



BRANDON REGIONAL HEALTH AUTHORITY

VISION.....

A model region, responsive to the community Through teamwork and a focus on "health".

MISSION.....

Promotion of healthy choices and delivery of health services across the lifespan in a variety of settings; in partnership with the residents of the Brandon and neighbouring Regions.

VALUES.....

We Believe In.....

Integrity and are committed to being open and honest with our partners in the workplace and the people that we serve.

Continuous Improvement as a means of achieving quality, efficiency, excellence and promoting creativity in all that we do.

Respect and Dignity in life and in death and will promote client choice, and be sensitive to the needs of individuals, families and co-workers.

Teamwork and shared decision-making as being integral to reaching our mission, vision and goals.

Accessibility to services in a seamless delivery system and a single point of entry in multiple sites.

ANNUAL REPORT

2005/2006

Brandon Regional Health Authority (Brandon RHA) offers a wide range of health services and programs to the citizens of Brandon and the municipalities of Cornwallis, Elton and Whitehead; and serves as a regional referral centre for the "Westman" area. Programs and Services include Long Term Care, Public Health, Home Care, Mental Health, Audiology, Medical Officer of Health, Rehabilitation, Acute Care & Ambulatory Care Services, 7th Street Health Access Centre and a full range of Diagnostic Services.



Larry Hogue,
Board Chair



Carmel Olson,
CEO

We have the honour to present the annual report for the Brandon Regional Health Authority, for the fiscal year ended March 31, 2006.

This annual report was prepared under the Board's direction, in accordance with The Regional Health Authorities Act and directions provided by the Minister of Health. All known material, economic and fiscal implications have been considered in preparing the annual report.

Respectfully submitted, on behalf of the Brandon Regional Health Authority.

A handwritten signature in black ink, appearing to read "L. Hogue".

Mr. Larry Hogue
Chairman of the Board
Brandon Regional Health Authority Inc.

Dear Mr. Hogue:

I am pleased to provide you with the 2005/2006 Annual Report, which highlights the status of the actions included in the annual health plan to address the strategic priorities set out by the Board.

Numerous individuals in a variety of roles throughout the organization participate in the planning and development of inter-regional strategies, as well as provincial initiatives. In addition, individuals and the Region have been recipients of awards that recognize outstanding achievement, by provincial and national organizations. Presentations highlighting some of our best practices have been made at provincial, inter-provincial, national, and international conferences.

The Region has successfully demonstrated its commitment to a population health approach through extensive partnerships and implementation of strategies that address the factors that determine health.

We acknowledge the exceptional opportunities for communication with Ministry of Health personnel and our ongoing positive working relationship. On behalf of the entire staff, I also thank the members of the Board for their support and commitment to the community.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Carmel Olson".

Financial

Consolidated Statement of Financial Position & Operations, Year ended March 31, 2006

Consolidated Statement of Financial Position	2006	2005	Consolidated Statement of Operations	2006	2005
ASSETS			REVENUE		
CURRENT			Manitoba Health operating income		
Cash	\$ -	\$ 8,015,957	Income as per Funding Document		
Accounts receivable (Note 3)	3,592,752	1,979,845	(excluding funding related to Capital and Interest)	\$ 137,158,524	\$ 129,256,441
Inventories	1,454,181	1,486,548	One Time Funding	-	2,236,889
Prepaid expenses	1,572,324	1,272,285	Retroactive Salary Payments	998,765	1,000,151
Due From Manitoba Health - Vacation	7,224,269	7,224,269	Recovery of Non Global Items	1,774,405	1,622,713
	\$ 13,843,526	\$ 19,978,904	Reallocation of Funding to Westman Laboratory for prior year	-	(93,398)
			Other Manitoba Health Income	3,859,492	3,287,848
DUE FROM MANITOBA HEALTH - Pre-retirement	9,191,179	9,191,179	Total Manitoba Health Funding (Note 12)	143,791,186	137,310,644
INVESTMENTS (Note 4)	3,685,641	3,703,873	Non-insured income	7,078,081	6,724,418
CAPITAL ASSETS (Note 5)	107,405,401	110,404,109	Other Income	2,325,165	3,208,05
	\$ 134,125,747	\$ 143,278,065	Amortization of deferred contributions	8,317,074	8,383,072
LIABILITIES			Capital revenue - Non Devolved Facilities	612,962	582,860
CURRENT			Ancillary revenue	3,924,657	2,958,723
Bank advances - operating (Note 6)	612,134	-		\$ 166,049,125	\$ 159,167,781
Accounts payable and accrued liabilities	6,376,250	10,601,647	EXPENSES		
Bank advances	1,196,078	1,301,708	Acute Care Services	98,073,160	92,457,867
Employee Future Benefits - Vacation	8,633,463	8,091,016	Long Term Care Services	21,867,031	20,955,734
Current portion of obligation under capital lease (Note 8)	391,475	370,001	Medical Remuneration - All Programs	11,123,340	9,824,687
Current portion of long term debt (Note 7)	91,490	85,906	Community Based Mental Health Services	11,642,996	10,336,315
	\$ 17,301,520	\$ 20,450,278	Community Based Home Care Services	6,020,074	5,583,545
ACCRUED EMPLOYEE FUTURE BENEFITS - Pre-retirement	10,810,650	10,073,397	Community Based Health Services	4,394,950	4,241,076
OBLIGATION UNDER CAPITAL LEASE (Note 8)	200,428	591,903	Land Ambulance	220,120	220,120
LONG TERM DEBT (Note 7)	955,268	1,046,758	RHA Administration Costs	2,737,002	2,645,197
DEFERRED CONTRIBUTIONS (Note 9)			Amortization of capital assets	8,165,601	8,225,676
Expenses of future periods	1,338,791	1,261,857	Capital payments - Non Devolved Facilities	612,963	582,860
Capital assets	102,159,555	104,058,040	Interest on capital lease	44,903	65,199
	\$ 132,766,212	\$ 137,482,233	Interest on long term debt	73,623	78,866
NET ASSETS			Other operating expenses	1,590,774	2,144,302
Invested in capital assets (Note 10)	2,947,072	3,595,952	Ancillary expenses	3,918,885	2,841,089
Internally restricted (Note 11)	3,158,527	2,980,044		\$ 170,485,422	\$ 160,202,538
Externally restricted (Note 11)	26,939	26,714	Shortfall of revenue over expenses for the year	\$ (4,436,297)	\$ (1,034,757)
Unrestricted	(4,773,003)	(806,878)	ALLOCATION OF SHORTFALL FROM OPERATIONS:		
	1,359,535	5,795,832	Investment in Capital Assets - Manitoba Health Activities	(847,925)	(928,380)
	\$ 134,125,747	\$ 143,278,065	Unrestricted - Manitoba Health Activities	(3,544,082)	98,855
COMMITMENTS AND CONTINGENCIES (Note 13)			Investment in Capital Assets - Non Manitoba Health Activities	(513,330)	(563,036)
			Internally Restricted - Non Manitoba Health Activities	468,815	356,983
			Externally Restricted	225	821
				\$ (4,436,297)	\$ (1,034,757)

COMPARATIVE FIGURES

Certain of the prior year's figures have been reclassified to conform to the current year's presentation

A complete set of financial statements, auditor's reports and the statement of public sector compensation disclosure can be obtained from the Brandon RHA administration office or by calling 571-8400.

Board Governance

2005/2006 Board Members: Chair Larry Hogue, Luba Barletta, Garry Bell, Errol Black, Bill Bryant, Terry Drebit, Aldin Foy, Wayne Langlois, Alison McNeill-Hordern, Karen Peto, Marion Robinsong, Ann Lanceley, Dr. Colin Macfarlane and Gerald Rocan.

For the 2006/2007 fiscal year, Minister Sale re-appointed Marion Robinsong and Ann Lanceley for 3-year terms, and appointed three new Board members: D.J. “Scotty” McIntosh, Margaret MacDonald and Darrell Racine. They replace outgoing board members Lube Barletta, Terry Drebit and Aldin Foy.

Board meetings are held on the third Tuesday of each month in the City Hall Council Chambers. Meetings are open to the public and also aired on WCG TV. There are two standing committees of the Board: Finance/Audit and Executive. The Board Chair acts as liaison to the Provider Advisory Council.

The board assures itself that the health plan is implemented; that funds are allocated appropriately; and the effective systems of control and legislative compliance are maintained with:

The Board through its Finance/Audit Committee

- Reviews, approves and recommends financial disclosure.
- Maintains oversight of internal control and management information systems.
- Maintains communication with auditors.
- Focuses on areas of significant risk to the Board.

Management

- Reports accurately, consistently and on a timely basis.
- Selects and recommends policies, estimates and disclosures.
- Maintains cost-effective internal control and management information systems.

External Auditors

- Assesses the appropriateness of accounting policies, estimates and disclosures.
- Reviews key financial internal control systems.
- Provides value-added, cost-effective audit services.
- Focuses on areas of significant risk to the Board.

Executive Limitations

Monitoring through surveys and self-evaluations

Patients\Clients\Residents

Acute Care

Diagnostic Services

Long Term Care

Community Services

Medical Services

Westman Regional Lab

Planning and Evaluation

Financial Services

Information Services

Support Services

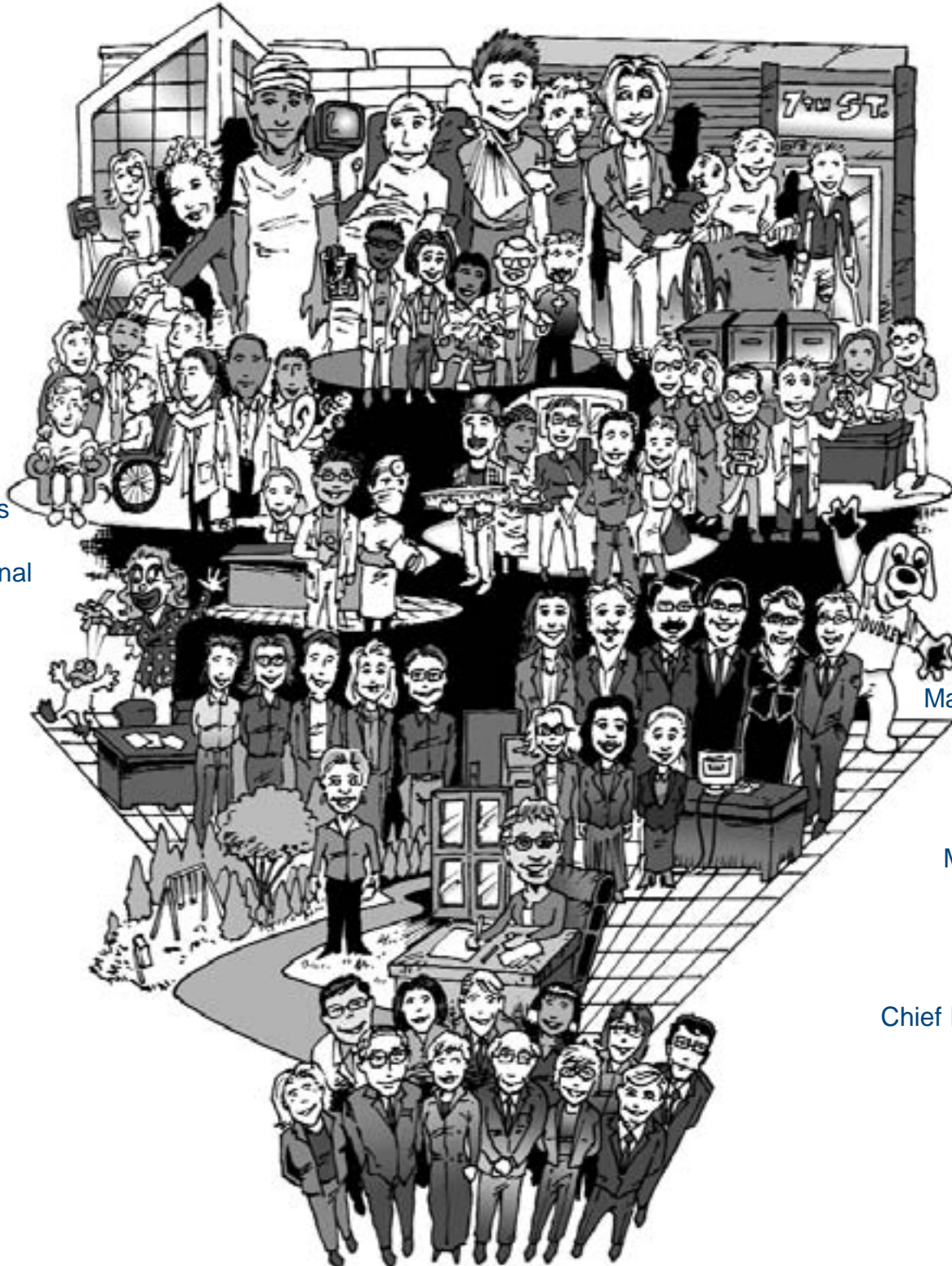
RHA Mascot

Executive Management Team

Medical Officer of Health

Communications

Chief Executive Officer



Volunteer Board of Directors

It Takes a Team to Build a System

Strategic Priority:

Improved health status of the community through strategies that focus on wellness and population health

Develop & implement a tobacco reduction strategy with emphasis on children & pregnant women.

- Two staff and one physician trained at Mayo Clinic re “addictions model”.
- Staff pilot commenced November 2003 & expanded to inpatient/outpatient target populations in fall of 2004, e.g. those with chronic disease.
- Phase III launched in 2005 giving access to the public.
- RHA participated in lobby to support City of Brandon smoking by-law, as well as the provincial legislation.
- Smoke-free Grounds Policy May 2005.
- Butt Out Smoking Strategy (BOSS) for mental health clients implemented.

Percentage of regular smokers = 19.3 (2005). Baseline = 23.74 in 1996.

Percentage of pregnant women smoking = 25% (2004/05) Baseline = 28.2% (1997/98).

Deaths due to lung cancer: Baseline = 39 in 1998; 23 in 2001; 35 in 2004.

Potential Years Life Lost (PYLL) due to cancer of lung, trachea, bronchus: 1994-98: 499 Females, 719 Males; 2000-04: 304 Females, 349 Males.

Develop strategies to reduce the incidence of teenage pregnancy.

- Family Planning Clinics at The Town Centre, BU, and ACC; and integrated into services at the Primary Health Care Access Centre.
- 1:1 counseling provided by Public Health Nurses.
- Regular presentations in schools.

Teenage pregnancy rate: Ages 10-14 reduced by 50% to 0.6 per 1000 in 2003/04. Ages 15-19 = 42.6/1000 (2003/04). (Baseline - 57.6).

Develop & implement strategies to increase rate of breast cancer screening.

- CancerCare Manitoba reduced the Tech positions by 0.6 fulltime equivalent (EFT) in order to redirect resources to rural/Winnipeg populations that had lower rates. Capacity is now fully subscribed.
- Screening Rate: Baseline: 49% (1996-98) Current: 60% (2003-04)*

Support healthy child development in children of teenage parents: prenatal care, parenting skills training, day care in high school.

- Proposal for high school based day care submitted to the Ministers of Health, Education & Family Services & Housing approved for September 2006. Due to need for capital renovations to the site, implementation deferred to 2007.
- Afternoon prenatal classes provides education specific to this target group.
- Parenting skills training thru Families First; Healthy Beginnings; at Elspeth Reid Family Resource Centre; in partnership with MB Metis Federation; and at the Brandon Friendship Centre.

Number of teen parents accessing prenatal care = 77 (2004/05),

Parenting training: 112 in Healthy Baby and average 95 in Baby First.

Percentage of pregnant teens in high school = 12% (2004/05), but completion unknown.

Participate in Chronic Disease Prevention Project in partnership with Alliance for Chronic Disease.

(Revised in 2006/07 Health Plan to: “Develop and implement the Chronic Disease Prevention Initiative (CDPI), based on a framework that includes cardiovascular, cancer, respiratory, and stroke.”)

- CDPI Plan approved March 2006.
- Brandon RHA & ARHA developed logic model to guide a strategy.
- Implemented cardiac & respiratory care clinics in BRHC Ambulatory Care setting.
- Announced Coordinated Stroke Strategy in September 2005 in partnership with the Heart & Stroke Foundation.
- New Clinical Practice Guidelines/Pathway launched April 2006.
- Region recognized by Heart and Stroke Foundation April 21, 2006 for launch of first Coordinated Stroke Strategy in Manitoba.
- Discussions with Asthma Education Centre re expansion to Brandon RHA / ARHA.

Implement revised Regional Diabetes Program (RDP) with emphasis on Aboriginal population by: Developing a Regional Diabetes Program evaluation framework with specific, realistic indicators. Reporting baseline information on the following from RDP evaluation: access to services, quality of services.

- RDP logic model completed.
- Implementation partially commenced in January 2003 i.e. Intake Worker.
- Developing physical activity strategy for “Westman” area.
- Annual Diabetes Gathering for Aboriginal people (4th one in 2005).
- Improved processes for client follow-up.
- Continued implementation of RDP included in 2006/07 health plan.
- Diabetes Advisory Committee for Brandon RHA & ARHA established & meets quarterly.
- Framework submitted December 2005.
- Report on baseline information deferred (as per MB Health).

Improved health status of the community through strategies that focus on wellness and population health. *Continued*

Develop an Aboriginal Health Strategy through: Continued engagement with Aboriginal Groups, Continued collaboration with MB Health to identify/develop specific elements.

- Two consultations with Aboriginal Groups.
- Multiple partnerships.
- Aboriginal Workforce Initiative April 2003 — to end of March 2006, 116 people hired.
- Aboriginal Spiritual Care Worker position established & funded by Aboriginal Northern Affairs /Manitoba Metis Federation.
- Cultural Awareness education program.
- Service Purchase Contract with Friendship Centre for Mental Health program.
- Mentorship program in partnership with Service Canada and Advanced Education and Training (targeting persons over 19 yrs of age that have dropped out of school).

Develop & implement strategies to improve the quality of life for persons with psychiatric illness through:

- **Promote bus pass program for Income Assistant recipients.**
- **Continue as a partner in Transitional Employment Project.**
- **Supported Living Project to promote graduation from intermediate unit & promote early intervention.**
- **Improved consumer participation in planning mental health services.**
- **Mental Health Co-Occurring Disorders (CODI) Progress report: Training to 75% of mental health providers in principles of CODI, plan to orient new staff to principles of CODI, plan for clinical staff training on the 8 Clinical Training Guidelines Integration of CODI assessment in the clinical assessment process, further progress toward integrating the principles of CODI into policies/procedures.**
- Volunteer Income Tax Program at 7th Street Health Access Centre.
- In response to availability of crystal meth, education broadly provided to staff.
- Bus Pass Program approved for provincial Income Assistance clients as one-year pilot.
- Supported Living Project established with funds redirected from Residential Care and efficiencies attained by Proctor assignments, as well as new funding from Manitoba Health.
- Brandon RHA staff provided significant leadership in the development of a suicide prevention strategy (multi-sectoral collaboration). In the fall of 2005, Kathy Foley received a national award recognizing her efforts in suicide prevention.
- Staff trained in principles of CODI.

Average use of bus passes/client = 20-25.

McTavish Manor wait list – no wait list as of March 2004.

Suicide rate: Baseline: 9.9/100,000 (1996), Current: 4.2/100,000 (2001)

Immunization: In collaboration with MB Health & other jurisdictions, set specific program, process and/or program and/or outcome targets.

Sexually Transmitted Disease: RHA-specific process and/or program and/or outcome targets, based upon local epidemiology and resource capacity; to be achieved in a mutually determined timeframe.

- Despite the best efforts of staff and increased partnerships, STI rates are projected to increase.
- Additional resources were identified in 2006/07 funding letter.

Collaborate with MB Health to: Demonstrate progress towards the implementation of a Regional Breastfeeding Framework that will be revised/updated annually.

- Revised targets for percentage of improvement in initiation and activities for achievement.
- Retrospective audit of breastfeeding practices (at 1,3,6, & 12 months) for babies born between February 1 and April 30, 2003 completed in August 2005.
- Prospective audit of breastfeeding practices for babies born between February 1 and April 30, 2005.
- Targets set for Region as per report submitted January 2006.
Targets: Initiation rates: 80%, Baseline: 75.3% in 1996, Current: 78.6% in 2001, Duration rates: increased by 2%.
Baseline: Exclusive 15% at 12 months (2003); Partial 3% at 2-4 months.

Injury Prevention (IP): Demonstrated progress towards implementation of a Regional Injury Prevention Framework.

- Injury Prevention Plan developed in partnership with Brandon Safe Communities Coalition & submitted December 2004.
- Priorities include: 1. Falls prevention in seniors 2. Falls prevention in children 3. Motor vehicle injuries 4. Young worker injuries.
- Updates submitted April 2005 and December 2005.

Strategic Priority:

Integrated system with services along a seamless health care continuum

Avoid duplication of service through multi-sectoral partnerships.

- Central intake process established for Speech Language Therapy/Occupational Therapy/Physiotherapy & accepted for ongoing funding through the Children's Therapy Initiative.
- Multi-agency Preschool Wellness Day.
- Early Years Team established.
- Safe Communities Coalition.
- Aboriginal Recruitment & Retention Partnership Agreement.
- Surgical program with ARHA in Minnedosa.
- Rivers Rehab Program is a partnership between ARHA and Brandon RHA.
- Sexual Assault program planning and implementation involved other agencies and crossed programs; and includes volunteers.
- Cancer Navigation handbook was developed in collaboration with other agencies and multidisciplinary group from within the Region.

Region-wide integrated Electronic Health Record (EHR) to coordinate service provision amongst multiple providers.

- Lab Information Systems (LIS)/Radiology Information Systems (RIS)/Picture Archiving Communication System (PACS) implemented.
- EHR in progress and aligned with Clinical Services Redevelopment (CSRFP).
- Multiple systems installed.

Seek opportunities to improve integration across programs & services i.e. promote the concept of “no walls” and virtual sites.

- Interdisciplinary planning for utilization; Primary Health Care (PHC) initiative; outreach clinics at hospital.
- Additional Home Care Case Coordinator introduced in hospital setting.
- Mental health programs integrated.
- Planning with Addictions Foundation of MB (AFM) to address needs of clients with co-occurring mental illness & substance abuse. CODI Training underway.
- Centre for Adult Psychiatry staff attend ER to assist with assessments of patients presenting with symptoms of mental illness.
- Secondary prevention planning with mental health programs and acute care to address depression associated with chronic disease.
- Staff from the Child and Adolescent Treatment Centre attend in ER as requested and available.

Promote the notion that “health promotion and education re disease prevention is everybody’s job”.

- Stakeholders' meetings/planning re cardiac care, chronic diseases, respiratory, and palliative care.
- Development of a “Harm Reduction Policy” for the RHA is underway.

Strategic Priority:

Health programs and services that are people-centered, evidence-based and needs driven

Maintain a corporate strategic planning process that facilitates participation.

- Strategic planning, Performance Deliverables, Continuous Quality Improvement, and accreditation processes integrated.
- 100% Coordinating & Program Teams have annual strategic plans*

Develop formal evaluation tools that are program & service specific.

- Generic tool developed & is currently in use by select programs.
- Patient/client/resident surveys developed for the following programs: Medicine, Surgery, Ambulatory Care, Critical Care (ICU, ER), Long Term Care, Home Care, Maternity, Mental Health.

Conduct comparisons with national indicators and best practices.

- Hired Clinical Practice Guideline Facilitator through redirected funds.
- Patient Care Standards Committee.
- Clinical/Evaluation Analyst hired in August 2005 to assist with auditing & monitoring clinical outcomes.

Conduct operational reviews where indicated.

- Completed in Rehab, Human Resources, Central Information Services, and Extended Care (recommendations fully implemented).
- Recommendations considered and implemented or phased plans established as appropriate.
- Operational review of inpatient surgical program completed, with recommendations for bed and human resources implemented.
- Operational review of inpatient medical program completed and development of an implementation plan is underway.

Restraint Use: Demonstrate compliance with Manitoba Health policy on “Restraints in Personal Care Homes.”

- An audit tool was completed in November 2005. Facilities are largely compliant with the Manitoba Health policy. A follow-up audit is planned so that gaps in compliance can be addressed.
- There are diverse opinions regarding application of the definition of “restraint”, especially related to use of bed rails.

Strategic Priority:

Human, financial and capital resources that are appropriate and sustainable

Support voluntary unpaid LOAs.

- Patient Care Coordinator position deleted 2003.
- One Support Services management position deleted upon retirement of incumbent in June 2003.
- Supervisor position in Rural Biomedical Program deleted in spring of 2004.

Continue including all department heads in zero-based budgeting process.

- VPs, Coordinators, Program Managers, & Supervisors involved in detailed planning, as well as ongoing monitoring.

Develop plan for inclusion of “Hospitalists” in physician complement.

- Considered by Physician Recruitment and Retention Committee and EMC.
- Initially deferred indefinitely; however, physicians have asked for discussions to resume and feasibility is being determined in consultation with the Department of Family Practice.

Initiate development of a functional program and design of a Radiation Therapy Unit in collaboration with Cancer Care Manitoba.

- Functional program has been developed in partnership CCMB (Program Manager re-assigned to facilitate completion).
- Planner Facilitator hired for the project.
- Funding letter received.
- Site selection pending.

Secure appropriate operating funds to support programs and services.

- Baseline remains inadequate, relative to the inflationary increases in supplies and pharmaceuticals in particular, e.g. safety needles & other disposables.

Refine the “equipment acquisition process” & secure funding to support programs/services, including building maintenance & replacement after useful life.

- Continues to be huge gap between funding sources and equipment needs.
- Acquisition process improved and utilized region-wide.
- Specialized equipment is assessed at \$100,000 or greater and included in a separate funding envelope from MB Health, prioritized on a provincial basis.

Funding levels from MB Health & donations:

MB Health = 2,225,389, Donations = \$376,528, Other sources = \$729,505.

Strategic Priority:

An organization that attracts and retains employees who feel valued and supported

Ensure the development and implementation of a comprehensive Human Resource plan, including succession and mentoring plans, and recruitment and retention strategies.

- Partnership with Education & Training established to support continuing education & laddering.
- Forgivable loans available.
- Preceptors/internships for: dieticians, pharmacists, occupational therapists, physiotherapists, social work, nurses.
- Grant program implemented for RNs and LPNs emulating Nurses Recruitment & Retention Committee initiative.
- Vacant RN positions recruited successfully.

Comprehensive long-term HR plan – in progress, percentage of implementation of R & R strategies = 100%.

Vacancy rate = 3.1% , turnover rate = 15.5% , sick leave rate = average 10.33 days/EFT compared to healthcare industry average of 13.4 days, overtime rate: Paid = 21,874 hours, 26,307 in 2004/05.

Develop and implement initiatives that contribute to the creation of a healthy workforce and workplace.

- Partnership with WCB re return to work programs.
- Staff satisfaction survey shows 69.44% in 2004 compared to 69% in 2000.

Number of Workplace Safety & Health complaints = 48 (2003) 23 (2004) 41 (2005)

Implement Employee Wellness Program.

- Smoking cessation program implemented.
- Massage therapy available at most sites.
- Employee Wellness Team established.

Number of current Wellness initiatives currently 14+.

Determine feasibility of a Child Day Care at BRHC site.

- Board established and proposal/plan developed.
- Grant funding approved for September 2006.
- Site selected and functional program completed.
- Approval from Minister to move the building and use the land.
- Re-zoning approval received from the City of Brandon.

Ensure effective communication strategies throughout the Region.

- Combination of “yes” / “sometimes” is 94%.
- Structure of general staff meetings changed to “coffee/table chats”, as previous forum was mechanism with lowest score in survey.
- Established quarterly “Regional Leadership Team” forum to expand decision-making – Program Managers included semi-annually.
- Providing written CEO report to Board.
- CEO now full time attendant at Medical Advisory Committee (MAC).
- Joint Conference Committee established (Board/Physicians/Management).
- Meet with staff and partners as requested or indicated.
- Cross-representation of portfolios on VPs decision-making teams.
- VPs attend departmental staff meetings.

RHA Programs and Services

Long Term Care Services

Fairview Home

1351 - 13th Street
Brandon, Manitoba R7A 4S6
Ph: 728-6696 Fax: 727-7616

Rideau Park Personal Care Home

525 Victoria Ave. East
Brandon, Manitoba R7A 6S9
Ph: 727-1734 Fax: 726-6690

Associated with:

- Hillcrest Place Personal Care Home
- Dinsdale Personal Care Home
- Central Park Lodge Personal Care Home

7th Street Health Access Centre

- 20 - 7th Street
Brandon, Manitoba R7A 6M8
Ph: 578-4800 Fax: 578-4950
- Adult Community Mental Health Worker
 - Chronic Disease Prevention Initiatives Facilitator
 - Community Health Nurse
 - Housing Resource Worker
 - Income Tax Program
 - Mental Health Consumer Education
 - Public Health - Travel Health Services
 - Service Navigator
 - AIDS Community Action Program Coordinator - Sexuality Education Resource Centre
 - Child and Family Services of Western Manitoba
 - Community Addictions Services - Addictions Foundation of Manitoba
 - Family Services & Housing (information and referral off peak bus pass exchange site)
 - Family Violence Outreach Worker - YWCA Westman Women's Shelter
 - Free community phone, voicemail, computer & internet access
 - Free shower, washer & dryer facilities
 - Needle exchange program/sharps drop off site

Mental Health Services

Community Mental Health

B13 - 800 Rosser Avenue, The Town Centre
Brandon, Manitoba R7A 6N5
Ph: 571-8300 Fax: 726-8684

- Psychosocial Rehabilitation
- Adult Community Mental Health
- Services for the Elderly

Child & Adolescent Treatment Centre (CATC)

1240 - 10th Street
Brandon, Manitoba R7A 7L6
Ph: 727-3445 Fax: 727-3451

Centre for Adult Psychiatry (CAP)

BRHC - AP1 - 150 McTavish Avenue East
Brandon, Manitoba R7A 2B3
Ph: 726-2923 Fax: 728-9633

Centre for Geriatric Psychiatry (CGP)

BRHC - Assiniboine Centre
150 McTavish Avenue East
Brandon, Manitoba R7A 2B3
Ph: 726-2900 Fax: 725-0911

Westman Crisis Services

Administration Office
Ph: 725-3108 Fax: 726-4665
Mobile Crisis Unit (MCU)
Ph: 725-4411 Toll Free: 1-888-379-7699
Crisis Stabilization Unit (CSU)
Ph: 727-2555

Telephone support, crisis intervention and brief residential care and outreach services.

Brandon Regional Health Centre

150 McTavish Avenue East
Brandon, Manitoba R7A 2B3
Ph: 578-4000 Fax: 578-4969

- Cancer Program
- Cast Clinic
- Day Treatment
- Emergency/Observation Unit
- Gastro Intestinal (GI) Unit
- Heart Program
- Infection Control
- Intensive Care Unit
- Medical and Surgical Units
- Mother and Baby Unit
- Lactation Consultant 578-4286
- Neonatal Intensive Care Nursery
- MB Breast Screening Program
- Ostomy Care
- Pediatrics
- Pain Management
- Prehab Program
- Renal Unit
- Respiratory Program
- Palliative Care
- Rehabilitation
- Short Term Emergency Program (STEP)
- Surgical Suite
- Tobacco Dependence Program
- Waiting Placement/Supportive Care
- Wound Care Clinic

Regional Rehabilitation

- Communication Disorders
- Children's Therapy Initiative
- Occupational Therapy
- Physiotherapy
- Neuropsychology Clinics
- Recreation Therapy

Diagnostic Services

- Angiography
- Bone Density
- CT Scan
- Echocardiology
- Electrocardiography (ECG)
- Electroencephalography (EEG)
- Fluoroscopy
- General Imaging
- Mammography
- MRI
- Nuclear Medicine
- Pacemaker Clinic
- Respiratory Services
- Ultrasound
- X Ray

Public Health Services

- A5 - 800 Rosser Avenue, The Town Centre
Brandon, Manitoba R7A 6N5
Ph: 571-8446 Fax: 726-8743
- Child Health Clinics
 - Communicable Disease Control
 - Community Nutritionist
 - Community Postpartum Program
 - Families First Home Visitors
 - Family Planning Program
 - Health Education and Promotion
 - Healthy Beginnings - A Healthy Baby Program
 - Immunization Services
 - Prenatal Sessions
 - School Health Program
 - Sexually Transmitted Infections Program
 - Unified Referral Intake System
 - Women's Health

Prairie Health Matters

Ph: 571-8357
Diabetes and Heart Health promotion

Audiology Services

Ph: 571-8366

- Hearing testing
- Counselling and education on hearing loss, hearing aides and hearing protection.
- Elks Preschool Aural Rehab Program

Medical Officer of Health

Ph: 571-8395

Midwifery Services

531 Princess Avenue
Brandon, Manitoba R7A 0P1
Ph: 571-5530 Fax: 571-5537
Please call ahead for an appointment with a midwife.

Home Care Services

- 150—B 7th Street The Town Centre
Brandon, Manitoba R7A 7M2
Ph: 571-8416 Fax: 726-5720
Referral line 571-8427
- Adult Day Program
 - Appeal Process
 - Assessment & Application for Personal Care Home
 - Assessment & Case Management
 - Equipment & Supplies
 - Family Relief
 - Home Support & Personal Care Assistance
 - Manitoba Home Oxygen program
 - Nursing & Therapy Services
 - Palliative Care
 - Care Giver Relief & Respite Care
 - Services for Seniors
 - Supportive Housing
 - Wait List Management

Regional Planning/Support/Financial Services

- Biomedical Services
- Capital Planning
- Clinical/Evaluation Analyst
- Continuous Quality Improvement
- Decision Support
- Emergency & Safety Services
- Environmental Services
- Financial Services
- Health Information & Electronic Health Record
- Health Promotion
- Human Resources
- Information Technology & Telecommunications
- Materials Management
- Nutrition Services
- Occupational Health
- Population Health
- Privacy Officer
- Property Management
- Risk Management

Allied Health Services

- Health Resource Centre
- MB Telehealth
- Medical Services
- Pharmacy, Rural Pharmacy
- Practice Guidelines Facilitator
- Spiritual Care
- Therapeutic Diets
- Volunteer Services
- Westman Regional Laboratory

You Have *An Exciting New Project* in Your Community!

What is the Project About?

The Brandon RHA and many community partners are working together to help us make healthier lifestyle choices. The intent of this project is to encourage us to become more physically active, eat healthier foods, quit smoking and better manage the stress that we experience in our lives. The project is called the Chronic Disease Prevention Initiative (CDPI).

Where Did We Start?

The Brandon RHA conducted a Community Health Assessment was conducted in the fall of 2004. The results of this assessment were examined. We looked at who we are, how we live, and what we have in the community. With many programs and services already in place, we identified people that could work together to support healthier lifestyle choices.

Over 50 representatives from community agencies, businesses, not-for-profit groups and interested citizens met. We talked about how to make our community healthier.

Who would benefit from this project?

We received funding from Manitoba Health to work with up to 20,000 people. There are many diverse groups of people living in Brandon and surrounding Rural Municipalities of Cornwallis, Elton and Whitehead. Our population is aging; the Aboriginal and immigrant populations are growing. We have many large and small industries in our region as well as government services.

A large portion of our working population is between 30 and 59 years old. In fact, there are 19,416 people in this age range - just the size we needed for our project! Often this age group is not well connected with health-related programs and services because they are busy working, raising families and have other commitments. We also know that this is an age when our lifestyle may begin to affect our health, so it is a great time to start making some changes. Because many people in this age range are employed, the worksite is a reasonable place to make connections. There are also several businesses in Brandon that are keen to be involved with employee wellness projects and many of them have resources to contribute to the project.

Why Do We Need to Prevent Chronic Diseases?

A diagnosis such as heart disease, diabetes, stroke, asthma, kidney disease and many cancers fall into the category of chronic disease. A chronic disease is a health condition that cannot be cured and we need to learn to manage it. Chronic diseases are a threat to our health and quality of life. Although the risk of developing a chronic disease increases as we age, the way we eat, how active we are, if we smoke and if we are stressed may have a direct impact on our health. Therefore, we need to shift our culture toward healthy living.

Did you know?

6 out of 10

Brandon region residents are overweight

6 out of 10

Manitobans consume fruit and vegetables less than 5 times per day

2 out of 10

Brandon region residents are smokers

9 out of 10

Brandon region residents report stress in their lives





What will the project focus on?

The following strategies have been developed to improve our health:

1) Active lifestyle strategy

Working with employees to develop physical activity programs for the workplace.

Goal: A cultural shift toward increasing physical activity among residents in the Brandon region.

2) Healthy eating strategy

Supporting healthy food choices for employees in the workplace.

Goal: Healthy foods choices are available, affordable and preferred.

3) Reduced tobacco use strategy

Supporting employees who want to quit smoking.

Goal: A decrease in the number of smokers in the Brandon region.

4) Reduced stress strategy

Adopting ways to reduce or manage stress.

Goal: A significant portion of residents in the region adopt healthy ways to manage life stressors and promote life/work balance

What Can You Do To Prevent Chronic Disease?

Some health problems are related to family history. But there are still many things you can do to lessen your chances of developing a chronic disease. Making healthy changes to your lifestyle is a great start. You may not be able to change everything at once, but you can choose one area and work on that one until you gradually incorporate all aspects of a healthy lifestyle.

- Get more active - take the stairs, go for a walk, join a fitness class
- Eat more fruits and vegetables along with foods from the dairy, meat and grains groups
- Quit smoking or cut down your use of tobacco
- Recognize stress in your life and find ways to manage it - try relaxation techniques, join a Yoga class or exercise program, make time for recreational activities

What Will We Do Next?

- Meet with businesses and employees in the region to identify programs that suit their needs
- Provide additional supports such as tobacco counselling for those who want to quit
- Organize community events to raise public awareness and encourage participation
- Provide seed funding for community projects that support healthy lifestyle choices
- Develop workplace policies that support employee wellness

Workplaces in the Brandon region are the main focus for this project. So far, businesses such as Behlen, Brandon RHA, Canada Post, Canexus, Maple Leaf, Koch Fertilizer Canada Ltd (formerly Simplot), Komfort Kitchen and Stan's Fine Foods are partners in the project.

How Will We Know If We Are Making A Difference?

As more businesses become active partners in this project, more people will be positively affected. Surveys about lifestyle choices will be conducted to assess the health of those involved. Health screening programs will be offered, which will identify personal risk factors. Employee participation in program activities will be monitored. Changes will be measured over time to see if we are making a difference.

How Can You Get Involved?

Think about a change that you would like to make in your lifestyle. Ask your boss about the health and wellness plan at your place of work. Encourage others to shift toward healthy living. For more information call the community facilitator for this project at 578-4821.

Brandon Regional Health Authority

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