Southern Health Santé Sud

Thriving Together

Anticipation: Building the Future

Annual Report
2025-26

Thriving Together

Anticipation: Building the Future

At Southern Health-Santé Sud **we believe in the power of Anticipation...**

serving as a bridge that connects present efforts to future possibilities,
making our vision a tangible and actionable aspiration.
It's about having a forward-looking perspective.

About believing positive change is attainable.
About having a confident mindset to overcome challenges, taking consistent determined steps, even when progress is slow or difficult.

About connecting us to a larger purpose, cultivating the trust in a shared future with "Healthier People. Healthier Communities. Thriving Together".

Anticipation fosters a sense of focus and momentum to drive innovation and prepare for what is to come, making the "how" as energizing as the "what".
A genuine expression of hope. A glimpse of better things to come and the will to keep seeking what is good, what is right.

A driving force between imagining and achieving, anticipation at Southern Health-Santé Sud instills a sense of commitment, allowing us to engage and co-create meaningful opportunities with our staff, our leaders, our communities, our volunteers, our patients, clients and residents, our partners, our colleagues, our stakeholders on a journey of growth and achievement while envisioning new horizons aligned with community needs in the days ahead.

Letter of Transmittal & Accountability

September 30, 2026

Honourable Uzoma Asagwara
Minister of Health, Seniors and Long-term Care

Dear Minister:

We have the honour to present the annual report for Southern Health-Santé Sud, for the fiscal year ended March 31, 2026.

This annual report was prepared under the Board's direction, in accordance with The Health System Governance and Accountability Act and directions provided by the Minister. All material including economic and fiscal implications known as of September 30, 2026 have been considered in preparing this annual report. The Board has approved this report.

Respectfully Submitted on Behalf of

Adam Monteith
Board Chair
Southern Health-Santé Sud

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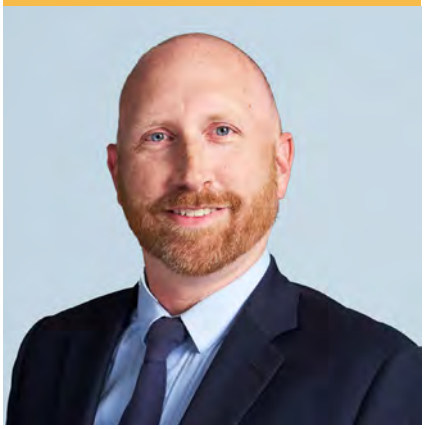
Statement of Acknowledgement of Indigenous Ancestral and Territorial Lands

Southern Health-Santé Sud acknowledges that the land on which it gathers is Treaty 1 and Treaty 3 territory and the national homeland of the Red River Métis.

We respect the treaties that were made on these territories and acknowledge harms and mistakes. We dedicate ourselves to move forward collaboratively in partnership with First Nations, Metis and Inuit peoples in the spirit of reconciliation.

Electronic copies of this report are available in English and French at www.southernhealth.ca



Message from the Board Chair

On behalf of the Board of Directors, it is once again my distinct pleasure to present Southern Health-Santé Sud's annual report for 2025-26 — a year defined by a profound sense of anticipation — the kind that transforms our efforts into tangible progress toward our mission of "Partnering with our communities, to provide safe, accessible and sustainable people-centred health care."

Indeed, our mission came to life in heartening ways this year, beginning with our accreditation success in May. Following a week-long onsite assessment of our governance, leadership, safety, and quality, surveyors confirmed that Southern Health-Santé Sud meets or exceeds standards. However, the most rewarding takeaway wasn't just the formal certification; it was the surveyors' feedback regarding our culture. In their report, they state that our core values are *"a defining element of how we engage with clients, staff and visitors… These values are not only articulated in guiding documents but are also consistently demonstrated by leaders and staff in their daily work."*

This validation is a powerful reminder that ten years ago, the Board chose to embed a Sacred Moment into its agenda—a dedicated time to reflect on our values, vision and mission. By consistently starting our meetings with the "why" before the "what", the Board anticipated cultivating a governance culture authentically rooted in people-centredness. This practice now, does more than just set the tone for our board meetings; it has evolved across the entire organization ensuring that every action we take remains anchored in our mission… This is what matters to the Board.

Our mission in motion is perhaps most visible in our regional capital projects at Bethesda Regional Health Centre, Portage Regional Health Centre and Boundary Trails Health Centre. These projects stand as physical expressions of our commitment to improving care across the region. As planning gives way to realization, there is a shared sense of momentum within our organization and the communities we serve, marking a meaningful turning point in how we deliver innovative and compassionate care. From new construction to complex, multi-phased renovations, significant milestones have been achieved — on schedule (see pages 33-34).

This progress reflects the extraordinary dedication of our teams. These projects are about far more than bricks and mortar. They are investments in access, in bringing specialized care closer to home, and in meeting the evolving needs of our communities. Most importantly, they represent a lasting commitment to the health and well-being of the people we serve.

Southern Health–Santé Sud is not only about services: it is about community. We are committed to growing alongside our communities so that we can thrive together, ensuring that people feel seen, heard and

genuinely cared for. Everyone has a role to play. Some of our best ideas come from lived experience, and as our region continues to grow and change, we actively seek out the voices of those we serve to keep innovation grounded in local insight.

This is evident in our ongoing work with Indigenous communities. The establishment of our Indigenous led Education Council has created space for meaningful dialogue around Truth and Reconciliation, shared progress and the continued work of embedding cultural safety and competence throughout our health system. I was especially encouraged that our recent accreditation feedback echoed this commitment, noting that "community partners highlighted our strength in maintaining an open and transparent approach, as well as our innovative responses to complex challenges."

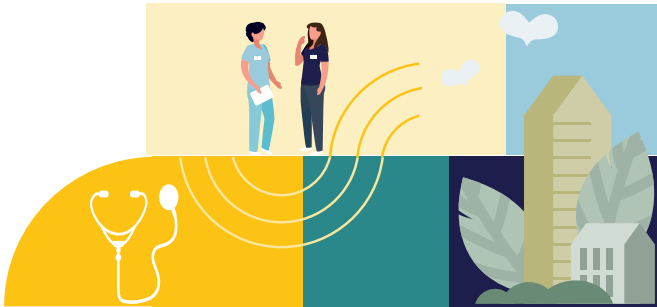
As ever, the Board continues to uphold its fundamental responsibility for sound governance and stewardship of our health care resources. With uncompromising integrity, we align with the mandate entrusted to us by the Minister of Health, Seniors and Long-Term Care, working in sync with government and other provincial partners.

To that end, the Board works closely with the leadership team to address not only the pressures of today but also anticipate and prepare for the evolving challenges in an era of increasing complexity. I want to extend my sincere gratitude to our Board members, leadership and our remarkable staff for their unwavering professionalism, collaborative spirit, and commitment to serve. It is truly a privilege to serve alongside such a talented and mission-driven group of people.

While the rapidly evolving challenges in health care today can be daunting, our strength lies in our ability to look ahead. Anticipation is more than a sentiment; it is our incentive to act. It is the bridge connecting 'what is' to 'what could be', turning tomorrow's possibilities into the actions we take today.

By building that bridge now, we reaffirm our commitment to a future of 'Healthier **people**. Healthier **communities**. **Thriving** together'.

Adam Monteith
Board Chair
Southern Health-Santé Sud

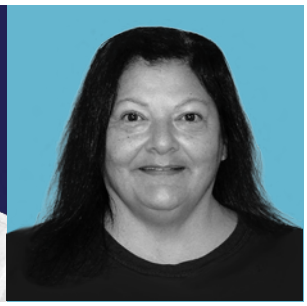


Board of Directors 2025-26

Adam Monteith, Chair

Edward Grenier, Vice-Chair

Talbot Bergsma



Arlene Cole to Dec 16, 2025

Shelley Irvine Day

Cynthia Patrick Rempel

Peter Veldhuis

Larry Driedger

Dale Gislason

Liz Merrick

Committee Membership

Audit Committee

Dale Gislason (Chair)
Committee of the Whole

Policy Review Committee

Shelley Irvine Day (Chair)
Adam Monteith
Peter Veldhuis
Dale Gislason

Community & Stakeholder Engagement Committee

Larry Driedger (Chair)
Committee of the Whole

Regional Medical Advisory Committee

Peter Veldhuis

Finance Committee

Peter Veldhuis (Chair)
Committee of the Whole

Quality & Patient Safety Committee

Cynthia Patrick Rempel (Chair)
Committee of the Whole

Board Governance

Accountable to the Minister of Health, the Board of Directors is responsible for the mandate, resources and performance of Southern Health-Santé Sud which includes the health authority's compliance with applicable legislation, regulations, provincial policies and current Ministerial mandates and directives.

In 2025-2026, the Board convened 10 times. Agendas are structured to help meet the Accreditation Canada's Governance Standards and to fulfill the functions of oversight, insight and foresight.

Board Member Education & Training

The majority of board member education, orientation and training occurs during monthly board meetings with additional opportunities made available to members between meetings. A few highlights of educational components from 2025-2026 were:

Adam Monteith
Chair

Dana Human
Interim CEO

- session with Chief Cadmus Delorme from One Hoop: Indigenous Consulting and Advisory Services
- board training event with Lynn Zapshala-Kelin: Financial Performance Advisor from the Department of Manitoba Health, Seniors and Long-Term Care
- accreditation mock survey
- program overview of personal care homes
- vacancy rate reports and data review
- capital project and building infrastructure renewal project updates
- monthly reviews of Patient Safety Learning Advisories
- auditor presentations
- multiple presentations and reviews in preparation for Strategic Plan and Annual Operating Plan submissions
- finance/budget education with Chief Financial Officer
- analysis of annual Risk Report and action updates

Process for Evaluation of Board Performance

The Board of Directors actively participates in numerous evaluation strategies.

- A comprehensive meeting evaluation following each meeting with a review of results at the next meeting to address any questions or concerns
- Annual individual assessments for board members to evaluate their own participation. Results are reviewed individually with the Board Chair.

- Annual Board assessment is completed based on governance standards. This assessment also includes an assessment of the Board Chair based on policy. Results are compiled and helps to populate the annual Quality Improvement Plan of the Board.
- Annual CEO assessments are also completed by the Board and Senior Leadership Team which helps guide development goals for the CEO.

Major Consultations with the Public and other Stakeholders:

- hosted Accreditation Canada surveyors to assess Governance standards and review Accreditation results
- toured new Portage Regional Health Centre along with project leads
- invited Dr. Chris Christodoulou, CEO of Shared Health for an overview
- participated in Blessing Ceremonies and Cornerstone Ceremonies as part of the capital projects in Portage la Prairie, Steinbach and Morden/Winkler
- several board members participated in Health Leadership meetings with Minister of Health
- Board Chair participated in multiple ministerial meetings and board chair meetings
- Annual Public Meeting took place in October on MS Teams; the Board Chair hosted and chaired the meeting
- as part of their engagement plan, board members volunteer to participate and represent the Board of Directors at identified stakeholder groups across the region when/how they meet—these groups include:

Community-Based Stakeholder Groups

- Altona Community Stakeholder Group
- Carman Community Stakeholder Group
- De Salaberry & Area Stakeholder Group
- Vita & District Stakeholder Group

Specialty Stakeholder Groups

- Indigenous Education Council
- Regional Medical Advisory Committee

Membership Sampling (varies from group to group)

- Mayor/Reeve/Council Members
- Family Services Representative
- Justice/RCMP Representative
- Economic Development
- Services for Seniors Representative
- Education (Principals/Superintendents)
- SH-SS Local Manager - Acute Care Services
- SH-SS Local Manager - Personal Care Home
- SH-SS Public/Mental Health Representatives
- SH-SS Board Members
- SH-SS CEO/Senior Leadership

Message from the Chief Executive Officer

Dana Human
Interim CEO

In February 2025 I stepped into the role of Southern Health-Santé Sud's interim CEO with fervour and resolve — a commitment that has only deepened throughout the year. Navigating through the challenges of unpredictable and turbulent times, I am in awe of the shared spirit of anticipation that propelled us through the year — the energy I felt across our organization, the eagerness for what is to come and the consistent daily efforts to get there.

And so, reflecting on fiscal 2025-26, I trust we haven't just reached the end point of a remarkable year… more importantly we've laid the foundation for an impactful future. Pulling us into that future, our anticipation reminds us why we are doing what we are doing and transforms the present. It anchors us to our vision of Healthier people. Healthier communities. Thriving together.

Moving from vision to impact

Committed to this work of great consequence for our ever-growing community we continue each year to reenergize our five-year strategic plan with a forward-looking perspective while translating it into actionable initiatives and activities that drive our daily operations.

Most notably, this commitment has built great anticipation in planning and preparation for capital expansion across our three regional centres. While construction is now complete, successfully transitioning into a new facility is a complex, multi-faceted process that extends far beyond construction. It requires aligning staff, workflows, technology and equipment to ensure patient safety and operational efficiency on opening day. Thanks to the drive and ingenuity of countless teams, comprehensive efforts have been undertaken this year to strengthen the skills and capacity of staff with training and education to ensure that the entire system works in harmony.

Valuing community

Throughout this year I've valued the opportunity to connect with communities across the region. Their anticipated commitment to better health drives us forward and I am deeply grateful for their trust.

The essence of community is more than a place on the map. It's about mutual support and a sense of belonging. Actively committed to building respectful, authentic and collaborative relationships with First Nations, Métis and Inuit communities, Southern Health-Santé Sud anticipates the guidance of Elders and Knowledge Keepers in shaping health practices as we integrate cultural capacity across all programs and services.

As we have already seen in times of adversity, our well-being is also interconnected with that of the broader community. The 2025 wildfire season was unlike anything Manitoba has ever seen, with a record number of evacuations across multiple communities. Our staff stepped up without hesitation—working additional shifts, providing weekend coverage, supporting outside assigned roles and creating new processes in real time to respond to a crisis that touched every corner of our health care system. The most powerful tool we have is our collective efforts.

Rooted in collaboration

A solid and true relationship with our provincial counterparts is fundamental in advancing provincial programs and modernizing the services we provide. The collaborative relationship with government encourages innovative problem-solving leading to breakthroughs and solutions that wouldn't be possible otherwise. As we gain fresh insights in addressing common challenges it makes us stronger as a whole.

Investing in responsible stewardship

A testament to our team's resourcefulness SH-SS continues to optimize operational performance and maintain its strong financial foundation. I am proud of our team's forward-looking stance anticipating and linking today's choices with tomorrow's outcomes. Our commitment to accountability and fiscal prudence has earned us an excellent assessment from Accreditation Canada this year ascertaining our "focus on sustainability of the system… deeply embedded in the organization's culture… a strong commitment to collaboration and resource stewardship."

Quality service. Our call.

Southern Health-Santé Sud successfully completed the first sequence of a four-year accreditation cycle in May 2025. Assessed against national health care standards that are fundamental to leadership, quality and safety across all services this first survey set the stage for subsequent, more specialized reviews in the next three years. I am especially pleased to see the Accreditation report validating the integrity of our foundational principles People-centred care, Truth and Reconciliation, Intentional Engagement and Connected and Alignment in driving effective, high-quality results.

Making it happen everyday

I often think of the collection of small, quiet, yet profound human moments that occur in just one single day in Southern Health-Santé Sud, and how, in those 24 hours, someone in our organization has most assuredly gone that extra mile to make a difference. Around

the clock our teammates bring our mission to life. Embracing the challenges as well as the opportunities our staff meet those 'mission moments' in the various roles they strive to fulfill as they authentically tell the "story of us".

I am also very grateful to the Board of Directors for their guidance and counsel over the last year as I transitioned into the CEO role. Their strategic insights and engagement throughout the year have helped move our organization into a bright future.

Building a workforce of engaged caregivers

Every employee is a caregiver in Southern Health-Santé Sud. Recruiting and maintaining a diverse workforce of over 5,000 caregivers, from administrative, supportive and clinical roles in a rural and diverse setting with rising patient volumes and infrastructure expansion, presents multi-faceted challenges. Nevertheless, this past year we welcomed an impressive number of new physicians and frontline staff across the region. We are focusing on staff recognition, well-being and inclusivity within a positive work environment. As well, we are partnering with the Healthcare Recruitment and Retention Office (HCRRO), participating in coordinated campaigns and integrating provincial training modules into our onboarding and continuing education programs.

Anticipating a promising future

Our work is not just about today; it is about paving the way for a better tomorrow. Believing in what's possible we've watched exciting new initiatives take root, taking pride in what we are building together.

As anticipation turns into action, I am incredibly excited for what we will achieve together next.

Dana Human
Chief Executive Officer (interim)
Southern Health-Santé Sud

Accreditation Feedback

People-centred care *is seen as an area of excellence where there are many examples of client and family engagement across programs and services. In particular the "What Matters to You" supports this effort in the region with meaningful conversations and encouraging people to share what matters to them during their encounter with the health system. Excellent example of quality improvement initiative to better serve indigenous patients, clients, residents and their families in a culturally safe manner. By. . . and for Indigenous peoples and communities.*

Organizational Structure

Board of Directors

Chief Executive Officer
Dana Human
(Interim)

The following represents Senior Leaders (VPs) that report to the Chief Executive Officer:

Medical Services & Chief Medical Officer	Human Resources	Community & Continuing Care	Acute Care & Chief Nursing Officer	Corporate Services & Chief Financial Officer
Aly Dhala	Jennifer Frey	Stephanie Rozsa (interim)	Lorraine Cassan	Ainsley Wiebe

For a full listing of staff who report directly to Senior Leadership, see Appendix A.

Pictured (lt-rt): Dr. Aly Dhala, Jennifer Frey, Dana Human, Ainsley Wiebe, Lorraine Cassan & Stephanie Rozsa

Southern Health-Santé Sud: A Snapshot

While the preceding chart outlines the formal reporting lines through which we operate, the Tree of Life on the following page serves as our strategic plan on a page, anticipating the long-term reach of our vision and mission ready to thrive together.

Our commitment is twofold: providing the best care today while safeguarding the well-being of generations to come. Given the complexities of today's global change and uncertainty, we are increasingly guided by the Indigenous wisdom of intergenerational stewardship recognizing that health equity requires looking beyond immediate outcomes to the lasting impact of our decisions.

Bridging Western and Indigenous perspectives, we draw inspiration from the Tree of Life. We recognize our choices and actions today as the "roots". They sustain the strength of our mission's "branches". Yet our mission's vitality depends entirely on the soil. For us that soil is the people and communities we serve.

To make sure every part of the "tree" thrives, we embrace anticipation as an act of stewardship, moving in step with our communities, engaging with them to gain a deeper understanding of their needs and aspirations to find common solutions that are sustainable and equitable.

Southern Health Santé Sud

We work every day inspired by our Core Values.

Uncompromising **INTEGRITY**
We build trust through accountability, authenticity and responsiveness in everything we do.

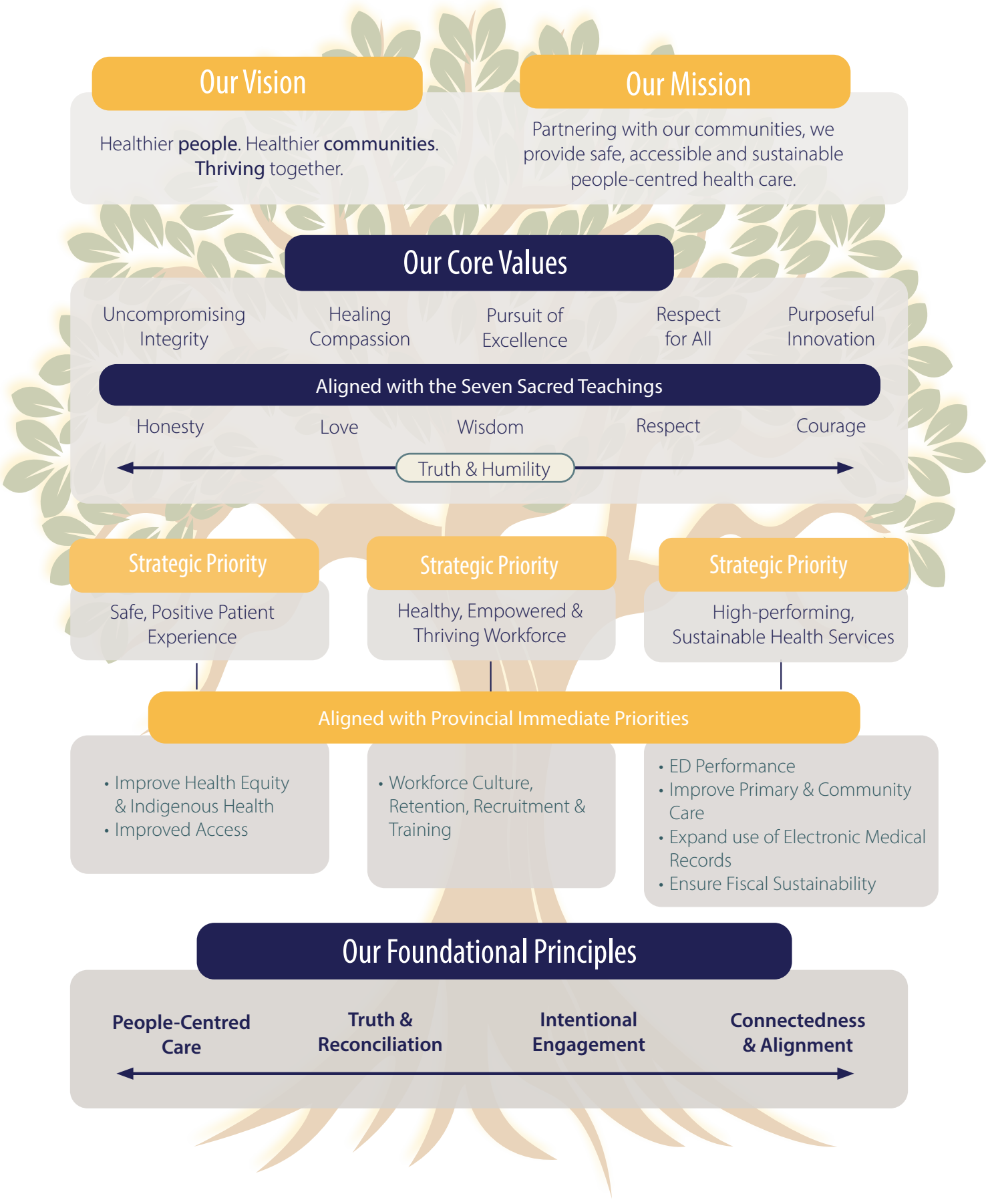
Healing **COMPASSION**
We empower hope for the whole person, being there along the journey with kindness, generosity and empathy for another's reality.

Pursuit of **EXCELLENCE**
We put forth our personal and professional best in our commitment to the highest standards of safety, quality and service.

RESPECT for All
We commit to inclusion and equity, and embrace diversity of culture, traditions, identity, ability and thought.

Purposeful **INNOVATION**
We courageously create new opportunities and collaboratively generate solutions for a sustainable future.

Strategic Plan on a Page



Population 2025

237,867

Southern Health residents

26,000

new residents since 2020 representing the largest percentage of population growth in the province

Projected to grow to over 44,000 additional residents

238,000 2025

282,000 2035

18.6% highest in the province

About the Region

Covering an expanse of 27,025 km^2 of southernmost Manitoba and situated at the geographic heart of North America, Southern Health-Santé Sud serves as a strategic continental gateway, supported by an extensive network of highway and rail systems. The regional landscape is defined by a transition from the Canadian Shield lakes and forest in the east to the fertile prairie grasslands and rolling pastures of the west.

Encompassing four of the province's ten cities, the region represents a unique blend of rural and urban vitality. This combination fosters a profound sense of shared ownership and collective responsibility with the conviction that advancing health equity is a collaborative endeavour that belongs to the entire community.

The following key trends, challenges, and opportunities highlight these critical influences.

Rapid Population Growth & Diversity

Reaching nearly 238,000 in 2025, Southern Health-Santé Sud's diverse population has increased by 12% since 2020, the highest five-year percentage growth rate in the province. With an impressive influx of immigrants, people all over the world have and continue to make their home here! Looking forward, this momentum is expected to continue with a projected increase to 282,000 by 2035.

While in some ways this growth can strengthen our community, an expanding and more diverse population also means that local needs are evolving. We are looking closely at the health challenges our residents face and how they access care so we can better serve everyone.

Higher Service Volumes

The rapid population growth in Southern Health-Santé Sud is directly driving higher service volumes with a higher number of residents requiring complex care. The sheer number of people needing care is expanding, translating into everyday pressures on services in the community that support residents navigating

through the health care system. While some specific health event percentages or rates may seem statistically stable, outright volume increases along with a broader range of health profiles are impacting primary care visits, diagnostics and surgical services, and personal care homes capacities.

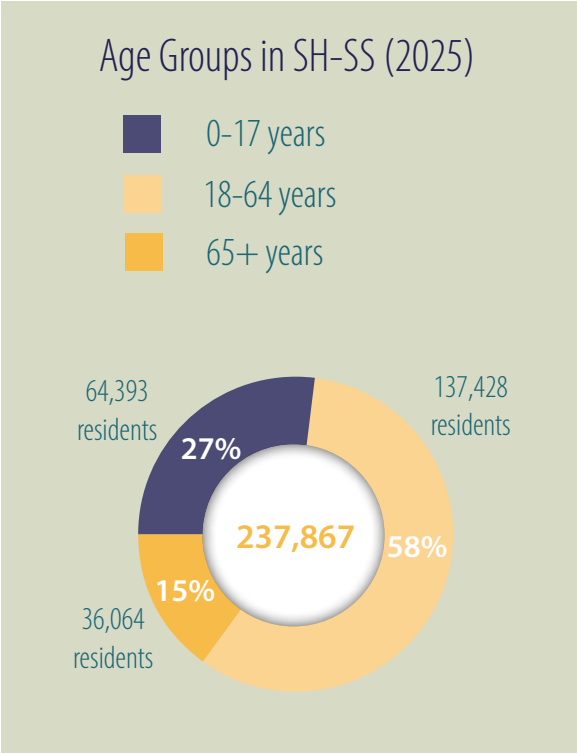
Our Strengths

Among the Healthiest Populations

Residents within Southern Health-Santé Sud continue to be the healthiest in the province with life expectancy among females and males the highest in the province. Moreover, the Socioeconomic Factor Index (SEFI) and social deprivation scores performed better than the provincial average (however material deprivation rates fared worse).

The region also demonstrates better rates for several key chronic conditions and health events compared to the rest of the province, including: diabetes, ischemic heart disease, arthritis, osteoporosis, injury hospitalizations, total respiratory morbidity and childhood asthma.

While the region presents several encouraging trends in maternal, reproductive and infant health indicators, there are also indicators highlighting areas where focused, targeted efforts can further improve population health and reduce health inequities.



Primary Care

While local continuity of care has been lower than Manitoba, the quality of primary care is a foundational strength. The network of interprofessional teams manage a remarkably broad clinical scope of diverse events and health experiences, driving a steady upward trend in continuity of care. Improving access to these professionals would generate significant benefits. Hospitalizations that were potentially avoidable with appropriate outpatient care are the lowest in the province and steadily decreasing. Hospital readmissions are the lowest in the province, and continue to decline. Finally, median wait times for personal care home admissions also decreased.

While it is encouraging to see the positive health outcomes in the region there are also important indicators of concern related to the determinants of health. Many diverse health conditions are influenced by social and environmental determinants playing a role in health inequities across the region. As noted in the 2025 health status of Manitobans report, the health care system is frequently responding to the visible outcomes of often invisible inequities.

Health Inequities

While we note that Southern Health-Santé Sud is relatively healthy overall, health advantages and burdens are not distributed equally among us with disparities persisting across different locations and demographic groups. For instance, in our region, life expectancy can vary by about 12 years depending strictly on where a person lives. Many of these differences stem from unfair, avoidable conditions — how we are treated and the environments where we are born, grow, live, play, work and age. As well, today's emerging health challenges, social and economic upheavals and service delivery realities in an extensive rural geography all expose and exacerbate underlying health inequities.

Income Gaps

Health inequities exist and are often tied to income gaps and systemic barriers. Across rural Manitoba (including all of Southern Health-Santé Sud) residents from lowest-income areas experienced poorer health outcomes and higher health care utilization than those in the highest-income areas. Only a few exceptions were noted (e.g., higher percentages of vaginal births after C-sections, lower child asthma and fewer hip replacement surgeries).

District Gaps

Where people live, impacts their health status and health care needs. We continue to see trends where disparities persist across the region. Specific districts disproportionately face the poorest social determinants and health outcomes, while others enjoy the best. Targeted action is needed to prevent people from being disadvantaged by social, economic and environmental conditions. Addressing the root causes of these inequities will ensure everyone has fair access, and the ability to act on opportunities to reach their full health potential.

The Rural Way

Our greatest strength is the pride we hold in our rural identity. We are a region defined by a rich, diverse heritage, and we know that strength comes from standing together so we can thrive together.

The realities of geographic isolation, workforce shortages and tight resources are undeniable. Yet, grounded by the land and our traditions, we overcome these through shared resourcefulness, community support and care built on authentic relationship building. Health equity requires understanding how local identity impacts daily well-being and as well as daily struggles.

Health care is a complex, people-intensive system - one size simply cannot fit all.

Service Delivery Model

Southern Health-Santé Sud supports health and wellness for all, through the delivery of a network of services in collaboration with Shared Health, Manitoba Health, Seniors and Long-Term Care and Housing, Addictions and Homelessness.

Southern Health-Santé Sud

Community Programs

- Home Care, Palliative Care & Seniors
- Mental Health & Addictions
- Rehabilitation Services
- Public Health-Healthy Living
- Primary Care
- Pharmacy
- Community Cancer Care Program (in partnership with CancerCare Manitoba within each regional centre)

Services

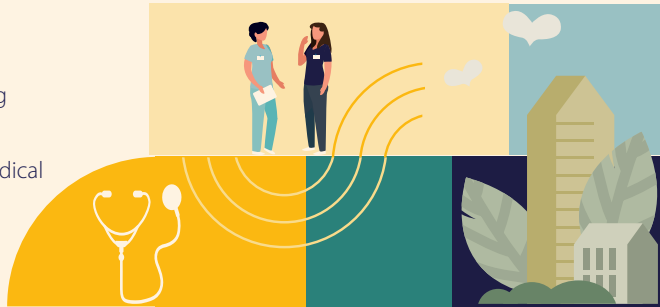
- Support Services (environmental, physical plant, nutrition, laundry, materials management)
- Acute Services (emergency, critical care, inpatient medicine, women & child health, orthopedic surgery, general surgery, dialysis, rehabilitation, Ear, Nose & Throat (ENT), mental health liaison)
- Long-Term Care (adult day program, respite services, small-house delivery model of care)
- Allied Health (dietitians, midwifery, respiratory therapists, occupational therapy, physiotherapy, speech language therapy, social work)

Corporate/Administrative

- Executive Leadership
- Human Resources
- Communications
- Finance & Planning
- Indigenous Health
- French Language Services
- Quality & Patient Safety
- Construction Management (delivery)
- Infection, Prevention & Control
- Emergency Preparedness
- Privacy & Access
- Health Information Services

In Collaboration with Shared Health

- Emergency Response Services
  - air & ground ambulance
- Diagnostic & Laboratory Services
- Human Resources Planning
  - recruitment & retention, staff wellness, bargaining
- Provincial Administrative Services
  - supply chain, digital shared services, capital planning, clinical engineering
- Provincial Coordinated Programs
  - renal program, tissue bank, transplant program, provincial pharmacy, medical assistance in dying



Challenges & Opportunities

In our complex and multi-stakeholder health care system, no challenge exists in isolation. A single catalyst, such as the growth of our vibrant population can impact the entire system. Global shifts and conflicts, emerging health issues and inequities including mental health and addictions, climate change, rising costs and evolving workforce dynamics, further intensify these pressures. Yet, with **anticipation**, we recognize that our challenges and opportunities are two sides of the same story. Our commitment to those we serve is to push past existing boundaries… For every challenge we face, there is a meaningful opportunity to listen, to learn and to improve.

Challenges Opportunities

Population Growth

Rapid population growth can strain the health care system. Factors such as rising patient volumes, evolving community needs and heightened service expectations are driving up demand. This pressure was compounded in 2025 by the re-emergence of communicable diseases, specifically a measles outbreak intensifying the strain on our resources. The demands for health care professionals are outpacing the supply of providers. Consequently, the system faces longer wait times and persistent challenges in inequitable access to care as well as rising costs.

Rapid population growth presents an opportunity as we evolve our healthcare infrastructure. (See page 32-34 for capital projects). As well, by engaging partners across all sectors, we have a unique opportunity to co-create culturally safe care and to further advance equity. Thriving together is our collective aspiration - the driving force behind everything we do. Collaboration is key.

Challenges Opportunities

Geography

Southern Health-Santé Sud is a relatively large rural region where transportation, weather logistics, hazardous winter conditions and limited digital technologies and connectivity across care settings can sometimes compromise access and create economic challenges. The Red River Valley, a natural floodplain, as well as other tributaries across the region have been flooded repeatedly through the centuries, impacting the health and lives of people in the surrounding land. The region also faces increasing risks from prolonged drought and wildfire activity, which significantly deteriorate air quality as experienced in 2025.

We are committed to bringing care closer to home. With comprehensive implementation and operational readiness planning for the significant capital projects currently taking shape across our region, technological advancements are fueling hope by transforming health care delivery in rural and under-served communities, overcoming geographic barriers and reducing long-distance travel. Remote consultations and treatment options are increasing access to care. Enhanced diagnostics such as CT, MRI and echocardiography have improved specialty care access closer to home.

Human Resources

The pandemic and a global competitive labour market have accelerated existing workforce shortages. Health care providers continue to offer safe quality care but they do so in the context of substantial vacancies and a growing demand with our growing population and the expansion of our regional centres. With an aging workforce and the struggle to recruit staff to smaller rural communities, the challenge persists while vacancies filled by agencies are a costly alternative. With mounting health care demands and acute pressures, adequate supports are essential to protect the workforce's health and resilience.

While we have seen high rates of vacancies specifically in nursing positions, our focus is to address recruitment and retention across all sectors, with a commitment to employee well-being and a more inclusive workforce. An operational readiness plan has been developed for the three regional health centres' major capital projects to ensure a smooth transition once the doors "open". For a successful start-up, workforce availability and preparedness are critical elements of operational readiness.

The scale and complexity of the challenge requires more than a local solution. Retention and recruitment remains a top priority in partnership with the province and Shared Health.

Challenges Opportunities

Accessible, Safe & Equitable Care

Access to safe and equitable care is uniquely challenging in the context of a large rural geography. Patients who want to access services struggle to find providers, face long wait times and have to navigate temporary closures of emergency department sites. Increasing patient complexity, including chronic conditions and an aging population that require more specialized care and resources can further exacerbate existing challenges.

Three major capital projects (see pages 32-34) will lay the foundation for building local service capacity and delivery. This will reduce wait times, unnecessary travel and will also meet the needs of patients closer to home by enhancing access to primary care, prevention, support for chronic conditions, mental health and addictions, rehabilitation and improved home care.

Information Technology Infrastructure & Access

In a time of rapid technology and AI development, many of our programs still rely on outdated or paper-based systems. Consistent technical support and connectivity is not always available. When information systems are available, they are not always integrated with one another or have important limitations, decreasing efficiency and increasing risk to patient and staff safety.

We are committed to forward-thinking innovation and investing in new processes and a wide range of other technologies that improve health care delivery. Finally, leveraging technology, such as telehealth will also improve access and personalize care.

The Manitoba government is actively addressing these challenges in 2026 by investing in digital tools to strengthen rural care.

While today's global environment presents significant hurdles, we are committed to navigating the challenges through meaningful engagement with the people we serve. We anticipate that **thriving together** is more than a shared vision; it needs to be a **local**, **community-driven** reality. A tangible outcome of this commitment is the realization of three major capital projects as well as the achievements listed in the following pages.

Accomplishments

Achieving a better tomorrow: Our shared understanding

We are driven by those we serve. Anticipating future challenges and opportunities while relentlessly striving to get better every single day, Strategic Plan 2026-2031 centres on three core strategic priorities that bridge where we are today with where we aim to be. By leveraging our strengths today, we are clearing the path to bring our vision and mission to life.

Safe, Positive Patient Experience	Healthy, Empowered and Thriving Workforce	High Performing, Sustainable Health Services

At Southern Health-Santé Sud we believe that how we work is as vital as the work itself. And so, we align our actions with our values through a framework of four foundational principles—the connective tissue that ensures the actions we take to implement the plan move are an expression of our core values.

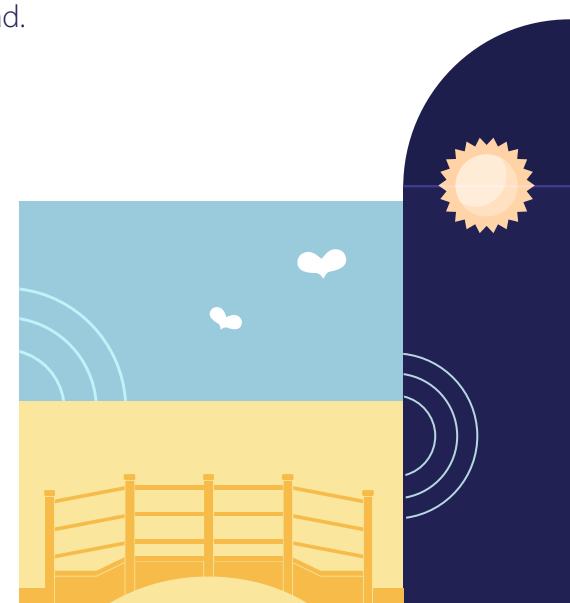
People-centred Care	Truth and Reconciliation	Intentional Engagement	Connectedness and Alignment

At the heart of our mission is the belief that health care thrives through partnership. We embrace a model of shared stewardship, rooted in the conviction that we achieve more when we work alongside our partners. By balancing overarching provincial objectives with our region's unique needs, we anticipate our collective efforts will drive meaningful progress across the entire system.

While navigating the complexities of the past year, our accomplishments tell a story of steady and effective advancement toward advancing our strategic vision. Though our work is continuous, there is value in pausing to reflect on our milestones as we prepare for the journey ahead.

Building a bridge from where we are to what can be…

Healthier **People**. Healthier **Communities**. **Thriving** Together.



Safe, Positive Patient Experience

Aligns with health system priorities

- Improved Health Equity & Indigenous Health
- Improve Access

Key Achievements for 2025-26

1. Quick Care Clinic in Steinbach transitioned to Medinav.ca new online booking application to improve access to same-day appointments
2. Received the Manitoba Order of the Buffalo Hunt for successfully working with provincial and community partners to support evacuees in Portage la Prairie and relocate long term care residents during the June 2025 wildfire evacuations.
3. Established two new community stakeholder groups using the Roots of Hope model to determine community-led suicide prevention priorities and actions*
4. Delivered multiple Francophone Cultural Awareness events to strengthen cultural diversity across the region.
5. Launched a new webpage with resources and links designed to support staff in incorporating health advisors into programs/service planning.
6. Co-designed discharge planning for clients transitioning from SH-SS facilities back to First Nation communities including supplies for wound care when required.
7. Expanded culturally safe palliative care access through community-driven care models.

* Aligns with Housing, Addictions & Homelessness government priority

> "We are very honoured to be working alongside four First Nations communities, including Long Plain First Nation, Roseau River Anishinaabe First Nation, Sandy Bay Ojibwe First Nation and Swan Lake First Nation, The work is entirely community-led and reflects the unique needs of each community.
>
> *Dana Human, CEO (interim)*

Pictured are lt-rt: Dana Human, CEO (interim) SH-SS, Lorraine Cassan, VP - Acute Care & CNO, Jenna Jones (SCO Health Transformation Senior Advisor, Governance & Intergovernmental Relations), Deanna Peyachew (SCO Executive Director), Michelle Cardinal, Regional Lead - Indigenous Health, Jennifer Frey, VP - Human Resources, Lynette McDonald (SCO Health Transformation Director, Operations & Systems Integration), Stephanie Rozsa, VP - Community & Continuing Care (interim) and Ainsley Wiebe, VP - Corporate Services & CFO

Safe, Positive Patient Experience

What Success Looks Like - Outcomes

- Meaningful engagement processes with Indigenous peoples to make system improvements.
- Activities that work towards health equity eliminating all forms of racism and removing barriers to access.
- French Language Services across the continuum of care.
- Wait time reduction to improve health care accessibility and system responsiveness.
- Patient and public engagement for health advisors to partner with the organization at various levels to help with co-designing of programs and services.
- Capital, program and service-model improvements to meet the current and future needs of the population.
- Safe experiences for patients and families.
- Access to community mental health and addictions supports.

Measure	2024-25 Actual	2025-26 Target	2025-26 Actual
Overall Inpatient Experience	68%	69%	67.6%
Hospital Harm	5.8	5.0	5.7
30-day Readmission Rate	7.2	6.2	6.8 until Feb 2026

764

total hip & knee surgeries

331

total cataract surgeries

Challenges & Future Direction:

Addressing wait times and enhancing the overall experience remain important opportunities for the organization. With many new processes underway, there is strong momentum for improvement. Continued engagement with patients, residents and families will play a key role in shaping meaningful, positive change.

Healthy, Empowered and Thriving Workforce

Aligns with health system priorities

- Workforce Culture, Retention, Recruitment and Training

Key Achievements for 2025-26

1. Hosted a wide variety of medical students and bilingual medicine students and professionals to provide networking and education opportunities. Students are given the chance to experience rural health care firsthand and get a sense of the communities where they could work.
2. Established a new hospitalist team with 3 daytime physicians and 1 on-call overnight in Portage la Prairie. Hospitalists provide focused care to patients who are in the hospital.
3. Worked with the College of Physicians and Surgeons of Manitoba to expedite licensing pathways for internationally trained physicians to practice in Manitoba allowing a smoother transition to work in the region.
4. Expanded the Human Resources Team by adding 3 new Employee Relations positions to help support Southern Health-Santé Sud employees.
5. Held two successful Human Resources forums to support current managers with new tools for succession planning.
6. Southern Health-Santé Sud StaffNET site serves as a best practice in the province with other regions planning to model their intranets and policy pages after it to improve accessibility for staff including nursing pool, agency and physicians. StaffNET receives on average 60,000 views per month and is increasing.

Healthy, Empowered and Thriving Workforce

What Success Looks Like - Outcomes

- Healthy work environment that fosters a shared sense of belonging, well-being and pride in the workplace.
- Ongoing regional education, training and other opportunities.
- Staff growing, learning and developing their leadership skills and competence.
- A holistic and robust approach to recruitment and retention, in collaboration with communities and provincial partners.
- Systems and processes support equal opportunity for employment.
- Innovative approaches that manage vacancies in the workforce.
- Operational readiness for three cornerstone capital projects.

Measure	2024-25 Actual	2025-26 Target	2025-26 Actual
Sick Time	4.3%	4.3%	4.4%
Overtime	4.0%	5.6%	4.8%
Vacancy Rate	20%	20%	20%

Challenges & Future Direction:

Southern Health–Santé Sud is actively advancing a range of innovative workforce strategies to build on early gains in reducing vacancy rates. Through focused recruitment, retention and partnerships, the organization is positioning itself to meet evolving needs, amidst a Canada-wide health care capacity challenge.

Quality Service Awards

Taking care of people – the health care workers that care for us and the patients they serve. We continue recognizing our employees, acknowledging their contributions. Quality Service Awards recognize extraordinary achievements and contributions of employees that extend their efforts beyond day-to-day performance duties by sharing gifts of compassion, patience, kindness and professionalism with clients and colleagues. Employees are nominated for their outstanding service by their peers. Award recipients for 2025 included:

Teresa Mulligan

Health Care Aide
Lorne Memorial Hospital

Brigitte Remillard

Manager, Health Services - Palliative Care (BTHC)

Paula Enns

Regional Coordinator, Infection Prevention & Control

Jayde Jonasson

Activity & Recreation Manager - Foyer Notre-Dame

Tamara Burnham

Collaborative Practice Lead - Acute Care

CEO ACHIEVEMENT AWARD

Donna Unrau

Case Coordinator - Home Care (Portage la Prairie)

TEAM AWARD

Public Health Nursing Team

High Performing, Sustainable Health Services

Aligns with health system priorities

- ED Performance
- Improve Primary & Community Care
- Expand use of Electronic Medical Records
- Ensure Fiscal Sustainability

Key Achievements for 2025-26

1. Deployed the new regional patient safety reporting software (RL) to track and manage patient incidents such as critical incidents or occurrences and near misses, improving review and follow up of events.
2. Expanded regional patient flow team in long-term care. Increased PCH admissions to 388 (increase of 90 from 2024).
3. Focused on diverting palliative individuals from the emergency department into appropriate care as quickly as possible.
4. Continued to maintain a balanced budget in 2025/26, receiving provincial recognition about the Southern Health-Santé Sud fiscal approach to zero-based budgeting.
5. Bethesda Regional Health Centre expansion complete. (see page 33)
6. Boundary Trails Health Centre phase 1 expansion complete. (see page 33)
7. The long-term care application pilot was completed in partnership with Shared Health Home and Community team as part of ongoing work to modernize the application process and support more consistent, objective decision-making for personal care home (PCH) / supportive housing (SH) placement.
8. Launched Manitoba Mental Health & Addiction Connect to create a single point of access for services*

* Aligns with Housing, Addictions & Homelessness government priority

BTHC Patient Room

PRHC Cultural Room

BRHC Renal Treatment

BTHC Entrance

PRHC Atrium

BRHC Waiting Area

High Performing, Sustainable Health Services

What Success Looks Like - Outcomes

- Financial resiliency in planning for value-based population health efforts, prevention of disease and health promotion interventions.
- A balanced budget, leveraging opportunities to improve efficiencies and effectiveness.
- Standards of care across the organization are achieved.
- Best practices in patient flow and ED management.
- Connectivity and modern digital solutions.
- Integration of services so that more patients are treated in the most appropriate settings.
- Completed capital projects.
- Improvement and enhancement of our emergency department performance, primary and community services.
- High-performing results within the Manitoba Health Performance Management Framework.

Measure	2024-25 Actual	2025-26 Target	2025-26 Actual
Emergency Department Wait Times (90th percentile)	6.1 hours	3.9 hours	6.6 hours
Left without Being Seen	11.4%	11.4%	12.5%
Emergency Department Length of Stay for Admitted Patients (median)	9.1 hours	9.1 hours	10.4 hours

Challenges & Future Direction:

The completion of several major capital projects marks a significant milestone for the region, though transitions of this scale bring workforce and technology adjustments that take time to stabilize. Emergency department performance remains our most pressing challenge. Wait times and length of stay increased this year, driven by rapid population growth, rising patient complexity and, the additional strain of measles outbreaks and wildfire response.

Targeted work is underway: the expanded regional patient flow team is diverting palliative patients from the ED to appropriate care settings, PCH admissions have increased and the newly completed capital expansions add treatment capacity across all three regional centres. Sustained improvement in ED performance, in partnership with the province and Shared Health, is a top priority for 2026-27.

Capital Projects:

a new era of local care

Three landmark capital projects designed to meet the needs of today and tomorrow - a new chapter in local health care in Southern Health-Santé Sud. From groundbreaking new build for the Portage Regional Health Centre to multi-phased renovations at Boundary Trails Health Centre and Bethesda Regional Health Centre these projects represent a giant leap forward in bringing world-class health care closer to home for our rapidly growing communities.

These projects represent more than just physical square footage. They are inspired spaces that will transform patient and family experiences, ensuring our patients receive expert care in a modern, healing environment. During project development, spaces such as the innovative Indigenous-led healing space were also created to ensure cultural relevance where patients, families and staff feel safe, supported and connected to their community.

The energy of shared anticipation in the last few years has evolved into a deep sense of accomplishment. As we transition into full operation, we extend our deepest gratitude to everyone who contributed to this success. This achievement is a testament to the tireless dedication of our staff, the instrumental generosity of our communities and the vital investment of our government partners.

Beyond Bricks and Mortar: behind the scenes

The successful delivery of a hospital's new physical building, on time and within budget, is a phenomenal achievement. However, the true test of success lies beyond the bricks and mortar. Opening a new hospital presents significant operational challenges. Proper planning is essential to ensuring service disruptions and operational downtime are minimized or eliminated entirely on Day One. Behind the scenes, there are teams working collaboratively to ensure the preparation for the moves and change is a turnkey process — the right people, in the right places, at the right time, working on the right equipment, technologies and procedures.

Operational readiness means assessing operations, getting people familiarized, oriented and thoroughly prepared for changes in space, workflow, processes, technology and equipment. It involves planning the physical spaces; the equipment, supplies, new technology; the communication; the timelines; the required workforce and training; the finances; etc.

Everything contributes to a safe and effective transition of programs and units to new spaces or processes, whether before, during and after. All this to ensure service disruptions and operational downtime are minimized on Day One—so staff can perform their jobs effectively and the community gets the care it needs. An extraordinary feat of teamwork!

Boundary Trails Health Centre

The new 24 medical and palliative care beds unit is part of a broader expansion of the Boundary Trails Health Centre campus that includes the addition of a new community services building, enhanced clinical spaces, a new operating theater, expanded emergency department, expanded cancer care department, a future labour and delivery expansion and level 2 nursery.

Phase I - Completed 2026
- new community services building
- 24 new medicine/palliative care beds
- multi-disciplinary team room
- gathering space for ceremony /family gathering

Phase II - Construction underway
- completion 2028

Bethesda Regional Health Centre

The completed capital expansion includes a 59,000 ft^2 addition with 15 new medicine and private palliative care beds, three state-of-the-art operating theatres, a pre-operative consultation room and dedicated spaces for pre- and post-operative care, expanded laboratory services and a dedicated quiet space designed for ceremonies and family gatherings.

Renal expansion - Completed 2023

New 59,000 ft^2 building - Completed 2026
- 15 new medicine/palliative care beds
- 3 new operating theatres
- new enhanced diagnostic space
- gathering space for ceremony/family

Portage Regional Health Centre

The new two-story Portage Regional Health Centre has been designed to meet the evolving health care needs of the community. The facility includes 114 acute care patient beds and will provide a full range of services, including medical care, palliative care, rehabilitation, family birthing, surgical services and special care. Expanding access to breast cancer services in southern Manitoba with the addition of new screening and diagnostic mammography services, currently scheduled to open in spring 2027.

New 269,000 ft² regional health centre - Completed 2025
- 114 inpatient beds
- computer lab & simulation lab - staff training
- Indigenous cultural space
- enhanced spaces for diagnostics
- palliative care unit with access to private balcony

In anticipation: *reflections from the heart*

"I wish everyone could see the work the team puts in. The overtime, the physical work, the shift work; meanwhile, they have their own families and separate lives after their long shifts at the hospital, caring for everyone else, always with a smile on their faces. I look forward with anticipation to what we will be able to achieve together in the coming years."

| *Patient*

"Every single person I came into contact with was very kind and friendly. They took me seriously and made a situation that could have been very traumatic into a positive one. I look to the future with absolute confidence in the care here."

| *Patient*

"The energy and hard work of our teams over the last few years are finally coming to life in these inspired spaces."

| *Staff member*

"Our health care professionals pour their hearts into making other peoples' lives better, even while anticipating the challenges to come."

| *Community member*

"Seeing these modern spaces move from blueprints to reality is a profound sense of accomplishment for everyone involved."

| *Staff member*

"I cannot say enough how kind, caring, and compassionate every single person was. The doctors made me feel so worthy of their help and were and still are determined to help me anticipate for better days ahead."

| *Patient*

Accreditation Overview

ACCREDITATION
AGRÉMENT
CANADA

Accreditation is a formal assessment conducted by outside expertise that health service organizations use to evaluate and improve the quality and safety of their services.

Moving away from the traditional four-year on-site visit model (last completed in May 2023), we have transitioned to Accreditation Canada's sequential survey model. This approach replaces the single, comprehensive survey with annual, segmented on-site surveys. It allows organizations to further advance continuous quality improvement on an ongoing basis.

In May 2025, we completed Sequence 1 of the new four-year provincial accreditation cycle. This initial phase focused on critical leadership and structural standards, including:

- Governance
- Leadership
- Emergency and Disaster Management
- Infection Prevention and Control (Leadership Criteria)
- Medication Management (Leadership Criteria)

The results from the Sequence 1 survey are available, and we are pleased to announce that Southern Health-Santé Sud has officially been awarded Accredited Status from Accreditation Canada. This means that patients, clients and residents can trust their health care providers are committed to delivering safe, effective and compassionate care.

Following the May visit we are now expanding our focus to include Acute Care standards for the upcoming May 2026 visit by educating staff, reviewing the criteria within the standards, and ensuring the organization has all necessary measures in place in readiness for Sequence 2.

Patient Safety

"Partnering with our communities, we provide safe, accessible and sustainable people-centred health care."

Our mission is built on an unwavering commitment to a culture of quality and patient safety is at the core of everything we do. It is embedded in our core values, our strategic priorities and our foundational principles.

We uphold this through a provincial quality framework that involves rigorous monitoring and measurement, meaningful reporting and valid information to anticipate risk and maintain best practices in safe service delivery.

Safety is a shared responsibility. We empower every member of our team to carry a safety mindset to ensure they meet the highest standards of safety. While health care providers strive for positive outcomes unexpected things can happen that cause unintended harm. When unforeseen outcomes—known as critical incidents—occur, our patient safety team utilizes a balanced, multi-perspective review process to generate recommendations and into invaluable system improvements.

We believe in:

- a culture of learning that promotes innovation and the development of quality and safety improvement competency, skills and processes that drives safety forward
- transparency that is balanced with being accountable
- continuous improvement, listening to diverse perspectives to make concrete system changes to prevent future harm

What is a critical incident?

A critical incident is an unintended event that occurs when health services are provided to an individual and result in harm:

- serious and undesired, such as death, disability, injury or harm, unplanned admission to hospital or unusual extension of a hospital stay; and
- not a result from the individual's underlying health condition or from a risk inherent in providing the health services. This means the unintended event does not result from the patient's illness or the risk in treating the illness, but from the health care provided.

11 Critical incidents

7 Critical incident reviews have been completed

4 Critical incidents reviews in progress

Highlights of changes made over the last year from critical incident reviews:

- Spread across the region, the current use of a piloted endoscopy safety checklist procedure which streamlines documentation and engages all staff/MDs in safety procedures.
- Implement further training on Canadian Triage and Acuity Scale (CTAS) for mental health/ substance concerns for emergency department patients.
- Developed a regional Special Care Unit policy.
- Managers are reviewing list of staff who have completed Basic Life Support training to renew their education.
- Mental Health Liaison Nurse hours have been expanded to 12 hrs/day coverage, 7 days a week; we have a position in each regional centre.
- Education on types of Guldmann slings and instruction for measuring of residents to ensure correct sling size is chosen. Ongoing training to all staff occurring.

Building *relationships* through shared learning

Partnering with our communities, we provide safe, accessible and sustainable people-centred health care — A mission rooted in trust and shared learning.

Driven by healing compassion and respect, our mission is guided by genuine and respectful partnerships and meaningful engagement with Indigenous Peoples. We believe that reconciliation is a relationship nurtured through continuous, shared learning and our collective work is strongest when we value and integrate diverse knowledges, methodologies and ways of being.

Our commitment to culturally safe care is entrenched in a deep respect for the diverse populations we serve. These efforts begin with conversations aimed at building trust and understanding with our Indigenous partners and diverse local communities—setting the groundwork for the work ahead. Through this collaborative approach, we are proudly co-designing care models —such as **palliative care**—that brings care closer to home. This work is grounded in cultural respect, community leadership and reciprocal learning.

A cornerstone of this work is providing learning opportunities for health care workers, helping bridge gaps in understanding and care delivery. These include cultural safety 'lunch-and-learn' sessions where community members share what they feel is important for health care providers to understand about their culture, their community and their nation. Guided by Elders and Knowledge Holders, staff take part in experiences such as sweat lodge ceremonies and ribbon skirt workshops increasing our understanding of Indigenous ways of knowing.

Education extends beyond workshops, with guided tours helping staff understand the historical context that continues to shape health care experiences today. In partnership with the National Residential School Museum, guided tours have been organized for staff to deepen their understanding of history and its ongoing impacts. These experiences create space for learning together and from one another.

Bringing us together under a shared model of care the work is entirely community-led and reflects the unique needs of each community. Through dedicated engagement sessions we have identified key priorities that have helped shape the direction of our work.

In close collaboration with our Indigenous partners, we co-developed community-specific information-sharing agreements that honour ownership, control, access and possession principles. These ensure that all data collected remains protected and stays within each respective community.

The long-term goal is to ensure care is both accessible and culturally appropriate, while strengthening relationships between health care providers and Indigenous communities.

Looking ahead, we remain committed to, and anticipate care that is - culturally safe and closer to home. We value a model of reciprocal learning where knowledge flows both ways and strongly believe in the principle of 'Nothing about us without us".

French Language Services

Active Offer: an invitation to a positive client experience

Southern Health-Santé Sud (SH-SS) remains committed to advancing the principle of "active offer" by supporting the availability, accessibility and visible delivery of French language services across the organization. This commitment is demonstrated through ongoing staff education, orientation, resource development and the promotion of bilingual services and supports to enhance the client experience in both official languages. Key practices supporting this commitment include:

- Strengthening of organizational awareness about the Active Offer (AO) of French Language Services through enhanced orientation, education and resource development initiatives.
- Launch of a new Active Offer Reference & Greeting Guide in both digital and print formats and development of an interactive digital virtual tour to support staff learning and engagement.
- Update to the orientation to designated bilingual positions | FLS training video as a key self-learning and management resource.
- Enhancement of access to French-language learning opportunities and promotion of Francophone cultural awareness across the organization, in collaboration with various partners.

Sustainable FLS Model

FLS Data Collection

In collaboration with all designated bilingual health authorities and service delivery organizations, Southern Health-Santé Sud participated in and contributed to the provincial OZi data collection initiative. This work focuses on streamlining and aligning data repositories and performance indicators to improve consistency, reporting efficiencies and monitoring capacity across the health system. The initiative also supports the collection of information related to designated bilingual positions (DBPs), enabling the analysis of workforce data and emerging HR trends associated with these positions.

The data collection of previous years further supported the development of a comprehensive overview of bilingual human resources and organizational practices related to French Language Services across the province. Findings identified key system strengths and opportunities for improvement.

Official Language Recognition Through Accreditation 2025

As part of the 2025 Accreditation process under the Communication Leadership portfolio, French Language Services contributed organizational information, performance data and evidence supporting official language recognition requirements.

Connecting with the Community

Advancing Francophone Representation in Patient Experience Measurement

Efforts continued to ensure the provincial Client Patient Experience Survey (CPES) reflects francophone health priorities. Standardized bilingual measures were integrated into the provincial in-patient survey, in collaboration with Francophone Health, Shared Health Manitoba.

Population Insights to Support Francophone Community Needs

Collaborated with internal research partners to strengthen the collection and use of indicators supporting the analysis of population demographics, service utilization, health status, and community needs. Francophone Health also leveraged an FLS dashboard to track key data points, including the impact of language on emergency department visits at both the provincial and regional levels.

Partnerships with Francophone Networks

Ongoing engagement with partners, stakeholders and community members supported the measurement of satisfaction with bilingual service delivery. This included regular meetings with key groups such as the *Table de concertation rurale du Sud* and *Table des gestionnaires* (bi-annually), the *Mon Équipe Santé* Steering Committee (bi-monthly) and provincial leadership tables including the Provincial Francophone Health Leadership Council and the *Vitalité Santé* Partner Leadership Table (quarterly).

Francophone Engagement and Awareness

Acted as a liaison between staff and the local francophone community, supporting awareness and engagement across the region. Promoted 10 francophone cultural activities and campaigns through multiple communication channels, including StaffNET, the Shared Health Health Providers Site and targeted email distributions. Staff were also engaged through regional and provincial campaigns, with approximately 11 opportunities to participate in prize draws tied to francophone initiatives.

Recruitment & Retention for a thriving bilingual workforce

Partnerships for Bilingual Recruitment

Partnerships and collaborations are essential to the success of bilingual recruitment within Southern Health-Santé Sud. We continue to collaborate with various community economic development groups throughout the region, local municipalities and various stakeholders.

Expanded collaboration with the Provincial Healthcare Retention & Recruitment Office through a strengthened partnership with the Bilingual Professional Recruiter supported coordinated regional hiring initiatives. This collaboration enhanced resource efficiencies and accelerated recruitment efforts for high-priority, hard-to-fill bilingual positions

within Southern Health-Santé Sud. Recruitment and retention of French-speaking health human resources (FHHR) remained a key focus, with workforce needs reflected in planning activities through ongoing community engagement and consultations with post-secondary institutions. These collaborative efforts contributed to the successful recruitment of critical bilingual positions in provincial health care programs throughout the region.

A new partnership supported expanded recruitment efforts through the Francophone Community Immigration Pilot (FCIP). With the Village of St. Pierre-Jolys selected to participate in the initiative, new opportunities were created to attract skilled francophone workers and strengthen bilingual workforce recruitment in St. Pierre-Jolys and surrounding area.

Southern Health-Santé Sud supported bilingual students in their professional development by promoting practicum placements, job shadowing and career opportunities across designated bilingual sites and programs; facilitating 23 bilingual practicum placements within the region and delivering post-secondary recruitment presentations—one of which focused exclusively on French-speaking health human resources (FHHR).

Supporting Workforce Retention

To support the retention of a thriving bilingual workforce, the province's Francophone health teams organized a special month of La *Francophonie* in March. Through a dynamic lineup of virtual events and cultural activities, the initiative celebrated the richness and beauty of the French language and culture. Employees across the health authorities participated in a variety of bilingual activities, including cooking classes and chair yoga sessions. These initiatives helped foster a sense of belonging, strengthen employee engagement and support staff retention efforts.

Ongoing Efforts, Persistent Challenges & Targeted Mitigation Strategies

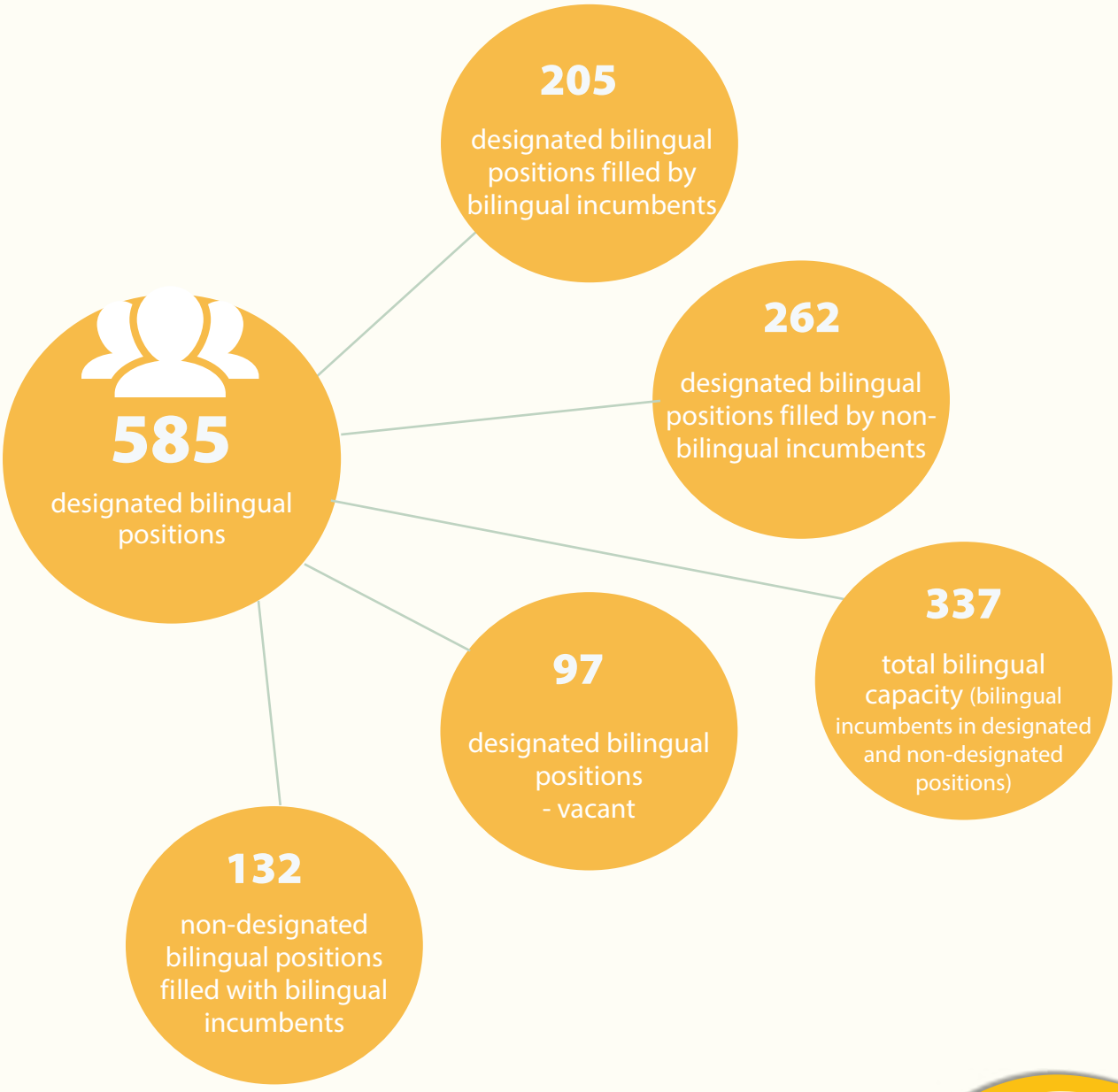
While meaningful progress has been made, challenges persist in attracting and retaining sufficient French-speaking health human resources, particularly for hard-to-fill roles and in rural areas. Limited candidate pools, competition across regions, and evolving workforce demands continue to impact recruitment outcomes.

New to Southern Health-Santé Sud, the region hosted a *Santé en français* and Francophone health networking evening for University of Manitoba bilingual medical students (12 participants) in Ste. Anne. The FLS Unit also collaborated with Santé en français to ensure regional representation in the annual congratulatory letter to Université de Saint-Boniface nursing graduates.

To mitigate these challenges, the organization has strengthened data-informed workforce planning through provincial initiatives like OZi data collection, enabling better tracking of bilingual workforce trends and needs. Internally, strategies have focused on retention and capacity-building, including enhanced access to French-language training, promotion of Francophone cultural awareness and improved onboarding supports, such as updated training resources, Active Offer tools and interpreter services.

Together, these measures aim to improve both recruitment and retention outcomes while ensuring consistent access to high-quality bilingual services across the region.

Statistics on Designated Bilingual Positions | March 2026



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 $85,000 or more.

Please visit the Southern Health-Santé Sud website under About Us - Publications & Reports for the statement of Public Sector Compensation Disclosure Report. The complete set of financial statements and the auditor's report are available by contacting:

Chief Executive Office, Southern Health-Santé Sud
180 Centennaire Dr, Southport MB R0H 1N1

Toll free: 1-800-742-6509
or access online at
www.southernhealth.ca

Report of the Independent Auditor on the Summary Financial Statements

To the members of the Board of Southern Health-Santé Sud:

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2026, and the summary statement of operations and accumulated surplus for the year then ended, are derived from the audited financial statements of Southern Health-Santé Sud (the "Region") for the year ended March 31, 2026.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with Canadian generally accepted auditing standards.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian generally accepted auditing standards. Reading the summary 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 summary 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 16, 2026.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with Canadian generally accepted auditing standards.

Auditor's Responsibility

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

Brandon, Manitoba
June 16, 2026

MNP LLP
Chartered Professional Accountants

MNP LLP
1401 Princess Avenue, Brandon MB, R7A 7L7 1.800.446.0890 T: 204.727.0661 F: 204.726.1543

Summary
Financial Statements
as at March 31, 2026

Summary Statement of Financial Position

	2026	2025
Financial Assets		
Cash and short term investments	$ 55,556,982	$ 55,299,014
Accounts receivable, net	6,977,716	6,901,336
Accounts receivable - external partners	1,973,973	1,543,072
Accounts receivable - Manitoba Health, Seniors and Long-Term Care	18,764,791	18,390,192
Accounts receivable - Manitoba Health, Seniors and Long-Term Care - vacation entitlements	8,290,205	8,290,205
Accounts receivable - Manitoba Health, Seniors and Long-Term Care - retirement entitlements	8,880,727	8,880,727
	100,444,394	99,304,546
Liabilities		
Accounts payable and accrued liabilities	38,886,995	34,144,515
Accounts payable - external partners	1,646,592	2,698,305
Unearned revenue	6,452,848	5,652,214
Accrued vacation benefit	25,105,952	22,324,265
Accrued sick leave benefit	2,803,405	3,343,097
Accrued retirement	20,180,336	19,068,389
Accrued retirement - Affiliate organizations	3,385,201	3,181,058
Long-term debt	727,090,962	601,215,385
Asset retirement obligations	11,363,530	10,930,389
	836,915,821	702,557,617
NET DEBT	(736,471,427)	(603,253,071)
Non-Financial Assets		
Inventory	2,520,180	2,219,982
Prepaid expenses	1,776,003	978,019
Tangible capital assets	795,773,554	651,073,640
Total Non-Financial Assets	800,069,737	654,271,641
ACCUMULATED SURPLUS	$ 63,598,310	$ 51,018,570

Note[1] Management is responsible for the preparation of the summary financial statements. The statements presented include only the summary statement of financial position and the summary 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.

Summary Statement of Operations and Accumulated Surplus
For the year ended March 31, 2026

	Actual 2026			Budget 2026	Actual 2025
	Operating	Capital	Total	Total	Total
Revenue					
Manitoba Health, Seniors and Long-Term Care	$ 462,979,481	$ 42,421,481	$ 505,400,962	$ 452,126,808	$ 455,742,168
Other Province of Manitoba departments	23,888,052	-	23,888,052	25,439,787	23,943,192
Government of Canada	553,436	-	553,436	419,330	662,903
Non-global patient and resident income	18,840,791	-	18,840,791	15,848,740	16,764,220
Other income	12,611,987	112,923	12,724,910	11,555,030	14,719,912
Interest	2,442,692	-	2,442,692	2,300,000	3,266,004
Donations	880,423	10,009,282	10,889,705	3,697,290	2,389,283
Ancillary operations	2,959,936	-	2,959,936	2,618,870	3,061,987
	525,156,798	52,543,686	577,700,484	514,005,855	520,549,669
Expenses					
Acute care services	175,411,305	9,395,932	184,807,237	163,046,396	170,588,166
Long-term care services	84,479,711	2,662,407	87,142,118	81,666,957	84,688,490
Medical remuneration	54,083,621	-	54,083,621	52,771,066	49,072,556
Community based therapy services	11,952,087	-	11,952,087	10,121,474	9,545,979
Community based mental health services	12,658,579	-	12,658,579	12,524,261	10,968,036
Community based home care services	63,740,109	-	63,740,109	59,357,625	59,790,396
Community based health services	28,757,612	246,072	29,003,684	28,350,182	27,066,872
Emergency medical services	-	233,782	233,782	232,600	233,782
Regional health authority undistributed	21,568,701	26,616,288	48,184,989	29,422,688	32,790,051
Affiliated organizations	70,278,116	402,878	70,680,994	67,878,430	69,761,157
Ancillary operations	2,266,232	367,312	2,633,544	2,711,006	2,642,742
	525,196,073	39,924,671	565,120,744	508,082,685	517,148,227
Surplus (Deficit) for the Year	$ (39,275)	$ 12,619,015	$12,579,740	$ 5,923,170	$ 3,401,442
Accumulated Surplus, Beginning of Year			51,018,570	51,018,570	47,617,128
ACCUMULATED SURPLUS, END OF YEAR			$ 63,598,310	$ 56,941,740	$ 51,018,570

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 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 & 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 2025-26

Service Delivery Organizations	Corporate	Patient-care Related	Human Resources & Recruitment	Total Administration
Interlake-Eastern RHA	2.41%	0.79%	0.87%	4.07%
Northern Health Region	3.59%	1.00%	1.00%	5.59%
Prairie Mountain Health	2.12%	0.46%	0.85%	3.43%
Southern Health-Santé Sud	2.49%	0.41%	1.07%	3.97%
CancerCare Manitoba	1.94%	0.60%	0.49%	3.03%
Winnipeg RHA	2.08%	0.59%	0.72%	3.39%
Shared Health	1.29%	1.01%	1.62%	3.92%
Provincial Totals	1.93% $ 150 162 626	0.72% $ 56 276 172	1.06% $ 81 951 956	3.71% $ 288 390 754

Southern Health-Santé Sud Administrative Costs

Administrative Costs Type	March 2026 $	%	March 2025 $	%
Corporate	14 085 675	2.49	13 073 126	2.54
Patient-care Related	2 302 863	0.41	2 451 592	0.48
Recruitment/Human Resources Related	6 061 130	1.07	5 952 630	1.16
Total Administrative Costs	$ 22 449 668	3.97%	$ 21 477 347	4.18%

Public Interest Disclosure (Whistleblower Protection)

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.

Public Interest Disclosure Statistics	#
Disclosures received (Subsection 18 (2a))	0
Investigations commenced (Subsection 18 (2b))	0
Finding of wrongdoing/ recommendations/corrective actions taken (Subsection 19 (2b))	0

As per subsection 18 of the Act, and in terms of reporting procedures, the following is the Whistleblower Protection Report.

Southern Health-Santé Sud
Whistleblower Reporting
180 Centennaire Dr, Southport MB
R0H 1N1
T 204-428-2720

Contact Us

Regional Office - La Broquerie
Box 470, 94 Principale St
La Broquerie MB R0A 0W0
T 800-742-6509 | F 204-424-5888

Regional Office - Morden
3 30 Stephen St
Morden MB R6M 2G3
T 800-742-6509 | F 204-822-2649

Regional Office - Notre Dame de Lourdes
Box 190, 40 Rogers St
Notre Dame de Lourdes MB R0G 1M0
T 800-742-6509 | F 204-248-7255

Regional Office - Southport
180 Centennaire Dr
Southport MB R0H 1N1
T 800-742-6509 | F 204-428-2779

Careers - Human Resources Recruitment & Retention
180 Centennaire Dr
Southport MB R0H 1N1
T 204-822-2647 | 1-800-742-6509
humanresources@southernhealth.ca

Careers - Physician Recruitment
Box 190, 40 Rogers St
Notre Dame de Lourdes MB R0G 1M0
T 204-723-0563
physicianresources@southernhealth.ca

Media Inquiries
T 204-424-2329
mediarelations@southernhealth.ca

For more information on our health services and programs, visit: www.southernhealth.ca
Email: info@southernhealth.ca
Toll Free: 1-800-742-6509

To provide feedback visit our website or see details above.

Southern Health Santé Sud

www.southernhealth.ca

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Appendix A: Organizational Structure

Organizational structure updated as of March 31, 2026.

Dana Human, Chief Executive Officer (CEO) (interim)

Senior Leadership: Ainsley Wiebe, VP- Corporate Services & Chief Financial Officer; Lorraine Cassan, VP - Acute Care & Chief Nursing Officer; Jennifer Frey, VP - Human Resources; Stephanie Rozsa, VP - Community & Continuing Care (interim); Aly Dhala, VP - Medical Services & Chief Medical Officer

Executive: Lyndsay Olson, Director - Communications; Julie Arnaud, Director - French Language Services; vacant, Regional Lead - Indigenous Services; Kyle MacNair, Clinical Change Lead; Ales Morga, Regional Lead - Quality, Planning & Performance*; Dr. Timothy Gosselin, Associate Chief Medical Officer**

Administrative Support: Kyla McCallum, Executive Assistant

Ainsley Wiebe, VP - Corporate Services & Chief Financial Officer

Ales Morga, Regional Lead - Quality, Planning & Performance*; Kristy Radke, Director - Support Services; Danielle Dupuis, Director - Financial Reporting; Darren Tindal, Director - Finance Planning

Administrative Support: Linda Boily, Executive Assistant; Carrie Tétrault, Executive Assistant

Lorraine Cassan, VP - Acute Care & Chief Nursing Officer

Roberta Thompson, Director, Health Services - Bethesda Regional Health Centre; Joel Nelson, Director, Health Services - Boundary Trails Health Centre; Lauren Doell, Director, Health Services - Portage Regional Health Centre; Vanessa Siemens, Director, Health Services - Acute Community Hospitals; Tamara Burnham, Collaborative Practice Lead; Melissa Schmidt, Director - Acute Care Standards & Projects; Amber Wiens, Clinical Change Lead - Acute & Continuing Care; Debbie Rigaux, Director - Staff Development, Infection Prevention & Control

Administrative Support: Tegan Bailey, Executive Assistant

*Reports both to CEO and VP - Corporate Services & Chief Financial Officer
** Reports both to CEO and VP - Medical Services & Chief Medical Officer

Jennifer Frey, VP - Human Resources

Jordan Fehr, Manager - Labour Relations; vacant, Manager - Occupational Health & Safety; Brooke Lashewicz, Human Resources Change Lead; Kathryn Reimer, Manager - Recruitment & Retention; Jennifer Hyra – HR Change Lead; Kirsten Petersen, Employee Relations Specialist; Lynda Peters, Employee Relations Specialist; Sabrina Minich, Employee Relations Specialist

Administrative Support: Auralee Winterburn, Executive Assistant, Nikki Moed, HR Assistant

Stephanie Rozsa, VP - Community & Continuing Care (interim)

Shauna Sanderson, Director, Health Services - Long Term Care-East; Marianne Woods, Director, Health Services - Long Term Care-West; Kelly Kaleta, Director, Health Services - Home Care, Palliative Care & Seniors; Tracy Pulak-D'Aoust, Director, Health Services - Mental Health & Addictions; Loreley Fehr, Director, Health Services - Public Health-Healthy Living; Chantelle D'Andrematteo, Director, Health Services - Primary Care; Nancy Klassen, Director, Health Services - Rehabilitation; Debbie Harms, Clinical Change Lead - Home & Community Care

Administrative Support: Jennifer Merasty, Executive Assistant

Dr. Aly Dhala, VP - Medical Services & Chief Medical Officer

Dr. Timothy Gosselin, Associate Chief Medical Officer**; Rizwan Ahmed, Regional Director - Pharmacy

Site & Community Medical Leads: Vacant, Chief of Staff - Bethesda Regional Health Centre; Dr. Ganesan Abbu, Chief of Staff - Boundary Trails Health Centre; Dr. Samreen Rizwan, Chief of Staff - Altona; Dr. Tyler Atchison, Chief of Staff - Carman; Vacant, Chief of Staff - Morris; Dr. Amanda Condon, Chief of Staff - Notre Dame & Area; Dr. Edward Tan, Chief of Staff - Portage Regional Health Centre; Dr. Michael Plett, Chief of Staff - St. Pierre; Dr. Danelle Lanouette, Chief of Staff - Ste. Anne; Dr. Myron Thiessen, Chief of Staff - Vita

Regional Medical Specialty Leads: Dr. Cornie Woelk, Medical Director - Palliative Care; Dr. Braden Arbuckle, Medicine Lead - Addictions; Dr. Richard Rusk (to Oct 2025), Medical Lead - Personal Care Home; Dr. Zachary Penner, Medical Lead - Indigenous Health

Administrative Support: Annette Dacquay, Physician Recruitment Officer; Samantha Driedger, Executive Assistant; Crystal Sawatzky, Executive Assistant/Credentialing Services; Patti Rach, Medical Education Coordinator Boundary Trails Health Centre

Appendix B: Data Dictionary

Overall Inpatient Experience: Overall positive patient experience during acute care hospital stay. A positive score is defined as a score of 9 or 10 out of 10. Indicator is a rate (%) of respondents who indicated a positive score.

Hospital Harm: Includes all post-admission occurrences of unintended harm (in one or more of 31 clinical groups) that result in treatment, alteration of treatment, or an extended stay in hospital. Harmful events that occur to patients that die in hospital are included in Hospital Harm, but mortality is not specifically addressed by the indicator.

Readmission Rates (30-Day): This indicator measures the risk adjusted rate of urgent readmission for the medical patient group.

Sick Time-Regional overall: paid and unpaid sick hours overall. (sick leave hours over worked salary hours x 100) Southern Health-Santé Sud rate includes all staff/sites.

Overtime: Overtime hours divided by planned salary hours (x100). Southern Health-Santé Sud rate includes all staff/sites.

Vacancy Rate: Percent of vacant positions overall for all Southern Health-Santé Sud staff Note: excludes discontinued positions and affiliate sites.

Emergency Department Wait Times (90th percentile): Max amount of time 9 out of 10 patients wait to see a provider (time to initial assessment - for admitted and non-admitted patients - all triage levels) are included.

Left Without Being Seen: The percentage of patients who register/are triaged in the emergency department but leave before being seen/treated/evaluated by a care provider.

Emergency Department- Length of Stay for Admitted Patients: The maximum length of stay for half (50%) of emergency department patients admitted to hospital, measured as the amount of time spent between registration in the ED and admission to hospital.

Healthier **people**. Healthier **communities**.

Thriving together.

Southern **Health** Santé Sud