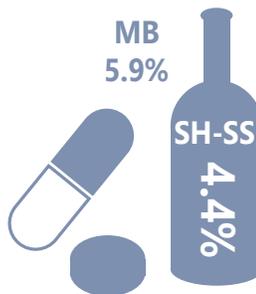
Total Respiratory Morbidity
lower vs. MB in 2016-2017



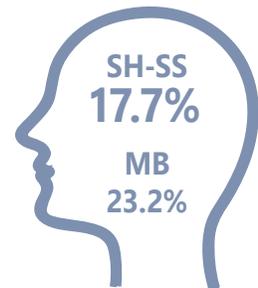
Ischemic Heart Disease
lower vs. MB
in 2012/13-2016/17



Arthritis lower vs. MB
in 2015/16-2016/17



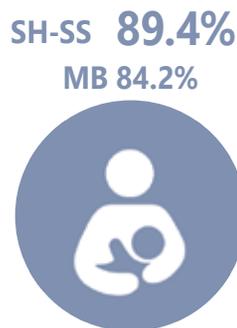
Substance Use Disorders
lower vs. MB in 2010/11-2014/15



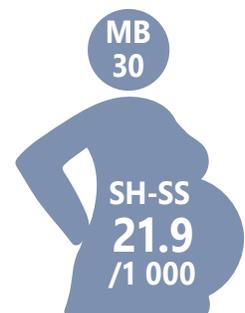
Mood & Anxiety Disorders
lower vs. MB in 2010/11-2014/15



Preterm Births lower vs. MB
in 2012/13-2016/17



Breastfeeding Initiation
higher vs. MB in 2016-2017

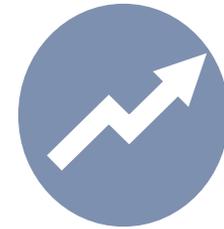
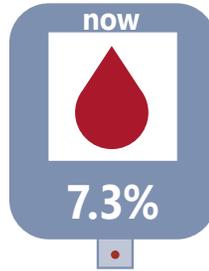


Teen Pregnancies lower vs. MB
in 2012/13-2016/17

increasing rates of diseases



then
6.3%



End Stage Kidney Disease
highest projected increase by 2024
ranging from 74-82%

Diabetes Prevalence
increasing over time
from 2009/10-2011/12
to 2014/15-2016/17

Sexually Transmitted Infections
Gonorrhea increased 4-fold
Syphilis increased 6-fold
from 2014/2018

lower use of preventative services compared to Manitoba



Cancer Screening
lower vs. MB

	SH-SS	MB
Colorectal (ages 50-74)	33.5%	35.3%
Breast - Women (ages 50-74)	52.0%	55.8%
Cervical - Women (ages 21-69)	63.4%	64.8%



Lowest in MB for several **Childhood Vaccines**
among youth aged 17 years who received the recommended doses

Diphtheria	Tetanus	Pertussis	Human papilloma virus
66.8%	66.8%	64.5%	51.2%



Influenza Vaccine
ages 65+ years

47.5%
National target: 80%

Pneumococcal Vaccine
ages 65+ years

55.3%
Lowest in the province

workforce demographics

4 461

Employees of Southern Health-Santé Sud
Includes full-time, part-time & casual positions

1 249

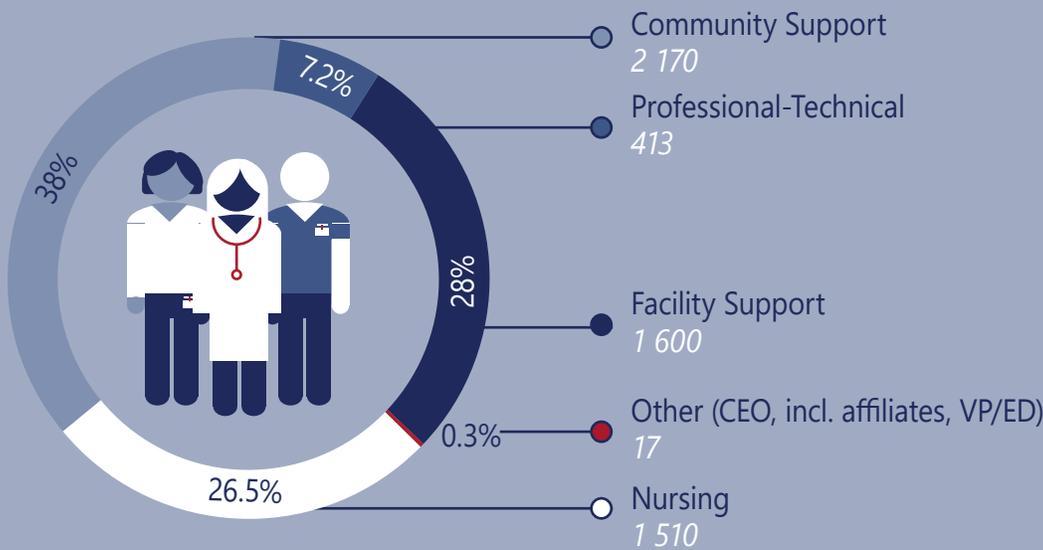
Employees of Affiliate Health Corporations &
Community-Owned Not for Profit

Affiliate Health Corporations

- Eden Mental Health Centre
- Menno Home for the Aged
- Prairie View Lodge
- Rest Haven Nursing Home
- Rock Lake Health District Hospital
- Rock Lake Health District Personal Care Home
- Salem Home Inc.
- Tabor Home Inc.
- Villa Youville Inc.

Community-owned not for profit:

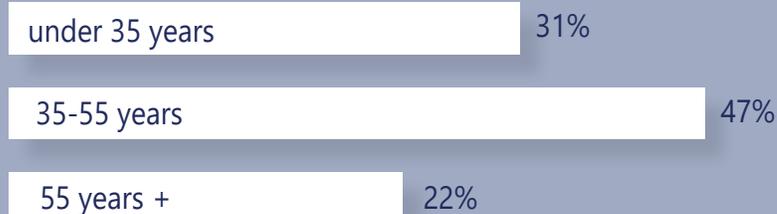
- Heritage Life Personal Care Home



Changes in 2019-2020
Emergency Medical Services and Information and Communication Technology services transitioned to Shared Health April 1, 2019

Provincial bargaining unit restructuring resulted in reclassifications between sectors. The largest was for health care aides which realigned from facility support to community support.

Age



wait times *in* SOUTHERN HEALTH-SANTÉ SUD

Cataract Surgery
Median wait times
Portage District General Hospital

2019-Oct **23 weeks**
2018-Oct **22 weeks**

Total Hip Replacement
Median wait times
Boundary Trails Health Centre

2019-Oct **33 weeks**
2018-Oct **42 weeks**

Knee Replacement
Median wait times
Boundary Trails Health Centre

2019-Oct **54 weeks**
2018-Oct **61 weeks**

MRI Scan
Median wait times
Boundary Trails Health Centre

2019-Oct **13 weeks**
2018-Oct **13 weeks**

Ultrasound Exam
Wait times
3 Regional Health Centres

2019-Oct **6 weeks**
2018-Oct **4.7 weeks**

CT/CAT Scan
Wait times
3 Regional Health Centres

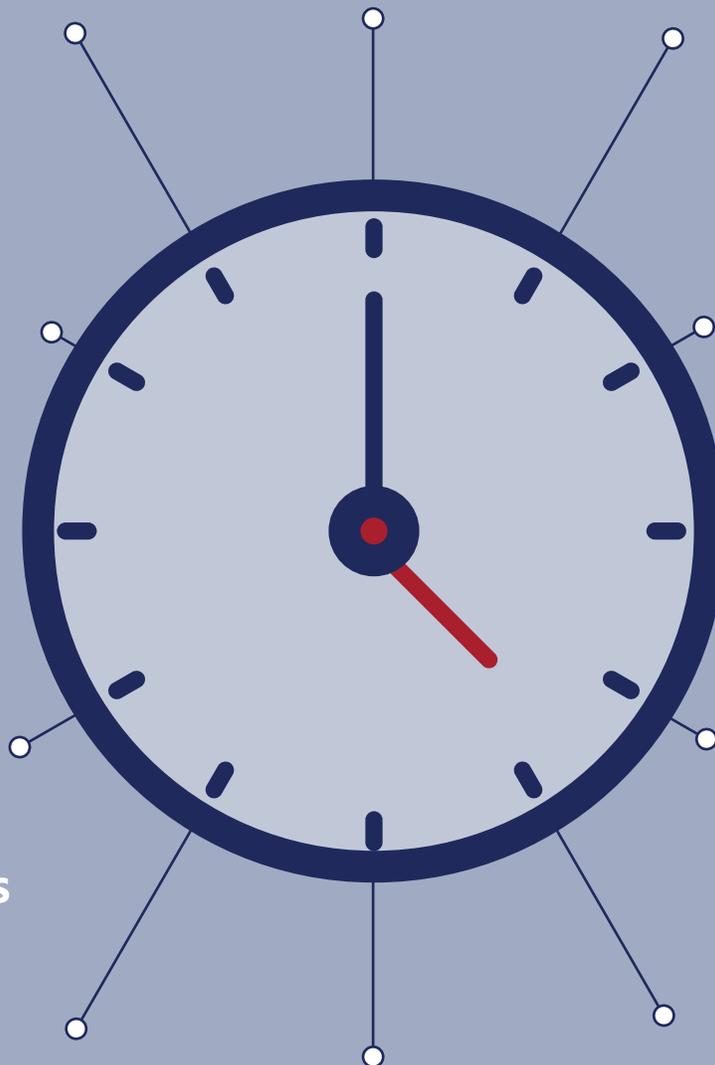
2019-Oct **2.3 weeks**
2018-Oct **2 weeks**

Personal Care Home
Wait times
1 229 PCH beds
2018/19 **26.1 weeks**
2017/18 **26.7 weeks**

Mental Health
Referral to assessment
Target is 8 weeks

2019-Oct **12.1 weeks**
2018-Oct **7.1 weeks**

**Language Access
Interpreter Services**
Number of requests
Coordinated for 8 languages
2019-20 **15**
2018-19 **20**



Mental Health
Assessment to treatment
Target is 8 weeks

2019-Oct **3.7 weeks**
2018-Oct **2.8 weeks**

Physiotherapy - Outpatient
Wait times
Priority 1

2019-Oct **15.6 weeks**
2018-Oct **18 weeks**

Audiology - Outpatient
Wait times
Priority 1 school-age

2019-Oct **12.3 weeks**
2018-Oct **21.3 weeks**

acute care stats

		Southern Health- Santé Sud	3 Regional Centres (Bethesda, Boundary & Portage)	All other Acute/ Transitional
Acute Care Beds (Total #)				
Average Occupancy	2019-2020	79.74%	83.45%	75.51%
	2018-2019	80.61%	83.71%	77.07%
Overnight Hospital Stay	2019-2020	9 346	7 628	1 718
	2018-2019	9 106	7 178	1 928
Average Length of Stay	2019-2020	14.0 days	9.5 days	32.8 days
	2018-2019	12.9 days	9.7 days	23.8 days
7-day Hospital Readmission Cases	2019-2020	227	184	43
	2018-2019	213	164	49
Day Surgery Cases	2019-2020	8 321	5 508	2 813
	2018-2019	8 227	5 512	2 715
Births in Facility	2019-2020	1 844	1 716	128
	2018-2019	1 811	1 654	157
Emergency Department Visits	2019-2020	100 791	66 276	34 515
	2018-2019	102 168	65 006	37 162
Alternate Levels of Care	2019-2020	56 851 days	14 934 days	41 917 days
	2018-2019	50 670 days	19 023 days	31 647 days



	2019-2020	2018-2019
Southern Health-Santé Sud	2 591 846	2 429 289
3 Regional Centres (Bethesda, Boundary & Portage)	801 966	795 039
All other Acute/Transitional	824 078	758 190
Personal Care Homes	965 802	876 060



Meals Prepared

	2019-2020	2018-2019
Southern Health-Santé Sud	1 827 096	1 841 310
3 Regional Centres (Bethesda, Boundary & Portage)	326 796	332 877
All other Acute/Transitional	358 728	360 141
Personal Care Homes	1 141 572	1 148 292

french language services

Building on progress made and best practices, the 2017-2021 French Language Services Strategic Plan of Southern Health-Santé Sud brings together closely related and interdependent strategic initiatives that align well with the Board of Directors' four main goals and the province's French language health and services objectives and goals. This integrated framework laid the foundation for progress on a number of initiatives, as well as several achievements, in 2019-2020.

Engaged Communities and Partners

Southern Health-Santé Sud works closely with entities officially mandated to represent the region's Francophone communities. This includes local stakeholder groups, the Table de concertation rurale du Sud ("Table") and the Local Health Involvement Group. Southern Health-Santé Sud participated in all Table meetings in 2019-2020.

With the approach having been approved by the provincial working committee tasked with preparing the Southern Health-Santé Sud Community Health Assessment (CHA), content on the region's Francophone community was developed and incorporated into the document and then validated by the community through the Table. The sampling was also shared and adapted by the other designated regional health authorities.

Mon équipe santé is a primary care network that puts the individual at the centre of an integrated community of health service providers, with an emphasis on the Francophone and bilingual population. Significant progress was made in 2019-2020, particularly with respect to the following:

- Recruitment of a fitness consultant for the local Mountain-region health team.
- Networking with other Francophone and bilingual communities and programs within Southern Health-Santé Sud to promote the expansion of services:
 - The Mountain team's social worker now offers services in Swan Lake.
 - The community health nurse on the Seine team completed training in wound care and now provides this type of care at the Ste. Anne Hospital.

40

employees took French-language training

115

translation requests
65 092 words or 368 pages

578

new employees introduced to active offer in general orientation

40

Université de Saint-Boniface (USB) nursing students participated in SH-SS bus recruitment tour

12

nursing internships as a result of the SH-SS USB bus recruitment tour

4

nursing hires as a result of the SH-SS USB bus recruitment tour

350

designated bilingual positions in SH-SS (of 602 total) held by bilingual employees

We continually strive to cultivate good relationships with other organizations working as partners and/or offering services in French in the health field in order to facilitate the sharing of expertise and resources. In this regard, Southern Health-Santé Sud collaborated with partners such as:

- Consortium national de formation en santé (CNFS): the CNFS was looking to better understand our region's needs and how their organization could better serve us within the purview of their mandate.
- Winnipeg Regional Health Authority (WRHA): at its first annual French language services forum, where we received a presentation on the Clinical and Preventative Services Plan (in the context of health system transformation) including an overview of the integrated component on French language services.
- Société de la francophonie manitobaine (SFM) – annual meeting: In his general report to the community, the SFM's Executive Director mentioned health system transformation, highlighting the contributions made by Southern Health-Santé Sud.
- Villa Youville: Meeting to discuss various Santé en français supports available to them, including translation, assessment and training, and sharing of the region's tools in relation to designated bilingual positions – a standardized, integrated and collaborative approach.
- St. Amant Centre: meeting to share the region's best practice in recruiting designated bilingual positions – a standardized, integrated and collaborative approach.

Southern Health-Santé Sud also participated in provincial initiatives under the leadership of Santé en français (Manitoba):

- FAFM (Fédération des aînés francos-manitobains inc.) project: participation in the planning of an initiative to support people with dementia.
- Health in early childhood: participation in a workshop aimed at devising a strategy to create early childhood development tools in French.



Active Offer in Action

Client/patient/resident experience: We continually strive to standardize our survey questions to better understand the French-language experience at our sites and in our programs. Samples of survey questions (on the French-language health experience) were validated by the Table de concertation and Southern Health-Santé Sud's French Language Services Advisory Council. A home care survey was piloted by the region.

French language training for employees:

- Since January 2020, our employees have access to French language training geared to health care settings (Université de Saint-Boniface) via an online platform that allows them to take classes from home. The platform replaces the Telehealth format.
- A pre-beginner course was piloted and is now part of the suite of language training courses available on an ongoing basis.



Strong FLS Policy and Administrative Framework

Under the leadership of Santé en français (Manitoba), Southern Health-Santé Sud was actively involved in provincial administrative planning initiatives, including the following:

- The region collaborated with the provincial working group to finalize the Learning Management System (LMS) learning module tailored to health professionals. The working group also established implementation principles and then coordinated an approach for initial and sustained implementation. The module was piloted at the Ste. Anne Hospital and by the Public Health-Healthy Living team.
- In keeping with the direction taken by the province, the region collaborated on the development of the OZI electronic platform, a standardized online database. The work continues as the template is developed and is still ongoing.
- Santé en français is conducting a study on the most appropriate and effective recruitment strategies to fill bilingual positions in the health sector, particularly in interested regional health authorities (RHAs) and designated institutions in Manitoba. Identified as a key stakeholder, Southern Health-Santé Sud participated in interviews related to the study.
- "Carrières en santé (health careers)" promotes various health professions and is presented annually to local high school students. In total, five (5) schools were visited and ten (10) presentations were made.

Success in FLS Recruitment & Retention

- Southern Health-Santé Sud filled the French Language Services specialist position in November 2019.
- Southern Health-Santé Sud continues to partner with various stakeholders, including Santé en français, the Université de Saint-Boniface (USB), the Consortium national de formation en santé (CNFS) and the Manitoba Healthcare Providers Network, to plan a regional bus tour for fourth-year nursing students and second-year licensed practical nursing students.
- Representatives from the region attended the 2019 USB graduation ceremonies for all nursing graduates.
- Southern Health-Santé Sud participated in twenty-five (25) career fairs in the province and nine (9) classroom presentations promoting employment opportunities with Southern Health-Santé Sud. Southern Health-Santé Sud also promotes its bilingual employment opportunities among all students currently enrolled in health-related fields.
- The COVID-19 pandemic forced the postponement of many nursing student internships that were part of the curriculum. These students cannot graduate in spring 2020 as planned, further delaying their entry into the labour market.

	Southern Health-Santé Sud (sept 2019)		Villa Youville Ste-Anne (mars 2019)		Total (combiné)	
	Postes	ÉTP	Postes	ÉTP	Postes	ÉTP
Postes désignés bilingues (PDB)	602	354.65	110	67.95	712	422.60
PDB occupés par titulaires bilingues	350	247.36	77	50.62	427	297.98
PDB occupés par des titulaires non-bilingues	203	P/D	32	16.9	235	P/D
PDB vacants	49	P/D	1	0.43	50	P/D

Note: DBPs - designated bilingual positions, FTEs - full-time equivalent , N/A - not available



financial information

In compliance with The Public Sector Compensation Disclosure Act of Manitoba, interested parties may obtain copies of the Southern Health-Santé Sud public sector compensation disclosure (which has been prepared for the purpose and certified by its auditor to be correct) and contains the amount of compensation it pays or provides in the corresponding fiscal year for each of its officers and employees whose compensation is \$50,000.00 or more.

The Public Sector Compensation Disclosure Report and/or the complete set of financial statements and the auditor's report are available by contacting:

Chief Executive Officer, Southern Health-Santé Sud
180 Centenaire Dr, Southport MB R0H 1N1

Toll free: 1-800-742-6509

or access online at www.southernhealth.ca



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Winnipeg MB R3C 3Z3
Canada

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Fax: (204) 947-9390
www.deloitte.ca

REPORT OF THE INDEPENDENT AUDITOR ON THE CONDENSED FINANCIAL STATEMENTS

To the Board of Directors of
Southern Health-Santé Sud

Opinion

The condensed financial statements, which comprise the condensed statement of financial position as at March 31, 2020 and the condensed statement of operations and accumulated surplus for the year then ended, are derived from the audited financial statements of Southern Health-Santé Sud for the year ended March 31, 2020.

In our opinion, the accompanying condensed financial statements are a fair summary of the audited financial statements.

Condensed Financial Statements

The condensed financial statements do not contain all the disclosures required by Canadian public sector accounting standards. Reading the condensed financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements and the auditor's report thereon. The condensed financial statements and the audited financial statements do not reflect the effects of events that occurred subsequent to the date of our report on the audited financial statements.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated June 23, 2020.

Management's Responsibility for the Condensed Financial Statements

Management is responsible for the preparation of the condensed financial statements.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the condensed financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, Engagements to Report on Summary Financial Statements.

Deloitte LLP

Chartered Professional Accountants

August 26, 2020
Winnipeg, Manitoba

audited condensed FINANCIAL STATEMENTS



Statement of Financial Position

	2020	2019
Financial Assets		
Cash and short term investments	\$64 845 665	\$ 69 229 519
Accounts receivable, net	4 014 890	3 654 930
Accounts receivable - external partners	1 769 199	562 860
Accounts receivable - Manitoba Health, Seniors & Active Living - vacation entitlements	8 276 616	8 839 967
Accounts receivable - Manitoba Health, Seniors & Active Living - retirement entitlements	8 845 020	10 118 174
	87 751 389	92 405 450
Liabilities		
Accounts payable and accrued liabilities	23 164 816	26 164 224
Accounts payable - Manitoba Health, Seniors & Active Living	810 225	1 677 314
Unearned revenue	6 978 301	5 912 286
Accrued vacation benefit	17 732 172	18 766 786
Accrued sick leave benefit	5 594 044	6 549 580
Accrued retirement	18 254 809	19 381 402
Accrued retirement - Affiliate organizations	3 033 319	3 000 103
Long-term debt	129 708 516	114 994 283
	205 276 203	196 445 978
NET DEBT	(117 524 813)	(104 040 528)
Non-Financial Assets		
Inventory	1 866 321	1 497 062
Prepaid expenses	957 142	877 824
Tangible capital assets	220 527 409	204 365 398
Total Non-Financial Assets	223 350 872	206 740 284
ACCUMULATED SURPLUS	\$ 105 826 058	\$ 102 699 756

Note¹ Management is responsible for the preparation of the financial statements. The statements presented include only the statement of financial position and the statement of operations and accumulated surplus. They do not include the statement of changes in net debt, the statement of cash flows or the notes to the financial statements.

Statement of Operations and Accumulated Surplus

	Actual 2020			Budget 2020	Actual 2019
	Core Operations	Capital Operations	Total	Total	Total
Revenue					
Manitoba Health, Seniors & Active Living	\$ 318 837 845	\$ 14 287 387	\$ 333 125 231	\$ 334 426 731	\$ 358 440 388
Other Province of Manitoba	4 042 685	-	4 042 685	4 609 700	4 093 083
Government of Canada	500 336	-	500 336	543 650	608 459
Non-global patient and resident income	14 327 859	-	14 327 859	15 768 850	14 451 329
Other income	11 765 937	339 654	12 105 591	10 916 380	13 049 724
Interest	2 031 300	-	2 031 300	1 700 000	1 698 189
Donations	645 062	1 919 069	2 564 131	622 800	1 333 922
Ancillary operations	2 501 344	-	2 501 344	2 544 450	2 434 521
	354 652 367	16 546 109	371 198 477	371 132 561	396 109 615
Expenses					
Acute care services	122 553 665	6 430 670	128 984 335	124 832 810	126 720 761
Long term care services	52 677 915	2 602 077	55 279 992	51 864 875	53 797 909
Medical remuneration	30 864 650	-	30 864 650	33 390 110	30 589 758
Community based therapy services	7 546 853	-	7 546 853	7 835 900	7 681 536
Community based mental health services	8 805 501	-	8 805 501	9 572 200	8 875 897
Community based home care services	44 374 291	-	44 374 291	43 048 528	42 555 762
Community based health services	22 245 413	237 144	22 482 558	23 327 950	22 219 948
Emergency medical services	-	206 974	206 974	205 000	20 340 369
Regional health authority undistributed	16 927 606	4 666 610	21 594 216	29 641 838	24 921 066
Affiliated organizations	45 425 691	1 715 912	47 141 603	46 425 100	46 162 989
Ancillary operations	1 861 491	111 758	1 973 249	2 371 550	2 061 996
	353 283 077	15 971 144	369 254 222	372 515 861	385 927 991
Surplus (Deficit) Before Restructuring	1 369 290	574 965	1 944 255	(1 383 300)	10 181 623
Restructuring gain	1 182 047	-	1 182 047	-	-
Surplus (Deficit) for the Year	2 551 337	574 965	3 126 302	(1 383 300)	10 181 623
Accumulated Surplus, Beginning of Year			102 699 756	102 699 756	92 518 133
Accumulated Surplus, End of Year			\$ 105 826 058	\$ 101 316 456	\$ 102 699 756

administrative COST REPORTING

Administrative Costs

The Canadian Institute of Health Information (CIHI) defines a standard set of guidelines for the classification and coding of financial and statistical information for use by all Canadian health service organizations. Southern Health-Santé Sud adheres to these coding guidelines.

Administrative costs as defined by CIHI, include:

Corporate functions including: Acute, Long Term Care and Community Administration; General Administration and Executive Costs; Board of Trustees; Planning and Development; Community Health Assessment; Risk Management; Internal Audit; Finance and Accounting; Communications; Telecommunications; and Mail Service

Patient Care-Related costs including: Patient Relations; Quality Assurance; Accreditation; Utilization Management; and Infection Control

Human Resources & Recruitment costs including: Personnel Records; Recruitment and Retention (general, physicians, nurses and staff); Labour Relations; Employee Compensation and Benefits Management; Employee Health and Assistance Programs; Occupational Health and Safety

Administrative Cost Percentage Indicator

The administrative cost percentage indicator (administrative costs as a percentage of total operating costs) also adheres to CIHI guidelines.

Figures presented are based on data available at time of publication. Restatements, if required to reflect final data or changes in the CIHI definition, will be made in the subsequent year.

Provincial Health System Administrative Costs and Percentages

2019/20

Region	Corporate	Patient-Care Related	Human Resources & Recruitment	Total Administration
Interlake-Eastern Regional Health Authority	3.34%	0.59%	2.28%	6.21%
Northern Health Region	3.85%	0.75%	1.09%	5.69%
Prairie Mountain Health	2.42%	0.35%	1.14%	3.91%
Southern Health-Santé Sud	3.07%	0.27%	1.09%	4.43%
CancerCare Manitoba	1.81%	0.56%	0.74%	3.11%
Winnipeg Regional Health Authority	2.84%	0.60%	1.12%	4.56%
Shared Health	2.44%	0.31%	0.44%	3.19%
Provincial - Percent	2.74%	0.48%	0.99%	4.21%
Provincial Totals	\$ 142 456 475	\$ 24 825 243	\$ 51 169 197	\$ 218 450 915

2018/19

Region	Corporate	Patient-Care Related	Human Resources & Recruitment	Total Administration
Interlake-Eastern Regional Health Authority	3.00%	0.50%	2.07%	5.57%
Northern Health Region	3.98%	0.66%	1.20%	5.84%
Prairie Mountain Health	2.31%	0.34%	1.17%	3.82%
Southern Health-Santé Sud	2.94%	0.25%	0.96%	4.16%
CancerCare Manitoba	2.10%	0.66%	0.70%	3.45%
Winnipeg Regional Health Authority	2.58%	0.58%	0.97%	4.13%
Shared Health	3.76%	0.60%	1.30%	5.66%
Provincial - Percent	2.73%	0.51%	1.06%	4.31%
Provincial Totals	\$ 133 559 455	\$ 25 149 251	\$ 51 169 197	\$ 210 625 769

Health System Transformation

Manitoba's Health System Transformation includes initiatives that improve patient access and the quality of care experienced by Manitobans while establishing a health system that is both equitable and sustainable. As transformation projects and initiatives are planned and implemented, opportunities to re-invest administrative efficiencies in patient care are sought out and prioritized. Under the Regional Health Authorities Act of Manitoba, health authorities must ensure their corporate administrative costs do not exceed a set amount as a percentage of total operation costs (2.99% in WRHA; 3.99% in Rural; 4.99% in Northern). Across Manitoba, as broad Health System Transformation initiatives were implemented through 2019/20, **administrative costs declined as a percentage of total operating costs for the health system as a whole** (including regional health authorities and CancerCare Manitoba).

The activation of Shared Health as a provincial organization responsible for leading the planning and coordinating the integration of patient-centred clinical and preventive health services across Manitoba involved the establishment of a leadership team to support health system transformation initiatives. Leadership transitioned in advance of staff and operational budgets, resulting in an increase to the administrative cost ratio for 2018/19 which as a percentage has decreased and normalized in 2019/20 with the transition in April 2019 of program budgets associated with the ongoing operation of departments, sites and services. This included Health Sciences Centre Winnipeg, provincial diagnostic services, digital health and emergency medical services and patient transport.

As Health System Transformation projects proceed, organizational changes across all health service delivery organizations in the time to come will allow for enhanced focus in patient-care and human resources and recruitment areas, while holding the line or further reducing administrative costs as a percentage of total operating costs.

Southern Health-Santé Sud Administrative Costs

For year to Date Ending:	Mar-20		Mar-19	
	\$	%	\$	%
Corporate	10 874 654	3.07%	11 061 248	2.94%
Patient care related costs	943 123	0.27%	940 582	0.25%
Recruitment/Human Resources related costs	3 858 760	1.09%	3 611 836	0.96%
Total administrative costs	\$ 15 676 537	4.43%	\$ 15 651 289	4.16%

public interest disclosure WHISTLEBLOWER PROTECTION

Public Interest Disclosure - Bill 34 - The Public Interest Disclosure - Bill 34 (Whistleblower Protection Act) gives employees and others a clear process for disclosing concerns about significant and serious wrongdoing in the Manitoba public service and provides protection from reprisal. The Act (Bill 34) is not intended to deal with routine operational or human resource matters. Employees who have concerns about such matters should follow existing procedures to deal with these issues. The law applies to employees and officers at all levels of provincial departments, Offices of the Legislative Assembly and government bodies including Regional Health Authorities.

Reporting Period Apr/2019-Mar/2020	
Disclosures received (Subsection 18 (2a))	0
Investigations commenced (Subsection 18 (2b))	0
Finding of wrongdoing/ recommendations/corrective actions taken (Subsection 19 (2b))	0

SOUTHERN HEALTH-SANTÉ SUD
Whistleblower Reporting
180 Centenaire Dr | Southport MB R0H 1N1
T 204-428-2720

accountability provisions

The Regional Health Authorities Act includes provisions related to improved accountability and transparency and to improved fiscal responsibility and community involvement.

As per Sections 22.1 and 51: Employment contracts have been established for the CEO and all Senior Leaders of the organization. These contracts contain all terms and conditions of employment as set out by the Minister.

As per Section 38.1: The CEO expense report for the period ending March 31, 2020 can be found by accessing the [Plans and Reports](#) section of the website.

As per Section 23 (2c.1): Southern Health-Santé Sud's 2016-2021 Strategic Plan took effect April 1, 2016 and can be found by accessing the [Plans and Reports](#) section of the website.

As per Sections 23.1 (2): Results of the final Accreditation Canada report for Southern Health-Santé Sud can be found by accessing the website [Plans and Reports](#) section of the website.

freedom of information *and* PROTECTION OF PRIVACY ACT

FIPPA provides the legislative framework for information and privacy rights in Manitoba. The main purposes of FIPPA are Access to Information and Protection of Privacy. FIPPA applies to all records in the custody or under the control of a public body such as Southern Health-Santé Sud.

FIPPA ensures that an individual's right of access to any record maintained by the public body is responded to in compliance with the Act.

As mandated by FIPPA, Southern Health-Santé Sud has a consistent and controlled process for individuals to obtain access to information maintained by the Region and to permit or refuse such access in accordance with the legislation.

Southern Health-Santé Sud has eight (8) FIPPA policies that provide direction to ensure FIPPA applications are managed accurately and timely in accordance with FIPPA legislation.

Increased volumes of FIPPA applications and the complexity of the applications vary from year to year. (see table)

SOUTHERN HEALTH-SANTÉ SUD
Regional Officer - Privacy & Access
Box 470, 94 Principale St | La Broquerie MB R0A 0W0
T 204-424-2320

Requests	2019	2018	2017	2016	2015
Total requests received	65	48	90	46	78
# of requests granted full or partial access	40	37	85	44	73
% of requests granted	62%	77%	94%	96%	94%

Type of Requests	2019	2018	2017	2016	2015
Media	1	20	34	4	3
Political Parties	13	11	34	26	70
Other	51	17	22	16	5

FIPPA facilitates the building and maintaining of positive relationships between Southern Health-Santé Sud and the media, political parties, public and staff. It is important for us to protect the privacy of the applicant, provide accurate and relevant information, in addition to, ensuring the applicants are responded to in a timely manner according to the legislation.

SUBJECTS

20

human resources

5

clinical

29

administrative/
operational

6

sustainability

6

long term care

1

emergency
department

1

retrait

Source: Regional Officer -
Privacy & Access

contact us

Regional Office - La Broquerie

Box 470, 94 Principale St | La Broquerie MB R0A 0W0

T 204-424-5880 | F 204-424-5888

Regional Office - Morden

3 30 Stephen St | Morden MB R6M 2G3

T 204-822-2650 | F 204-822-2649

Regional Office - Notre-Dame

Box 190, 40 Rogers St | Notre Dame de Lourdes MB R0G 1M0

T 204-248-7250 | F 204-248-7255

Regional Office - Southport

180 Centenaire Dr | Southport MB R0H 1N1

T 204-428-2720 | F 204-428-2779

Careers - Human Resources Recruitment & Retention

Box 470, 94 Principale St | La Broquerie MB R0A 0W0

T 204-424-6045 | 1-800-742-6509 | humanresources@southernhealth.ca

Careers - Physician Recruitment

Box 190, 40 Rogers St | Notre Dame de Lourdes MB R0G 1M0

T 204-248-2759 | physicianresources@southernhealth.ca

Media Inquiries

Box 470, 94 Principale St | La Broquerie MB R0A 0W0

T 204-424-2329

For more information on our health services, visit: www.southernhealth.ca

Email: info@southernhealth.ca

Toll Free: 1-800-742-6509



www.southernhealth.ca