



GENERAL BOARD MEETING
WEDNESDAY, JANUARY 25, 2006

QUESTIONS & ANSWERS

Submitted by Lisa Dodd

Q

What is VIHA currently doing and actively promoting to aid families to make wise food choices?

A

In addition to providing both in-patient and out-patient counseling by hospital dietitians, VIHA also has a Community Nutrition Program that provides a number of services/programs. These services/programs range from prenatal to postnatal and early childhood education on nutrition. This is done in a variety of ways, including distribution of written material, drop in classes, individual sessions and home visits. VIHA staff also participate in advisory groups and work with community groups on programs targeted to improve nutrition, such as *the Good Food Box*, which is available in many communities.

VIHA has a comprehensive school health program for kindergarten to grade 10 students, which focuses on nutrition, activities, decision-making, peer influences, media, etc. This program includes curriculum, school activities to support healthy environments, including policy such as vending machines, fundraising, community action and resources.

VIHA has also successfully moved the concept of a food charter forward at a municipal level and we work in concert with other like-minded community groups to foster additional health public policy around food security. For example, using park land and school yards for community gardens to encourage community development and teach children and youth more about food production and healthy eating.

In addition, over the coming year, we will be focusing more of our public communication through local media and our website on promoting health living to raise awareness and to assist families in making healthy choices.

Q

Is VIHA willing to promote and support a healthy eating program for children with the goals of:

- Promoting fresh foods
- Promoting water
- Focusing on feeding the brain
- Addressing diet and behaviour link

QUESTIONS & ANSWERS

➤ Sugar awareness

A There are a number of initiatives underway that support the goals listed above for a healthy eating program for children. For example, we are currently piloting a fruit and veggie program in two schools in School District 63 (Saanich). Water is recommended and promoted for thirst. The brain is part of the body and VIHA promotes and supports feeding the whole body, which is particularly important early in life when the body (and brain) is still developing. The Community Nutritionist Program encourages limiting the intake of simple sugars, sweetened drinks such as pop, and even fruit juices, which can displace more nutritious foods in a child's diet. We also provide information on the sugar content in many food products such as cereals and sports drinks so parents and children can make informed decisions around their choices.

Submitted by David Ridley

Q **What steps does VIHA intend to take to improve communications, transparency and accountability in its dealings with the Cowichan Valley Regional District?**

A VIHA currently has a Memorandum of Understanding with the six Regional Hospital Districts within VIHA. The agreement, signed by both parties, stipulates that representatives from the Regional Hospital Districts and VIHA will meet twice yearly. The attendance of these twice yearly meetings has been expanded to include Board, as well as senior staff, representation at these meetings. In addition, VIHA staff meet with representatives from the Regional Hospital Districts, or attend regularly scheduled meetings, as requested by either party.

Q **Which governance model does the VIHA Board follow and what governance training is given to directors?**

A The VIHA Board follows its own bylaws, which are based upon traditional best practice corporate board governance and have been approved by the Ministry of Health. Roberts Rules of Order govern meeting procedures.

All Board members had previous governance experience. The Ministry of Health organized an initial one day orientation session in 2002 for VIHA Directors and held a governance session in September 2005 for the Board members of all Health Authorities in the province. As well, individual Board members attend education sessions and/or workshops on an ad-hoc basis, as appropriate.

QUESTIONS & ANSWERS

Q

In the 2005/2006 Performance Agreement between the Ministry of Health and VIHA, a variety of performance measures are listed. Many of the targets for 2005/2006 are given as percentage improvements over the previous year. However, the performance levels for the previous year are missing. Would the Board please provide these figures?

A

Unfortunately, for the most part, we are unable to provide you with the data requested as it is not yet available for public release. It takes time to collect and verify data, and much of the data we rely on comes from other parties, such as the Ministry of Health, the Canadian Institute of Health Information, Vital Statistics and the BC Centre for Disease Control. The Ministry of Health is required to report on the performance of the health system in its Annual Service Plan Report, which is posted on the Ministry's website by June 30th of every year. The Annual Service Plan Report can be found at <http://www.bcbudget.gov.bc.ca/annualreports/hs/default.htm>.

Q

What is the cost of the VIHA Organizational Renewal Project, including the total cost of all new administration positions per annum?

A

The organizational renewal project has resulted in a net increase of one full-time administrative position within the Executive Team and the Integrated Health Services Team within VIHA.

Prior to the changes, VIHA had 'engaged' approximately 80 physicians within a variety of administrative roles. The new model has significantly expanded the role of physicians in decision-making and the planning and management of services. We now have over 120 physicians involved with this process, as part of our co-management and island-wide program model.

As part of our organization renewal, VIHA has also worked to reduce our reliance on external consultants, in order to redirect resources, and build internal management expertise within VIHA. As a result, we have reduced the number of external contracts by 33% within the current fiscal year.

So in summary, the total cost of administration within VIHA has not increased. On the one hand we have added capacity at a cost of \$1.1M per annum, and at the same time, reduced external consulting costs by up to \$1.4M in the current fiscal year. These figures demonstrate a successful picture of organizational renewal that has achieved our goals at no incremental cost.

QUESTIONS & ANSWERS

Q How much has been spent during 2005 to increase nursing and support staffing levels at Cowichan District Hospital?

A In the past year we have invested, on an annualized basis, \$861,000 to enhance services at Cowichan District Hospital, as well as providing \$25,500 in one-time funding for Specialty Education Training.

Q What is VIHA's plan to improve levels of quality control at Cowichan District Hospital?

A VIHA's Quality Plan focuses on strengthening the abilities within each of the program areas to do quality control, quality assurance and quality improvement work. As part of the recent organizational renewal, our focus is on the integration of services and each program area has been assigned responsibility for quality in order to ensure quality is imbedded in the day-to-day work of all staff. To support management's philosophy of "plan regionally and deliver locally", quality improvement staff will work with local area teams in identifying issues and having them rolled up to the Quality Council for each program for priority and direction setting.