Manitoba Health

Santé Manitoba

Annual Report Rapport annuel

For the year ended March 31, 2023 Pour l'exercice terminé le 31 mars 2023



Indigenous Land Acknowledgement

We recognize that Manitoba is on the Treaty Territories and ancestral lands of the Anishinaabe, Anishininewuk, Dakota Oyate, Denesuline and Nehethowuk peoples.

We acknowledge Manitoba is located on the Homeland of the Red River Métis.

We acknowledge northern Manitoba includes lands that were and are the ancestral lands of the Inuit.

We respect the spirit and intent of Treaties and Treaty Making and remain committed to working in partnership with First Nations, Inuit and Métis people in the spirit of truth, reconciliation and collaboration.

Reconnaissance du territoire

Nous reconnaissons que le Manitoba se trouve sur les territoires visés par un traité et sur les terres ancestrales des peuples anishinaabe, anishininewuk, dakota oyate, denesuline et nehethowuk.

Nous reconnaissons que le Manitoba se situe sur le territoire des Métis de la Rivière-Rouge.

Nous reconnaissons que le nord du Manitoba comprend des terres qui étaient et sont toujours les terres ancestrales des Inuits.

Nous respectons l'esprit et l'objectif des traités et de la conclusion de ces derniers. Nous restons déterminés à travailler en partenariat avec les Premières Nations, les Inuits et les Métis dans un esprit de vérité, de réconciliation et de collaboration.

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This publication is available in alternate formats, upon request. Contact: <u>department.services@gov.mb.ca</u>

Minister's Letter of Transmittal



MINISTER OF HEALTH

Room 302 Legislative Building Winnipeg, Manitoba R3C 0V8 CANADA

September 1, 2023 Her Honour, the Honourable Anita R. Neville Lieutenant-Governor of Manitoba Room 235 Legislative Building Winnipeg, MB R3C 0V8

May it Please Your Honour:

I have the privilege of presenting, for the information of Your Honor, the Annual Report of Manitoba Health, for the fiscal year ending March 31, 2023.

Respectfully submitted,

"originally signed by"

Honourable Audrey Gordon

Minister of Health



Lettre d'accompagnement de la ministre



Ministre de la Santé

Bureau 302 Palais législatif Winnipeg (Manitoba) CANADA R3C 0V8

1 septembre 2023

Son Honneur l'honorable Anita R. Neville

Lieutenante-gouverneure du Manitoba

Palais législatif, bureau 235

Winnipeg (Manitoba) R3C 0V8

Madame la Lieutenante-Gouverneure,

J'ai l'honneur de vous présenter, à titre d'information, le rapport annuel du ministère de la Santé du Manitoba pour l'exercice qui s'est terminé le 31 mars 2023.

Le tout respectueusement soumis,

La ministre de la Santé,

«original signé par»

Audrey Gordon



Deputy Minister's Letter of Transmittal



Health Deputy Minister

Room 310 Legislative Building, 450 Broadway Winnipeg, Manitoba Canada R3C 0V8

The Honourable Audrey Gordon

Minister of Health

Dear Minister:

I am pleased to present for your approval the 2022/23 Annual Report of the Department of Health.

Respectfully submitted,

"originally signed by"

Scott Sinclair

Deputy Minister of Health



Lettre d'accompagnement de la sous-ministre



Santé

Sous-ministre

Chambre 310 Édifice de l'Assemblée législative, 450 Broadway Winnipeg, Manitoba Canada R3C 0V8

Audrey Gordon

Ministre de la Santé

Madame la Ministre,

J'ai le plaisir de soumettre à votre approbation le rapport annuel du ministère de la Santé pour l'exercice 2022-2023.

Le tout respectueusement soumis,

Le sous-ministre de la Santé,

«original signé par»

Scott Sinclair



Table of Contents

Minister's Letter of Transmittal	1
Lettre d'accompagnement de la ministre	2
Deputy Minister's Letter of Transmittal	3
Lettre d'accompagnement de la sous-ministre	4
Department At a Glance – 2022/23 Results	8
Departmental Responsibilities	10
Responsabilités ministérielles	11
Organizational Structure	12
2022/23 Key Achievement Highlights	13
Department Strategy Map	22
Vision	22
Mission	22
Values	22
Department Balanced Scorecards Priorities and Objectives	22
Schéma stratégique ministériel	24
Vision	24
Mission	24
Valeurs	24
Priorités et objectifs des tableaux de bord équilibrés ministériels	24
Department Balanced Scorecards Priorities and Objectives - Details	26
Quality of Life – Improving Outcomes for Manitobans	26
Working Smarter – Delivering Client-Centred Services	33
Public Service – Delivering Client-Service Excellence	35
Value for Money – Protecting Manitoba's Bottom Line	38
FINANCIAL DETAILS	41
Consolidated Actual Expenditures	41
Summary of Authority	43
Part A: Expenditure Summary by Appropriation	45
Overview of Capital Investments, Loans and Guarantees	56
Revenue Summary by Source	57
Departmental Program and Financial Operating Information	59
Other Key Reporting	111
Departmental Risk	111
Regulatory Accountability and Red Tape Reduction	113

The Public Interest Disclosure (Whistleblower Protection) Act	114
Equity and Diversity Benchmarks	115
INDEPENDENT AUDITOR'S REPORT	116
Appendices	142
Appendix A – Other Reporting Entities	142
Appendix B – Statutory Responsibilities	145
Glossary	147

Introduction/Introduction (French)

This Annual Report is organized in accordance with departments' appropriation structure as at March 31, 2023, which reflects the authorized appropriations approved by the Legislative Assembly.

Consistent with the Main Estimates Supplement, the annual report includes Balanced Scorecards to foster operational improvements by reinforcing transparency, urgency, alignment and accountability. As Balanced Scorecards have now been implemented by all departments, the previous Performance Reporting in the appendix has been discontinued.

The Annual Report includes information on the department and its Other Reporting Entities (OREs) summary financial results, provides a more detailed breakdown on any changes to its voted budget, and also reports on the department's progress of achieving diversity milestones. The tradition of providing the financial results with any associated variance explanations continues to be provided at the sub-appropriation level. Overall, the new annual report is intended to provide a more comprehensive picture of the department's financial performance

Le présent rapport annuel est présenté conformément à la structure des postes budgétaires du ministère au 31 mars 2023, qui tient compte des crédits autorisés approuvés par l'Assemblée législative.

En cohérence avec le budget complémentaire, le rapport annuel comprend des tableaux de bord équilibrés qui favorisent l'amélioration sur le plan opérationnel en mettant l'accent sur la transparence, l'urgence, l'uniformité et l'obligation redditionnelle. Ces tableaux de bord ayant été mis en œuvre par tous les ministères, les rapports antérieurs sur la performance qui étaient inclus en annexe ont été abandonnés.

Le rapport annuel contient les résultats financiers sommaires du ministère et de ses autres entités comptables, fournit une ventilation plus détaillée des changements apportés au budget des crédits votés et rend compte des progrès du ministère en matière de diversité. Il continue de fournir les résultats financiers accompagnés d'explications sur les écarts au niveau des postes secondaires. Dans l'ensemble, le nouveau rapport annuel vise à offrir un portrait plus global de la performance financière du ministère.

Department At a Glance – 2022/23 Results

Department Name & Description	The department operates under the provisions of the legislation and responsibilities of the Minister of Health. The legislation, as well as emerging health and health care issues, guide the planning and delivery of health care services for Manitobans.
Minister	Honourable Audrey Gordon
Deputy Minister	Scott Sinclair

Other Reporting Entities	7 Service Delivery Organizations 124 Licensed Personal Care Homes	 Service Delivery Organizations: CancerCare Manitoba Regional Health Authorities: Interlake-Eastern Regional Health Authority Northern Regional Health Authority Prairie Mountain Health Authority Southern Health-Santé Sud Winnipeg Regional Health Authority Shared Health Not-for-Profit Personal Care Homes Community Health Agencies Rehabilitation Centre for Children, Inc. St. Amant
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Summary Expenditure (\$M)		
7,246	7,570	
Authority	Actual	

Core Expenditure (\$M)		Core Staffing
6,833	6,982	812.00
Authority	Actual	Authority

Coup d'œil sur le ministère – Résultats en 2022-2023

Nom et description du ministère	Le fonctionnement du ministère est régi par des dispositions législatives et est également fonction des responsabilités confiées à la ministre de la Santé. Les textes de loi, ainsi que les questions émergentes de santé et de soins de santé, orientent la planification et l'offre de services de santé à l'intention de la population manitobaine.
Ministre	Audrey Gordon
Sous-ministre	Scott Sinclair

Autres entités comptables	7 Organismes de prestation de services: 124 Foyers de soins personnels agréés	 Organismes de prestation de services: ActionCancer Manitoba Offices régionaux de la santé: ORS d'Entre-les-Lacs et de l'Est Office régional de la santé du Nord Santé de Prairie Mountain Santé Sud Office régional de la santé de Winnipeg Soins communs Foyers de soins personnels à but non lucrative Agences de santé communautaire Centre de réadaptation pour enfants, Inc. St. Amant
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Dépenses globales (en millions de dollars)		
7,246	7,570	
Dépenses autorisées	Dépenses réelles	

Dépenses ministérielles (en million	Personnel ministériel	
6,833 6,982		812.00
Dépenses autorisées	Dépenses réelles	Dépenses autorisées

Departmental Responsibilities

The Minister of Health is the cabinet minister responsible for Manitoba Health. This includes emerging health and health care issues and the planning and delivery of health care services for Manitobans.

The overall responsibilities of the minister and Health include:

- The Minister of Health is responsible for continuing to build a health care system that is: more focused on the patient; integrated and innovative; clear in its definition of roles, responsibilities and accountabilities; transparent in its measurement of outcomes through performance dashboards; equitable and accessible regardless of geography, cultural practices or social circumstances and sustainable for current and future generations.
- The department has a policy, planning, funding and oversight role to ensure that service delivery organizations (SDOs) (the regional health authorities, CancerCare Manitoba and Shared Health) and over 100 other service providers (primarily not-for-profit organizations) are accountable to provide high-quality services at a reasonable cost to Manitobans. This role is accomplished through resource allocation; legislation and regulations; planning and strategic direction; policy and standards; and performance monitoring, reporting, and management to achieve results.
- The department promotes and supports its mandate through engagement with Manitobans and the seven SDOs.
- The department provides leadership and policy support designed to influence the conditions that promotes the health of the public across all sectors of the population. The department also provides public health clinical leadership and ensures that a provincial public health system delivers to Manitobans on core public health priorities such as pandemics and communicable disease prevention.
- Legislation under the responsibility of the minister has been provided in the Statutory Responsibilities of the Minister of Health section.

Department Shared Services

Health's Finance Division

The Department of Health/Finance Division, is responsible for ensuring appropriate management and accountability of department resources and alignment with business strategies and priorities. The division provides shared services supporting budgeting, financial analysis and financial reporting for the Departments of Mental Health and Community Wellness and Seniors and Long-Term Care.

Responsabilités ministérielles

La ministre de la Santé est la ministre de la Couronne responsable de Santé Manitoba. À ce titre, elle est responsable des questions émergentes de santé et de soins de santé ainsi que de la planification et de l'offre de services de soins de santé à l'intention de la population manitobaine.

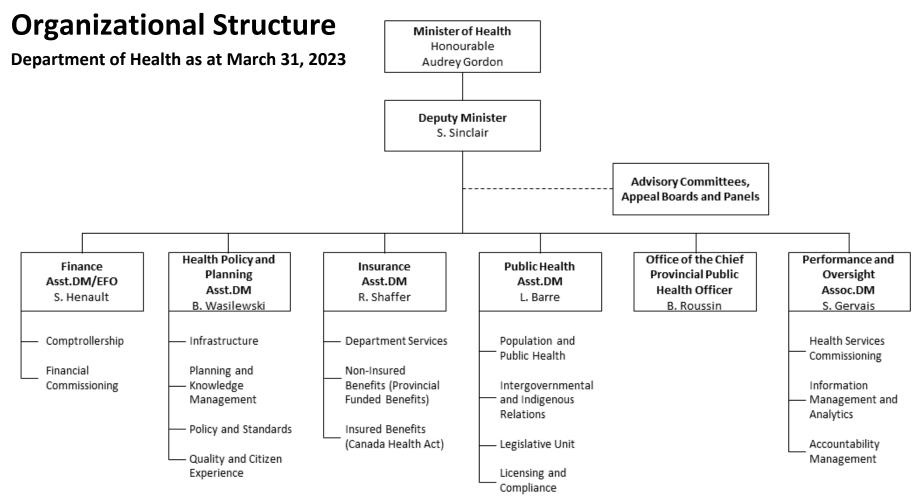
Les responsabilités générales de la ministre et du ministère de la Santé sont les suivantes :

- La ministre de la Santé est chargée de poursuivre l'édification d'un système de soins de santé : davantage axé sur le patient; intégré et innovant; clair dans sa définition des rôles, des responsabilités et des obligations redditionnelles; transparent dans sa mesure des résultats au moyen de tableaux de bord du rendement; équitable et accessible indépendamment de la région, des pratiques culturelles ou des circonstances sociales; durable pour les générations actuelles et futures.
- Le ministère joue un rôle dans l'élaboration des politiques, la planification, le financement et le contrôle afin de faire en sorte que les organismes de prestation de services (offices régionaux de la santé, Action cancer Manitoba et Soins communs) et plus de 100 autres fournisseurs de services (principalement des organismes sans but lucratif) assument la responsabilité d'offrir à la population manitobaine des services de haute qualité à un coût abordable. Il s'acquitte de ce rôle dans le cadre des fonctions suivantes : affectation des ressources; législation et réglementation; planification et orientation stratégique; établissement de politiques et de normes; surveillance, communication et gestion du rendement en vue de l'atteinte des résultats voulus.
- Le ministère fait la promotion de son mandat et l'appuie par un dialogue continu avec la population manitobaine et les sept organismes de prestation de services.
- Le ministère fournit la direction et le soutien stratégique nécessaires pour influer sur les conditions qui favorisent une bonne santé dans tous les secteurs de la population. De même, dans le domaine de la santé publique, il exerce un leadership clinique et garantit à la population manitobaine l'accès à un système de santé axé sur des priorités essentielles comme la gestion des pandémies et la prévention des maladies transmissibles.
- Les lois et règlements relevant de la responsabilité de la ministre sont énumérés dans la section intitulée « Statutory Responsibilities of the Minister of Health ».

Services partagés du ministère

Division des finances du ministère de la Santé

La division est chargée d'assurer une gestion appropriée des ressources ministérielles et l'obligation redditionnelle à cet égard, de même que la conformité aux stratégies et aux priorités opérationnelles. Elle fournit au ministère de la Santé mentale et du Mieux-être de la communauté et au ministère des Aînés et des Soins de longue durée des services partagés pour appuyer leurs activités de budgétisation, d'analyse financière et de production de rapports financiers.



Other Reporting Entities Accountable to Minister:

- CancerCare Manitoba
- Shared Health
- Non-for-profit personal care homes
- Community health agencies
- Rehabilitation Centre for Children, Inc.
- St. Amant

- Regional Health Authorities:
 - o Interlake-Eastern Regional Health Authority
 - o Northern Regional Health Authority
 - Prairie Mountain Health Authority
 - o Southern Health-Santé Sud
 - Winnipeg Regional Health Authority

2022/23 Key Achievement Highlights

During the fiscal year, Health accomplished the following:

Health Human Resource Action Plan:

- Manitoba's Health Human Resource Action Plan (HHRAP) was announced November 10, 2022 with the core objective to add 2,000 new providers to the public health care system. The HHRAP contains 35 initiatives and incentives to retain, recruit and train health care providers to the Manitoba health care system. Key initiatives include: comprehensive financial incentives for health care providers; a new provincial task force to reduce physician administrative burdens; expanding education capacity for physicians and nurses, and enhancing mental health and well-being, including increasing resiliency, reducing mandated overtime and enhancing security measures. As of March 31, 2023, 773 new health care providers were hired in the public system since the release of the HHRAP, and Manitoba Health continues to see the number of new hires grow. Throughout 2022/23, the department advanced steadfast effort to implement the first phase of the HHRAP which included:
 - Wage incentives for nurses (e.g. weekend super premium, recruitment/retention incentive, full-time incentive)
 - o Wellness bonus for nurses and allied health providers
 - o Licensure reimbursement for nurses, allied health providers and physicians
 - Established Virtual Emergency Care and Transfer Resource Service (VECTRS), a centralized resource for clinical guidance and patient transport support to support urgent care centres, emergency departments and nursing stations across the province.
 - o Established a Joint Task Force to Reduce Administrative Burdens on Physicians
 - o Expanded education capacity for nurses and physicians

Implementation on subsequent phases of the HHRAP continues for 2023/24.

Diagnostic and Surgical Recovery Task Force:

- Throughout the 2022/23 fiscal year, a total of 52,952 cases were completed as a result of Diagnostic and Surgical Recovery Task Force (DSRTF) initiatives. Of these surgical and diagnostic procedures, 39,019 were completed within the public Manitoba health system (74% through service delivery organization and system contracts), 277 occurred out-of-province (OOP) (0.5% through OOP contracts), and 13,656 took place through private-public partnerships (PPP) (26% through PPP and request for supply arrangement (RFSA) contracts). Five different contracting types have been utilized to reduce the COVID-19 backlog and improve wait times for Manitobans, including RFSA, OOP, PPP, service delivery organization, and system initiatives.
 - The DSRTF has made strides to improve public engagement and communications to share accurate, timely information with Manitobans. This has included social media posts regarding a patient story (February 23, 2023), general work of DSRTF (February 24, 2023), a patient story (February 27, 2023), and out of province partnerships for hip and knee (February 24, 2023 and March 1, 2023).
 - Alternative solutions have been developed and implemented by the DSRTF to help eliminate the barriers in patient identification in order to increase our effectiveness and improve outcomes for all

Manitobans. This included the launch of two patient portals to allow patients on wait lists to selfidentify for care; 655 hip and knee patients and 191 sleep study patients have self-identified in 2022/23. Additional portals are planned for 2023/24.

Capital and Infrastructure Projects:

- The department provided oversight to four streams of infrastructure work major capital, medical equipment including diagnostic imaging (e.g. CT and MRI), information & communications technology and safety & security (e.g. roof replacement, fire alarm systems). The focus of the projects:
 - o aligned with Manitoba's Clinical & Preventive Services Plan
 - supported clinical services in the non-hospital sector such as mental health and addictions
 - achieved efficiencies similar to a return on investment approach but without cost savings (e.g. return on investment is increased volume)
 - o improved access to services through investment leads
 - improved quality of care (patient-centered outcomes)
- The financial investment for the three streams of infrastructure work is on-going and focused on safety & security, medical equipment and information & communications technology renewal at approximately \$160M annually.
- Specific funding allocation for capital projects, highlights as follows:
 - Clinical & preventive Services Plan overall \$1.2B to support plan
 - \$455 million for new Portage la Prairie Hospital
 - \$338 million for new Neepawa Hospital
 - \$45.7M for expansion to Selkirk Regional Health Centre
 - \$30M for expansion to Bethesda Regional Health Centre (Steinbach)
 - \$110M for expansion to Brandon Regional Health Centre
 - \$26M for expansion to the Western Manitoba Cancer Centre (Brandon)
 - Other Major Capital Projects
 - \$4.9 million for additional operating room at Concordia Hospital (Winnipeg)
 - \$2.5 million for expansion of chemotherapy at Russell Health Centre includes donation of \$1.8M from Foundation
 - \$15 million for two new CT scanners installed at Selkirk Regional Health Centre

Public Health

- Successfully completed one of the largest immunization campaigns in Manitoba's history with the
 assistance of several government departments and the service delivery organizations and allied health
 professions. The provincial immunization campaign was transitioned based on public demand and the
 immunization coverage of Manitoba's population, from the COVID-19 Immunization Supersite model to
 the delivery of immunizations through regional public health services, pharmacies and primary care
 service providers, as the system moves back to the post-pandemic state.
- The department also increased its focus on recovering core public health services that were impacted during the pandemic, such as immunizations for other publicly-funded vaccines and addressing sexually transmitted and blood-borne infections (STBBIs), including HIV. It implemented significant new measure to address the increasing rates of STBBIs, including piloting of a new paraprofessional role to improve case follow-up, producing education and promotional information for the public and health providers,

updating STBBI treatment guidelines, and streamlining reporting processes and incentives for providers to improve STBBI reporting and case management.

- During 2022/23, the department completed reviews at all 124 personal care homes in Manitoba, held follow-up licensing meetings with regional health authorities, and issued 124 personal care home operating licences for the 2023 calendar year. This is a particular achievement as each facility historically received a review once every two years; completing annual standards reviews ensures operators comply with regulatory requirements and helps to ensure that residents of provincially-licensed personal care homes receive quality care. It also made significant improvements to the processes of the Protection for Persons in Care Office.
- Expanded Manitoba's high dose influenza vaccine program to include all Manitobans 65 years of age and older during the 2022/23 Seasonal Influenza Program.

Acts, legislation and regulatory reviews:

- Proclamation of The Regional Health Authorities Amendment Act (Health System Governance and Accountability) to support the health system transformation. Among other things the Act
 - (a) amended The Regional Health Authorities Act to:
 - (i) establish and set out the duties and responsibilities of the provincial health authority and designate Shared Health as the provincial health authority
 - (ii) establish and set out the duties and responsibilities of the cancer authority and designate CancerCare Manitoba as the cancer authority
 - (iii) strengthen the accountability requirements for health authorities
 - (iv) rename the Act as The Health System Governance and Accountability Act

Three regulations were amended, two regulations were repealed and two new regulations were made to implement the amendments. In addition, the amending Act repealed The Addictions Foundation Act, and the operations, property, etc. of the Foundation were transferred to health authorities, and repealed The Hospitals Act.

- The College of Registered Psychiatric Nurses of Manitoba transitioned to governance under The Regulated Health Professions Act and The Registered Psychiatric Nurses Act was repealed.
- The Universal Newborn Hearing Screening Act legislative review was completed and published on the EngageMB website, thereby ensuring access to this service for newborns all across Manitoba.
- The department developed a suite of five departmental policies providing direction and guidance to health authorities in order to enable the proclamation and implementation of The Regional Health Authorities Amendment Act (Health System Governance and Accountability). These policies guide the preparation of the Clinical and Preventive Services Plan and the delivery of core health services, and set expectations for annual planning and reporting requirements.

Performance and Oversight

 Through continued expansion of the provincial health data repository, the department provided analytical support that enabled and facilitated public access to situational data and statistics such as Urgent Care Wait Times, Diagnostic and Surgical Services Wait Times, and Cancer Care. At a national level, the department continued to support the public reporting initiatives led by the Canadian Institute for Health Information and Statistics Canada on a wide variety of health information matters. • Elevated the use of data in performance conversations through engagement with regional leaders. Performance discussions were focussed to drive improvements and accountability throughout the healthcare system in key areas including; improving the health outcomes of Manitobans, improving the patient's experience of care, improving the workforce's experience of providing care and reducing the cost of care in Manitoba. This included holding the first ever Provincial Performance Summit to bring together health leaders across Manitoba to share best practices and strengthen relationships in a post-COVID-19 environment, working together as one health system.

Insurance

- Registration and Client Services team members actively supported the Ukrainian Reception Centre, registering 12,604 adults and 3,971 children between April 19, 2022 and March 31, 2023. This allowed Ukrainians seeking shelter and safety in Manitoba health care access.
- Received and adjudicated claims for 32.8 million physician services, 718,753 optometric services, 738,167 chiropractic services, and 7,724 oral surgery services. More physician services, optometric services, chiropractic services, and oral surgery services were adjudicated than during the previous fiscal year, with oral surgery services increasing by 46.6%.
- Manitoba Health Registration and Client Services handled the record increase of nearly 66,900 net newcomers and immigrants to Manitoba. This supports business and financial drivers for Manitoba's economic stability through the second year of the pandemic.

Principales réalisations en 2022-2023

Au cours de l'exercice, le ministère de la Santé a accompli les réalisations suivantes.

Plan d'action sur les ressources humaines en santé

- Annoncé le 10 novembre 2022, le Plan d'action sur les ressources humaines en santé du Manitoba a pour principal objectif d'ajouter 2 000 nouveaux fournisseurs au système public de soins de santé. Ce plan contient 35 initiatives et mesures incitatives pour retenir, recruter et former des soignants qui pourront travailler au sein du système de santé du Manitoba. Les principales initiatives comprennent : un éventail complet d'incitatifs financiers à l'intention des professionnels de la santé; un nouveau groupe de travail provincial chargé de réduire le fardeau administratif des médecins; l'élargissement des formations offertes aux médecins et au personnel infirmier; l'amélioration de la santé mentale, du bien-être et de la résilience, la réduction des heures supplémentaires obligatoires; le rehaussement des mesures de sécurité. Au 31 mars 2023, 773 nouveaux fournisseurs de soins de santé avaient été embauchés dans le système public depuis la publication du Plan d'action, et la hausse des nouvelles embauches se poursuit. Tout au long de 2022-2023, le ministère a déployé des efforts soutenus pour mettre en œuvre la première phase du Plan d'action, qui prévoyait :
 - des incitations salariales pour le personnel infirmier (p. ex. super prime de fin de semaine, mesures incitatives pour le recrutement et le maintien en poste, prime temps plein);
 - o une prime pour le bien-être des infirmières et infirmiers et des professionnels paramédicaux;
 - le remboursement des frais de permis d'exercice pour les infirmières et infirmiers, les professionnels paramédicaux et les médecins;
 - le lancement du Service de soins d'urgence virtuels et de transfert une ressource centralisée d'orientation clinique et d'aide au transport des patients – pour appuyer les centres de soins d'urgence, les services d'urgence et les postes de soins infirmiers de la province;
 - la création d'un groupe de travail conjoint qui cherchera des solutions pour réduire le fardeau administratif des médecins;
 - une augmentation des places dans les programmes de formation en sciences infirmières et en médecine.

La mise en œuvre des prochaines phases du Plan d'action se poursuivra en 2023-2024.

Groupe de travail sur le rétablissement des services chirurgicaux et diagnostiques

Tout au long de 2022-2023, 52 952 interventions chirurgicales et procédures de diagnostic ont été réalisées à la suite des initiatives du Groupe de travail sur le rétablissement des services chirurgicaux et diagnostiques. De ce nombre, 39 019 ont eu lieu au sein du système de santé public du Manitoba (74 % dans le cadre de contrats conclus entre des organismes de prestation de services et le système de santé), 277 se sont tenues à l'extérieur de la province (0,5 % par l'entremise de contrats conclus avec des parties situées à l'extérieur de la province) et 13 656 ont été exécutées dans le cadre de partenariats public-privé, ou PPP (26 % par l'entremise de PPP et d'arrangements en matière d'approvisionnement). On a ainsi utilisé cinq différents types de mécanismes pour réduire les arriérés imputables à la COVID-19 et les temps d'attente pour la population manitobaine : arrangements en matière d'approvisionnement, contrats

conclus avec des parties à l'extérieur de la province, partenariats public-privé, organismes de prestation de services et initiatives lancées au sein même du système de santé.

- Le Groupe de travail a pris des mesures pour améliorer la mobilisation du public et les communications afin de transmettre des renseignements précis en temps opportun à la population manitobaine. Il a notamment diffusé des publications dans les médias sociaux pour relater des histoires de patients (23 et 27 février 2023), donner un aperçu des principaux travaux du Groupe de travail (24 février 2023) et présenter les partenariats conclus hors province pour la réalisation d'arthroplasties du genou et de la hanche (24 février et 1^{er} mars 2023).
- Le Groupe de travail a élaboré et mis en œuvre des solutions de rechange pour contribuer à éliminer les obstacles à la prise en charge des patients afin d'améliorer notre efficacité et offrir de meilleures perspectives à l'ensemble de la population manitobaine. Parmi ces solutions figurait le lancement de deux portails pour permettre aux patients qui figurent sur des listes d'attente de s'inscrire afin de profiter de nouvelles options de soins : 655 patients en attente d'une arthroplastie du genou et de la hanche et 191 patients en attente d'une évaluation des troubles de sommeil se sont inscrits en 2022-2023. D'autres portails devraient voir le jour durant l'exercice 2023-2024.

Projets d'immobilisations et d'infrastructures

- Le ministère a supervisé quatre volets de travaux d'infrastructure : grands projets d'immobilisations; équipements médicaux (dont les dispositifs d'imagerie diagnostique comme la tomodensitométrie et l'imagerie par résonnance magnétique); technologies de l'information et des communications; sécurité et protection (p. ex. remplacement de la toiture, systèmes d'alarme incendie). Ces projets :
 - o sont arrimés au Plan de services cliniques et préventifs du Manitoba;
 - ont appuyé l'offre de services cliniques dans le secteur non hospitalier (p. ex. santé mentale et lutte contre les dépendances);
 - ont permis la réalisation de gains d'efficacité de façon comparable à une approche reposant sur le rendement du capital investi, mais sans économies de coûts (p. ex. le rendement du capital investi prend la forme d'un volume accru);
 - o ont facilité l'accès aux services grâce à des pistes d'investissement;
 - ont amélioré la qualité des soins (résultats centrés sur le patient).
- L'investissement financier est soutenu pour trois volets de travaux d'infrastructure (sécurité et protection, équipements médicaux et renouvellement des technologies de l'information et des communications), à raison d'environ 160 millions de dollars par an.
- Parmi les principaux montants accordés pour des projets d'immobilisations, mentionnons les suivants :
 - projets réalisés dans le cadre du Plan de services cliniques et préventifs du Manitoba (pour un total de 1,2 milliard de dollars) :
 - 455 millions de dollars pour le nouvel hôpital de Portage-la-Prairie;
 - 338 millions pour le nouvel hôpital à Neepawa;
 - 45,7 millions pour l'agrandissement du Centre de santé régional de Selkirk;
 - 30 millions pour l'agrandissement du Centre de santé régional de Bethesda (Steinbach);
 - 110 millions pour l'agrandissement du Centre de santé régional de Brandon;
 - 26 millions pour l'agrandissement du Centre de lutte contre le cancer de l'ouest du Manitoba (Brandon);
 - o autres grands projets d'immobilisations :

- 4,9 millions de dollars pour l'ajout d'une salle d'opération à l'Hôpital Concordia (Winnipeg);
- 2,5 millions pour l'agrandissement de l'unité de chimiothérapie au Centre de santé de Russell (ce qui comprend des dons de 1,8 million recueillis dans le cadre d'une fondation consacrée à cette cause);
- 15 millions pour deux nouveaux tomodensitomètres au Centre de santé régional de Selkirk.

Santé publique

- La Santé publique a mené à bien l'une des plus grandes campagnes de vaccination de l'histoire du Manitoba avec le concours de plusieurs ministères, organismes de prestation de services et professions paramédicales. La sortie de la pandémie s'est accompagnée d'une transition de la campagne d'immunisation provinciale contre la COVID-19. Ainsi, en réponse à la demande du public et à la lumière de la couverture vaccinale au Manitoba, les vaccins auparavant administrés dans des supercliniques sont maintenant accessibles par l'entremise des services de santé publique régionaux, de pharmacies et de fournisseurs de soins primaires.
- Le ministère a également concentré davantage ses efforts sur le rétablissement des services de santé publique de base qui ont subi les contrecoups de la pandémie, comme l'administration des autres vaccins financés par le secteur public et la lutte contre les infections transmissibles sexuellement et par le sang (ITSS), dont celles imputables au virus de l'immunodéficience humaine (VIH). Il a mis en œuvre de nouvelles mesures importantes pour juguler l'augmentation de ces infections : création d'un nouveau rôle paraprofessionnel pour améliorer le suivi des cas, production de renseignements éducatifs et promotionnels pour le public et les professionnels de la santé, mise à jour des directives pour le traitement des ITSS, simplification des processus de déclaration et nouvelles mesures incitatives à l'intention des soignants pour améliorer la déclaration des ITSS et la gestion des cas.
- Au cours de l'exercice 2022-2023, le ministère a procédé à l'inspection de l'ensemble des 124 foyers de soins personnels du Manitoba, tenu des réunions de suivi relatives à l'octroi de permis avec les offices régionaux de la santé et délivré 124 permis d'exploitation de foyers de soins personnels pour l'année civile 2023. Il s'agit d'une réalisation digne de mention du fait que les établissements étaient auparavant inspectés une fois tous les deux ans. Les examens annuels de la conformité aux normes permettent au ministère de s'assurer que les exploitants de foyers de soins personnels autorisés par la Province se conforment aux exigences réglementaires et qu'ils offrent des soins de qualité à leurs résidents. Le ministère a également amélioré de façon notable les processus de l'Office de protection des personnes recevant des soins.
- Dans le cadre du Programme manitobain de vaccination contre la grippe saisonnière 2022-2023, l'accès à la vaccination antigrippale à forte dose a été élargi à toutes les personnes de 65 ans et plus.

Lois, mesures législatives et examens réglementaires

• La Loi modifiant la Loi sur les offices régionaux de la santé (gouvernance et obligation redditionnelle au sein du système de santé) est entrée en vigueur par proclamation pour soutenir la transformation du système de santé. Cette loi permet notamment :

a) de modifier la Loi sur les offices régionaux de la santé pour :

(i) établir et définir le mandat de l'office provincial de la santé et désigner Soins communs à titre d'office provincial de la santé;

- (ii) établir et définir le mandat de l'office des soins contre le cancer et désigner la Société Action cancer Manitoba à titre d'office des soins contre le cancer;
- (iii) renforcer les exigences en matière d'obligation redditionnelle des offices de la santé;
- (iv) changer le nom de la Loi, qui est devenue la Loi sur la gouvernance et l'obligation redditionnelle au sein du système de santé.

Trois règlements ont été modifiés, deux autres ont été abrogés et deux nouveaux règlements ont été pris pour mettre en œuvre les modifications. De plus, la loi modificative a abrogé la Loi sur la Fondation manitobaine de lutte contre les dépendances, transféré les activités, les biens, etc., de la Fondation aux offices de la santé et abrogé la Loi sur les hôpitaux.

- La Loi sur les professions de la santé réglementées régit dorénavant l'Ordre des infirmières et des infirmiers psychiatriques du Manitoba, et la Loi sur les infirmières psychiatriques a été abrogée.
- L'étude en comité de la Loi sur le dépistage systématique des déficiences auditives chez les nouveau-nés a été achevée, et ses résultats ont été publiés sur le site Web Participation MB, garantissant ainsi l'accès universel à ce dépistage pour les nouveau-nés du Manitoba.
- Le ministère a élaboré une série de cinq politiques ministérielles fournissant une orientation et des conseils aux offices de la santé afin de permettre l'entrée en vigueur par proclamation et la mise en œuvre de la Loi modifiant la Loi sur les offices régionaux de la santé (gouvernance et obligation redditionnelle au sein du système de santé). Ces politiques orientent la préparation du Plan de services cliniques et préventifs et la prestation des services de santé de base, en plus de définir les attentes en matière de planification et de rapports annuels.

Rendement et supervision

- Grâce à l'expansion continue de l'entrepôt provincial de données sur la santé, le ministère a fourni un soutien analytique afin de permettre et de faciliter l'accès du public à des données et à des statistiques sur la situation dans le système de santé, par exemple au sujet des temps d'attente (salles d'urgence, services de diagnostic et de chirurgie) et des soins contre le cancer. À l'échelle nationale, le ministère a continué de soutenir les initiatives de l'Institut canadien d'information sur la santé et de Statistique Canada relatives à la production de rapports publics portant sur de nombreuses et diverses questions en matière d'information sur la santé.
- Le ministère a mobilisé ses dirigeants régionaux afin qu'ils améliorent l'utilisation de données dans leurs entretiens portant sur le rendement. Ces discussions ont été axées sur l'amélioration et l'obligation redditionnelle dans l'ensemble du système de santé, dans des domaines clés comme l'amélioration des résultats en matière de santé de la population, le rehaussement de l'expérience des patients et de celle des travailleurs au moment où ils fournissent des soins à cette clientèle, et la réduction des coûts des soins au Manitoba. Ces efforts ont notamment porté sur la tenue du tout premier sommet provincial sur le rendement, qui a réuni des responsables de la santé du Manitoba qui ont ainsi pu échanger sur leurs pratiques exemplaires et renforcer leurs relations au sortir de la pandémie, en travaillant main dans la main au sein d'un seul et même système de santé.

Assurances

• L'équipe de la Section de l'inscription et du service à la clientèle a activement soutenu les activités du centre d'accueil des réfugiés ukrainiens, enregistrant l'arrivée de 12 604 adultes et de 3 971 enfants entre

le 19 avril 2022 et le 31 mars 2023. Cette initiative a permis aux Ukrainiens qui cherchaient refuge et protection d'accéder à des soins de santé au Manitoba.

- Le ministère a reçu et évalué des demandes de règlement pour 32,8 millions de services de médecins, 718 753 services d'optométrie, 738 167 services de chiropractie et 7 724 services de chirurgie buccale. Un plus grand nombre de demandes pour des services de médecins, d'optométrie, de chiropractie et de chirurgie buccale ont été évaluées comparativement à l'exercice précédent, et on enregistre une hausse de 46,6 % du nombre de demandes reçues pour des services de chirurgie buccale.
- La Section de l'inscription et du service à la clientèle de Santé Manitoba a géré l'augmentation record nette de près de 66 900 nouveaux arrivants et immigrants dans la province. Par l'entremise de ce travail, le ministère a soutenu le renforcement de facteurs opérationnels et financiers qui ont joué un rôle déterminant pour la stabilité économique du Manitoba durant la deuxième année de la pandémie.

Department Strategy Map

The department strategy map lists the four Government priority areas: Quality of Life, Working Smarter, Public Service and Value for Money, with the department's objectives listed under each priority.

The Annual Report includes progress on advancing priorities and objectives outlined in the 2022/23 Supplement to the Estimates of Expenditures and are described in further detail following the strategy map.

Vision

Working together toward excellent whole person healthcare for all Manitobans

Mission

To ensure Manitoban patients, families and seniors have access to quality timely health care wherever they live through a health care system that is sustainable and accountable.

Values

- Champion Quality
- Foster Adaptability
- Be Accountable
- Respect the Workforce
- Value the Community

Department Balanced Scorecards Priorities and Objectives

Quality of Life – Improving Outcomes for Manitobans

- 1. Create Conditions to Improve Quality of Life
- 2. Advance Truth and Reconciliation

"Truth" has been added to the original objective titled "Advance Reconciliation".

"There is no Reconciliation without the Truth. If you ever see Reconciliation on its own without Truth, let people know that they need the Truth before there is Reconciliation."

- As told to Helen Robinson-Settee by the Late Dr. Donald Robertson, Elder, Indigenous Inclusion Directorate Advisory Council, Manitoba Education and Early Childhood Learning

Working Smarter – Delivering Client-Centred Services

- 3. Foster and Advance Innovation
- 4. Reduce Red Tape
- 5. Involve Manitobans in Decision Making

6. Be Transparent

Public Service – Delivering Client-Service Excellence

- 7. Enhance Client Services
- 8. Build Our Capacity to Deliver
- 9. Advance Inclusion
- 10. Strengthen Respect at Work

Value For Money – Protecting Manitoba's Bottom Line

- 11. Provide Value for Money
- 12. Balance the Budget

Schéma stratégique ministériel

Le schéma stratégique ministériel dresse la liste des quatre domaines prioritaires du gouvernement (qualité de vie, gestion plus ingénieuse, fonction publique, optimisation des ressources), les objectifs ministériels étant répertoriés sous chacune de ces priorités.

Le rapport annuel rend compte des progrès réalisés dans l'avancement des priorités et des objectifs qui sont présentés dans le budget complémentaire de 2022-2023 et décrits plus en détail à la suite de ce schéma.

Vision

Travailler ensemble pour offrir à tous les Manitobains d'excellents soins de santé qui tiennent compte de l'ensemble de la personne.

Mission

Pour veiller à ce que les patients, les familles et les personnes âgées du Manitoba aient accès à des soins de santé de qualité dans des délais raisonnables, là où ils habitent, par le biais d'un système de soins de santé viable et responsable.

Valeurs

- Promouvoir la qualité
- Favoriser l'adaptabilité
- Être responsable
- Respecter la main-d'œuvre
- Valoriser la communauté

Priorités et objectifs des tableaux de bord équilibrés ministériels

Qualité de vie – Améliorer les résultats pour les Manitobains

- 1. Créer des conditions qui permettent d'améliorer la qualité de vie
- 2. Faire progresser la vérité et la réconciliation

Ajout de « vérité » à l'objectif original intitulé « Faire progresser la réconciliation.

« Sans la vérité, il n'y a pas de réconciliation possible. S'il est question de réconciliation seulement sans la vérité, dites qu'il faut connaître la vérité avant de parler de réconciliation. »

- Propos confiés à Helen Robinson-Settee par le regretté Donald Robertson, Aîné, Conseil consultatif de la Direction générale de l'inclusion des Autochtones, Éducation et Apprentissage de la petite enfance Manitoba.

Gestion plus ingénieuse – Fournir des services axés sur le client

3. Favoriser et promouvoir l'innovation

- 4. Réduire la bureaucratie
- 5. Faire participer les Manitobains à la prise de décisions
- 6. Faire preuve de transparence

Fonction publique – Offrir un service à la clientèle d'excellence

- 7. Améliorer les services aux citoyens
- 8. Renforcer notre capacité d'exécution
- 9. Favoriser l'inclusion
- 10. Renforcer le respect dans nos milieux de travail

Optimisation des ressources – Protéger les résultats financiers du Manitoba

- 11. Dépenser judicieusement
- 12. Équilibrer le budget

Department Balanced Scorecards Priorities and Objectives - Details

The following section provides information on key performance measures for Health for the 2022/2023 reporting year. All Manitoba government departments include a performance measurement section in a standardized format in their annual reports.

Performance indicators in Manitoba government annual reports are intended to complement financial results and provide Manitobans with meaningful and useful information about government activities and their impact on the province and its citizens.

Quality of Life – Improving Outcomes for Manitobans

1. Create Conditions to Improve Quality of Life

Key Initiatives

- Response to the COVID-19 pandemic and recovery of core public health services: The department took on responsibility for the COVID-19 immunization program, as it shifted out of the Vaccine Task Force structure. Consistent with the approach from the beginning of the vaccine campaign and with public health approaches in general, COVID-19 immunization planning continued to be data/epidemiology driven and delivered through partnerships between regional health authorities and community stakeholders. During this period, 550,431 doses of COVID-19 vaccine were administered. Eligibility for vaccine expanded to include children six months to four years. Additionally, the COVID-19 bivalent vaccine became available and was recommended as a booster in fall 2022. These programs were the focus of immunization efforts in 2022/23, particularly during the fall and winter respiratory season where there was an increased volume of clinics and opportunities for immunization. Vaccines were offered through primary care providers, pharmacies, and regional public health clinics (fixed sites, pop up clinics and outreach). Urban Indigenous clinics were once again available in 2022/23 to ensure culturally-accessible options were available for Indigenous populations in Manitoba. As the COVID-19 situation evolved, the department also began to focus more on recovering core public health services that were impacted during the pandemic, such as immunizations for other publicly-funded vaccines and sexually transmitted and blood-borne infections.
- Immunization rates: COVID-19 vaccines continued to be offered to Manitobans as part of both fall 2022 and spring 2023 campaigns through various immunization providers across Manitoba. To continue with the recovery activities on missed immunizations, regional Public Health offered catch up opportunities for school-based immunizations for the 2008-2010 birth cohorts. A review was conducted on the childhood immunization coverage rates for the routine immunizations in the 2019-2021 birth cohorts who were most impacted by the COVID-19 pandemic. The data was shared with the Regional Health Authorities to develop awareness and initiatives to catch-up these birth cohorts in addition to immunizing any members of the population that needed to be caught up on their routine immunizations. The data was also shared with key partners, such as Doctor's Manitoba, to help with these catch-up efforts. Further catch-up plans, such as notification letters to families of children overdue for their routine immunizations, were also developed for implementation in late spring/early summer 2023. In response to another public

health emergency, Manitoba responded to the risk of mpox (formerly called monkeypox) infections by offering resources, vaccines, and medications to those who may have been exposed or infected as an outbreak was occurring internationally, including in many jurisdictions in Canada. Manitoba's high dose influenza vaccine program was expanded to include all Manitobans 65 years of age and older during the 2022/23 Seasonal Influenza Program, at an estimated incremental cost of \$5.6M annually.

• Health Human Resource Action Plan: The Health Human Resource Action Plan (HHRAP) is a \$200M strategy that provides comprehensive and responsive incentives and initiatives to retrain, train and recruit skilled health care providers to ensure Manitobans have access to quality care. The foundation of the HHRAP is to add 2,000 new providers to the public system over the next several years with the first phase of implementation completed as of March 31, 2023.

From the launch of the HHRAP in November 2022 to March 31, 2023, a total of 773 new health care providers were hired in the public system (39% of overall target) and Manitoba Health continues to see the number of new hires grow.

Ongoing efforts continue to implement subsequent phases of the HHRAP with the goal of implementing all 35 initiatives and incentives by 2023/24.

- Diagnostic and Surgical Recovery Task Force: In December 2021, the Manitoba government established the Diagnostic and Surgical Recovery Task Force (DSRTF). The DSRTF identifies and implements short and long-term solutions to reduce surgical and diagnostic waitlists, shorten wait times for patients and build capacity for long-term health-care system resilience. From January 2022 to the end of March 2023, 132 separate initiatives were proposed, reviewed, approved, and funded. So far, a total investment of \$50M (FY 2021/22) and over \$125M (FY 2022/23) has resulted in:
 - o a total of 72,391 diagnostic and surgery procedures being completed
 - an overall 42 per cent elimination of COVID-19 backlogs in 35 of 36 different surgical or diagnostic procedures
 - o a 100 per cent elimination of 17 backlogs
 - o a 50 per cent or more reduction in 5 additional backlogs
 - o a 12 per cent to 47 per cent reduction in 10 additional backlogs

About 60 per cent of completed cases were funded and managed within the public health system, about 40 per cent through interim partnership contracts with Manitoba-based health-service providers, and less than .01 per cent through interim partnership contracts with out-of-province providers. As backlogs continue to be reduced and eliminated, the Diagnostic and Surgical Recovery Task Force is shifting to expand its focus to include funding for initiatives that reduce wait times for patients to even lower than pre-pandemic levels, to build a more resilient and responsive health-care system for the long term.

- Health System Transformation: the department and the health sector continued in their efforts to ensure the health system is more patient-focused, safe and operates more efficiently and sustainable in the long-term. The department will continue to lead the system change, through policy support and planning, funding and performance requirements, oversight and accountability. Specific activities in 2022/23 included:
 - The department provided oversight to Shared Health in the continued planning and implementation of Manitoba's Clinical and Preventive Services Plan (CPSP). In 2022/23, Shared Health finalized the new provincial clinical network model and developed a resource planning tool to support the model. The model envisions the realignment of clinical services to local, district, intermediate, and provincial "hubs," to ensure services as close to home as possible, so the need for Manitobans to travel for

health services are minimized. Shared Health also developed two new service delivery models in support of the home and community care modernization pillar of the CPSP. One model reimagines supportive housing as community supported living and the other model reimagines client-directed funding as client-directed community care. Shared Health is in the process of preparing these models for implementation in the coming fiscal year.

An 11 member Shared Health permanent board was appointed by the Health minister in March 2022, and Shared Health was established as the Provincial Health Authority pursuant to the Health System Governance and Accountability Act effective April 1, 2023.

To address wait times:

- Emergency Department waits: The department continued to provide oversight on the performance of emergency departments and urgent care centres across the province. Service delivery organizations are accountable for the continued performance improvements of wait times. These organizations took steps to address patient wait times, implementing immediate changes to help reduce waits, and engaging front-line staff and physicians in identifying short and longer-term solutions to mitigate existing patient flow challenges. Wait time indicators provide critical insights into level of service Manitobans receive and drive efforts to improve the results.
- **Hip, knee and cataract volume/waits:** The public dashboard covers surgical and diagnostic services as it tracks the progress made in addressing surgical and diagnostic wait times. Link to the dashboard can be found here: <u>https://www.gov.mb.ca/health/dsrecovery/progress.html</u>
- St. Boniface General Hospital redevelopment: As of March 31, 2023, the construction on the project was underway and accomplished approximately a third of the total project deliverables. The department will continue to oversee and support the redevelopment of the St. Boniface Hospital Emergency Department which is expected to be complete in late 2025. The project will further aid efforts to address emergency department wait times in Winnipeg. St. Boniface Hospital Emergency Department redevelopment will also expand the size of the department and provide for increased patient capacity. While pressures of COVID-19 related supply chain issues have had impacts on the original delivery schedule and overall project costs, this multi-phased project continues and the first part of construction is underway.
- Invest in capital improvements to strengthen health care delivery: The Clinical and Preventive Service Plan (CPSP) capital projects are underway and advanced to varying stages. The overall focus of these projects is to bring care closer to home for the patients and with modern facilities. Activities in 2022/23 includes:
 - Four projects are complete to address minor renovations Erickson, Wawanesa, Melita and Baldur. Total cost was \$0.2M.
 - Thirteen projects are in construction, including new hospitals for Neepawa and Portage la Prairie for approximately \$24.8M in 2022/23 and major renovations/expansions for Selkirk, Brandon (2 projects), Boundary Trails, Dauphin, Ashern–Lakeshore Hospital and Bethesda (Steinbach) (2 projects) for approximately \$22.9M in 2022/23 and minor renovations in Souris, Tri-lake and Virden for approximately \$1.0M.
 - One project in tender; one project in design and the remaining projects are in the planning stages

The capital program also includes the following specific projects:

• The province-wide project to upgrade fire safety systems in hospitals and personal care homes to comply with the fire code continues and is expected to be completed by 2026.

- Both Acute Stroke Unit and Epilepsy Monitoring Unit, both at Health Sciences Centre are scheduled to be complete summer of 2023.
- The CancerCare Manitoba projects to address immediate needs and services to 2025 are underway. Some are in construction, some ready to tender and the rest in the design stages. These renovations/expanded spaces will enhance patient care and improve overall work space configurations. The total cost of the eight individual sub-projects is \$11.5M, with approximately \$0.6M spent to March 31, 2023. The remaining funds will be spent as the rest of the group of projects advance into construction.
- Continued investments in provincial Information and Communications Technology (ICT) systems such as, the pharmacy information management, electronic patient record and dictation and transcription systems. The Department invested \$68.8M in 2022/23 on new and continuing ICT projects to support Manitoba's healthcare system.
- New investments in virtual care systems such as remote home monitoring to support care closer to home.
- The provincial pharmaceutical services and the National Association of Pharmacy Regulatory Authorities (NAPRA) project is in Phase 1 of development and is on schedule to deliver the new sterile compounding program. Phase 1 development on Thompson, Brandon, CCMB and HSC is in contract document and cost estimate phase, including changes required to meet the new building code being issued in October 2023.
- In addition to these ongoing projects, investments were made in ICT projects required to support the transformation of the health care system. Existing digital health systems are assessed on an annual basis for renewal to ensure reliability and availability to health care providers for clinical decision-making and ongoing patient care.
- Health Sciences Centre Children's Emergency Department Renovation: Improvements will increase patient flow.

All of the capital projects underway address the ongoing healthcare needs of Manitobans. They improve access to care through increased capacity, commitment to national standards, and developing sites in different regions.

- Shared support services: Shared Health is responsible for delivering a suite of province-wide services that will provide more efficient delivery and less duplication, rather than each Service Delivery Organization providing their own suite of support services. The Shared Services projects seek to transform activities that were previously siloed across the service delivery organizations into province-wide Shared Services providing standardized and efficient processes and reduce duplication of efforts and data. Shared Services will streamline administrative tasks, enable cross system efficiencies, and will reduce admin costs enabling a stronger focus on the clinical needs of Manitobans. The Shared Services, when providing standard operating procedures to simplify and standardize access to services, will work with all SDOs to minimize impacts to operations as services are rolled out across the province. The provincial lead and coordinate roles in the Shared Services will directly impact and improve health services by reducing functional duplication and redundancy. Specific shared services are:
 - Supply Chain Management Shared Service Contracting province-wide with new enabling software for contracting and value analysis
 - Human Resources Shared Service seven functions providing operational support-payroll, recruitment, benefits administration, talent management, compensation, human resource systems and occupational-environmental safety and health (OESH).

- o Pharmacy Shared Service lead and coordinate functions established
- o Clinical Engineering Shared Service initial transfer of staff to Shared Health completed
- Capital Planning Shared Service targeting 2023/24 implementation
- Health Status of Manitobans Report: The 2022 Health Status of Manitobans Report, written by the Office of the Chief Provincial Public Health Officer, was released in December 2022. Overall, there has been a gradual improvement in the health status of people in Manitoba; however, the gap in health between Indigenous communities and other people in Manitoba is widening. The next Health Status Report is scheduled to be released in 2025.
- Sexually transmissible and blood-borne infections (STBBI): Current HIV medication coverage programs • were reviewed and additional coverage opportunities were identified for consideration in the next fiscal year. The department continued to coordinate health care provider registrations to prescribe HIV medications for pre-exposure prophylaxis. The Ka Ni Kanichihk's pilot Indigenous-led STBBI testing and treatment program was successful and the province will continue to work in partnership with Ka Ni Kanichihk on this program. A public dashboard for STBBI rates and indicators was launched in November 2022. The department continued to enhance STBBI outreach testing in high risk settings by working with community partners, and supporting service delivery organizations (SDOs) to direct resources to outreach programs. The department and regional health authorities piloted the use of paraprofessionals to enhance public health follow-up with contacts of gonorrhea and chlamydia cases. This workforce model may be leveraged to support other STBBI priorities in the future. A streamlined form and process was implemented for health care providers to report STBBI cases and contacts, and treatments that they administer for sexually transmitted infections (STI). STI treatment records will now be automatically transferred into eChart Manitoba. This will improve access to patient treatment history and facilitate coordination of care between health care providers, including emergency department physicians that may be the only medical facility to provide care to some clients. The department continues to improve STBBI response efforts, including developing a collaborative approach with other government departments to address factors that influence STBBI rates in disproportionately impacted populations. The impact of STBBIs on the health of Manitobans, and the numerous response efforts were highlighted in a series of communications to health care providers.
- Personal care home licensing: The department continued to lead the Personal Care Home Standards Modernization Working Group, comprised of subject matter experts and representatives from the department, service delivery organizations, and facilities. Beyond its leading-practice research, the Working Group connected virtually, in person, or by survey with Manitoba personal care homes residents and their families, as well as unlicensed First Nations personal care homes and nearly all licenced personal care homes. The result was draft modernized standards that have an enhanced focus on resident experience, choice, and quality of life, as well as dignity of risk, enhanced communication, and shared decision making. Trials for the draft standards commenced in March 2023. During 2023/24, the Working Group will complete the trials, analyze the data, make any required adjustments, and then prepare a final draft of the modernized standards as well as the accompanying review tools and surveys.

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
1.a Improve Manitoba's emergency department/urgent care centre wait time to physician initial assessment	3.9	5.6	3.9	6.6
1.b Increase the number of public health inspections of regulated facilities within the province		4,502	-	6,142

1.a Improve Manitoba's emergency department/urgent care centre wait time to physician initial assessment. The wait time for patients to see a provider in emergency department / urgent care centre is a key indicator of timely access to essential health services which help ensure patients receive appropriate care leading to improved health outcomes. While not a complete measure of time spent in these facilities, the 90th percentile wait time to initial assessment represents the maximum time the majority of patients will wait to begin receiving treatment. Wait times can vary due to a number of factors, like peaks in patient volumes and the number of patients with more serious health issues. Seasonal variation also occurs, with elevated waits in winter months often coinciding with influenza, respiratory conditions and weather-related health issues, such as slips and falls, while accidents, injuries and other trauma occurs during the outdoor summer season. Though wait times fluctuate, beginning in 2020, wait times have generally trended upwards due to a number of factors, including pent-up demand from the pandemic and the availability of health human resources, among others. Higher Emergency Department wait times in 2022/23 are attributable to factors including human resources. Manitoba's Heath Human Resources Action Plan is one of the significant efforts anticipated to address this issue. This measure is reported in hours.

1.b Increase the number of public health inspections of regulated facilities within the province. Increase the number of public health inspections of regulated facilities within the province: Oversight and monitoring of regulated facilities such as restaurants, daycares, swimming pools, recreational camps and personal service facilities leads to safer food and safer facilities for the public to attend, and should correspond to better health outcomes, especially with regards to foodborne and waterborne diseases. This measures the number of routine public health inspections across all program areas in Manitoba with the goal of returning to pre-COVID-19 inspection levels. Inspections are identified based on the facility risk ratings. The target was superseded by prioritizing the most out of date high risk facilities and risk rating of the facility. As operators/facilities recover from the pandemic, there was less infractions and more compliance during routine inspections, allowing for an increase capacity for routine inspections.

2. Advance Truth and Reconciliation

Key Initiatives

• Implementing the Indigenous Partnership Strategic Framework: Manitoba is actively engaged with key Indigenous governments and organizations on health partnerships and initiatives. Much of this work in is line with the principles of the Indigenous Strategic Partnership Framework. Activities in 2022/23 included:

- On June 24, 2022, Manitoba was part of an announcement with Canada and the Southern Chiefs Organization Inc. (SCO) that the three parties will work on establishing an Agreement in Principle towards the development of a tripartite table with the objective to help establish a Southern First Nation Health Authority.
- The Northern Regional Health Authority (NRHA) and the Transformation Management Office (TMO) have engaged with key northern Indigenous leadership organizations such as the Manitoba Keewatinowi Okimakanak (MKO) to support work on an Indigenous Collaboration Approach for Clinical Services and Clinical Planning in the north.
- Manitoba Health supports work led by the TMO and the NRHA with the Service Delivery Organizations (SDO) Indigenous Health leads. The goal of this work is to increase collaborative leadership across the SDO's concerning Indigenous Health functions. This work is supported by all of the SDO Chief Executive Officers.
- The department continues to work with individual First Nations Bands, tribal councils and organizations such as the Southern Chiefs Organization, to address their health care needs in collaboration with Shared Health and the service delivery organizations (e.g., health regions).
- Employee training and awareness of Indigenous history: branch leaders were encouraged to participate in the Truth and Reconciliation Executive Program to help ensure leaders understand how to develop and maintain relationships with Indigenous people, communities and Nations using wise practices in Indigenous employee recruitment and retention; policy development and management. The department developed an action plan to strategically promote and monitor employee participation in reconciliation-related learning and training activities to increase awareness of Indigenous histories. The action plan will ensure all Health staff are committed learning about, and ensuring compliance with, The Path to Reconciliation Act.

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
2.a Increase Participation in Reconciliation Related Learning and Activities	5%	-	10%	5%

2.a Increase Participation in Reconciliation Related Learning and Activities. The Path to Reconciliation Act formalizes Manitoba's commitment to advancing reconciliation, as guided by the Calls to Action of the Truth and Reconciliation Commission. This measure will track the percentage of employees within the department who have completed Reconciliation learning. Learning can take many forms as appropriate for employee roles and is the first step in multi-step initiative to strengthen department initiatives to advance reconciliation. 2022/23 was used to establish a baseline for this measure. Manitoba Health's recruitment challenges impacted overall capacity to delivery on this measure. Efforts are underway to ensure adequate staffing to meet future performance targets.

Working Smarter – Delivering Client-Centred Services

3. Foster and Advance Innovation

Key Initiatives

• Idea Fund: Four Idea Funds were monitored and reported on quarterly were: Implementation of Electronic Admission/Separation Forms; Protection for Persons in Care Office; Electronic Documentation System for Public Health Nurse; Fecal Immunochemical Test (FIT) Provincial Screening Program.

4. Reduce Red Tape

Key Initiatives

- Red Tape Reduction: Red tape reduction aims to remove regulatory requirements that are no longer achieving desired outcomes, or are doing so in an inefficient manner. Regulatory requirements that result in red tape may be unclear, overly prescriptive, poorly designed, redundant, contradictory or antiquated. Not all regulatory requirements create red tape.
- Annual report from regulatory accountability database, regulatory instruments and regulatory requirements: Progress was made in advancing regulatory accountability across the department including the total number of regulatory requirements. Regulatory accountability provides a framework to create a transparent, efficient and effective regulatory system. Reducing red tape and enhancing regulatory accountability strengthens the provincial economy, improves services for Manitobans and reduces costs for stakeholders and government.

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
4.a Percent reduction of regulatory requirements	0.0%	0.18%	2.5%	1.82%

4.a Percent reduction of regulatory requirements. This measure accounts for the per cent reduction of regulatory requirements undertaken by the department in a fiscal year. In the fiscal year 2022/23, the department achieved a reduction of 1.82 per cent. The total number of regulatory requirements accounted for by the department at the end of 2022/23 was 107,491. The baseline resets to zero at the beginning of every fiscal year, and the target of a 2.5 per cent reduction is applied.

5. Involve Manitobans in Decision Making

Key Initiatives

• Shared Health conducted client and citizen engagement in redesign of health system: The department continued to support and provide consultation for health care system and Shared Health conducted client and citizen engagement in redesign of health system. Activities included:

- Shared Health's Patient and Family Advisor network recruited over 80 advisors. This network connected patient and family advisors to healthcare engagement opportunities and supported ongoing recruitment, training, and mentoring of staff to work with advisors.
- The department continued work on standardized processes and tools to support integrating the patient voice into decision-making, planning, quality improvement, strategic planning, and Clinical and Preventive Services Projects.
- Public engagement activities led by Shared Health continued to provide design and clinical input into the cornerstone capital projects in Portage, Selkirk, Dauphin, Neepawa, Ashern, Steinbach, and Winkler.
- Provincial consultations led by Shared Health continued in rural and remote, Winnipeg, and Francophone communities for Provincial Clinical Teams planning.
- Shared Health led and coordinated Disrupting Racism in Healthcare work which included engagement of community, health partners, staff, patients and families.
- Patient representatives continue on the Diagnostic and Surgical Recovery Task Force Steering Committee.

These activities ensured that the voice of Manitobans is heard when planning health system initiatives and services.

6. Be Transparent

Key Initiatives

- **Proactive disclosure:** In addition to the documents routinely posted to the department's website, the department also adopted an internal proactive disclosure process whereby every six months, a review of documents recently posted to the department's website is conducted and documents that are identified as being of high public interest are posted on the Open Manitoba website for the purposes of proactive disclosure. Over the past year, two documents related to the Stevenson Review have been posted to the Open MB website to ensure public access to information, and to enhance transparency. The department also includes data sets, the accountability agreements for each of the service delivery organizations and departmental information, reports and statistics such as the Annual Report.
- Public release of standards reviews of personal care homes: The department publicly posted the reports that it generated from its standards reviews of all of Manitoba's 124 licenced personal care homes during the 2022 calendar year. Results are publicly posted to the Government of Manitoba website: https://www.gov.mb.ca/openmb/infomb/departments/pch/index.html
- **Public Reporting:** The department continued to maintain weekly surveillance reporting of respiratory pathogens, such as COVID-19 and influenza. In addition, dashboards were developed and deployed for Sexually Transmitted and Blood Borne Infections (STBBI) and Substance Related Harms (SRH) surveillance information. Through continued expansion of the provincial health data repository, the department provided analytical support that enabled and facilitated public access to situational data and statistics such as Urgent Care Wait Times, Diagnostic and Surgical Services Wait Times, and Cancer Care indicators. At a national level, the department continued to support the public reporting initiatives led by the Canadian Institute for Health Information and Statistics Canada on a wide variety of health information matters.

Public Service – Delivering Client-Service Excellence

7. Enhance Client Services

Key Initiatives

- French Language Services: after completing an evaluation of the former 2018/23 Strategic French Language Services (FLS) plan, the department successfully built a new Strategic FLS Plan (2023/28). The new FLS Plan outlines measures to be taken by Health over the next five years to enhance the vitality of Manitoba's Francophone community and to support and assist its development, including the provision of French language services as they relate to Health's policies, programs and services. Health demonstrated a 66 per cent measurable increase in bilingual capacity in 2022/23. The increase is due to vacancies being filled with bilingual incumbents and introduction of a new method of capturing employee data on bilingualism.
- Manitobans have access to timely, accurate and credible information about their health system: The department continues to identify areas to improve its reporting on reliable data to ensure Manitobans can quickly access accurate and credible information about their health system and ensure their concerns reach the appropriate department branch and/or SDO. The department also worked to enhance client experience when registering for Manitoba Health coverage. Fiscal year 2022/23 was spent laying the foundation for a revamped Insured Benefits website providing easy access to important information, creating various e-forms for clients to submit their applications at their convenience, and automated processing of requests to reduce handling times. The project will roll out to the public early in the 2023/24 fiscal year.

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
7.a Increase provision of active offer for French language in all public interactions	-	-	55%	65%

7.a Increase provision of active offer for French language in all public interactions. The department operates 15 phone lines including the deputy minister and minister of health, in addition to providing in person services at 300 Carlton Street in Winnipeg. Data is collected through an audit and yearly branch survey. 2022/23 was used to establish a baseline and target for this measure.

8. Build Our Capacity to Delivery

Key Initiatives

Attain the capital budget: The department worked with the service delivery organizations and provided
ongoing oversight to the annual capital plans which included, but is not limited to, \$87.9M for new
projects (included annual safety and security, ICT renewal and medical equipment allocations) and
\$206.1M in continuing projects for a total project cost estimate of \$3.8B to complete. Projects continuing
from previous years included the work on existing facilities (Boundary Trails, Selkirk) and new facilities
(Neepawa, Portage) to support the Clinical and Preventive Services Plan (CPSP) and health care

transformation enablers (surgical waitlist management, remote home monitoring). The department, working with service delivery organizations, recognized the continuing impacts of COVID-19, clinical resources for project planning, cost escalation, supply chain delays, labour shortages and the on-going transition to align resources to deliver CPSP and health care transformation work in preparation of the 2022/23 capital plan. The department also prepared preliminary capital investment requirements for 2023/24 and 2024/25. Through the combination of activities, the department consistently improved processes to ensure the delivery of capital program as efficiently as possible – increasing capacity to deliver healthcare to Manitobans.

- Access to staff learning and development: The department widely promoted and shared the results of the Employee Perspectives Survey to gain understanding of employees' perceptions that the department is providing adequate support for learning and development. Strategies to address issues identified in the survey were also shared and communicated to the department, some of these strategies have been implemented.
- Ensure health sector COVID-19 costs are funded in a timely way: In 2022/23, the department provided quarterly payments to the SDOs to help offset costs of the COVID-19 response so they can continue to safely provide care to Manitobans. The department reimbursed a total of \$262M in COVID-19 costs to the health sector in 2022/23 for staffing requirements, enhanced cleaning procedures, and additional supplies and equipment in acute care settings like hospitals as well as personal care homes.

9. Advance Inclusion

Key Initiatives

• Employee feedback on respect in the workplace: The department used the Employee Perspectives survey to gain understanding of employees' perceptions of a respectful workplace environment. Inclusion within the workplace continues to be highly valued by staff. Results of the survey were promoted and shared throughout the department. Data from the survey will be used in fiscal year 2023/24 by new committees that are still in the development phase, as well as for a revised staff onboarding process.

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
9.a Percentage of department employees who have completed mandatory diversity and inclusion training	71%	-	90%	71%

9.a Percentage of department employees who have completed mandatory diversity and inclusion training. This measure will capture the percentage of department employees that have taken mandatory diversity and inclusion training offered through the Public Service Commission. 2022/23 was used to establish a baseline for this measure. Data for this measure is from March 31, 2023 and may not reflect the current department composition. Manitoba Health's recruitment challenges impacted overall capacity to delivery on this measure. Efforts are underway to ensure adequate staffing to meet future performance targets.

10. Strengthen Respect at Work

Key Initiatives

 Respectful workplace training: Employees are deserving of a workplace that is respectful and free from all forms of harassment. The department developed an action plan to strategically promote and monitor respectful workplace training. This initiative will strengthen respect at work by ensuring all branches are aware of, and compliant with, the respectful workplace policy. Implementation is anticipated for fiscal year 2023/24.

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
10.a Percentage of department employees who have completed mandatory respectful workplace training	60%	-	90%	60%

10.a Percentage of department employees who have completed mandatory respectful workplace training. This measure will capture the percentage of department employees that have completed the mandatory respectful workplace training offered through the Public Service Commission. 2022/23 was used to establish a baseline for this measure. Manitoba Health's recruitment challenges impacted overall capacity to delivery on this measure. Efforts are underway to ensure adequate staffing to meet future performance targets.

Value for Money – Protecting Manitoba's Bottom Line

11. Provide Value for Money

Key Initiatives

- Paper reduction: print reduction strategies contributed to a decrease in usage of paper and toner supplies in fiscal year 2022/23. One driver is the effort of the department to transition to an entirely electronic AskHealth response system that focuses on email replies over hard copy letters to inquirers, when it is appropriate to do so. Another is the work of the department to develop several e-forms for Manitoba Health card registration/update processes. The e-forms will eliminate the need to print a paper copy of each application for coverage or update to existing coverage. The department anticipates developing a report on paper reduction in the fiscal year 2023/24.
- **Supply chain improvement:** Manitoba will continue to seek improvements and make strides in the realm of supply chain improvement including, but not limited to, provincial contracting practices. Health transformation efforts overseen through the department will continue to work on the design and development of clinical standards and common products and services that will be used in the course of care. It will also seek to more formally establish supply chain functions as a true shared service not only for the health sector, but for all-of-government health purchases at large.
- Digital Health efficiencies: the department and Shared Health/Digital Health continued their efforts to
 advance changes and improvements in the digital environment. Existing ICT infrastructure undergoes
 regular assessments. ICT infrastructure refers to the composite hardware, software, network resources
 and services required for the operation and management of Manitoba's healthcare-based ICT
 environment. This regular assessment guides the planning, acquisition, operation, maintenance, renewal
 and disposal/decommissioning of the existing provincial assets. Through this practice, the department
 ensures technology infrastructure is applied and upgraded efficiently to get the most value for money
 possible. The following projects were advanced in 2022/23:
 - replaced end-of life ICT assets (e.g. computer, storage, network, hosting, security devices and appliances) to reduce the risk of failure
 - o consolidated and rationalized technology assets to ensure conformance to established standards
 - updated network and supporting infrastructure to remediate known issues and maintain vendor support requirements
 - aligned Service Delivery Organizations systems and infrastructures to provincial standards and vendor lifecycles
 - o upgraded unsupported operating systems to ensure compatibility with current technology standards

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
11.a Achieve the Capital Budget	-	\$131.0M	\$288.9M	\$247.1M
11.b Reduce Paper Usage	6506	5313	4994	5400

11.a Achieve the Capital Budget. Total spending on health infrastructure projects, including major capital projects, safety and security projects, medical and basic equipment, and information technology initiatives, according to the department's strategic capital plan. The amount spent against the approved budget is based on the total Service Delivery Organization borrowings and cash disbursements for approved projects for the reporting period. Higher spending overall from 2021/22 as Clinical and Preventative Service Plan (CPSP) projects progress into construction stages and spending accelerates. Spending is lower than the current year's budget due to the complexity of projects that required additional review and coordination to align with the CPSP, as well as reduced spending from supply chain issues and the procurement of materials.

11.b Reduce Paper Usage. 2021/22 baseline and ongoing measures for paper usage (in packages) include data for both the Department of Health and the Department of Mental Health and Community Wellness. Manitoba Health's recruitment challenges impacted overall capacity to delivery on this measure. Efforts are underway to ensure adequate staffing to meet future performance targets.

12. Balance the Budget

Key Initiatives

Redesign of Departmental Accountability and Commissioning functions including, but not limited to, funding modernization with the health sector, creation of key commissioning tools and Performance Management and Improvement Systems to deliver greater value for Manitobans. In 2022/23, Manitoba Health routinely engaged with Service Delivery Organizations leadership to advance incremental improvements and identify where additional support was needed. Performance indicators were used to support work on integrated strategies and initiatives to improve healthcare results for Manitobans. Engagements focused on continuous performance improvement aligned to key performance domains of system effectiveness, system efficiency, high performing workforce and fiscal sustainability.

Additionally, Service Delivery Organizations signed their first accountability agreements with government as required by The Health System Governance and Accountability Act. The department continued to undertake planning and consultations within government and with SDOs to fulfill the intended redesign is realized, including better integration of planning, funding, and performance processes. Ensuring performance on fiscal sustainability in Manitoba's healthcare system is crucial for managing expenditures and capital infrastructure investments in a way that meets the health needs of Manitobans today and into the future.

Performance Measures

Measure	Baseline	2021/22 Actual	2022/23 Target	2022/23 Actual
12.a Work within Operating Budget	-	\$7.265B	\$6.687B	\$7.570B

12.a Work within Operating Budget: Work within Summary Operating Budget measures whether healthcare expenses are within the annual budget determined in the Summary Budgeting process the prior year. The measure reports deviation of operating expenditure from the operating budget. Once the operating budget has been approved, the department must have a way of ensuring the approved budget is utilized as planned, and actual spending does not exceed budget limits to demonstrate achievement of economy (cost minimization), efficiency (output maximization) and effectiveness (full attainment of the intended results).

Balancing the department's summary budget contributes to the Government of Manitoba's broader objective of balancing the provincial budget. This measure reflects a 13% above target of the annual budget spent. In 2022/23, additional funding authority were approved through Main Estimates Supplement or Special Warrants for new, in-year new initiatives or adjustments decided at government corporate level. These initiatives resulted in departmental over-expenditures for the year, however decisions are taken on government's overall financial position.

FINANCIAL DETAILS

Consolidated Actual Expenditures

This table includes the expenditures of the department and Other Reporting Entities that are accountable to the Minister and aligns to the Summary Budget.

Health includes the following OREs:

- Seven Service Delivery Organizations (SDOs): CancerCare Manitoba, five Regional Health Authorities, and Shared Health are consolidated with the Funding to Health Authorities appropriation.
- Personal Care Homes, Community Health Agencies, Rehabilitation Centre for Children, Inc., and St. Amant are funded by the SDOs.

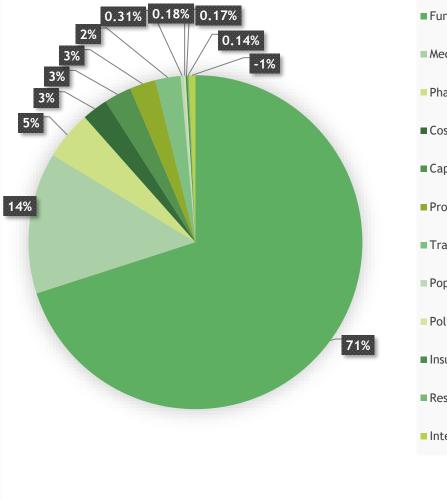
Consolidated Actual Expenditures

For the fiscal year ended March 31, 2023 with comparative figures for the previous fiscal year \$ (000s)

		Other	Consolidation		
Main Appropriations	Part A – Operating	Reporting Entities	and Other Adjustments	2022/23 Actual	2021/22 Actual
Resources and Performance	10,571	-	-	10,571	10,045
Policy and Accountability	13,390	-	-	13,390	15,371
Insurance	12,950	-	-	12,950	12,233
Population Health	23,677	-	-	23,677	23,890
Transition	188,121	-	-	188,121	117,015
Funding to Health Authorities	4,468,324	6,445,350	(5,544,107)	5,369,567	5,249,233
Provincial Health Services	192,306	-	-	192,306	175,894
Medical	1,499,185	-	(449,145)	1,050,040	968,581
Pharmacare	362,738	-	-	362,738	340,062
Capital Funding	203,745	-	-	203,745	205,106
Costs Related to Capital Assets (NV)	7,306	215,567	(31,367)	191,506	211,072
Interfund Activity	-	-	(48,498)	(48,498)	(63,200)
TOTAL	6,982,313	6,660,917	(6,073,117)	7,570,113	7,265,302

NV – Non-Voted

Percentage Distribution of Consolidated Actual Expenditures by Operating Appropriation, 2022/23, Actuals



- Funding to Health Authorities 71%
- Medical 14%
- Pharmacare 5%
- Costs Related to Capital Assets (NV) 3%
- Capital Funding 3%
- Provincial Health Services 3%
- Transition 2%
- Population Health 0.31%
- Policy and Accountability 0.18%
- Insurance 0.17%
- Resources and Performance 0.14%
- Interfund Activity -1%

Summary of Authority

Part A - Operating		2022/23 Authority \$ (000s)
2022/23 MAIN ESTIMATES - PART A		6,272,978
Allocation of funds from: Internal Service Adjustments		560,162
	Subtotal	6,833,140
In-year re-organization from:		-
	Subtotal	-
2022/23 Authority		6,833,140

Part B – Capital Investment	2022/23 Authority \$ (000s)
2022/23 MAIN ESTIMATES – PART B	1,305
Allocation of funds from:	-
Subtotal	1,305
2022/23 Authority	1,305

Part D – Other Reporting Entities Capital Investment	2022/23 Authority \$ (000s)
2022/23 MAIN ESTIMATES – PART D	288,913
In-year re-organization from:	-
Subtotal	288,913
2022/23 Authority	288,913

Detailed Summary of Authority by Appropriation \$ (000s)

Detailed Summary of Authority	Printed Estimates 2022/23	In-Year Re- organization	Virement	Enabling Authority	Authority 2022/23	Supplementary Estimates
Part A – Operating (Sums to be Voted)						
Resources and Performance	12,785	-	(893)	-	11,892	-
Policy and Accountability	19,954	-	(3,267)	-	16,687	-
Insurance	13,892	-	(526)	-	13,366	-
Population Health	29,525	-	(5,173)	110	24,462	-
Transition	76,091	-	2,031	110,000	188,122	-
Funding to Health Authorities	3,998,426	-	-	404,008	4,402,434	71,200
Provincial Health Services	180,642	-	3,317	6,349	190,308	2,000
Medical	1,428,211	-	4,511	39,695	1,472,417	
Pharmacare	298,062	-	-	-	298,062	67,300
Capital Funding	207,890	-	-	-	207,890	-
Subtotal	6,265,478	-	-	560,162	6,825,640	140,500
Part A – Operating (NV))						
Costs Related to Capital Assets	7,500	-	-	-	7,500	-
TOTAL Part A - Operating	6,272,978	-	-	560,162	6,833,140	140,500
Part B – Capital Investment						
Capital Assets		-	-	-		-
General Assets	1,305				1,305	
TOTAL PART B - CAPITAL INVESTMENT	1,305	-	-	-	1,305	-
Part D – Other Reporting Entities Capital Investment						
Other Reporting Entities	288,913	-	-	-	288,913	-
TOTAL Part D – OTHER REPORTING ENTITIES CAPITAL INVESTMENT	288,913	-	-	-	288,913	

NV – Non-Voted

Part A: Expenditure Summary by Appropriation

Departmental Actual Expenditures

For the fiscal year ended March 31, 2023 with comparative figures for the previous fiscal year \$ (000s)

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	1. RESOURCES AND PERFORMANCE				
42	(a) Minister's Salary	44	25	19	
	(b) Executive Support				
1,206	Salaries and Employee Benefits	1,255	1,089	166	
217	Other Expenditures	110	59	51	
	(c) Administration				
281	Salaries and Employee Benefits	294	283	11	
26	Other Expenditures	11	9	2	
	(d) Comptrollership				
1,355	Salaries and Employee Benefits	1,355	1,256	99	
173	Other Expenditures	186	94	92	
438	Grant Assistance	355	372	(17)	
	(e) Financial Commissioning				
1,664	Salaries and Employee Benefits	1,664	1,558	106	
93	Other Expenditures	130	226	(96)	
	(f) Health Service Commissioning				
1,459	Salaries and Employee Benefits	943	706	237	
91	Other Expenditures	49	9	40	
	(g) Information Management and Analytics				
4,505	Salaries and Employee Benefits	3,695	3,740	(45)	
342	Other Expenditures	480	518	(38)	
11,892	Subtotal 21.1	10,571	9,944	627	

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl No.
	2. POLICY AND ACCOUNTABILITY				
	(a) Administration				
256	Salaries and Employee Benefits	310	353	(43)	
66	Other Expenditures	97	36	61	
	(b) Infrastructure				
812	Salaries and Employee Benefits	812	3,108	(2,296)	1
7,442	Other Expenditures	7,366	7,426	(60)	
	(c) Planning and Knowledge Management				
1,930	Salaries and Employee Benefits	1,266	1,144	122	
590	Other Expenditures	416	267	149	
	(d) Policy and Standards				
1,794	Salaries and Employee Benefits	924	928	(4)	
740	Other Expenditures	255	335	(80)	
67	Grant Assistance	67	-	67	
	(e) Accountability Management				
1,085	Salaries and Employee Benefits	230	311	(81)	
353	Other Expenditures	329	291	38	
	(f) Workforce				
823	Salaries and Employee Benefits	576	601	(25)	
644	Other Expenditures	677	224	453	
85	Grant Assistance	65	55	10	
16,687	Subtotal 21.2	13,390	15,079	(1,689)	

1. Primarily due to staffing vacancies and transfer of digital support services to Shared Health.

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	3. INSURANCE				
	(a) Administration				
255	Salaries and Employee Benefits	386	208	178	
39	Other Expenditures	21	136	(115)	
	(b) Department Services				
2,256	Salaries and Employee Benefits	1,980	2,046	(66)	
350	Other Expenditures	400	444	(44)	
	(c) Non-Insured Benefits				
3,420	Salaries and Employee Benefits	3,051	2,831	220	
540	Other Expenditures	624	722	(98)	
414	Grant Assistance	329	329	-	
	(d) Insured Benefits				
4,975	Salaries and Employee Benefits	4,845	4,573	272	
1,117	Other Expenditures	1,314	1,145	169	
13,366	Subtotal 21.3	12,950	12,434	516	

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	4. POPULATION HEALTH				
	(a) Administration				
273	Salaries and Employee Benefits	216	218	(2)	
77	Other Expenditures	144	117	27	
	(b) Population and Public Health				
11,200	Salaries and Employee Benefits	11,024	11,799	(775)	
5,011	Other Expenditures	4,940	4,758	182	
950	Grant Assistance	855	-	855	
	(c) Intergovernmental and Indigenous Relations				
645	Salaries and Employee Benefits	684	775	(91)	
509	Other Expenditures	89	99	(10)	
	(d) Quality and Citizen Experience				
650	Salaries and Employee Benefits	607	344	263	
1,100	Other Expenditures	978	868	110	
	(e) Office of the Chief Provincial Public Health Officer				
1,002	Salaries and Employee Benefits	1,159	1,257	(98)	
22	Other Expenditures	1	2	(1)	
	(f) Legislative Unit				
789	Salaries and Employee Benefits	776	747	29	
264	Other Expenditures	95	87	8	
	(g) Licensing and Compliance				
1,807	Salaries and Employee Benefits	1,865	1,727	138	
163	Other Expenditures	244	147	97	
24,462	Subtotal 21.4	23,677	22,945	732	

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	5. TRANSITION				
	(a) Transition				
539	Salaries and Employee Benefits	494	340	154	
11,157	Other Expenditures	16,499	16,810	(311)	
13	Grant Assistance	4	4	-	
	(b) Cadham Provincial Laboratory Services				
12,424	Salaries and Employee Benefits	9 <i>,</i> 652	10,654	(1,002)	
12,454	Other Expenditures	9,190	9,592	(402)	
	(c) Health Transformation				
29,504	Other Expenditures	26,841	29,242	(2,401)	1
	(d) Priority Procedure and Wait Times Reduction				
122,031	Other Expenditures	125,441	50,137	75,304	2
188,122	Subtotal 21.5	188,121	116,779	71,342	

- 1. Primarily due to delays in the implementation of some Health Transformation initiatives.
- 2. Year over year increase due to priority procedures wait time reduction and COVID-19 backlog initiatives.

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	6. FUNDING TO HEALTH AUTHORITIES			(,	
	(a) Acute Care Services - Funding to Service Delivery Organizations				
2,908,685	Other Expenditures	2,991,836	2,855,574	136,262	1
	(b) Long- Term Care Services - Funding to Service Delivery Organizations				
681,828	Other Expenditures	686,143	692,829	(6 <i>,</i> 686)	2
	(c) Home Care Services - Funding to Service Delivery Organizations				
385,887	Other Expenditures	382,825	386,638	(3,813)	3
250,931	(d) Community Health Services - Funding to Service Delivery Organizations Other Expenditures	230,086	297,385	(67,299)	4
230,931	Other Expenditures	230,080	297,385	(07,299)	4
	(e) Emergency Response and Transport Services - Funding to Service Delivery Organizations				
175,103	Other Expenditures	177,434	169,244	8,190	5
4,402,434	Subtotal 21.6	4,468,324	4,401,670	66,654	

- 1. Primarily due to price and volume increases.
- 2. Primarily due to a decrease in COVID-19 PCH operating costs and COVID-19 PCH Visitation Shelter operating costs.
- 3. Primarily due to volume decreases.
- 4. Primarily due to a decrease in COVID-19 related costs and a redistribution of expenses to other sectors in Funding to Health Authorities.
- 5. Primarily due to increase in volume for air and land ambulance.

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	7. PROVINCIAL HEALTH SERVICES				
	(a) Out-of-Province				
63,645	Other Expenditures	50,083	47,035	3,048	1
	(b) Blood Transfusion Services				
66,298	Other Expenditures	73,841	69,368	4,473	2
	(c) Federal Hospitals				
2,937	Other Expenditures	3,713	3,372	341	
	(d) Ancillary Programs				
19,231	Other Expenditures	22,051	18,249	3,802	3
	(e) Nursing Recruitment and Retention Initiatives				
4,016	Other Expenditures	5,074	3,100	1,974	4
	(f) Manitoba Learning Health System Network				
3,750	Other Expenditures	3,701	3,580	121	
	(g) Immunizing Agents, Biologics and Drugs				
30,431	Other Expenditures	33,843	31,115	2,728	5
190,308	Subtotal 21.7	192,306	175,819	16,487	

- 1. Primarily due to volume increases.
- 2. Primarily due to increased utilization of blood and blood related products.
- 3. Primarily due to volume increases for prosthetic and orthotic devices.
- 4. Year over year increase in the Authorized Prescriber Nursing Program, Registered Nurses (RN) Clinical Competency Assessments, Nurse Practitioner Grants and other initiatives.
- 5. Primarily due to volume increases.

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	8. MEDICAL				
	(a) Fee-For-Service				
920,542	Other Expenditures	966,593	912,437	54,156	1
	(b) Alternate Funding				
462,139	Other Expenditures	449,145	431,766	17,379	1
	(c) Other Professionals				
31,106	Other Expenditures	28,757	26,558	2,199	1
	(d) Out-of-Province Physicians				
33,044	Other Expenditures	30,107	26,614	3,493	2
	(e) Physician Recruitment and Retention Program				
25,586	Other Expenditures	24,583	22,997	1,586	
1,472,417	Subtotal 21.8	1,499,185	1,420,372	78,813	

- 1. Primarily due to increase in volume.
- 2. Primarily due to increase in price and volume.

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	9. PHARMACARE				
375,954	(a) Drug Programs Other Expenditures	438,701	412,252	26,449	1
	(b) Drug Expenditures Incurred by the Department of Families				
(77,892)	Other Expenditures	(75,963)	(72,074)	(3,889)	2
298,062	Subtotal 21.9	362,738	340,178	22,560	

- 1. Primarily due to higher price and volume.
- 2. Primarily due to higher recoveries from the Department of Families due to higher price and volume.

Authority 2022/23	Appropriation	Actual 2022/23	Actual 2021/22	Increase (Decrease)	Expl. No.
	10. CAPITAL FUNDING				
	(a) Principal Repayments				
127,317	Other Expenditures	122,215	125,128	(2,913)	1
	(b) Equipment Purchases and Replacements				
18,163	Other Expenditures	18,163	18,299	(136)	
	(c) Other Capital				
7,700	Other Expenditures	9,608	12,748	(3,140)	2
	(d) Interest				
54,710	Other Expenditures	53,759	48,214	5,545	1
207,890	Subtotal 21.10	203,745	204,389	(644)	

- 1. Each year, principal and interest is incurred when projects are completed. As a result, actual expenditures vary year over year as projects are completed and debt repayment is initiated.
- 2. Year over year decrease in COVID-19 related equipment purchases.

Authority 2022/23	Appro	opriation	Actual Actual 2022/23 2021/22		Increase (Decrease)	Expl. No.
	11. CO	OSTS RELATED TO CAPITAL ASSETS				
	(a) Ge	neral Assets				
7,500	(ii)	Other Expenditures	7,306	13,772	(6,466)	1
7,500		Subtotal 21.11	7,306	13,772	(6,466)	

1. Year-over-year decrease in amortization as a result of retired assets and the transfer Cadham Provincial Laboratory assets to Shared Health.

6,833,140	Total Expenditures	6,982,313	6,733,381	248,932
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Part B – Capital Investment	2022/23 Actual \$ (000s)	2022/23 Authority \$ (000s)	Variance Over/(Under) \$ (000s)	Expl. No.
General Assets		- 1,305	(1,305)	1

1. Under-expenditure due to fewer capital projects and the transfer of Cadham Provincial Laboratory to Shared Health.

Part D – Other Reporting Entities Capital Investment	2022/23 Actual \$ (000s)	2022/23 Authority \$ (000s)	Variance Over/(Under) \$ (000s)	Expl. No.
Capital Program	247,099	290,218	(43,119)	1

Explanation:

1. Under-expenditure due to delays in proceeding with various projects.

Revenue Summary by Source

Departmental Actual Revenue

For the fiscal year ended March 31, 2023 with comparative figures for the previous fiscal year \$ (000s)

Actual 2021/22	Actual 2022/23	Increase/ (Decrease)	Expl. No.	Source	Actual 2022/23	Estimate 2022/23	Variance E Over/(Under) I	Expl. No.
				Other Revenue				
7,036	10,605	3,569) 1	Sundry	10,605	2,864	7,741	1
54,769	47,326	6 (7,443)) 2	Out-of -Province Hospital Recovery	47,326	66,952	(19,626)	2
11,549	15,611	4,062	2 3	Out-of -Province Medical Recovery	15,611	20,157	(4,546)	2
18,364	17,166	6 (1,198))	Third Party Hospital Recovery	17,166	21,477	(4,311)	4
10,173	9,714	459) •)	Third Party Medical Recovery	9,714	12,136	(2,422)	5
101,891	100,422	2 (1,469))	Subtotal	100,422	123,586	(23,164)	

				Government of Canada			
91,510	43,439	(48,071)	6	Shared MB Bilateral Agreement	43,439	54,680	(11,241) 6
1,262	-	(1,262)	7	Health Infoway	-	-	-
-	-	-		Immunization Partnership Fund	-	1,000	(1,000)
92,772	43,439	(49,333)		Subtotal	43,439	55,680	(12,241)

194,663 143,861 (50,802) Total Revenue 143,861 179,266 (35,405)	194,663	143,861 (50,802)	2) Total Revei	nue 143,861	179,266 (35,405)
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Explanations:

1 Year over year volume increases year in third party recoveries for Air Ambulance – Lifeflight Program

- 2. Primarily due to a decrease in volume.
- 3. Primarily due to increase in volume.
- 4. Decrease Third Party Hospital revenues due to volume decrease

- 5. Decrease Third Party Medical revenues due to volume decrease
- 6. One-time additional Federal funding for MB Bilateral Agreement received in 2021/22
- 7. One-time Federal Funding for Health Infoway received in 2021/22

Departmental Program and Financial Operating Information

Resources and Performance (Res. No. 21.1)

Main Appropriation Description

Oversees health system fiscal resourcing and organizational performance through formal approaches to commissioning of programs and services from service delivery organizations via accountability agreements. Leads and manages the provincial information management and analytics shared service. Provides advice, financial administration and support to the departments of Manitoba Health, Mental Health and Community Wellness, and Seniors and Long-Term Care.

	2022/23 Actual	<u>2022/23 A</u>	uthority
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Minister's Salary	44	1.00	42
Executive Support	1,365	16.00	1,423
Administration	305	3.00	307
Comptrollership	1,896	24.60	1,966
Financial Commissioning	1,794	24.00	1,757
Health Service Commissioning	992	21.80	1,550
Information Management and Analytics	4,175	79.00	4,847
TOTAL	10,571	169.40	11,892

Minister's Salary

Sub-Appropriation Description

Provide leadership and policy direction for the renewal of the health system and the delivery of a comprehensive range of health and health care services for Manitobans.

1(a) Minister's Salary

	Actual	<u>Authority</u>	2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	44	1.00	42	2	
Total Sub-Appropriation	44	1.00	42	2	

Executive Support

Sub-Appropriation Description

Provides executive support to the minister of health in achieving objectives through strategic leadership, management, policy development, program determination, and administration of the department's and broadly defined health services delivery system.

1(b) Executive Support

Expenditures by	Actual 2022/23	<u>Authority</u>	2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	1,255	16.00	1,206	49	
Other Expenditures	110	-	217	(107)	
Total Sub-Appropriation	1,365	16.00	1,423	(58)	

Administration

Sub-Appropriation Description

Provides strategic leadership to advance and support the objectives and priorities of the department. Provides direction and oversee improved economy, efficiency, effectiveness, and value for money in investments of designated program delivery as it relates to the broader health care system.

1(c) Administration

Expenditures by	Actual 2022/23	<u>Authority</u>	2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs \$(000s)		\$ (000s)	No.
Salaries and Employee Benefits	294	3.00	281	13	
Other Expenditures	11	-	26	(15)	
Total Sub-Appropriation	305	3.00	307	(2)	

Comptrollership

Sub-Appropriation Description

Provides for the identification and fair allocation of both tangible and fiscal resources, and monitors the use of those resources in accordance with government priorities and policies.

Key Results Achieved

- Provided leadership on financial and procurement and supply chain matters, ensuring that the comptrollership function of the department is appropriately maintained and meets the needs for financial control, accountability, and the reporting, safeguarding and protection of financial and physical assets.
- Provided comprehensive support services in assessing resource requirements and allocations to programs and branches, including direction and support in financial planning, reporting, monitoring and control policies, processes and procedures consistent with the established priorities of the department and government.
- Provided efficient and accurate preparation of annual estimates of the department and other financial planning processes; monitoring and reporting financial performance; conducting specialized financial reviews and analyses; preparing reports to support timely financial management decisions; safeguarding physical and financial assets; and providing accounting services to the department.
- Provided efficient, accurate information to government on the fiscal status of the department.

Expenditures by	Actual 2022/23	<u>Authority 2022/23</u>		Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs \$(000s)		\$ (000s)	No.
Salaries and Employee Benefits	1,355	24.60	1,355	-	
Other Expenditures	186	-	173	13	
Grant Assistance	355	-	438	(83)	
Total Sub-Appropriation	1,896	24.60	1,966	(70)	

1(d) Comptrollership

Financial Commissioning

Sub-Appropriation Description

Plans and oversees the allocation of available operating, medical, and capital funds to health delivery organizations in accordance with government priorities. Monitors and reports the financial performance of health service delivery organizations.

Key Results Achieved

- Provided financial expertise and direction to the service delivery organizations in support of various government projects and initiatives, specifically for operating, medical and capital funding requirements.
- Analyzed financial reporting received from the service delivery organizations for accuracy, consistency and completeness to ensure efficient and effective use of resources and alignment with commissioning.
- Supported the continuation of the Diagnostic and Surgical Recovery Taskforce (DSRTF) as well as the newly established Health Human Resource Action Plan (HHRAP) taskforce announced on November 10, 2022. Provided financial support to the taskforces by providing guidance in accordance with Government directives, policies and guidelines.
- Provided capital financing for the Clinical and Preventative Services Plan capital projects including such major development projects as Brandon Hospital, Selkirk Regional Health Centre, Portage Hospital and Neepawa Hospital.

	Actual	<u>Authority</u>	2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	1,664	27.00	1,664	-	
Other Expenditures	130	-	93	37	
Total Sub-Appropriation	1,794	27	1,757	37	

1(e) Financial Commissioning

Health Service Commissioning

Sub-Appropriation Description

Leads the development, execution, and accountabilities for commissioned agreements with health authorities and funded agencies.

Key Results Achieved

- Implemented work to guide performance improvement and accountability throughout the healthcare system. This included clarifying Manitoba Health and Service Delivery Organization's roles in performance improvement, setting core expectations of health system leadership, and defining and implementing mechanisms to ensure continuous performance improvement aligned to outcomes. The policies and standards applicable to Service Delivery Organizations are identified in the GOM/SDO accountability agreement and related schedules. Work was initiated to update the department's planning, funding, and performance processes to align to commissioning.
- Facilitated the first accountability agreements between government and the SDOs.
- Completed agreements and related oversight for health services with funded agencies, Request for Supply Arrangement vendors, and other service providers to meet the policy and planning objectives for mandated services.

	Actual	Authority	2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	943	18.80	1,459	(516)	
Other Expenditures	49	-	91	(42)	
Total Sub-Appropriation	992	18.80	1,550	(558)	

1(f) Health Service Commissioning

Information Management and Analytics

Sub-Appropriation Description

Leads and manages the provincial information management and analytics shared service aimed at providing accurate and timely information to decision makers across the health care system.

Key Results Achieved

• Completed the amalgamation of provincial information management and analytics staffing resources within the shared service and continued to progress on recruitment to fill vacancies to enhance capacity to respond to health system demands for analytic and reporting services.

- Successfully completed a project to define the requirements for an enhanced provincial health system data repository that will continue to expand the availability and quality of health data to support the needs of a wide range of health system stakeholders.
- Achieved progress towards the implementation of an information governance framework that will put in place the mechanisms to ensure standardization of health system data and enforce consistent information management best practices.
- Through continued expansion of the provincial health data repository, the department provided analytical support that enabled and facilitated public access to situational data and statistics such as Urgent Care Wait Times, Diagnostic and Surgical Services Wait Times, and Cancer Care. At a national level, the department continued to support the public reporting initiatives led by the Canadian Institute for Health Information and Statistics Canada on a wide variety of health information matters.
- Continued to maintain weekly surveillance reporting of respiratory pathogens, such as COVID-19 and influenza.
- Developed and deployed dashboards for Sexually Transmitted and Blood Borne Infections (STBBI) and Substance Related Harms (SRH) surveillance information.
- Supported health systems continuous improvement through the creation of Provincial Health System Performance Dashboards.
- In compliance with amendments to The Personal Health Information Act (PHIA) pertaining to the harmonization of the health research approval process, the department successfully completed the transition of work to support the project titled "Research Improvements Through Harmonization In Manitoba (RITHIM)".

1(g) Information Management and Analytics

Expenditures by	Actual 2022/23	<u>Authority</u>	2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs \$(000s)		\$ (000s)	No.
Salaries and Employee Benefits	3,695	79.00	4,505	(810)	1
Other Expenditures	480	-	342	138	
Total Sub-Appropriation	4,175	79	4,847	(672)	

Explanation(s):

1. Primarily due to miscellaneous salaries under-expenditures.

Policy and Accountability (Res. No. 21.2)

Main Appropriation Description

Supports government in developing policy objectives and solutions for the healthcare delivery system, and implements and oversees government direction. Oversees department, system, workforce and infrastructure planning and forecasting across the healthcare delivery system. Provides advice for the development, implementation and oversight of policies for programs related to Manitoba Health, Mental Health and Community Wellness, and Seniors and Long-Term Care.

	2022/23 Actual	2022/23 Authority		
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)	
Administration	407	3.00	322	
Infrastructure	8,178	43.90	8,254	
Planning and Knowledge Management	1,682	24.30	2,520	
Policy and Standards	1,246	21.60	2,601	
Accountability Management	559	13.30	1,438	
Workforce	1,318	9.00	1,552	
TOTAL	13,390	115.10	16,687	

Administration

Sub-Appropriation Description

Oversees system level accountability aligned to legislation and provides strategic leadership to advance and support the objectives and priorities of the department with a focus on health infrastructure. Provides strategic direction and oversee legislated requirements such as the French Language Services Plan, annual reports and other governance policies.

2(a) Administration

Expenditures by	Actual <u>Authority 2022/23</u> 2022/23		2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	310	3.00	256	54	
Other Expenditures	97	-	66	31	
Total Sub-Appropriation	407	3.00	322	85	

Infrastructure

Sub-Appropriation Description

Provides advice and recommendations for government decision-making on health infrastructure investments, and oversees the progress and status of specific projects and the overall capital program. Develops capital program and policy options for infrastructure to support the continued delivery of healthcare across the province.

Key Results Achieved

- Enabled and provided oversight for the effective implementation of over 40 major capital projects, plus
 over 130 minor projects focused on safety and security (e.g. roof replacement, heating/cooling systems),
 procurement of over 200 medical equipment items and over 30 projects focused on Information and
 Communications Technology (ICT); ensuring they are delivered on time, on budget and in scope.
- Provided oversight to 36 active ICT projects within the authorized parameters of scope, budget and time; seven projects were completed and closed in 2022/23.
- With the Department of Consumer Protection and Government Services, started the decommissioning of 105 External Visitation Shelters which had been installed to support save visits of personal care home residents and their loved ones during the COVID-19 pandemic.
- Reviewed and revised five Infrastructure policies focused on requirements related to the implementation
 of the Health System Governance and Accountability Act (also known as Bill 10). These policies
 established a common understanding and processes for Service Delivery Organizations to meet the
 regulated requirements of the Act.
- The department oversaw the completion of the Hybrid Operation Room at the St. Boniface Hospital in Winnipeg. The hybrid operation room allows a patient to receive surgery and imaging procedures in the same room drastically reducing stress to the patient.
- The department oversaw the successful construction, completion and occupancy for two new personal care homes Boyne Lodge (Carman) and Rest Haven (Steinbach).
- Participated on reviewing and improving applicable program processes for capital, safety and security and medical equipment projects. The improved processes are to standardize the expectations throughout the regions regarding roles and responsibilities between Manitoba Health Infrastructure, Shared Health and SDOs.
- Provided oversight to multiple capital plan investments. This included safety and security (buildings), medical equipment, and ICT.

2(b) Infrastructure

	Actual <u>Authority 2022/23</u> itures by 2022/23		2022/23	Variance	Eval
Expenditures by Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	812	43.90	812	-	
Other Expenditures	7,366	-	7,442	(76)	
Total Sub-Appropriation	8,178	43.90	8,254	(76)	

Planning and Knowledge Management

Sub-Appropriation Description

Leads oversight of health system planning to ensure its strategic integration and alignment with department activities and government's mandate. Ensures that the Department and health system's structure and governance promotes integration of health services, along with the co-ordination of departmental responses to inquests, audits, proposals and regulatory accountability. Responsible for horizon scanning and providing advice on current and emerging health issues, trends and best practices.

Key Results Achieved

- Continued to provide oversight to enable policy and planning for implementation of Clinical and Preventive Service Plan projects and initiatives. The department also supported Shared Health in the policy and funding reviews of the new provincial clinical network model and resource planning tool, as well as the review of the new home and community care modernization service models.
- By monitoring the provision of Active Offer through an audit, and reviewing results with service areas, the department was able to determine improvements needed to services to ensure that Manitobans are offered services in both languages. The operation of 15 client service phone lines and in-person services at 300 Carlton Street were reviewed and audited. Results of the audit reported a 66 per cent compliance with the department's French Language Active Offer policy.
- The Manitoba Health 5-Year Strategic Plan was developed and launched in January 2023. The plan is being used within the department and health system to guide work planning and to support greater alignment across the health system.
- The Manitoba Learning Health System Network (MLHSN) partners develop, maintain and operate the Population Health Data Repository which supported 297 research projects in 2022/23. MLHSN partners created a centralized and continuous intake pilot process for research requests from Manitoba Health, other health-related departments and Shared Health. Supporting Older Adult Healthcare Reform through Research (formerly known as Translating Research in Elder Care) investigated the impact of COVID-19 on personal care home work environments and resident care. The Manitoba Training Program provided University of Manitoba graduate students with health services research training and skills to be partners in healthcare reform and innovation.

2(c) Planning and Knowledge Management

Expenditures by	Actual <u>Authority 2022/23</u> ditures by 2022/23		2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	1,266	24.30	1,930	(664)	1
Other Expenditures	416	-	590	(174)	
Total Sub-Appropriation	1,682	24.30	2,520	(838)	

Explanation:

1. Primarily due to miscellaneous salaries under-expenditures.

Policy and Standards

Sub-Appropriation Description

Undertakes activities to develop and provide policy advice on a range of health system issues and government policy decisions.

Key Results Achieved

- Through participation on the Provincial Territorial Blood Liaison Committee, the department represented Manitoba in negotiating the annual Canadian Blood Services budget and ensured Canadian Blood Services accountability with the National Accountability Agreement. The department also worked closely with colleagues at Shared Health to oversee the implementation of Shared Health's blood product utilization initiatives and promote cost efficiency during global supply chain constraints, ensuring that Manitobans have sustained access to critical blood and blood products.
- Performed a comprehensive policy review to ensure new and existing home care policies enable Home and Community Care Modernization as part of the Clinical and Preventive Services Plan, as well as delivery of effective, safe and quality care to Manitobans.
- Provided policy support to develop a suite of departmental policies providing direction and guidance to health authorities under the Health System Governance and Accountability Act. These policies guide the preparation of the Clinical and Preventive Services Plan and the delivery of core health services, and set expectations for annual planning and reporting requirements.
- Provided oversight for implementation of adult cochlear implant program expansion, funding for which was announced in June 2022. Oversight enabled collaboration and communication among service providers, to achieve timely and efficient cochlear implant processor activations for patients newly eligible for provincial coverage.

- Oversaw planning for the expansion of the Forensic Nursing Examiner program to rural and northern locations in Manitoba.
- Partnered with Manitoba Families and Winnipeg Regional Health Authority to launch the Integrated Adult Services pilot project, a new service delivery model for 30 adults with complex physical disabilities. The pilot will run over a 30 month period.
- The Universal Newborn Hearing Screening Act legislative review was completed and published on the EngageMB website, thereby ensuring access to this service for newborns all across Manitoba.
- Policy and Standards collaborated with the Department of Seniors and Long Term Care and the Department of Families to support Shared Health in designing and developing projects as part of Home and Community Care Modernization through Manitoba's Clinical and Preventative Services Plan. These projects will test new models of service in order to increases client comfort and autonomy and improve health outcomes.
- Provided policy support to develop a suite of departmental policies providing direction and guidance to Health Authorities under the Health System Governance and Accountability Act. These policies guide the preparation of the Clinical and Preventive Services Plan and the delivery of core health services, and set expectations for annual planning and reporting requirements.

Expenditures by	Actual 2022/23	Authority 2022/23		Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	924	21.60	1,794	(870)	1
Other Expenditures	255	-	740	(485)	2
Grant Assistance	67	-	67	-	
Total Sub-Appropriation	1,246	21.60	2,601	(1,355)	

2(d) Policy and Standards

- 1. Primarily due to miscellaneous salaries under-expenditures.
- 2. Primarily due to miscellaneous operating under-expenditures.

Accountability Management

Sub-Appropriation Description

Provides leadership in oversight, evaluation and monitoring of system level results and outcomes through analysis of trends and system performance, corrective action, and reporting of results.

Key Results Achieved

- Led engagement with service delivery organizations on continuous performance improvement aligned to key performance domains of system effectiveness, system efficiency, high performing workforce and fiscal sustainability. Manitoba Health routinely engaged with SDO leadership to advance incremental improvements and identify where additional support was needed. Performance indicators were used to support work on integrated strategies and initiatives to improve healthcare results for Manitobans.
- Supported departmental work to align performance of the department with performance of the health care system.

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	230	13.30	1,085	(855)	1
Other Expenditures	329	-	353	(24)	
Total Sub-Appropriation	559	13.30	1,438	(879)	

2(e) Accountability Management

Explanation(s):

1. Primarily due to miscellaneous salaries under-expenditures.

Workforce

Sub-Appropriation Description

Provides policy, planning and oversight in the development of health human resources.

Key Results Achieved

- Implemented the Health Human Resource Action Plan (HHRAP), announced on November 10, 2022, to support the recruitment, training and retention of health care providers across Manitoba. The HHRAP is a \$200M strategy that contains 36 initiatives to support human resource needs of the health care sector by retraining valued staff and adding 2,000 new health care providers to the provincial health care system. Implementation of the incentives and initiatives began late 2022/23 and will continue to 2023/24.
- In 2022/23, the International Educated Nurses (IEN) Pathway project was transferred from Economic Development, Industry and Training to Manitoba Health. This includes the administration of the IEN Portal which provides IEN applicants financial assistance for assessment and training costs to support their goal of working the nursing field.
- Continued to collaborate with Advanced Education and Training to increase clinical education capacity for multiple health care provider roles. This includes physicians, clinical psychologists, nurses and nurse practitioners, physical therapists, MRI technologists, advanced care paramedics, and physician assistants.

Expenditures by	Actual 2022/23	Authority 2022/23		Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	576	9.00	823	(247)	
Other Expenditures	677	-	644	33	
Grant Assistance	65	-	85	(20)	
Total Sub-Appropriation	1,318	9.00	1,552	(234)	

2(f) Workforce

Insurance (Res. No. 21.3)

Main Appropriation Description

Establishes and administers benefits as prescribed by The Canada Health Act as well as provincially funded benefits as prescribed by The Health Services Insurance Plan, The Pharmaceutical Act, and The Prescription Drug Cost Assistance Act. Establishes and monitors department administrative policies, processes, and standards.

	2022/23 Actual	2022/23 Authority		
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)	
Administration	407	3.00	294	
Department Services	2,380	27.00	2,606	
Non-Insured Benefits	4,004	56.00	4,374	
Insured Benefits	6,159	93.80	6,092	
TOTAL	12,950	179.80	13,366	

Administration

Sub-Appropriation Description

Provides strategic leadership to advance and support the objectives and priorities of the department with a focus on: insured benefits, non-insured benefits, internal and external customer service, and corporation and facility support.

3(a) Administration

Expenditures by	Actual 2022/23	<u> </u>		Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	386	3.00	255	131	
Other Expenditures	21	-	39	(18)	
Total Sub-Appropriation	407	3.00	294	113	

Department Services

Sub-Appropriation Description

Develops and supports alignment to administrative policies, processes and standards, as well as leading departmental communications, operations, and employee wellness, engagement and diversity/inclusion efforts. Provides administrative, technological and logistical support to the departments of Manitoba Health, Mental Health and Community Wellness, and Seniors and Long-Term Care.

Key Results Achieved

- Launched a number of innovative web applications to increase internal operational efficiencies and workplace culture, such as a standardized e-resource for on-boarding new staff and a central portal for departmental staff to request new/replacement tech, ergonomic assessments, minor building repairs, and more.
- Launched Health News, a bi-weekly newsletter for the departmental staff, which shares information about branch activities, notices from executive leadership, new staff announcements, and more.
- The department coordinated events to improve employee engagement, such as Take Our Kids To Work, the Holiday Hot Chocolate Event, and the Tech Graveyard where staff across the department dropped off surplus tech for disposal.
- Established new partnerships with service delivery organizations to better facilitate responses to citizen inquiries, as well as with more than 30 agencies, boards, and commissions to facilitate ministerial board appointments.

	Actual	<u>Authority</u>	2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	1,980	27.00	2,256	(276)	
Other Expenditures	400	-	350	50	
Total Sub-Appropriation	2,380	27.00	2,606	(226)	

3(b) Department Services

Non-Insured Benefits

Sub-Appropriation Description

Plans, manages, and administers provincially funded benefits offered beyond those required by The Canada Health Act. Establishes eligibility criteria, service improvements, legislative amendments and related benefit plan design to support government goals and priorities in the delivery of health care.

Key Results Achieved

- Continued to ensure that new drugs were added to the formulary for Pharmacare, as evidence-informed and approved by Health Canada for use in Canada.
- The department expanded the coverage for advanced glucose monitors for all eligible Manitobans with Type 1 or Type 2 diabetes who meet eligibility criteria came into effect in March 2023. These devices enable persons who live with diabetes to manage their condition with fewer finger pricks and also with enhanced digital information on their blood sugar levels throughout the day and even while at rest.
- In May 2022, client access to Paxlovid was increased by shifting Paxlovid dispensation from Service Delivery Organizations including hospitals to designated community pharmacies in Manitoba.

3(c) Non-Insured Benefits

Expenditures by	Actual 2022/23	<u>Authority</u>	2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	3,051	56.00	3,420	(369)	
Other Expenditures	624	-	540	84	
Grant Assistance	329	-	414	(85)	
Total Sub-Appropriation	4,004	56.00	4,374	(370)	

Insured Benefits

Sub-Appropriation Description

Plans, manages, and monitors registration of citizens for benefits and fee-for-service payments to health care providers insured under the provincial health insurance plan. Interprets and translates benefits under the provincial health insurance plan to advise and direct service delivery organizations and alignment with requirements of The Canada Health Act. Establishes policy, benefit plan design, and corresponding legislative amendments to support government goals and priorities in the delivery of health care. Supports the development of negotiation mandates for health care providers, professional associations, and other provincial plans.

Key Results Achieved

- Customers who visited the Manitoba Health website opted to use an "online form" in 75,300 instances to submit their request for a change to their Manitoba Health registration certificate. In addition, we received 57,171 emails through the Insured Benefits email (<u>insuredben@gov.mb.ca</u>).
- The Registration/Client Services front counter was closed to the public due the COVID-19 pandemic from March 16, 2020 and reopened on March 1, 2022.
- Visits to the Client Services counter increase from zero in 2021/22 to 49,988 in 2022/2023 as the Client Services area has been closed due to the pandemic. Client Services handled 138,801 telephone enquiries, achieving a time frame of 3 minutes, on average, in assisting clients.
- Registration and Client Services issued 232,122 Manitoba Health Registration Certificates and processed 118,230 address changes. Provided ongoing health care access via the Ukrainian Reception Centre from April 2022 to fiscal year end.
- 66,825 net new Personal Health Identification Numbers (PHIN) were issued in Manitoba with 15,845 new certificates issued to 18-yr-olds receiving their own individual registration numbers for the first time as adults, in addition to 45,852 status changes (e.g. births, deaths, marriages and separations).
- Third-Party Liability closed 130 lawsuits between April 1, 2022 and March 31, 2023; and recovered \$984K in funds.
- Processed claims for 254,784 services provided by Manitoba physicians to residents of other provinces for recovery of payments through the Inter-Provincial Reciprocal Agreement. The Inter-Provincial Reciprocal Agreement honours the portability of health care across Canada and allows Manitobans who travel across the country to seek medically necessary care outside of Manitoba.
- To support the Diagnostic and Surgical Recovery Task Force, the out-of-province claims unit handled the communications with and reimbursement payments to citizens and vendors.

3(d) Insured Benefits

Expenditures by	Actual 2022/23	Authority 2022/23		Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	4,845	93.80	4,975	(130)	
Other Expenditures	1,314	-	1,117	197	
Total Sub-Appropriation	6,159	93.80	6,092	67	

Population Health (Res. No. 21.4)

Main Appropriation Description

Oversees population and public health leadership to advance the health of the population, including disease prevention and control. Ensures department work is conducted on new or on amended statutes and regulations, requests for information on The Freedom of Information and Protection of Privacy Act, engagement with Indigenous leaders and organizations, health systems compliance with applicable provincial legislation, policies and standards to ensure safe environments for patients are maintained, health systems quality, and federal and provincial relations.

	2022/23 Actual	<u>2022/23 A</u>	uthority
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Administration	360	3.00	350
Population and Public Health	16,819	138.95	17,161
Intergovernmental and Indigenous Relations	773	7.00	1,154
Quality and Citizen Experience	1,585	7.00	1,750
Office of the Chief Provincial Public Health Officer	1,160	2.00	1,024
Legislative Unit	871	14.00	1,053
Licensing and Compliance	2,109	23.25	1,970
TOTAL	23,677	195.20	24,462

Administration

Sub-Appropriation Description

Provides strategic partnerships with Indigenous health organizations to collaboratively address health disparities. Provides oversight and leadership to ensure effective primary care service delivery in the three provincial nursing stations. Provides strategic leadership to advance the department's objectives and priorities using a population and public health approach to improve the health and wellness of the population, and reduce the gaps faced by populations with the greatest inequities.

4(a) Administration

Evenenditures hu	Actual 2022/23	Authority 2022/23		Variance Over/(Under)	Expl.
Expenditures by Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	216	3.00	273	(57)	
Other Expenditures	144	-	77	67	
Total Sub-Appropriation	360	3.00	350	10	

Population and Public Health

Sub-Appropriation Description

Provides public health clinical leadership to advance the health of the population; leads and co-ordinates the health system on emerging public health issues, and ensures that health protection services are delivered.

Key Results Achieved

- Formed a new provincial Healthy Baby program team to return to providing core public health services to families. Re-engaged with Regional Health Authorities and community organizations to deliver the community support programs. Returned to in-person community support groups with the priority of increasing attendance at in-person groups.
 - Priority of increasing uptake of the Manitoba Prenatal Benefit.
 - o Identified new breastfeeding education for providers that work with new families.
- Public Health Inspectors prioritized overdue inspections based on risk assessments for each type of
 routine work. Industries include restaurants, grocery stores, swimming pools, daycares, recreational
 camps, personal service facilities and residential care facilities. There has been gradual improvement in
 the number of inspections completed annually post-COVID-19 to ensure the health and safety of the
 general public. This gradual increase is due to inspectors reporting longer inspection times due to the
 delay in routine inspections during the pandemic and having to address more critical issues than in the
 past.
- Sexually transmitted infection (STI) treatments that health care providers (HCPs) administer to their
 patients and report to Public Health are being transferred into eChart Manitoba. This will improve access
 to patient treatment history and facilitate coordination of care between health care providers. The
 project as a whole is expected to improve reporting of STBBIs, access to patient treatment records, and
 efficiency of Public Health follow-up with cases and contacts to improve testing and treatment rates for
 all STBBIs. Major milestones of this project were:
 - Dec. 9, 2022: A new Provider Report Form for STBBIs and STI Treatment was implemented, and two associated tariffs were approved for completion of the form by fee-for-service HCPs.

- Jan. 16, 2023: The Provider Form Investigation workflow was launched in the Public Health Information Management System (PHIMS), to streamline transfer of information from the provider forms into PHIMS.
- Mar. 2, 2023: Implementation of a new interface between PHIMS and eChart, to enable transfer of STI medications into eChart.
- Additional tasks are planned, including transfer of historical STI medication data into eChart, and quality and reporting enhancements in PHIMS.

A pilot project was initiated to implement a new workforce (communicable disease paraprofessionals) to enhance public health follow-up with contacts of gonorrhea and chlamydia cases. The project included the following achievements:

- Developing workflows, procedures and training materials, and providing provincial orientation training to CD technicians (completed December 2022).
- This workforce model may be leveraged to support other STBBI priorities in the future.

Public Health and the Chief Provincial Public Health Office issued a series of communications to health care providers stressing the urgency of the STBBI outbreak and their role in the response effort. This included letters to health care providers, a CPSM newsletter article and a series of webinars presented in collaboration with Doctors Manitoba and the College of Physicians and Surgeons of Manitoba.

- An overview of STBBIs in Manitoba was presented on January 18, 2023, and a targeted syphilis webinar "Addressing the Syphilis Surge in Manitoba" was presented on February 7, 2023.
- These webinars can be accessed on-demand from the provincial STBBI website.
- A future webinar is planned to focus on HIV.

The department continued to monitor and evaluate the expansion of coverage for HIV medications (anti-retroviral therapy, post-exposure prophylaxis and pre-exposure prophylaxis).

The provincial protocols for management of syphilis and HIV were updated in late 2022, including updated clinical guidance and information on testing and treatment.

A public-facing fact sheet about syphilis was updated and published in January 2023 to include information about risks and prevention of congenital syphilis.

A quick reference tool for management of syphilis cases by health care providers was updated. The tool will be published in summer 2023.

Work was initiated to improve overall data quality for HIV surveillance in the province, especially in high risk areas and populations, and to produce reports to inform strategic responses.

An order was implemented through the CPPHO to allow RNs to test and treat clients for STBBIs.

- COVID-19 vaccines were included with the seasonal influenza in the fall respiratory season immunization program by using existing infrastructure to maximize the ability to immunize as many Manitobans who wanted to be immunized against COVID-19 and influenza.
- A new ordering system for health care providers to order influenza vaccine doses was introduced for fall 2022 that made these vaccines available to providers earlier than in previous years and allowed for more frequent ordering of vaccine to match public demand. All providers who used this new system were sent a survey to evaluate it compared to the previous ordering system. The majority of providers considered it an improvement and responses to the survey are being used to improve the system for fall 2023.

- The department continued to offer COVID-19 vaccines to those at greatest risk as part of a Spring Immunization Program through many providers across Manitoba.
- The department implemented an mpox (formerly called monkeypox) immunization and treatment
 program to respond to an international and national outbreak. Vaccines were provided to Manitobans at
 higher risk of infection with mpox in summer 2022, during the international outbreak. Communications
 about the outbreak, how to diagnose mpox, and how to prevent it were sent to healthcare providers and
 the public frequently during this outbreak. These efforts helped contain the outbreak in Manitoba to just
 one case, which was travel acquired.
- Privacy audits of the Public Health Information Systems (PHIMS) were implemented to ensure Personal Health Information Act (PHIA) compliance and protect the personal health information of Manitobans.
- Quality audits of the Public Health Information System (PHIMS) were implemented to ensure completeness and correctness of Manitobans' health data.
- Provincial standardized training for the Public Health Information Systems (PHIMS) were established to achieve consistency across the province.
- The electronic form used for COVID-19 immunization inquiries to general inquiries were expanded to allow Manitobans to seek information about their immunization records without needing to visit their local public health office.

4(b) Population and Public Health

	Actual <u>Authority 2</u> 2022/23		2022/23	Variance Over/(Under)	Expl.
Expenditures by Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	11,024	138.95	11,200	(176)	
Other Expenditures	4,940	-	5,011	(71)	
Grant Assistance	855	-	950	(95)	
Total Sub-Appropriation	16,819	138.95	17,161	(342)	

Intergovernmental and Indigenous Relations

Sub-Appropriation Description

Fosters relationships and engagement with Indigenous leaders and organizations and the broader health system to collaborate on Indigenous led health initiatives and promote effective interfaces of the health services that are delivered by multiple governments. Provides co-ordination of policy advice and information to support work of ministerial and deputy minister federal, provincial, and territorial health tables.

Key Results Achieved

- Supported the provincial Indigenous Health Collaboration led by the Transformation Management Office (TMO), and Shared Health Manitoba and conducted engagement sessions within and across the Service Delivery Organizations (SDOs). The three sessions consisted of Indigenous Health leads and the Chief Executive Officers (CEOs), toward the development of an Indigenous Health operational plan for the SDOs. The goal of this work is to increase collaborative leadership across the SDOs concerning Indigenous Health.
- Supported the work of the Northern Health Provincial Collaboration and the Clinical and Preventive services Plan (CPSP), engaging Indigenous government organizations and leading clinical and operational leaders to inform future health programs and services.
- Supported the work of the Truth and Reconciliation (TRC) Call to Action (CTA) #57 Interdepartmental working group chaired by the Public Service Commission (PSC) -- providing advisory support on the planning and development of TRC related curriculum Cultural Competency training.
- Supported the work of the Disrupting Racism in Health Care committee (DRHC) chaired by Shared (SH) and the Northern Health Region (NRH). The DRHC committee covers a range of work on educative resources on Health Equity Gaps and Indigenous specific racism; and a Racial Climate Survey (RCS) for Service Delivery Organizations (SDO) staff.
- Worked in collaboration with representatives from multiple First Nation governments to address their immediate and longer term health services needs.
- Continued to provide support to the federal provincial territorial (FPT) tables of the Ministers and Deputy Ministers of Health, Seniors and Long Term Care, and Mental Health and Community Wellness, in addition to FPT committees and inter-jurisdictional agreements.
- Resumed the Planning and Operations Table for the Island Lake Regional Renal Health Program (ILRRHP).
- In the provincial nursing stations, implemented Tissue Plasminogen Activator (TKN), which is used in the case of acute myocardial infarctions (heart attacks), and which does not require a physician to be on site to use this treatment.

4(c) Intergovernmental and Indigenous Relations

Expenditures by	Actual <u>Authority 2022/23</u> 2022/23		2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	684	7.00	645	39	
Other Expenditures	89	-	509	(420)	
Total Sub-Appropriation	773	7.00	1,154	(381)	

Quality and Citizen Experience

Sub-Appropriation Description

Oversees health system quality that includes patient centred care, patient safety, accreditation and public engagement.

4(d) Quality and Citizen Experience

Evpanditures by	Actual <u>Authority 2</u> 2022/23		2022/23	Variance Over/(Under)	Expl.
Expenditures by Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	607	7.00	650	(43)	
Other Expenditures	978	-	1,100	(122)	
Total Sub-Appropriation	1,585	7.00	1,750	(165)	

Office of the Chief Provincial Public Health Officer

Sub-Appropriation Description

Provides co-ordinated and integrated public health leadership for public health services and programs at regional and provincial levels, including carrying out the role and responsibilities outlined in The Public Health Act for the purpose of promoting and protecting the health of the population.

Key Results Achieved

• The 2022 Health Status of Manitobans Report, written by the Office of the Chief Provincial Public Health Officer was released in December 2022. Overall, there has been a gradual improvement in the health status of people in Manitoba, however, the gap in health between Indigenous communities and other people in Manitoba is widening. The next Health Status Report is scheduled to be released in 2025.

4(e) Office of the Chief Provincial Public Health Officer

Expenditures by	Actual 2022/23	<u>Authority</u>	2022/23	Variance Over/(Under)	Expl.
Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	1,159	2.00	1,002	157	
Other Expenditures	1	-	22	(21)	
Total Sub-Appropriation	1,160	2.00	1,024	136	

Legislative Unit

Sub-Appropriation Description

Facilitates the development of new or amended statutes and regulations that are the responsibility of the ministers of Health, Mental Health and Community Wellness, and Seniors and Long-Term Care. Provides information and advice on the application of the statutes and regulations. Manages access to information requests received by the departments of Health, Mental Health and Community Wellness, and Seniors and Long-Term Care under The Freedom of Information and Protection of Privacy Act.

Key Results Achieved

- New health statutes and amendments to existing health statutes are developed to meet the government's legislative agenda: 25 statutes were amended and five statutes were repealed in the 2022/2023 fiscal year.
- New health regulations and amendments to health regulations are developed, as required: 19 regulations were amended, four regulations were repealed, and four new regulations were made.
- Timely, accurate information is provided in relation to health statutes and regulations: accurate and timely information was provided. In addition to other activities in this area, departmental staff responded to 1120 external enquiries relating to The Personal Health Information Act.
- The department meets its responsibilities under FIPPA in responding to requests for access to information under FIPPA: there were 225 responses to FIPPA requests for information. These numbers are based on a calendar year.
- Up-to-date online PHIA training modules are available for departmental management and staff and external stakeholders to support compliance with PHIA: 4325 people completed the online PHIA training modules for external stakeholders.

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	776	17.25	789	(13)	
Other Expenditures	95	-	264	(169)	
Total Sub-Appropriation	871	17.25	1,053	(182)	

4(f) Legislative Unit

Licensing and Compliance

Sub-Appropriation Description

Oversees health system compliance with applicable provincial legislation, policies and standards to ensure safe environments for patients are maintained. Administers The Protection for Persons in Care Act, including receiving reports of alleged patient abuse and neglect in designated health care facilities. Oversees licensing of Emergency Medical Services and Personal Care Homes.

Key Results Achieved

- The department conducted unannounced reviews at all 124 personal care homes, as well as pre-opening and/or follow-up reviews at several facilities for a total of 130 reviews (Park Place personal care home closed in April 2022, reducing the total number of personal care homes by one from 125 to 124)
- During 2022, the department completed reviews at all 124 personal care homes, held follow-up licensing
 meetings with regional health authorities, and issued 124 personal care home operating licences for the
 2023 calendar year. This is a particular achievement as each facility historically received a review once
 every two years; completing annual standards reviews ensures operators comply with regulatory
 requirements and helps to ensure that residents of provincially-licensed personal care homes receive
 quality care.

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Salaries and Employee Benefits	1,865	20.00	1,807	58	
Other Expenditures	244	-	163	81	
Total Sub-Appropriation	2,109	20.00	1,970	139	

4(g) Licensing and Compliance

Transition (Res. No. 21.5)

Main Appropriation Description

Oversees and manages current operations of service delivery structures, staff and related functions of Cadham Provincial Laboratory. Leads the department's transformation towards the new mandate of policy, planning, funding, and oversight.

	2022/23 Actual	<u>2022/23 A</u>	uthority
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Transition	16,997	7.50	11,709
Cadham Provincial Laboratory Services	18,842	145.00	24,878
Health Transformation	26,841	-	29 <i>,</i> 504
Priority Procedure Wait Times Reduction	125,441	-	122,031
TOTAL	188,121	152.50	188,122

Transition

Sub-Appropriation Description

Provide planning and oversight of the provincial services in the interim of any transitions to Shared Health and/or service delivery organizations (SDOs) and the College of Paramedics of Manitoba (COPM), guided by the health system transformation blueprint and roadmap plans and government authorities.

5(a) Transition

	Actual 2022/23	Authority	2022/23	Variance Over/(Under)	Evol
Expenditures by Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	Expl. No.
Salaries and Employee Benefits	494	7.50	539	(45)	
Other Expenditures	16,499	-	11,157	5,342	1
Grant Assistance	4	-	13	(9)	
Total Sub-Appropriation	16,997	7.50	11,709	5,288	

Explanation:

1. Primarily due to an accounting adjustment on the valuation of the allowance for doubtful accounts.

Cadham Provincial Laboratory Services

Sub-Appropriation Description

Provides response to and detection of disease in the province through laboratory screening, surveillance, and viral and emerging infectious disease testing. Serves as the primary lab resource to public health and government. The operational responsibilities of Cadham Provincial Laboratory Services transferred to Shared Health effective April 1, 2022.

5(b) Cadham Provincial Laboratory Services

	Actual 2022/23	<u>Authority 2022/23</u>		Variance Over/(Under)	Expl.
Expenditures by Sub-Appropriation	\$ (000s)	FTEs	\$(000s)	\$ (000s)	No.
Salaries and Employee Benefits	9,652	145.00	12,424	(2,772)	1
Other Expenditures	9,190	-	12,454	(3,264)	2
Total Sub-Appropriation	18,842	145.00	24,878	(6,036)	

Explanation(s):

- 1. Primarily due to staffing vacancies.
- 2. Primarily due to decreased regular testing activities for several seasonal diseases.

Health Transformation

Sub-Appropriation Description

Provides support for projects related to the transformation of the health system.

Key Results Achieved

- Supported the department in advancing health system recovery through improved accountability, monitoring, and oversight of the health system for by:
 - developing a standard Accountability Agreement template for Health Authorities in support of the Health System Governance and Accountability Act
 - supporting the development of the Performance and Oversight Division within Manitoba Health including implementing a new Health Authority performance management process supported by a new dashboard and reporting process
 - developing guidance for fiscal year 2024/25 Health Authority Annual Operating plans to improve annual planning and support the new performance management process
- The department worked with Shared Health to complete the transition of supply chain functions, payroll functions, and human resources support for 800+ employees from Cadham Provincial Laboratory and Selkirk Mental Health Centre with no reported disruptions affecting the business operations.
- Continued to work transitioning functions and programs related to primary care, home care, patient access, health education, and spiritual health care to Shared Health. Of the 92 functions identified, 68 were successfully transitioned with 24 remaining to be completed in the next fiscal year.
- Developed a draft Provincial Indigenous Collaborative Approach that provides a pathway for the provincial health system to address Indigenous priorities in collaboration with Indigenous health partners, federal partners and other agencies. The Approach will continue to advance understanding of the Indigenous partner landscape, engagement planning, and the Truth and Reconciliation Commission calls to action, among other legislation and guidance.

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	26,841	-	29,504	(2,663)	1
Total Sub-Appropriation	26,841	-	29,504	(2,663)	

5(c) Health Transformation

Explanation:

1. Primarily due to delay in the implementation of some Health Transformation initiatives.

Priority Procedure Wait Times Reduction

Sub-Appropriation Description

Provides additional funding for priority procedures, such as hip, knee and cataract surgeries, to improve patient care and meet the objective of reducing wait times for Manitobans.

Key Results Achieved

- Four service lines were within the preliminary wait time targets set:
 - Cardiac Catheterization Laboratory
 - Cardiac Coronary Artery By-pass Graph (CABG)
 - Cataract surgery
 - o CT scan
- Significant improvements on wait times were also be seen in Orthopedics Total Joint Replacements for Hip and Knee and Cardiac – Electrophysiology (EP).
- The COVID-19 backlog was fully eliminated, and so wait times improved, for a total of 13 service lines, including: Cataracts, Cardiac Catheterization Lab, Ultrasound, CT Scan, Pacemaker, Orthopedics Surgery Other (shoulder, foot and ankle surgery), Urology, Pediatric Sleep, Pediatric Neurodevelopmental Assessment, Cardiac EP, MRI, Myocardial Perfusion, and Transplant.
 - Of the eight services reported on the public dashboard, six have eliminated the COVID-19 backlog and reduced wait times.
- Global figures show that a total of 30% of the identified COVID-19 backlog was eliminated as of the end of March 2023 (accounting for 30 of 36 service lines).

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	125,441	-	122,031	3,410	1
Total Sub-Appropriation	125,441	-	122,031	3,410	

5(d) Priority Procedure Wait Times Reduction

Explanation:

1. Primarily due to increased volume as a result of the COVID-19 backlog.

Funding to Health Authorities (Res. No. 21.6)

Main Appropriation Description

Regional health authorities, CancerCare Manitoba (CCMB) and Shared Health provide a service delivery system that responsively, efficiently and effectively meets the needs of Manitobans in an affordable and sustainable manner.

	2022/23 Actual	<u>2022/23</u>	<u>Authority</u>
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Acute Care Services - Funding to Service Delivery Organizations	2,991,836	-	2,908,685
Long- Term Care Services - Funding to Service Delivery Organizations	686,143	-	681,828
Home Care Services - Funding to Service Delivery Organizations	382,825	-	385,887
Community Health Services - Funding to Service Delivery Organizations	230,086	-	250,931
Emergency Response and Transport Services - Funding to Service Delivery Organizations	177,434	-	175,103
TOTAL	4,468,324	-	4,402,434

Acute Care Services - Funding to Service Delivery Organizations

Sub-Appropriation Description

Provides funding to health authorities, CancerCare Manitoba and Shared Health to provide services delivered within acute care settings. Funding for the acute care sector encompasses operating funding related to compensation, supplies, and drugs required to operate acute care facilities and programs.

	Actual	<u>Authority 2022/23</u>		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	2,991,836	-	2,908,685	83,151	1
Total Sub-Appropriation	2,991,836	-	2,908,685	83,151	

6(a) Acute Care Services - Funding to Service Delivery Organizations

Explanation:

1. Primarily due to COVID-19 operating costs and price and volume increases.

Long-Term Care Services - Funding to Service Delivery Organizations

Sub-Appropriation Description

Provides funding to health authorities and Shared Health to deliver services to provincially licensed personal care homes. Funding for the long-term care sector includes operating funding related to compensation, supplies, and drugs required to operate long-term care facilities.

6(b) Long-Term Care Services - Funding to Service Delivery Organizations

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	686,143	-	681,828	4,315	1
Total Sub-Appropriation	686,143	-	681,828	4,315	

Explanation:

1. Primarily due to COVID-19 operating costs and price and volume increases.

Home Care Services - Funding to Service Delivery Organizations

Sub-Appropriation Description

Provides funding to health authorities and Shared Health to provide home care and related services required to enhance patient care in their homes. Funding for the home care sector is largely comprised of compensation and supply costs.

6(c) Home Care Services - Funding to Service Delivery Organizations

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	382,825	-	385,887	(3,062)	1
Total Sub-Appropriation	382,825	-	385,887	(3,062)	

Explanation:

1. Primarily due to re-distribution of funding within other sectors in Funding to Service Delivery Organizations.

Community Health Services - Funding to Service Delivery Organizations

Sub-Appropriation Description

Provides funding to health authorities and Shared Health to fund services provided through Community Health Agencies.

6(d) Community Health Services - Funding to Service Delivery Organizations

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	230,086	-	250,931	(20,845)	1
Total Sub-Appropriation	230,086	-	250,931	(20,845)	

Explanation:

1. Primarily due to re-distribution of funding within other sectors in Funding to Service Delivery Organizations.

Emergency Response and Transport Services - Funding to Service Delivery Organizations

Sub-Appropriation Description

Provides funding to Shared Health for Emergency Response Services across the province, as well as funding to health authorities for the Northern Patient Transportation Program.

6(e) Emergency Response and Transport Services - Funding to Service Delivery Organizations

	Actual	<u>Authorit</u>	y 2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	177,434	-	175,103	2,331	1
Total Sub-Appropriation	177,434	-	175,103	2,331	

Explanation:

1. Primarily due to volume increases.

Provincial Health Services (Res. No. 21.7)

Main Appropriation Description

Provincial health-related programming and services, which include Out-of-Province, Blood Transfusion Services, Federal Hospitals, Ancillary Programs, Nursing Recruitment and Retention Initiatives, the Manitoba Learning Health System Network, and Immunizing Agents, Biologics and Drugs.

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	2022/23 Actual	<u>2022/23</u>	Authority
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Out-of-Province	50,083	-	63 <i>,</i> 645
Blood Transfusion Services	73,841	-	66,298
Federal Hospitals	3,713	-	2,937
Ancillary Programs	22,051	-	19,231
Nursing Recruitment and Retention Initiatives	5,074	-	4,016
Manitoba Learning Health System Network	3,701	-	3,750
Immunizing Agents, Biologics and Drugs	33,843	-	30,431
TOTAL	192,306	-	190,308

Out-of-Province

Sub-Appropriation Description

Provides for insured hospital services required by Manitobans while temporarily out of the province. This fulfills the portability requirements of The Canada Health Act.

Key Results Achieved

- Adjudicated 1,170 requests from Manitoba specialists from coverage of services outside of Manitoba
- Provided \$629K in travel subsidies to 476 patients for 179 international and 380 domestic trips
- Adjudicated 2,875 physician claims, 667 outpatient visits and 3,853 inpatient days for emergency care outside of Canada
- Paid \$30.1M to other provinces and territories in accordance with the Interprovincial Reciprocal Billing Agreement for physician's fees (excluding Quebec physicians) and \$50.1M for hospital services on behalf of Manitoba residents who received care elsewhere in Canada

 Recoveries received by Manitoba Health as a result of reciprocal billings to other provinces and territories for care provided to their residents totalled \$15.6M for physicians fees (excluding Quebec physicians) and \$47.3M for hospital services

7(a) Out-of-Province

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	50,083	-	63,645	(13,562)	1
Total Sub-Appropriation	50,083	-	63,645	(13,562)	

Explanation:

1. Primarily due to lower volume, partially offset by higher price.

Blood Transfusion Services

Sub-Appropriation Description

Oversees and advises on policy and planning direction regarding Manitoba's utilization of blood products, organ and tissue supply and associated expenditures to ensure that Manitobans have sustainable access to appropriate transfusion and transplant products and services.

Key Results Achieved

- Through participation on the Provincial Territorial Blood Liaison Committee, Policy and Standards
 represented Manitoba in negotiating the annual Canadian Blood Services budget and ensured Canadian
 Blood Services accountability with the National Accountability Agreement. Policy and Standards also
 worked closely with colleagues at Shared Health to oversee the implementation of Shared Health's blood
 product utilization initiatives and promote cost efficiency during global supply chain constraints, ensuring
 that Manitobans have sustained access to critical blood and blood products.
- Participated in successful negotiations for the 2023/24 Canadian Blood Services budget.

	Actual	<u>Authorit</u>	ty 2022/23	Variance		
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.	
Other Expenditures	73,841	-	66,298	7,543	1	
Total Sub-Appropriation	73,841	-	66,298	7,543		

7(b) Blood Transfusion Services

Explanation:

1. Primarily due to increased usage of blood and blood related products.

Federal Hospitals

Sub-Appropriation Description

Provides funding for medical services delivered to non-treaty residents of Manitoba at federal hospitals located in Norway House and Hodgson and 22 federal nursing stations.

7(c) Federal Hospitals

	Actual	Authority	y 2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	3,713	-	2,937	776	1
Total Sub-Appropriation	3,713	-	2,937	776	

Explanation:

1. Primarily due to higher price and volume.

Ancillary Programs

Sub-Appropriation Description

Provides for assistive devices as prescribed under The Prosthetic, Orthotic and other Medical Devices Insurance Regulation of The Health Services Insurance Act.

Key Results Achieved

- Expansion of coverage for insulin pumps for all eligible Manitobans with Type 1 diabetes who meet
 eligibility criteria was enabled in March 2023, further to the establishment of the Young Adult Insulin
 Pump Program. An insulin pump is a small mechanical device that delivers insulin at a steady rate through
 a very fine needle inserted under the skin, and is an important tool for people living with diabetes which
 plays a vital role in helping to manage and regulate blood sugar.
- Regulation amendments were made to the Prosthetic, Orthotic and Other Medical Devices Insurance Regulation in order to update the pricing list for artificial eye benefits under the Prosthetic Eye Program. These pricing updates brought Manitoba more in line with other jurisdictions.

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	22,051	-	19,231	2,820	1
Total Sub-Appropriation	22,051	-	19,231	2,820	

7(d) Ancillary Programs

Explanation:

1. Primarily due to higher volume of prosthetic and orthotic devices.

Sub-Appropriation Description

Provides recruitment and retention initiatives for nurses in Manitoba.

Key Results Achieved

- As part of the Health Human Resource Action Plan, the following key achievements were made during 2022/23 for nursing recruitment and retention:
 - Negotiated and implemented financial incentives to recruit and retain nurses in the provincial health care system. This included weekend super premium, full-time incentive, travel nurse premium, recruitment/retention incentive, wellness incentive, licensure reimbursement, and refer-a-nurse incentive. Implementation occurred in 2022/23 and continued to 2023/24.
 - Established a provincial float pool to support nurse staffing needs across the province.
 - Commitment to expand nursing education by 400 seats. Approximately 289/400 seats were confirmed in 2022/23.

	Actual	Authority 2022/23		Variance		
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.	
Other Expenditures	5,074	-	4,016	1,058	1	
Total Sub-Appropriation	5,074	-	4,016	1,058		

7(e) Nursing Recruitment and Retention Initiatives

Explanation:

1. Primarily due to increased Authorized Prescriber Nursing Program, Registered Nurses (RN) Clinical Competency Assessments, Nurse Practitioner Grants and other initiatives.

Manitoba Learning Health System Network

Sub-Appropriation Description

Supports policy evaluation and research on priority health issues for the department through the Manitoba Centre for Health Policy, George and Fay Yee Centre for Healthcare Innovation, Manitoba Training Program for Health Services Research and Translating Research in Elder Care.

Key Results Achieved

 The Manitoba Learning Health System Network (MLHSN) partners develop, maintain and operate the Population Health Data Repository which supported 297 research projects in 2022/23. MLHSN partners created a centralized and continuous intake pilot process for research requests from Manitoba Health, other health-related departments and Shared Health. Supporting Older Adult Healthcare Reform through Research (formerly known as Translating Research in Elder Care) investigated the impact of COVID-19 on personal care home work environments and resident care. The Manitoba Training Program provided University of Manitoba graduate students with health services research training and skills to be partners in healthcare reform and innovation.

	Actual 2022/23 \$ (000s)	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation		FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	3,701	-	3,750	(49)	
Total Sub-Appropriation	3,701	-	3,750	(49)	

7(f) Manitoba Learning Health System Network

Immunizing Agents, Biologics and Drugs

Sub-Appropriation Description

Ensures the security of the supply of vaccines and drugs via purchase, storage and distribution of immunizing agents, biologics and drugs.

Key Results Achieved

- Procured and distributed more Naloxone kits to meet the increased demand.
- Distributed an increased amount of medications to providers to treat those with Sexually Transmitted and Blood-Borne infections as we continue to see increased numbers of infections in Manitoba

7(g) Immunizing Agents, Biologics and Drugs

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	33,843	-	30,431	3,412	1
Total Sub-Appropriation	33,843	-	30,431	3,412	

Explanation:

1. Primarily due to higher volume.

Medical (Res. No. 21.8)

Main Appropriation Description

Provides payment to, or on behalf of, residents of Manitoba for services insured under the Manitoba Health Services Insurance Plan in respect of fee-for-service claims submitted by physicians (including out-of-province physicians), optometrists, chiropractors, oral and maxillofacial surgeons and dentists, as well as non-fee-forservice payments to physicians. Provides support through the physician recruitment and retention programs towards the training, recruitment and retention of physicians in Manitoba.

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	2022/23 Actual	<u>2022/2</u>	3 Authority
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Fee-For-Service	966,593	-	920,542
Alternate Funding	449,145	-	462,139
Other Professionals	28,757	-	31,106
Out-of-Province Physicians	30,107	-	33,044
Physician Recruitment and Retention Program	24,583	-	25,586
TOTAL	1,499,185	-	1,472,417

Fee-For-Service

Sub-Appropriation Description

Provides for services in respect of fee-for-service claims submitted by physicians.

8(a) Fee-For-Service

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	966,593	-	920,542	46,051	1
Total Sub-Appropriation	966,593	-	920,542	46,051	

Explanation:

1. Primarily due to an increase in volume.

Alternate Funding

Sub-Appropriation Description

Provides for services in respect of non-fee-for-service payments to physicians, physician assistants, and clinical assistants.

8(b) Alternate Funding

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	449,145	-	462,139	(12,994)	1
Total Sub-Appropriation	449,145	-	462,139	(12,994)	

Explanation:

1. Primarily due to vacancies in Service Delivery Organizations.

Other Professionals

Sub-Appropriation Description

Provides for services insured under the Manitoba Health Services Insurance Plan in respect of fee-for-service claims submitted by optometrists, chiropractors, and oral and maxillofacial surgeons and dentists.

8(c) Other Professionals

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	28,757	-	31,106	(2,349)	1
Total Sub-Appropriation	28,757	-	31,106	(2,349)	

Explanation:

1. Primarily due to price and volume decreases.

Out-of-Province Physicians

Sub-Appropriation Description

Provides for services insured under the Manitoba Health Services Insurance Plan in respect of fee-for-service claims submitted by physicians as well as non-fee-for-service payments to physicians for services required by Manitobans while temporarily out of the province.

8(d) Out-of-Province Physicians

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	30,107	-	33,044	(2,937)	1
Total Sub-Appropriation	30,107	-	33,044	(2,937)	

Explanation:

1. Primarily due to volume decreases.

Physician Recruitment and Retention Program

Sub-Appropriation Description

Provides for physician recruitment and retention programs towards the training, recruitment, and retention of physicians in Manitoba.

Key Results Achieved

- Manitoba Health approved a 10-seat increase in the one-year International Medical Graduate program, and 30 seats in the two-year postgraduate medical education program for internationally educated medical students at the University of Manitoba.
- Amendments to the College of Physicians and Surgeons of Manitoba's General Regulation were made to remove the requirement for internationally educated physicians in specific membership classes to pass the Medical Council of Canada Qualifying Exam Part 1 (MCCQE1) before registering and practising in Manitoba. This change is intended to facilitate physician recruitment while maintaining high competency levels.
- Established a provincial Joint Task Force to Reduce Administrative Burdens for Physicians. The Task Force
 will identify unnecessary administrative burdens placed on physicians, set measurable goals and then
 work with relevant organizations to streamline or eliminate the excessive administrative burdens. The
 task force will also provide guidance and recommendations on how to avoid creating excessive
 administrative burdens for physicians in the future.

- Introduced new extended hour fee tariffs for physicians at primary care and community health clinics.
- Invested \$450K to support physician health and wellness through the Physician Peer Support program administered by Doctors Manitoba.

8(e) Physician Recruitment and Retention Program

	Actual	Authority 2022/23		Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	24,583	-	25,586	(1,003)	1
Total Sub-Appropriation	24,583	-	25,586	(1,003)	

Explanation:

1. Primarily due to decrease in family medicine residency grants under Northern Remote Physician Placement Initiative (NRPPI)

Pharmacare (Res. No. 21.9)

Main Appropriation Description

Provides for prescribed pharmaceutical benefits subject to The Prescription Drugs Cost Assistance Act and regulations and The Pharmaceutical Act and regulations to protect the residents of Manitoba from financial hardship resulting from expenses for eligible prescription drugs. Includes prescribed pharmaceutical benefits provided under the Department of Families' Health Services program for social assistance participants.

Key Results Achieved

- Modification (additions and deletions) to the provincial formularies.
 - Agreements with manufacturers of generic drugs continued to be reviewed and renegotiated through the panCanadian Pharmaceutical Alliance. The attainment of increased value through further price reductions is the primary goal and will move the average price paid for these products closer to the international comparators.
 - New, innovative drugs continued to be added to the provincial formularies. These new drugs offered therapeutic and cost-effective improvements over standard-of-care or over older, less effective products. New products were added in many disease domains as they were moved through the Canadian drug approval process.
- Work in both activities above are coordinated such that savings achieved in (1) can be applied to the incremental costs expected in (2), and to ensure appropriate fiscal management of associated budgets.

	2022/23 Actual	2022/23 Authority	
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Drug Programs	438,701	-	375,954
Drug Expenditures Incurred by the Department of Families	(75,963)	-	(77,892)
TOTAL	362,738	-	298,062

9(a) Drug Programs

	Actual	<u>Authorit</u>	ty 2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	438,701	-	375,954	62,747	1
Total Sub-Appropriation	438,701	-	375,954	62,747	

Explanation:

1. Primarily due to higher price and volume.

9(b) Drug Expenditures Incurred by the Department of Families

	Actual	<u>Authorit</u>	ty 2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	(75,963)	-	(77,892)	1,929	
Total Sub-Appropriation	(75,963)	-	(77,892)	1,929	

Capital Funding (Res. No. 21.10)

Main Appropriation Description

Provides funding to health authorities for principal repayment on approved borrowing, equipment purchases, other capital expenditures and interest.

	2022/23 Actual	<u>2022/2</u>	<u>3 Authority</u>
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
Principal Repayments	122,215	-	127,317
Equipment Purchases and Replacements	18,163	-	18,163
Other Capital	9,608	-	7,700
Interest	53,759	-	54,710
TOTAL	203,745	-	207,890

10(a) Principal Repayments

	Actual	<u>Authorit</u>	ty 2022/23	Variance	_
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	122,215	-	127,317	(5,102)	1
Total Sub-Appropriation	122,215	-	127,317	(5,102)	

Explanation:

1. Project timelines took longer than initially planned therefore debt repayment did not occur in the manner originally forecasted.

10(b) Equipment Purchases and Replacements

	Actual	<u>Authorit</u>	y 2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	18,163	-	18,163	-	
Total Sub-Appropriation	18,163	-	18,163	-	

10(c) Other Capital

	Actual	<u>Authorit</u>	ty 2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	9,608	-	7,700	1,908	1
Total Sub-Appropriation	9,608	-	7,700	1,908	

Explanation:

1. Primarily due to higher outright cash payments for equipment purchases.

10(d) Interest

-	Actual	<u>Authorit</u>	ty 2022/23	Variance	Eval
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	53,759	-	54,710	(951)	
Total Sub-Appropriation	53,759	-	54,710	(951)	

Costs Related to Capital Assets (Non-Voted) (Res. No. 21.11)

Main Appropriation Description

Provides for the amortization and interest expense related to capital assets.

	2022/23 Actual	<u>2022/2</u>	3 Authority
Sub-appropriations	\$ (000s)	FTEs	\$ (000s)
General Assets	7,306	-	7,500
TOTAL	7,306	-	7,500

11(a) General Assets

	Actual	<u>Authorit</u>	y 2022/23	Variance	
Expenditures by Sub-Appropriation	2022/23 \$ (000s)	FTEs	\$(000s)	Over/(Under) \$ (000s)	Expl. No.
Other Expenditures	7,306	-	7,500	(194)	
Total Sub-Appropriation	7,306	-	7,500	(194)	

Other Key Reporting

Departmental Risk

Health provides leadership in risk analysis through its Comptrollership framework and by creating a risk management culture that facilitates assessment and management of risk. Risk is managed for policy, operations, human resources, financial, legal, health and safety, environment and reputation within a legislative environment, both in regards to the probability of occurrence and degree of damage and strategies for mitigating or minimizing potential situations.

A continuous, proactive, and systematic process is undertaken to ensure that decisions support the achievement of organizational corporate objectives. This enterprise approach ensures that accidents and unexpected losses are minimized.

The department manages its risks under the guidance of its comptrollership plan and all aspects of the central government Manitoba Risk Management Policy. The department must: a) emphasize loss prevention, loss reduction and risk transfer methods; b) identify risks thoroughly; c) identify strategies to mitigate or minimize risk; and d) receive appropriate approval. Specific activities are identified in the department comptrollership framework to meet risk management responsibilities, as follows:

- High level enterprise risk is continually discussed at senior leadership meetings
- COVID-19 Task Force and the Diagnostics Services Review Task Force in place to examine and mitigate risks for specific task force objectives (COVID-19 pandemic and surgery back log/wait lists).
- Due to COVID-19 and Health system transition risk management processes continue to evolve and adapt to health system needs.

Through fiscal year 2022/23, the Department undertook the following specific activities toward managing its risks.

Risk	Activities taken to reduce / remove risk		
COVID-19, Flu and infectious disease spread, and other developing diseases	 Implemented COVID-19 booster shot campaigns across the province and enhanced focus on other vaccine programs such as influenza 		
	 Implemented an mpox (formerly called monkeypox) immunization and treatment program to respond to an international and national outbreak 		
	 Updated the provincial protocols for management of syphilis and HIV including updated clinical guidance and information on testing and treatment 		
	 Published a fact sheet for the public about syphilis to include information about risks and prevention of congenital syphilis 		
	 Issued a series of communications to health care providers stressing the urgency of the STBBI outbreak and their role in the response effort 		

•	Implemented an incentive for primary care providers to improve STBBI case reporting, treatment and case contacts
•	Implemented an Order through the CPPHO to allow RNs to test and treat clients for STBBIs
•	Began piloting a new workforce (communicable disease paraprofessionals) to enhance public health follow-up with contacts of gonorrhea and chlamydia cases
•	Implemented PCH standards modernization recommendations as outlined in the Stevenson Review
 Licensing, compliance and standards 	Enhanced transparency to the public with the release of standards reviews for personal care homes
reviews	Enhanced local capacity & safety by implementation of PCH patient supports (virtual support, locally and/or across the inter- disciplinary network, social supports from family/close contacts, etc.)
• Policy Modernization	Incorporated transformation changes to policies to improve transparency and customer service to Manitobans. This includes modernization of health policy to enable Shared Health in its provision of provincial clinical programming, and to align with the service enhancements prioritized in the Manitoba Clinical Preventive Services Plan (i.e. local service delivery organizations, home & community care, palliative care, renal health, and others). Developed infrastructure policy to standardize how new projects are developed and reported on, in alignment with the Health System Governance and Accountability Act
• Public Service Build Capacity	Continued work to establish the Commissioning and Accountability Management framework and continue Transformation of Department processes to a Policy, Planning, Funding and Oversight model Continued work to shift operational programs/services to Shared Heath such as primary care services
•	Continued efforts to build capacity within the department that included recruitment and retention of staff throughout 2022/23

Regulatory Accountability and Red Tape Reduction

Regulatory requirements

	April 1, 2022	March 31, 2023
Total number of regulatory requirements	109,571	107,491
Net change		-1,998
Percentage change		-1.82%

- 'Total number of regulatory requirements' includes transfers of regulatory requirements in and out of the department in 2022/23.
- 'Net change' includes the changes (sum of decreases and increases) in regulatory requirements undertaken by the department in 2022/23 and is net of transfers of regulatory requirements in and out of the department.
- 'Percentage change' includes percentage changes in regulatory requirements undertaken by the department in 2022/23 and is net of transfers of regulatory requirements in and out of the department.

The Public Interest Disclosure (Whistleblower Protection) Act

The Public Interest Disclosure (Whistleblower Protection) Act came into effect in April 2007 and amended in 2018 gives employees a clear process for disclosing concerns about significant and serious matters (wrongdoing) in the Manitoba public service, and protects employees who make those disclosures from reprisal. The act builds on protections already in place under other statutes, as well as collective bargaining rights, policies, practices and processes in the Manitoba public service.

Wrongdoing under the act may be: contravention of federal or provincial legislation; an act or omission that endangers public safety, public health or the environment; gross mismanagement; or knowingly directing or counseling a person to commit a wrongdoing. The act is not intended to deal with routine operational or administrative matters.

A disclosure made by an employee in good faith, in accordance with the act, and with a reasonable belief that wrongdoing has been, or is about to be, committed is considered to be a disclosure under the act, whether or not the subject matter constitutes wrongdoing. All disclosures receive careful and thorough review to determine if action is required under the act, and must be reported in a department's annual report in accordance with Section 29.1.

The following is a summary of disclosures received by Manitoba Health for fiscal year 2022/2023.

Information Required Annually (per section 29.1 of PIDA)	Fiscal Year 2022/2023
The number of disclosures received, and the number acted on and not acted on. Subsection 29.1(2)(a)	Nil
The number of investigations commenced as a result of a disclosure. Subsection 29.1 (2)(b)	Nil
In the case of an investigation that results in a finding of wrongdoing, a description of the wrongdoing and any recommendations or corrective actions taken in relation to the wrongdoing, or the reasons why no corrective action was taken. Subsection 29.1(2)(c)	Nil

Equity and Diversity Benchmarks

Manitobans are best served by a public service that is inclusive and representative of the diverse population of Manitoba at all levels of the organization, including senior management. Employment equity status is self-identified on a voluntary basis when individuals are hired into a position or at any time during their employment with Manitoba's public service. Employment equity groups include women, Indigenous peoples, visible minorities, and persons with disabilities. This measure will capture diversity in Manitoba's public service and in senior management.

Equity Group	Benchmarks	% Total Employees as at March 31, 2023
Women	50%	71%
Indigenous Peoples	16%	8%
Visible Minorities	13%	26%
Persons with Disabilities	9%	7%



INDEPENDENT AUDITOR'S REPORT

To the Legislative Assembly of Manitoba To the Minister of Health

Opinion

We have audited the Schedule of Payments of the Manitoba Health Services Insurance Plan (the Plan) for the year ended March 31, 2023 ("the schedule").

In our opinion, the financial information in the schedule of the Plan for the year ended March 31, 2023 is prepared, in all material respects, in accordance with Section 5 of *The Public Sector Compensation Disclosure Act.*

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Schedule* section of our report. We are independent of the Plan in accordance with the ethical requirements in Canada that are relevant to our audit of the schedule, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter: Basis of Accounting

We draw attention to the schedule, which describes the basis of accounting. The schedule is prepared to assist the Plan to meet the requirements of Section 5 of *The Public Sector Compensation Disclosure Act*. As a result, the schedule may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Other information

Management is responsible for the other information. The other information comprises the information included in the Annual Report, but does not include the schedule and our auditor's report thereon.

Our opinion on the schedule does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the schedule, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the schedule or our knowledge obtained in the audit or otherwise appears to be materially misstated.

We obtained the Annual Report prior to the date of this auditor's report. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of Management and Those Charged with Governance for the Schedule

Management is responsible for the preparation of the schedule in accordance with Section 5 of *The Public Sector Compensation Disclosure Act* and for such internal control as management determines is necessary to enable the preparation of the schedule that is free from material misstatement, whether due to fraud or error.

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Those charged with governance are responsible for overseeing the Plan's financial reporting process.

Auditor's Responsibilities for the Audit of the Schedule

Our objectives are to obtain reasonable assurance about whether the schedule is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial information.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the schedule, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

"Original signed by"

Office of the Auditor General Winnipeg, Manitoba September 27, 2023

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

Basis of Accounting

This Schedule of Payments is published in compliance with the provisions of The Public Sector Compensation Disclosure Act.

The Act requires the publication of the name of every person who receives \$85,000 or more in the fiscal year for providing services to insured persons under The Health Services Insurance Act, and the amount paid to each. It should be noted that the payments reported for physicians represents their fee-for-service, net of any recoveries, sessional fees, and fees for committee meetings.

The payments reported do not include payments that a physician may receive:

- From alternate sources such as for salary and contract payments, on-call stipends, etc.
- For providing services to insured persons (Manitoba residents) when outside of Manitoba for which Manitoba Health reimburses the health care provider.
- For providing services to non-residents of Manitoba (non-insured persons under The Health Services Insurance Act) for which Manitoba Health receives reimbursement from third parties.

The fee-for-service payments are reported under the name of the practitioner who provided the services, except for special arrangements when services provided by a group of practitioners are billed in the name of a single practitioner for administrative efficiencies. This type of billing arrangement is in place for radiology, laboratory, nuclear medicine and dialysis services in particular. As a result, some of the amounts shown have not been generated solely by the practitioner whose name is shown.

Persons reading these data should understand that:

- This Schedule provides only a record of gross payments made by Manitoba Health to the practitioner.
- A practitioner's net income may vary from the gross payments shown as costs of operating a practice must be paid from these gross payments.
- As total revenues and costs of practice vary significantly between specialty groups and between individual practitioners, net income can also vary significantly.

ABBOTT, BURTON B \$542,621.47 ADELUFOSI, ADEGOKE O \$190,840.25 AHMED, NASEER \$226,747.06 ABBU, GANESAN P \$172,913.57 ADRIAANSEN, MARIA JUS \$160,575.67 AHMED, SANA J \$375,177.88 ABBU, KAVITHAN \$516,897.63 AFIFI, TAREK J \$1,596,898.27 AHUJA, NITIN \$509,742.39 ABDALLATEEF, YOSSRA H \$533,964.67 AFOLABI, BABAFEMI \$488,074.61 AHWENG, ALBERT \$277,839.14 ABDALMASSIH, MICHAEL \$175,050.65 AFROSE, SAIMA \$304,882.97 AHWENG, ANDREW G \$1,771,203.61 ABDULRAHMAN, SULEIMAN \$596,709.59 AFULUKWE, FRANCIS \$219,644.45 AIKEN, CHRISTOPH \$206,181.04 ABDULREHMAN, A S \$239,041.39 AGABA, NGOZI MAR \$167,348.13 AINSLIE, MARTHA D \$174,402.48 ABEJ, ESMAIL A \$1,386,172.53 AGOSTINHO, ANDREA V \$240,953.91 AJAO, MONISOLA \$192,426.20 ABBANS, ELISSA M \$402,684.25 AGUAYO BONNIARD, ALBERTO J \$910,332.52 AJAYI, TEMITOPE \$538,919.44 ABRAMS, ELISSA M \$482,819.56 AHMAD, ABSAR \$364,636.36 AKERELE,						
ABBU, KAVITHAN\$516,897.63AFIFI, TAREK J\$1,596,898.27AHUJA, NITIN\$509,742.39ABDALLATEEF, YOSSRA H\$533,964.67AFOLABI, BABAFEMI\$488,074.61AHWENG, ALBERT\$277,839.14ABDALMASSIH, MICHAEL\$175,050.65AFROSE, SAIMA\$304,882.97AHWENG, ANDREW G\$1,771,203.61ABDELGADIR, IBRAHIM\$696,856.74AFSNER, NARGES\$336,943.88AIKEN, ANDREW\$129,692.33ABDULRAHMAN, SULEIMAN\$596,709.59AFULUKWE, FRANCIS\$219,644.45AIKEN, CHRISTOPH\$206,181.04ABDULREHMAN, A S\$239,041.39AGABA, NGOZI MAR\$167,348.13AINSLIE, MARTHA D\$174,402.48ABEJ, ESMAIL A\$1,386,172.53AGOSTINHO, ANDREA V\$240,953.91AJAO, MONISOLA\$192,262.02ABISHEVA, GULNIYAZ\$557,958.50AGRAWAL, VENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.36AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,700.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82 <td>ABBOTT, BURTON B</td> <td>\$542,621.47</td> <td>ADELUFOSI, ADEGOKE O</td> <td>\$190,840.25</td> <td>AHMED, NASEER</td> <td>\$226,747.06</td>	ABBOTT, BURTON B	\$542,621.47	ADELUFOSI, ADEGOKE O	\$190,840.25	AHMED, NASEER	\$226,747.06
ABDALLATEEF, YOSSRA H\$533,964.67AFOLABI, BABAFEMI\$488,074.61AHWENG, ALBERT\$277,839.14ABDALMASSIH, MICHAEL\$175,050.65AFROSE, SAIMA\$304,882.97AHWENG, ANDREW G\$11,771,203.61ABDELGADIR, IBRAHIM\$696,856.74AFSHAR, NARGES\$336,943.88AIKEN, ANDREW\$129,692.33ABDULRAHMAN, SULEIMAN\$596,709.59AFULUKWE, FRANCIS\$219,644.45AIKEN, CHRISTOPH\$206,181.04ABDULREHMAN, A S\$239,041.39AGABA, NGOZI MAR\$167,348.13AINSLIE, MARTHA D\$174,402.48ABEJ, ESMAIL A\$1,386,172.53AGOSTINHO, ANDREA V\$240,953.91AJAO, MONISOLA\$192,426.20ABISHEVA, GULNIYAZ\$557,958.50AGRAWAL, VEENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.36AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,700.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABBU, GANESAN P	\$172,913.57	ADRIAANSEN, MARIA JUS	\$160,575.67	AHMED, SANA J	\$375,177.68
ABDALMASSIH, MICHAEL\$175,050.65AFROSE, SAIMA\$304,882.97AHWENG, ANDREW G\$1,771,203.61ABDELGADIR, IBRAHIM\$696,856.74AFSHAR, NARGES\$336,943.88AIKEN, ANDREW G\$129,692.33ABDULRAHMAN, SULEIMAN\$596,709.59AFULUKWE, FRANCIS\$219,644.45AIKEN, CHRISTOPH\$206,181.04ABDULREHMAN, A S\$239,041.39AGABA, NGOZI MAR\$167,348.13AINSLIE, MARTHA D\$174,402.48ABEJ, ESMAIL A\$1,386,172.53AGOSTINHO, ANDREA V\$240,953.91AJAO, MONISOLA\$192,426.20ABISHEVA, GULNIYAZ\$557,958.50AGRAWAL, VEENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.66AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,700.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABBU, KAVITHAN	\$516,897.63	AFIFI, TAREK J	\$1,596,898.27	AHUJA, NITIN	\$509,742.39
ABDELGADIR, IBRAHIM\$696,856.74AFSHAR, NARGES\$336,943.88AIKEN, ANDREW\$129,692.33ABDULRAHMAN, SULEIMAN\$596,709.59AFULUKWE, FRANCIS\$219,644.45AIKEN, CHRISTOPH\$206,181.04ABDULREHMAN, A S\$239,041.39AGABA, NGOZI MAR\$167,348.13AINSLIE, MARTHA D\$174,402.48ABEJ, ESMAIL A\$1,386,172.53AGOSTINHO, ANDREA V\$240,953.91AJAO, MONISOLA\$192,426.20ABISHEVA, GULIYAZ\$557,958.50AGRAWAL, VEENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.66AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,700.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABDALLATEEF, YOSSRA H	\$533,964.67	AFOLABI, BABAFEMI	\$488,074.61	AHWENG, ALBERT	\$277,839.14
ABDULRAHMAN, SULEIMAN\$596,709.59AFULUKWE, FRANCIS\$219,644.45AIKEN, CHRISTOPH\$206,181.04ABDULREHMAN, A S\$239,041.39AGABA, NGOZI MAR\$167,348.13AINSLIE, MARTHA D\$174,402.48ABEJ, ESMAIL A\$1,386,172.53AGOSTINHO, ANDREA V\$240,953.91AJAO, MONISOLA\$192,426.20ABISHEVA, GULNIYAZ\$557,958.50AGRAWAL, VEENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$553,819.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.63AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,70.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABDALMASSIH, MICHAEL	\$175,050.65	AFROSE, SAIMA	\$304,882.97	AHWENG, ANDREW G	\$1,771,203.61
ABDULREHMAN, A S\$239,041.39AGABA, NGOZI MAR\$167,348.13AINSLIE, MARTHA D\$174,402.48ABEJ, ESMAIL A\$1,386,172.53AGOSTINHO, ANDREA V\$240,953.91AJAO, MONISOLA\$192,426.20ABISHEVA, GULNIYAZ\$557,958.50AGRAWAL, VEENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.66AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,700.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABDELGADIR, IBRAHIM	\$696,856.74	AFSHAR, NARGES	\$336,943.88	AIKEN, ANDREW	\$129,692.33
ABEJ, ESMAIL A\$1,386,172.53AGOSTINHO, ANDREA V\$240,953.91AJAO, MONISOLA\$192,426.20ABISHEVA, GULNIYAZ\$557,958.50AGRAWAL, VEENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.40ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.66AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,70.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABDULRAHMAN, SULEIMAN	\$596,709.59	AFULUKWE, FRANCIS	\$219,644.45	AIKEN, CHRISTOPH	\$206,181.04
ABISHEVA, GULNIYAZ\$557,958.50AGRAWAL, VEENA R\$364,926.58AJAO, OLARENWAJ\$289,199.69ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.36AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,70.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABDULREHMAN, A S	\$239,041.39	AGABA, NGOZI MAR	\$167,348.13	AINSLIE, MARTHA D	\$174,402.48
ABO ALHAYJAA, SAHAR\$402,684.25AGUAYO BONNIARD, ALBERTO J\$910,332.52AJAYI, TEMITOPE\$538,919.44ABRAMS, ELISSA M\$482,819.56AHMAD, ABSAR\$364,636.36AKERELE, OLADAPO\$425,321.97ABUJAZIA, ABDURREZA\$532,125.38AHMAD, ARDALANEJ\$99,341.07AKHIDIME, BLESSING\$92,262.87ADAM, CHRIS J E\$433,460.31AHMAD, EJAZ\$499,124.86AKINPELU, FADEKE O\$432,186.07ADAM-SDROLIAS, HEATHER L\$220,322.90AHMAD, SUFFIA N\$369,543.37AKINSOLA, AKINTUNDE\$307,70.82ADEGBESAN, ADENIYI A\$1,019,467.66AHMED, MUNIR\$522,035.37AKINSOLA, OLUWATOSI\$108,873.82	ABEJ, ESMAIL A	\$1,386,172.53	AGOSTINHO, ANDREA V	\$240,953.91	AJAO, MONISOLA	\$192,426.20
ABRAMS, ELISSA M \$482,819.56 AHMAD, ABSAR \$364,636.36 AKERELE, OLADAPO \$425,321.97 ABUJAZIA, ABDURREZA \$532,125.38 AHMAD, ARDALANEJ \$99,341.07 AKHIDIME, BLESSING \$92,262.87 ADAM, CHRIS J E \$433,460.31 AHMAD, EJAZ \$499,124.86 AKINPELU, FADEKE O \$432,186.07 ADAM-SDROLIAS, HEATHER L \$220,322.90 AHMAD, SUFFIA N \$369,543.37 AKINSOLA, AKINTUNDE \$307,700.82 ADEGBESAN, ADENIYI A \$1,019,467.66 AHMED, MUNIR \$522,035.37 AKINSOLA, OLUWATOSI \$108,873.82	ABISHEVA, GULNIYAZ	\$557,958.50	AGRAWAL, VEENA R	\$364,926.58	AJAO, OLARENWAJ	\$289,199.69
ABUJAZIA, ABDURREZA \$532,125.38 AHMAD, ARDALANEJ \$99,341.07 AKHIDIME, BLESSING \$92,262.87 ADAM, CHRIS J E \$433,460.31 AHMAD, EJAZ \$499,124.86 AKINPELU, FADEKE O \$432,186.07 ADAM-SDROLIAS, HEATHER L \$220,322.90 AHMAD, SUFFIA N \$369,543.37 AKINSOLA, AKINTUNDE \$307,700.82 ADEGBESAN, ADENIYI A \$1,019,467.66 AHMED, MUNIR \$522,035.37 AKINSOLA, OLUWATOSI \$108,873.82	ABO ALHAYJAA, SAHAR	\$402,684.25	AGUAYO BONNIARD, ALBERTO J	\$910,332.52	AJAYI, TEMITOPE	\$538,919.44
ADAM, CHRIS J E \$433,460.31 AHMAD, EJAZ \$499,124.86 AKINPELU, FADEKE O \$432,186.07 ADAM-SDROLIAS, HEATHER L \$220,322.90 AHMAD, SUFFIA N \$369,543.37 AKINSOLA, AKINTUNDE \$307,700.82 ADEGBESAN, ADENIYI A \$1,019,467.66 AHMED, MUNIR \$522,035.37 AKINSOLA, OLUWATOSI \$108,873.82	ABRAMS, ELISSA M	\$482,819.56	AHMAD, ABSAR	\$364,636.36	AKERELE, OLADAPO	\$425,321.97
ADAM-SDROLIAS, HEATHER L \$220,322.90 AHMAD, SUFFIA N \$369,543.37 AKINSOLA, AKINTUNDE \$307,700.82 ADEGBESAN, ADENIYI A \$1,019,467.66 AHMED, MUNIR \$522,035.37 AKINSOLA, OLUWATOSI \$108,873.82	ABUJAZIA, ABDURREZA	\$532,125.38	AHMAD, ARDALANEJ	\$99,341.07	AKHIDIME, BLESSING	\$92,262.87
ADEGBESAN, ADENIYI A \$1,019,467.66 AHMED, MUNIR \$522,035.37 AKINSOLA, OLUWATOSI \$108,873.82	ADAM, CHRIS J E	\$433,460.31	AHMAD, EJAZ	\$499,124.86	AKINPELU, FADEKE O	\$432,186.07
	ADAM-SDROLIAS, HEATHER L	\$220,322.90	AHMAD, SUFFIA N	\$369,543.37	AKINSOLA, AKINTUNDE	\$307,700.82
ADEGBOYEGA, MARGARET \$390,228.00 AHMED, MUSAWIR \$279,196.37 AKINTOLA, OLALEKAN \$787,138.72	ADEGBESAN, ADENIYI A	\$1,019,467.66	AHMED, MUNIR	\$522,035.37	AKINSOLA, OLUWATOSI	\$108,873.82
	ADEGBOYEGA, MARGARET	\$390,228.00	AHMED, MUSAWIR	\$279,196.37	AKINTOLA, OLALEKAN	\$787,138.72

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$200.417.85

\$392.064.07

\$221,943.00

\$304,244.10

\$130,633.33

\$569,884.50

\$857,909.77

\$114,600,49

\$262,977.22

\$107.801.81

\$370.967.60

\$494 357 04

\$323.057.56

\$867.047.11

\$374.920.83

\$343.073.70

\$1,043,520.73

\$214.072.18

\$427 606 08

\$491,750.43

\$371,844.14

\$519.124.16

\$278,141.99

\$125,535.02

\$547.862.43

\$486.434.89

\$387,775.38

\$594,794.64

\$254,638.13

\$284,274.67

\$111.143.95

\$185,169.88

\$376.160.97

\$131,295.94

\$378,684.38

\$112,030.70

\$203,151.07

\$863,995.52

\$325,412.79

\$477,920.86

\$680.162.15

\$430,537.92

\$544,508.87

\$604,332.24

\$387,440.10

\$372.426.23

\$305,883.08

\$123.229.72

\$610,082.72

\$107,664.48

\$353,686.73

\$149,151.84

\$290,507.94

\$221.799.64

\$494.831.70

\$1,234,615.48

\$1,002,922.27

(Continued)

AKRA. MOHAMED A AL-ABBASI, BASHAR A ALABDOULSALAM, TAREQ ALAI. ZANA AL-ALLAQ, YASEEN ALAMIAN HARANDI, KAYVAN ALAMIAN-HARANDI, KOUROSH ALBAK. RUSSELL E ALEXANDER, IAN SCOTT ALI NEJAD. SHAHROKH ALL ABDALLA M ALL MOLUD A F ALL MOSSADEQ ALJAFARI, ALHASSAN AL-KAABI, ATHEER ALLAN, DONALD R³ ALLEN, DAVID W ALLEN, JESSICA S ALMALKY AMMAR AL-MOUMEN, ZAKARIA ALMOUSTADI, WAIEL A ALSHANTI, MARWAN ALTMAN, ALON ALTMAN, GARY N ALTO, MEAGHAN L AMADEO, RYAN J J AMBROSE, DEVON J AMEDE, KEBEDE H AMES. DAVID H AMIR, NUMAN ANANG, JULIUS B ANANG, POLINA ANDERSON, BRADY ROB ANDERSON, BRENT R ANDERSON, MATTHEW ANDERSON, RYAN A ANDERSON, TYLER ANDREIW, ADAM ANDREW, CHRIS ANGUS, TREVOR J ANOZIE, CHIAKA B ANSARI, MUHAMMAD ANSARIAN, HAMID R ANSSARI, NEDA ANTTILA, LISA K APOESO, OMOLOLA APPLEBY, STEPHANIE AQUIN, TREVOR ARAFA, RAMADAN ARAGOLA, SANJAY ARANEDA, MARIA C ARARA, MOHAMMED ARBUCKLE, BRADEN ARCHER, LORI ANNE ARMSTRONG, BRENT ARMSTRONG, SEAN³ ARYA. VIRENDRA

ASHAM. HANY A ASHCROFT, R P ASHCROFT, REBECCA C ASHFAQ, BUSHRA ASHRAFIHABIBABA, LEILA ASKARIFAR, RASOOL ASSKAR, RAMZI ATAINYANG, MOLLIE ATALLA, NIVEEN G ATCHISON, TYLER J ATIF. HINA ATOYEBI OLADELE ATOYEBI, OLUFUNMIL ATTALLA, SHADY AVILA FLORES, FRANCISCO² AWADALLA, ALAA AYINDE, WASIU A AZER, NIVIN AZER NIVINE N AZIZ. AZIZ N N AZZAM. HUSSAM M AZZAM, LINA BABICK, ANDREA P BABICK, TERRY R BACILY, MERVAT A BADENHORST, FREDERIK BADENHORST, LYNETTE BAGRY, HEMA S BAILLIE, CORY BAKER, CHANDRAN BALAGEORGE, DIMITRIOS BALCHEN, STACEY J BALHAJ, ABDELAATI BALKO, GEORGE BALL, FREDERIC BALLEGEER, TREVOR A BALLEN, JENIFER L BALOGUN, SAHEED OL BAMMEKE, FEMI BANERJI, VERSHA BANMANN, DARIN S BANSAL, RAHUL K BARAC, IVAN BARAC, SNEZANA BARBER, COLIN BARC, JENNINE BARCZAK, ALEKSANDR BARKER, MARK F BARKMAN, JAYSON M BARNARD, ALICIA G BARNES, DANIEL W BARNES, JEFFREY G BARON, CYNTHIA M BARON, KENNETH I BARRON, LAURIE W BARSKE, HEATHER L BARTEAUX, BROOKS

\$445.090.35 \$197.068.80 \$452,285.37 \$864.220.91 \$108,259.18 \$524,919.51 \$428,370.08 \$337.054.56 \$356,602.40 \$326.566.15 \$375.038.12 \$250 513 76 \$194.375.02 \$238.371.63 \$885,036.15 \$878,775,72 \$791.349.73 \$650.278.78 \$387.781.14 \$723,905.13 \$327,076.21 \$283,687.61 \$338.247.76 \$718,179.10 \$499.630.57 \$342.217.11 \$217.839.38 \$389,426.63 \$703,553.48 \$1,024,601.91 \$483,741.06 \$176.069.16 \$749,186.42 \$358.309.07 \$411,022.04 \$90,110.37 \$320,302.34 \$101,163.77 \$249,007.88 \$120,071.94 \$310,479.43 \$242.261.51 \$473,445,67 \$165,544.64 \$695,376.73 \$335,762.63 \$433,900.96 \$654,519.44 \$370.146.29 \$90,284.14 \$369,848.23 \$397,086.89 \$212,072.58 \$342,628.32 \$230.262.45 \$465,056.85 \$92.795.53

BASRA, GAGANDEEP BASSILY, MENA N F BASSON, ANEL BASSON, HENDRIK J BASTA, AYMAN F BASTA, MERIAM SA BASTA. MOHEB S S BATTAD, ANTHONY B BAY, GRAHAM H BAYDOCK, BRADLEY BEAUMONT IAN D BEAUPRE, JENWA BEGUM. FATEMA BEIKO, JASON BELDAVS, ROBERT A BELLAN, GARY BELLAN, LORNE D BELLAS JONATHON BELLISARIO, TIO BELLO, AHMED B BELLO, ANTHONY BENNING, HARBINDER BENNING, HARJIT S BENNING, RUPAL S BENSHABAN, LAMIN BENZAGLAM, ALI BERDNIKOV, ALEXEI A BEREZNAY, OLIVER BERGMAN, AMANDA D BERNSTEIN, CHARLES N BERNSTEIN, KEEVIN BERRINGTON, NEIL R BESHARA, EREN I A BEST, RAINA L BHALLA, JULIE K BHANGOO, DALJIT S BHANGOO, SANDIP S BHANGU, MANPREET BHANOT, PRADEEP BHARJ, AMIT BHASIN, HIMANI BHAYANA, RAJINDER BHUIYAN, NAZMUN N BHULLAR REHSIA, ASHLEY BHULLAR, MATTHEW J BHULLAR, NAVDEEP BHULLAR, RICK S BIALA, BARBARA BIALY, MACIEJ B BIALY, PETER C **BILENKI, SHERRY** BILLINKOFF, ERROL N BILOS, RICHARD J BIRT. DOUGLAS BISHAY, WAGDY **BISSON, DANNY S**

BASHIR, BASHIR

\$496.697.75 \$767,389.86 \$869,962.14 \$104.638.05 \$281,786.26 \$687,978.74 \$300,729.01 \$97.096.11 \$224,848.13 \$718.040.42 \$160.962.31 \$169 071 06 \$182,580,41 \$1.204.984.67 \$261.475.61 \$1,537,931.74 \$271.116.70 \$475,132,92 \$273 819 28 \$144,746.36 \$89.879.23 \$104,943.56 \$617.989.34 \$1,041,058.25 \$1,052,788.31 \$158,753,48 \$995.190.13 \$199,106.63 \$354,708.97 \$282,178.11 \$1,007,884.59 \$866.360.45 \$370,846.09 \$281.085.44 \$168,388.37 \$106,271.60 \$583,089.24 \$282,656.69 \$441,395.20 \$255,330.76 \$214,192.35 \$109.856.38 \$139,519.82 \$374,580.52 \$551,038.13 \$475,704.30 \$664.879.56 \$1,042,135.18 \$151.098.43 \$277,370.74 \$381,250.01 \$229,791.13 \$275,571.76 \$213,938.11 \$101,324.94 \$539,456.74 \$338.793.55

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$100.015.97

\$106.580.20

\$107,164.68

\$280,372.13

\$207,195.80

\$627,757.13

\$574,056.34

\$287.253.10

\$324,178.22

\$217,700.88

\$302.371.08

\$587 617 34

\$237.581.47

\$129.340.27

\$572.906.64

\$569,096.45

\$482.436.71

\$143.819.02

\$215 243 82

\$764,288.67

\$901,884.26

\$400.453.81

\$157,901.18

\$637,975.74

\$95.543.96

\$127.473.46

\$146.854.87

\$87,447.33

\$129,732.30

\$306,949.75

\$426.293.81

\$333,910.73

\$334.086.00

\$503,435.53

\$120,118.00

\$197,705.65

\$729,144.26

\$105,492.26

\$333.221.07

\$302,838.40

\$218.862.01

\$636,935.99

\$242,114.34

\$566,250.71

\$427.022.40

\$372,598.33

\$359.316.56

\$99,097.66

\$220,582.87

\$401,118.82

\$165,205.06

\$148,618.55

\$387,391.81

\$437,419.79

\$356.667.29

\$1.667.640.02

\$1,325,857.56

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BISSON, JOANNE BLACK. G BRIAN BLACKIE, KAREN M BLAIS, ASHLEY BLAMPY, JANICE R BLAZIC, IVAN BLELLOCH, SARAH R BLOM. LOURENS J BLOUW, ERIKA R BLOUW, MARCUS R BLYTH, SCOTT BODNARCHUK TAVIS R BOGAERT, PASCAL BOHEMIER, ROBERT J BOHM. CLARA J BOHM, ERIC R BOHN, ETHAN T BOKTOR, HANAN BOMAN JONATHAN BONAKDAR, HAMID R BONIEL, AVI BONIEL, NANCY BOOKATZ, BRIAN J BOON, LAURIE E BOOTH, STEVEN A BORCHERS, TANJA E BORESKIE, PATRICK BORKOWSKY, KENT BORLOT, FELIPPE BORODITSKY, ALISSA BORODITSKY, LILA M BORODITSKY, MARK BORODITSKY, MICHAEL L BORRETT, GEORGE F BORYS, ANDREW E BOTHA, DANIEL JO BOTKIN, ALEXIS A BOTKIN, COLIN D BOURDON, NELSON BOURGEOIS-GOSSE, JOELLE BOVELL, FRANK M BOWER. TENLEY N BOWES, RENEE C BOYD, APRIL J BOYD, RYAN DAVI BRACKEN, JOHN H BRACKENREED, NOLAN BRADSHAW, CANDACE D BRAINCH, NAVJOT KA BRANDES, LORNE J BRAR, ADARSHDIP BRAS, JAMES A BRAUN, CHANTEL M BRAUN, JEANELLE BRAUN, KAREN Y BRECKMAN, DAVID K BRECKMAN, GILLIAN L

BRENNAN, GERALD D BRETECHER, GILBERT J BRETT, MATTHEW J BRINKMAN, RYAN J BRINKMAN, SHAUNA BRISCOE, DEREK BRODOVSKY, STEPHEN C **BRONSON, MARIA** BROWN, ALASTAIR BROWN, JONATHAN BROWN, KEVIN BROWN I FAH ANNE BROWN ROBERT BRUCE, KELSEY BRUDNEY, CHARLES S BRUIN, SONJA BRUNEAU, MICHEL R BRYANTON, MARK BSHOUTY ZOHEIR BUCHEL, EDWARD W BUCHEL, TAMARA L BUCHIK, GLENDA M BUCHKO, KRISTYN A BUEDDEFELD, DEREK EVA BUENAFE JAY BUETI, GIUSEPPE BUFFIE, TYLER **BUFFO SEQUEIRA, ILAN** BULLARD, JARED BULLEN, TYLER J P BUNKOWSKY, STEPHANEE BURG, MAXWELL BURKETT, BRITTANY BURNELL, COLIN D C BURNETT, C J BURNETT, CLINTON J BURNETT, MAIRI BURNSIDE, TYLER C BURRON, IAN BURTON, TANNER BURYM, CRAIG J BURZYNSKI, JEFFREY H BUSHARA, DALIA BUSHIDI, MBUYU BUTLER, JAMES B BUTLER, NICOLAAS BUTTERWORTH, THOMAS G BYBEL, BOHDAN⁴ BYKOVA, ELENA BYNKOSKI, STACEY A **BZURA, THOMAS J** CAMACLANG, VANESSA CAMORIANO NOLAS, GERARDO D \$1,702,711.55 CAMPBELL, BARRY CAMPBELL, JENNIFER CAMPBELL, MACKENZIE CAMPBELL, NEIL

\$408.599.53 CANAVAN-HOLLIDA. KEVIN \$212.994.80 \$251,586.22 \$358.411.52 \$851,573.55 \$196,459.00 \$834,129.92 \$254.781.12 \$263,637.41 \$447.198.02 \$101.152.00 \$172 474 78 \$370.890.35 \$106.178.74 \$194.235.81 \$222.365.01 \$621,176.96 \$1.034.640.38 \$85 473 34 \$948,839.81 \$246.216.39 \$110,815.88 \$277.303.10 \$1,180,765.44 \$968,221.34 \$824.619.41 \$251.521.34 \$316,892.66 \$125,034.85 \$477,053.28 \$135,444.50 \$98.009.25 \$210,047.47 \$706.400.90 \$252,779.70 \$252,853.05 \$87,375.53 \$268,878.51 \$158,736.88 \$167,037.29 \$633,509.98 \$169.464.45 \$148,020.07 \$672,322.21 \$306,707.85 \$370,294.63 \$114.070.57 \$145.611.73 \$468.038.42 \$299,822.30 \$626,557.95 \$106,375.60 \$221,960.53 \$89.104.49 \$156,806.18

\$450.762.99 CANERS, DENNIS T \$534.207.76 CANERS, THEO CANTOR, MICHAEL J CAPLAN, DEBORAH C CAPPELLANI, RONALD B CARELS, BRENNAN CARLETON, ALISON CARLEY, ROSS CARLSON, KURTIS WA CARRICK, KATHRIN CASEY ALAN R CASSANO-BAILEY, ALESSANDR² CASWELL, BRENT CASWILL. MELISSA E CATTANI, LYNNSEY CAVERS, JACOB CAVERS, KENNETH J CAZAKOFE DAVID JER CHAKRABORTY, AMIYA R CHALISE, IRA SHARM CHAN, DAVID A CHAN, ENG LYAN CHAN, LAURA H CHANDY, POORNIMA CHAPMAN, LEIGH CHARETTE, MIRANDA CHARISON, JODIE CHARTIER, BLAKE CHATWIN, MEGHAN K CHAUDHARY, HARPAL CHAUVIN, SARAH ELI CHAVALI, SOUJANYA CHEHADI, ABDEL-KAR CHEN, LYDIA Y X CHENG, LONI CHERIAN, RACHEL CHERNISH, GREGORY M CHERNOS, COURTNEY CHEUNG, ANENE CHEUNG, LAI-KEUNG CHEUNG, PAUL K-M CHIN. DANIEL CHISICK, LAURA B CHO, PATRICK A CHOCHINOV, PAUL H CHODIRKER, BERNARD N CHOPEK, ASHLEY J CHOPRA, AMIT CHOPTIANY, THOR I CHOW, HERMAN CHOW, MELINA CHOWDHURY, AMITAVA D CHRISTIANSEN, DAVID N CHRISTODOULOU, CHRIS C CHUBATY, ROMAN A CHUDLEY, DAVID A A

\$124.841.07 \$593.836.12 \$275,464.22 \$251,929.72 \$122,741.50 \$342.778.35 \$96,521.09 \$221.180.23 \$120,158,76 \$352 382 24 \$524,781.34 \$157.737.48 \$203.483.00 \$312.085.56 \$200.449.54 \$242,131.09 \$187 513 13 \$443,389.23 \$93.842.10 \$765,151.20 \$417.071.65 \$459,594.20 \$881,030.56 \$1.372.146.88 \$189.302.59 \$310,159.60 \$138,775.60 \$160,976.47 \$93,223.04 \$244,642.40 \$238,055.95 \$347.476.67 \$109,936.94 \$329,006.22 \$153,315.05 \$90,469.47 \$673,601.66 \$233,902.84 \$188,189.79 \$272.495.66 \$1,200,093.71 \$244,062.33 \$788,700.65 \$368,914.08 \$91.849.42 \$108,266.36 \$579.714.08 \$552,988.57 \$141,138.31 \$98,002.41 \$288,214.40 \$353,030.54 \$246.385.53 \$388,576.25 \$215.838.08

\$181.050.20

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$224.378.02

\$249.823.91

\$108.771.63

\$901,438.73

\$254,166.43

\$177,126.57

\$378,956.66

\$627.518.66

\$196,515.99

\$462.821.35

\$527,999,92

\$95 031 87

\$665.243.45

\$384.408.48

\$567.453.19

\$113,641.02

\$542,189.38

\$909.285.15

\$129 034 94

\$298,778.16

\$381,456.78

\$303,429.83

\$187.632.20

\$317,355.01

\$103.141.73

\$548.061.97

\$134.276.67

\$579,486.97

\$212,005.60

\$371,048.10

\$544,485.39

\$511.326.34

\$116,074.75

\$374.986.67

\$357,787.55

\$171,853.84

\$212,923.21

\$774,119.01

\$241,401.57

\$269.557.68

\$234,325.19

\$450.131.42

\$95,765.14

\$492,785.80

\$867,341.54

\$91,290.74

\$405.438.75

\$190,210.90

\$175.967.71

\$340,643.93

\$425,054.38

\$938,850.90

\$349,965.96

\$466,623.74

\$96.666.47

\$522,472.16

\$154.970.35

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CHUMBER, TARWINDER CHUNG, LOUIS CIFTCI-KAVAKLIO, BEYZA CISNEROS, NESTOR CLARK, IAN H CLARK, KIRSTEN M CLARK, SANDRA G CLARK, TOD A CLASSEN, CHRISTOPH CLAYDEN, GERALD CLEGHORN, SCOTT A CLEVEN RAEGAN D CLOUTIER, JUSTIN M CLOVECHOK, CODY COATES, KEVIN R COCHRANE, DAVID COGAR. AMBER COHEN, BARRY A COHLER LARRY COLBOURNE, TERRY COLISH. JANE COLLIN, MARIAN B COLLISON, LINDA M COLLISTER, MARK CONDON, AMANDA J CONEYS, JOHN G D CONNELLY, KELSEY CONNOR, DAVID D CONNOR, GRAHAM T CONRAD, KYLE F CONVERY, KEVIN COODIN. MICHAEL G COODIN, SHALOM Z COOK, KATIE A COOKE, ANDREW L COOMBS, JENNIFER COONEY, MATHIEU F CORBETT, CAROLINE CORDOVA, JUAN L CORMIER, FAITH R CORMIER, RYAN CORNE, STEPHEN I CORNELSON, SHANE E COYLE, STEPHEN J CRAM, DAVID H CRAM, JORDAN A CRANSTON, MEGHAN E CRATON, NEIL CREEK. KRISTEN CROCKER, ELISE D CROOK, LANCE A CROSBY, JASON A CROSS, ROBERT CROW, ROAN CRUST, LOUIS J CSUPAK, BRIAN E CSUPAK. ELAINE M

CUDMORE, JESSICA CUMMINGS, MICHAEL L CURTIS, KYLE J CUSHNIE, DUNCAN CUVELIER, GEOFFREY CUVELIER, SUSAN L CYR, KAITLIN A CYR-HORNICK, ANNIE CZAJKA-FEDIRCHU, CYNTHIA CZAPLINSKI, JOLANTA E CZAPLINSKI, KAZIMIERZ CZAPLINSKI PETER R CZAYKOWSKI, PIOTR M DAENINCK, PAUL J DAKSHINAMURTI, SOWMYA S DALE, RYAN JONN DALLING, GORDON N DANAKAS, COSTA DANDEKAR ANAND S DANDEKAR, MASUMI S DANG. TAI HUU DANGERFIELD, ARAN L DAO, VI V B DAOUD, HANI M A DARCZEWSKI, IRENA DARE, IDOWU O DARNBROUGH, ANDREA L DART, ALLISON B DARWISH, ABBAS DASCAL, MARIO A DASHEFSKY, SIDNEY M DAVIDSON, J MICHAEL² DAVIE, SOPHIE DAVIES, JARED DAVIS, MICHAEL O DAWDY, MATTHEW DAYA, JAYESH J DE GUSSEM, ELS MARIA DE MOISSAC, PAUL C DE MUELENAERE, PHILLIP DE ROCQUIGNY, ANDRE J DEAN, ERIN C DEANE, KAREN DEANE, SHANNON DEBNATH, PRANAB K DEBROUWERE, ROLAND G DECK. MEGAN DECOCK, CANDACE DECTER, DIARMUID DEKONINCK, THERESA DEMERS, VERONIQUE DEMETER, SANDOR J DEMSAS, HABTU DENIS, JAMES P DENISUIK. TYLER DEONARAIN, SUE DEONARINE, LINDA

\$307.048.86 DERENDORF, BRADLEY K \$488.636.37 \$324,890.96 \$113.384.52 \$111,983.66 \$215,902.37 \$259,679.15 \$104.346.80 \$234,243.34 \$114.932.96 \$119.039.85 \$247 862 37 \$106.935.45 \$166.989.32 \$224.899.44 \$461,707,41 \$428,704.20 \$88,944,98 \$533 031 04 \$206,230.22 \$287,076.18 \$453,233.74 \$217,790.60 \$245,198.52 \$381,978.19 \$100.538.75 \$459.533.59 \$127,509.38 \$257,187.22 \$730,532.25 \$670,862.68 \$4,489,711.95 \$336,278.38 \$460.103.92 \$606,628.38 \$95,218.20 \$437,207.49 \$127,268.04 \$409,161.81 \$1,284,693.42 \$654,251.82 \$353.733.50 \$120,013.56 \$172,983.14 \$116,631.92 \$494,338.27 \$123.397.22 \$167,050.55 \$706.904.77 \$96,064.66 \$172,141.20 \$128,272.48 \$295,558.11 \$436,630.14 \$94.298.38 \$653,732.86

DERKATCH. SHELDON D DERZKO, LYDIA A DESAUTELS, ANGELA D DESAUTELS, DANIELLE DESILETS, NICHELLE DESMARAIS, G P DESMOND, GERARD H DESROCHERS, SEAN ROLA DHALA, ALY DHALIWAL, JAMIT S DHALIWAL PERRY DHALIWAL, SIMARJOT DHALIWAL, SURINDER DHALLA, SONNY S DHANJAL, PERMJEET DHARAMSI, NAFISA DIAMOND, HEATHER D DILLON J DAVID DILLON, TANYA DIONNE, CLAIRE DIRKS, JACQUELYN DISSANAYAKE, DILANI D'MELLO, ANDREA DOAK, GREG J DOAN, QUY DOCKING, LEANNE M DODD, KHUSHMAN DOLYNCHUK, KENNETH N DOMKE, HEATHER DOMKE, SHEILA DONALESHEN, JENIVA A DONNELLY, JOHN P DOOKERAN, RAVI DORNN, BRUCE DORTAJ, NICK DOW, NATHAN W DOWHANIK, MONICA A DOWHANIK, PAUL B J DOWNEY, ANGELLE D DOWNS, A CRAIG DRACHENBERG, DARREL E DREWNIAK, ANNA DREXLER, JAROSLAV DU PLESSIS, MARLIE M DU PREEZ, JOACHIM DU TOIT, LINDA L DU, GUOYAN DUBBERLEY, JAMES DUBEY, ARBIND A DUBIEL, CHRISTOPH DUBYNA, AARON D DUBYNA, DALE DUCAS, DIANE A DUCAS, ROBIN A DUECK, DARRIN DUECK. LAURA J

\$94.727.62 \$1,477,795.09 \$153,142.67 \$321.022.34 \$101,297.92 \$394,703.55 \$89,460.00 \$102.659.82 \$558,299.81 \$192.649.69 \$687.258.97 \$352 094 37 \$113.879.43 \$325.986.08 \$1.317.041.04 \$185,233,26 \$112,997.54 \$317.812.17 \$789.621.21 \$92,550.51 \$240,040.23 \$225,683.86 \$270.138.21 \$102,899.05 \$264,776.92 \$332,212,86 \$394.869.99 \$217,532.27 \$271,365.15 \$440,435.97 \$389,317.92 \$1,032,392.54 \$322,708.96 \$1.979.233.92 \$224,691.21 \$394,241.83 \$281,434.76 \$86,423.55 \$158,155.90 \$522.860.97 \$360,004.53 \$838.700.82 \$328,603.09 \$438,136.13 \$152,449.81 \$151,007.22 \$145.918.32 \$169,312.16 \$341.545.80 \$241,049.50 \$115,029.83 \$328,176.68 \$88,623.36 \$94,245.41 \$707,939.99 \$320,716.62 \$112.750.01

\$384.655.67

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$453.704.24

\$766.317.34

\$335.866.87

\$189.090.55

\$325,229.57

\$833,993.78

\$417,893.42

\$510.837.55

\$132,201.01

\$133.082.37

\$109 859 19

\$88,106,94

\$568.713.76

\$160.318.70

\$442,545,03

\$416,836.44

\$184,790.04

\$220 639 98

\$804,300.80

\$88,928.43

\$439,938.55

\$244,706.79

\$844,505.26

\$379,946,18

\$235.586.78

\$270,904.84

\$290,897.56

\$494,279.31

\$284,001.98

\$362,602.97

\$509,196.25

\$130,575.25

\$122,280.07

\$376,884.97

\$858,715.40

\$471,485.11

\$235,692.40

\$302,051.15

\$475.597.96

\$338,560.78

\$359,036.30

\$422,461.84

\$215,398.81

\$271.579.51

\$204,028.63

\$274.732.48

\$429,229.56

\$481,340.32

\$885,229.17

\$105,796.46

\$466.203.58

\$477,563.73

\$312.617.19

(Continued)

DUERKSEN, CARL DUERKSEN, DONALD R DUERKSEN, MARK T DUFF, BRIAN D DUFF, GRAHAM DUMATOL-SANCHEZ, JOCELYN DUNCAN, STEPHEN J DUNDAS, JENNIFER DUNFORD, DAWN A DUNSMORE, SARA E³ \$1,020,242.98 DUPLAK, KAMILA I DURAND CARL DURCAN, ANNE M DUTTA, VIKAS DWILOW, RACHEL DYCK, ANDREW J DYCK, GORDON H DYCK, MICHAEL P DYCK NEALA DYCK. STEPHANIE DYKER, JORDAN DZIKOWSKI, DANA RAE EAGLESHAM, HUGH² \$3.103.598.26 EARL, KEVIN D G EDIRIWICKRAMA, IRESHA EDWARD, GIRGIS EGAN, JANICE EGHTEDARI-NAMIN, FARIBA EGUAOJE, VICTORIA EHIGIATOR, PATRICK EHSAEL FARHAD ELALLEGY, ABED ALI ELBARDISY, NOZAHY ELBAROUNI, BASEM \$1.369.744.98 ELEFF, MICHAEL K ELGAZZAR, REDA F ELGHERIANI, ALI ELIAS, EVAN D ELIAS, KAMELIA ELIMBAN, VINIT V ELKAMS, SAMEH N B ELKHEMRI, A M ELKIN, JONATHAN ELKIN, MARK S ELLIOTT, JACOBI ELLIOTT, JASON ELLIS. MICHAEL J EL-MATARY, WAEL M M EL-MAZAHY, MANAL MOH ELVES. EMMETT J EMBIL, JOHN M A \$1,416,181.83 EMERY, C EMHAMED, MUSBAH ENCARNACAO, CAYLEY ENG. STANLEY ENGEL, JEFF S ENGELBRECHT, STEPHANUS

ENNS. JAMES P ENNS, JESSICA S EPP. RILEY ERONMWON, CINDY OSA ESHGHI ESFAHANI, FARID ESKAROUS, SOAD ESMAIL, ALI RAZA ESMAIL. AMIRALI M ESPENELL, AINSLEY E ESSIG, MARCO² ETHANS, KAREN D FTUKAKPAN LUCY FDWI EVANS, DEVON C R EVANS. HEATHER EVANS. MICHELE J EWONCHUK, MARIE J EZE, OSCAR FAGAN, ANDREW FAINMAN SHANE F FAINSTEIN, RACHEL E FAISAL, NABIHA FAMUYIDE, OMOLAYO FANELLA, SERGIO T FARAGALLA, NARDIN FASHOLA, ZAHEED OL FATOYE, ADETUNJI FEIERSTEIN. MICHELE FELSCH, SHEILA E FERGUSON, DAVID A FINLAYSON, NOLAN A FINNEY, BRETT A G FIORENTINO, ELISA J F FISCHER, JONATHON FISHMAN, LAWRENCE FJELDSTED, FREDRIK H FLEISHER, WILLIAM P FLETCHER, COLIN W FLYNN, BRYAN T FOERSTER, DAVID R FOGEL, JORDAN P² FONTIGNY, NADINE J FOROUZANDEH, FARIBA FORSYTH, MARK D FOSTER, RUKHSANA FOTTI, CHRISTOPH FOTTI, SARAH A FOURIE. PHILIP FOURIE, THEO FOX. SHANDY FRANKEL, MATTHEW S FRASER, MICHAEL B FRECHETTE, MARC FRECHETTE, SHARON C FRECHETTE, YANNICK FREDETTE, PATRICK FREEDMAN, JEFFREY I FRIESEN, BRITTNEY

\$814.057.57 \$308.055.20 \$321,352.93 \$109.800.95 \$830,264.36 \$404,171.77 \$453,308.47 \$437.808.77 \$418,947.03 \$754.077.27 \$319.265.21 \$811 984 48 \$397,409.53 \$106.398.41 \$132.681.62 \$184,950.94 \$321,394.38 \$120.936.24 \$206 887 24 \$301,962.68 \$491,651.30 \$333,734.17 \$124.787.73 \$171,995.78 \$322,599.66 \$162.617.51 \$175.894.45 \$279,723.14 \$117,233.13 \$356,033.00 \$418,872.15 \$124,246.74 \$142,290.07 \$403.865.96 \$318,631.18 \$99,657.10 \$294,948.15 \$608,084.18 \$442,394.86 \$567,222.50 \$325,428.64 \$384,701,74 \$774,861.82 \$687,609.60 \$290,104.79 \$301,291.74 \$101.709.60 \$628,097.89 \$441.238.77 \$802,478.94 \$341,681.22 \$328,891.46 \$487,783.13 \$535,532.71 \$250.871.50 \$396,014.76 \$471,600.97

FRIESEN, GRAHAM R FRIESEN, SELENA FRIESEN, TYLER B FRIMPONG, DANIEL O FROHLICH, ARNOLD M FROSK, PATRICK D FUDGE, JESSICA FUDGE, THOMAS FULMORE, ANDREA M FULMORE, JONAH J N FULMORE, KAITLIN S FUNG ADRIAN J FUNK AARON N FUNK. DUANE J GABOR, JONATHAN GACUTAN, SHERWIN GAISER-EDWARDS, ALISE GALESSIERE, PAUL F GALL RICHARD M GAN, KENMAN GANESH KUMAR M. -GARBA, SULE GARBER, LESLEY GARBER, PHILIP J GARBUTT, LAUREN GARD, SHERRY GARDNER, RACHAEL E GARG, MANISH GAWRYLUK, MARIELLE GDIH, GDIH A M GEISHEIMER, ANDREW R GENDI, MINA A R GENDY, BAHER M A GENDY, VIVIAN GEORGE, RONALD H GEORGE, SILVIA E GEORGE, STEPHEN GERA, AMAN GERA, RAKESH M GERGES, GEORGE RA GERGES, HANAN F GERGES, VIVIAN F GERGIS, ENAS S GERGIS, NERMIN Y GERSTNER, THOMAS V GERTENSTEIN, ROBYN J GHEBRAY, TESFAY M GHEBRIAL, MAGED S N GHONEIM, MOSTAFA S GHORPADE, NITIN GHROODA, ESSEDDEEG GIANNOULI, ELENI GILBERT, JANE GILL, DALJIT GILL. EUNICE GILL, HARPREET GILL. JAGROOP S

\$204.065.13 \$123,460.61 \$347.824.62 \$602.770.89 \$572,300.12 \$110,945.24 \$332,360.73 \$201.935.93 \$381,226.72 \$642.281.52 \$198,919.30 \$310 664 74 \$297.220.03 \$267.460.57 \$1.232.063.93 \$171,690.47 \$106,353.94 \$712,715,95 \$723 409 01 \$102,959.42 \$136.895.67 \$89,862.06 \$800.860.76 \$85,923.95 \$655,431.35 \$420.029.26 \$412.280.13 \$245,074.84 \$341,870.67 \$3,229,007.66 \$385,163.51 \$337,926.75 \$494,078.33 \$321.025.88 \$184,275.08 \$489,874.79 \$124,632.99 \$450,554.65 \$671,737.22 \$608.500.04 \$549,293.08 \$471.835.49 \$632,793.21 \$195,061.99 \$528,466.81 \$382,337.21 \$383.743.12 \$373,540.08 \$972.816.69 \$634,834.15 \$533.383.43 \$423,252.02 \$421,002.60 \$1,176,619.95 \$146,631.70 \$168,739.43 \$489.557.20

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$85,755,30

\$90,145.43

\$89,388.27

(Continued)

GILLESPIE. BRIAN \$722.412.58 GILLETTE, ALEESHA \$415.549.93 GILLMAN, LAWRENCE \$317.574.54 GILLMAN, MARK \$128.070.85 GILMORE, JONATHAN \$362,024.68 GINDY, LYDIA A \$325,580.86 GINGERICH, JOEL R \$169,177.45 GIRARD, JOHN \$405.107.82 GIRGIS, HOSSAM E \$467,192.12 GIRGIS, LABIB GIR \$134.964.78 GIUFFRE, JENNIFER \$555.981.43 GLACKEN ROBERT P \$244 383 96 GLAZNER, KATHRYN A \$391,241.50 GLENN, DAVID M GLEW. WADE B \$310.172.22 GLOBERMAN, ADAM S \$1,165,641.11 GLOBERMAN, DOBROCHNA \$337,887.13 GLOR, HAYDEN \$277.542.57 GLOVER PAMELAG \$186 425 22 GOEKE, FREDRICK \$419,371.79 GOERZ. PAUL G GOLDBERG, JESSICA \$299,387.30 GOLDENBERG, BENJAMIN \$195.246.88 \$464,489.15 GOLDENBERG, DAVID J GOLIAN, MEHRDAD \$146,424.43 GONG. ANNIE \$440.919.19 GOOI, TEONG H \$766.203.73 GOOSSEN, MARVIN \$869,247.53 GORCHARAN, CHANDRA GORDEY, ERIN E \$471,828.27 GORDON, JEREMY \$380,194.03 GORDON, VALLERIE \$172,777,71 GOUBRAN, ASHRAF W² \$942,596.39 GOUDA, FAYEZ F \$413.149.14 GOULD, LISA F \$519,931.81 GOULET, STEPHEN C \$300,066.12 GOUSSEAU, MICHAEL \$645,016.09 GOVENDER, PRAKASHEN \$374,068.22 GOVERNO, NELSON J \$444,447.55 GOVIA. RACHELLE \$533,349.69 GOWING, STEPHEN \$539,343.76 GOYTAN, MICHAEL J \$1,916,929,42 GRABOWSKI, JANET L \$713,444,59 GRACE, KEVIN J \$329,351.77 GRAHAM, CHRIS P \$559,940.06 GRAHAM, JEFFREY R \$122,437.55 GRAHAM. KERR \$402.347.07 GRAHAM, REID \$184,753.66 GRATTON, REMY-MART \$460.082.49 GRAUMAN NEANDER, JAN ANDRE \$270,038.54 GRAY, MICHAEL G \$273,975.09 GRAY, REGAN C \$208,520.90 GRAY, ROBIN \$366,274.69 GREGOIRE, SCOTT A \$1,490,228.12 GREGORY, KALYN \$111,510.41 GRENIER, DEBJANI \$154,297.80 **GRENIER, JANINE** \$363.934.58

GREYLING, LOUW D L **GRIFFIN, JENNIFER** GRIFFIN, PATRICK GRIMES, RUTH B GROBLER, WILHELMUS GROCHOLSKI, STEVEN AN GROCOTT, HILARY P GROENEWALD, LOUISE H GRUNFELD, ALEXANDER GUDMUNDSON, CATHERINE GUENTHER CHAN, LINDSAY J GUEST MITCHELL GUINDI, NIZAR S GUINDY, SHERINE GUJRAL. PARAMJEET GUPTA, AASHIMA GUPTA, KAMAL KIS GUPTA, RAVI GURANDA MIHAII GURURAJARAO, SUDARSHAN GUSNOWSKI, EVA GUZMAN, RANDOLPH GWOZDECKI, TARAS M HAAKMAN, OLGA HABEEB, ALI MOHAM HABERMAN, CRAIG J HAGER, DREW RUSS HAGGARD, GIAN G HAI, MD ABDUL HAJI, SALAH A HAJIDIACOS, NICHOLAS HALBRICH, MICHELLE HALEIS, AHMED R HALIGOWSKI, DAVID HALL, THOMAS HAMAM, AL WALID HAMEDANI, RAMIN HAMEED, KAZI A HAMILTON, HOLLY HAMILTON, KRISTIN A HAMMELL, JENNIFER HAMMOND, ALLAN W HAMMOND, GREG W HANCOCK, BETTY J HANCOCK, KYLE C HANLON-DEARMAN, ANA C HANNA, IRIN HANNA, MAGDY HANNA, MARNI HANNA, NERMEEN S HANNAH, JOHN EFFA HANSEN, TAWNYA M HAQ, RABIA HARDING, GARY A J HARDING, GREGORY E HARDY, BRIAN² HARDY, KRISTA M

\$355.125.64 HARDY, ROBERT J \$197.974.85 \$202,721.51 \$207.966.86 \$363,417.46 \$400,729.50 \$278,722.12 \$228.256.80 \$362,929.99 \$336.162.50 \$107.093.19 \$180 672 64 \$202,996,59 \$455.060.42 \$340.438.34 \$94,881.60 \$405,849.39 \$614.642.06 \$339 359 39 \$574,450.37 \$110,462.23 \$930,648.24 \$289.570.63 \$208,510.40 \$861,805.98 \$365.023.89 \$760.877.89 \$491,064.15 \$141,273.39 \$496,895.15 \$288,531.18 \$560.751.49 \$325,470.80 \$345.404.22 \$166,605.18 \$703,615.32 \$580,882.71 \$282,999.19 \$212,686.40 \$147,462.51 \$362,159.58 \$653.958.03 \$191,044.17 \$188,388.91 \$318,254.79 \$202,808.38 \$340.055.32 \$92,654.55 \$619.450.10 \$608,054.56 \$352,387.57 \$562,587.24 \$207,121.51 \$134,964.32 \$1,012,564.96 \$609,095.11 \$393.426.52

HARESHA, ABDULLATI HARLOS, CRAIG H HARMER, HELEN A HARMS, STEFAN HARRINGTON, MICHAEL W HARRIS, KRISTIN R HARRIS, PATRICIA HARRISON, WAYNE D² HARTLEY, DUANE M HARWOOD-JONES, MARISA R HASDAN GALIT HASHMI, SAJJAD HASTIR, ARVIND HAVERLUCK, BRENNA L HAWALESHKA, ADRIAN HAWE, RICHARD D HAYAKAWA, THOMAS E HAYDEY RICHARD P HAYES, CHRISTOPH HAYWARD, JENETTE F HEBBARD, PAMELA HEBERT, JACQUELIN HECHLER, PETER HECHTENTHAL, NORMAN HEDDEN, DAVID R HEDDEN, JOHN R HEENDENIYA, AMILA C HEIBESH, SUZY G F HEINRICHS, KRISTIN M HELEWA, RAMZI M HENDERSON, BLAIR² HENEIN, MATTA MAK HENNESSEY, HOOMAN HENRY, STEPHEN F HERCINA, CHANTELLE HERMANN, LAURA L HICKS, CYNTHIA D HICKS, WAYNE HIEBERT, TIMOTHY HIEBERT, TIMOTHY J HILDAHL, ERIK J HILDEBRAND, BRENDA C HILDERMAN, LORRAINE HILDES RIPSTEIN, G E HILL, DEBORAH M HILL. SCOTT HILLMAN, CHINA-LI HINGWALA, JAY³ HIRSHBERG, JONAH HITCHON, CAROL HO, JULIET HO, PETER HOBAN, CHRISTOPH HOBSON, DOUGLAS E HOCHMAN, DAVID J HOCHMAN, JORDAN

\$423.637.68 \$539,939.88 \$195,472,81 \$104.270.26 \$167,397.49 \$89,162.46 \$331,006.59 \$647.255.22 \$1,825,967.74 \$477.775.73 \$454.905.32 \$654 440 21 \$392.918.36 \$359.496.20 \$209.160.24 \$181,696.75 \$511.319.63 \$691.218.66 \$993 102 21 \$1,027,531.01 \$102,019.74 \$462,486.17 \$266.140.32 \$235,910.02 \$130,072.84 \$688.693.10 \$377.918.98 \$275,693.94 \$1,290,677.46 \$306,584.33 \$1,171,217.41 \$1,324,747.62 \$150,505.39 \$178.547.44 \$93,145.36 \$109,579.64 \$198,128.52 \$637,410.72 \$354,032.19 \$172,438.32 \$390,101.03 \$129.652.94 \$370,450.90 \$232,693.65 \$155,072.35 \$88,597.26 \$576.512.45 \$803,943.60 \$980.833.25 \$174,206.09 \$127.838.94 \$125,107.52 \$529,901.88 \$436,546.76 \$268.251.47 \$765,947.16 \$658.617.05

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$546,559.92

\$255,984.22

\$510,693.22

\$134.043.37

\$123,951.23

\$110,443.38

\$668,601.73

\$510.538.13

\$121.094.80

\$840 412 40

\$402.647.23

\$545.083.94

\$90.979.38

\$285,293.56

\$477,072.18

\$110.850.76

\$169.434.32

\$176,865.54

\$351,924.75

\$403,014.18

\$135.103.44

\$502,424.69

\$179,646.42

\$476.146.88

\$411.162.30

\$308,800.74

\$477,687.10

\$559,145.26

\$264,024.62

\$361.879.41

\$352,081.82

\$151.006.64

\$658,694.60

\$260,131.93

\$332,037.88

\$142,488.00

\$567,264.13

\$283,372.43

\$562,711.22

\$753.081.62

\$469,430.34

\$763,481.69

\$397,181.90

\$139.403.85

\$348,056.85

\$441.558.72

\$780,720.51

\$364,146.27

\$372,234.73

\$90,136.26

\$96,555.38

\$149,376.92

\$528,199.39

\$99.231.93

\$1,205,870.89

\$1,182,422.19

\$1.874.244.22

(Continued)

HOCHMAN, MICHAEL HODGSON, SCOTT HOHL, C M HOLLAND-MUTER, ELIZABETH HOLMES, CAROL HOLMES, SIGNY L HOLODNIAK, ANNA HOMIK. LAWRENCE HONG, JONATHAN HONIBALL, JAMES J HOO, AARON HOOPER DAVYD HOOPER, WENDY M HORGAN, LEE F HORVATH, JEFFREY F HOSIER, GREGORY HOSSEINI, BOSHRA HOUSTON, DONALD S HOUSTON RYAN STEV HOY, CONRAD S HOY. GERALD J HOY, MURRAY L HUGHES. PETER HUGHES, PHILIP M HUNT, DANIEL A HUNT. JENNIFER HUNTER, CHRISTOPH HURD, CARMEN HURST, LORNE D HURTON, SCOTT M S HUTCHISON, TREVOR HUTFLUSS, GEORGE J HYMAN, JEFFREY R HYNES, ADRIAN F HYUN, ERIC IGOH, PAUL IGOH ILCHYNA, DANIEL C ILIRIANI, KLEVIS ILNYCKYJ, ALEXANDRA ILSE. WERNER K IMAM, ISAM E B INGLIS. DUNCAN INGLIS, PETER J INTRATER, HOWARD INTWALA, CHAITASI IQBAL, IRUM IQBAL. SHAIKH ISAAC, CAREY ISABEY, ERIKA PAI ISHAK, GEORGE ISKANDER, SALAH S G ISKANDER, SUZAN F ISMAIL, UMAR ISRAELS, SARA J ISSAIVANAN, MAGIMAIRA IWAASA, KENNETH K IZADI. SAMIN

JABS. MARLIS JACKSON, ANDORA JACOB, MARY V² JACOB, THOMAS K JACOB, V C JACOBS, JOHANNES JACOBSOHN, ERIC JAEGER. CLAIRE JAGDEO, AMIT JAIN, MADHURI JAMAL, ALEEM JAMAI SHABANA JAMES, JOANN JAMORA, EARL JANKE, ALYSSA J JANSEN VAN RENS, NICHOLAS JANZ DAVID F JARAMILLO-CORRE, CARLOS JARKAS OSAMA JASSAL, DAVINDER JASTRZEBSKI, ANDRE JATTAN, AARON R JAVELLANA, AUDREY JAWED, SIDRA JAYAKUMAR, SETHU M JAYAS, RAVI JEBAMANI. SAMUEL JENKINS, KEITH A JENSEN, DERREK M JHOOTY, JASON M S JILKINE, KONSTANTI JOHNSON, BIJAI JOHNSON, DARCY JOHNSON, ERIC C JOHNSON, MICHAEL G JOHNSON, ROBERT G JOHNSTON, CHRISTINE JOHNSTON, JAMES B JOHNSTON, JANINE L JOHNSTON, STEPHANIE JOKHIO, ADAM JONES, JODI LYNN JORDAAN, ESAIAS EN JOSE, JOE M JOSHUA, JULIAN M JOUNDI, MOHAMED G JOYAL, KRISTINA JUNAID, ASAD KABANI, AMIN M^{1, 5} KAETHLER, WILFRIED KAITA. KELLY D E KAKUMANU, ANKINEEDU KALER, RAJPREET KALETA, KLAYTON KALICINSKY, CHRYSTYNA KALKAT, HARMANDEE KALTURNYK, BLAKE P

\$172,283.62 \$156,788.48 \$1.092.320.57 \$174.603.23 \$89,914.54 \$634,965.88 \$309,429.47 \$427.965.50 \$558,421.73 \$653,410.67 \$191.238.25 \$754 824 43 \$616,872.72 \$156.644.13 \$96.272.22 \$535,874.86 \$398,812.55 \$461,997,50 \$156 118 78 \$758,878.52 \$1,588,312.76 \$143,244.33 \$351.622.05 \$164,466.78 \$508,036.66 \$213.398.73 \$137.326.02 \$287,736.55 \$306,473.83 \$351,921.81 \$245,749.88 \$428.560.90 \$156,103.65 \$203.297.65 \$1,470,437.67 \$419,736.91 \$115,512.75 \$130,936.18 \$180,550.53 \$185,212.25 \$642,244.97 \$341.109.96 \$486,128.68 \$221,632.28 \$164,005.27 \$163,870.04 \$209.286.21 \$369,838.49 \$522.409.86 \$151,766.95 \$629,354.26 \$341,281.80 \$398,253.00 \$110,557.41 \$129.519.51 \$326,067.38 \$810.275.41

KANJEE. RAAGEEN KANSARA, ROOPESH R KANWAL, JASWINDER KAPLAN, JOEL KARPINSKI, MARTIN E KARVELAS, JOHN KASHALO, MOHAMED-S KASHEFI, HOSSEIN KASHIN, ROBERT S KASI, ANUSHUYA KASLOFF JAN M KASPER, KENNETH D KASS. MALEK KASSEM. WAIL A KASSUM, SHAMINA KATOPODIS, CHRISTINA KATZ, GUIDO A KATZ LAURENCE KATZ, MATTHEW KATZ. MICHAEL D KATZ, NOAM S KATZ. PAMELA KAUENHOFEN, KURT M KAUFMANN, ANTHONY M KAUR, MANPRIYA KAUSHAL, RAVI DATT KAUSHIK, VISHAL R KAYLER, DOUGLAS E KAZINA, COLIN J KAZMERIK, KATRICE E KEAN, SARAH L KEARNS, KATHERINE KEDDY-GRANT, JILL KEIJZER, RICHARD KELLEHER, BARBARA E KELTA, NOHA S G KEMKARAN, KENNETH KENNEDY, MAUREEN F KENNETH, MELISSA KERR, LORRAINE KERR. PAUL D KERR-RAMSAY, AUTHERINE KETAWALA, PRASANGA KEVANY, MADILYNE KEYNAN, YOAV KHADEM. ALIASGHAR KHAN, AHMAD KHAN, ALI H KHAN, NOOR M KHAN, SADIA A KHANAHMADI, SHAHAB KHANDELWAL, AJAI S KHANGURA, DAVINDER KHELIL. ASSIL I KHIMJI, MOHAMED KHOO, CLARENCE

KANDEEL. TAREK M

\$134.650.45 \$1.036.142.41 \$297.875.09 \$854.782.62 \$235,507.67 \$779,298.01 \$266,777.42 \$293.289.31 \$677,962.78 \$160.048.49 \$642,265.01 \$606 150 12 \$336,429.45 \$1,120,750.69 \$296.098.95 \$198,131.16 \$451,787.33 \$260.017.48 \$106 103 26 \$393,749.00 \$151,639.00 \$152,959.34 \$276.898.27 \$411,563.66 \$271,453.01 \$351,271,34 \$255.209.09 \$515,460.93 \$271,684.34 \$109,720.43 \$168,815.88 \$328.819.90 \$197,004.19 \$370.714.12 \$112,310.83 \$163,451.27 \$695,827.61 \$596,197.82 \$191,358.68 \$123,656.87 \$111,723.51 \$684.491.96 \$370,694.86 \$488,937.04 \$95,197.48 \$166,185.32 \$892.007.23 \$140,652.03 \$630.479.92 \$325,482.18 \$238,505.85 \$872,082.18 \$289,140.29 \$625,659.55 \$421.833.80 \$398,302.92 \$621.896.61

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$492.478.14

\$106.985.09

\$155.898.27

\$105,562.00

\$619,764.80

\$431,010.29

\$133,218.84

\$157.653.19

\$354,545.03

\$211.374.64

\$153,575,78

\$311 259 24

\$94.037.66

\$182.204.15

\$1,214,745.04

\$512,353.07

\$484,951.93

\$571.337.00

\$1.214.853.95

\$1,052,518.50

\$397,398.90

\$191,656.06

\$186.178.79

\$237,711.54

\$187,855.82

\$140.163.43

\$244.673.83

\$700,317.57

\$488,218.55

\$460,537.60

\$96,054.30

\$231.835.63 \$310,555.42

\$413.394.76

\$218,786.83

\$133,291.47

\$135,988.06

\$381,752.87

\$215,403.23

\$181,634.17

\$613.929.63

\$769,729.77

\$129,533.13

\$434,795.49

\$256,248.24

\$399.547.55

\$370,324.87

\$97.044.32

\$415,739,47

\$135.750.15

\$87,217.86

\$89,645.07

\$1,048,879.82

\$244,654.55

\$929,369.86

\$86.777.26

\$4,283,295.33

(Continued)

KHOSHNAM, MOHSEN KHOSRAVI, KATAYOON KIAN, SOROUSH KIANI, KIAN N KIDANE, BINIAM KILADA, BAHER F N KIM, CHRISTINA KIM. DIANE KIM, HAE KWANG KIM. JULIAN O KIM, SU HYUN KIMELMAN ALLENT KIMELMAN, SAMANTHA KINDAKJI, RAZAN KINDLE, GEOFFREY KING, MACKENZIE KINNEAR, DAVID KINSLEY, DAVID C KIPPEN JAMES D KIRKPATRICK, JAIN D.C. KIRSHNER, ALLA KISH, SCOTT L KLASSEN, DONALD H KLASSEN, LARRY J KLASSEN, NORMA F KLAUKE, DANIEL KLEMMER, MARGOT HE KLIPPENSTEIN, NORMAN L KLIPPENSTEIN, PETER J KLOPP, ANNIKA KLUS, BRADLEY A KLYM. KAREN L KNEZIC, KATHY A KNICKLE, COREY JOH KNIGHT, ERIN M KOCZANSKI, ROMAN KOENIG, JAMES K² KOETTING, LEAH KOGAN, SYLVIA KOH. CLARISSA KOH, DENISE KOHJA. ABBAS ALI KOKO, RAL KOLTEK, MARK M KOMENDA, PAUL V J KONG, ANNE M C KONRAD, GEOFFREY KOODOO, STANLEY R KOREEN, DINA KORNELSEN, BRADY Q KOSOWSKI, MARCO KOSOWSKI, NOAH E KOSTYK, RICHARD KOTECHA, YATISH KOUL. RASHMI KOULACK, JOSHUA KOVEN, SHELDON

KOWALCHUK. IVAN J KOWALSKI, STEPHEN E KOZ, LORI G **KRAHN, CURTIS** KRAHN, JAMES KRAHN, MARIANNE KRAMER, MATTHIAS KREMER. STEVEN KREML, JOHN A KREML, RENEE LEA KRISTJANSON, DAVID N KROCZAK TADEUSZ KROEKER BRYAN KROEKER, DANIEL KROEKER, JORDAN KROEKER, LLOYD R KROFT. CARA D L KRONGOLD, PENINA KRUK ROBERT D KRULICKI, HARTLEY KRZYZANIAK. KELLY M KUEGLE, PETER F X KULBISKY, GORDON P KULKARNI, SHUBHANG KUMAR, APARNA KUMBHARATHI, RAVI BABU KUNDZICZ, EDWARD KUO, BRIAN KUO, KENDRA KUZENKO, NINA J L KWOK, KAREN S KYEREMATENG, DORIS LABIYARATNE, CHAMINDRA LABOSSIERE, MATHIEU LACERTE, MARTINA M LACH, LORI ANN LACHMAN, MATTHEW LAFOURNAISE, CARRIE L LAGE, KAREN L LAM, HERMAN P³ LAMAI, OLABIMPE LAMB. JULIE A LAMBA, K S LAMBERT, DAVID A LAMBRECHTS, HUGO LANDER, MATTHEW LANE. ERIC S LANE, MARGO A LANG. REBECCA LANGRELL, JORDAN LANGRIDGE, JAMES K LANOUETTE, DANELLE S LARA, CARLOS LARGE, GREGORY LAROSE, GABRIEL LATHAM, LESLEY LAU, JONATHAN

\$284.711.07 \$258.589.66 \$267.461.81 \$203.755.56 \$292,786.95 \$129,740.64 \$216,370.11 \$128.274.17 \$509,545.20 \$632,365.31 \$286.085.37 \$1 055 986 75 \$227,940,49 \$308.172.23 \$173.939.95 \$275,955.19 \$114.554.23 \$396.811.67 \$341 293 26 \$691,840.39 \$319,169.92 \$388,640.62 \$726.208.88 \$876,051.97 \$456,813.32 \$599.162.90 \$192.658.04 \$307,987.15 \$229,056.54 \$224,818.05 \$417,121.66 \$283,532.23 \$502,209.93 \$159.562.29 \$233,152.76 \$86,933.95 \$87,767.38 \$377,614.66 \$302,846.51 \$850,012.40 \$276,535.06 \$374.034.23 \$293,996,29 \$372,187.54 \$176,164.18 \$339,892.60 \$315.275.46 \$178,011.19 \$116.660.33 \$425,937.96 \$406,440.61 \$332,420.56 \$98,259.49 \$323,284.29 \$195.979.99 \$422,331.48 \$302.252.27

LAU. YAN \$771.001.42 \$626,335.79 LAUNCELOTT, SEBASTIAN LAUTATZIS, MARIA-ELE \$98,682,01 LAUTENSCHLAGER, JESSICA E \$141.495.10 LAW, JAIMIE R \$315,192.84 LAWAL, WAHEED \$832,073.24 LAXTON, J T W \$297,285.84 LAZAR. MATTHEW H \$370.560.74 LAZARECK, SAMUEL L \$153,347.75 LE, VICTOR \$307.455.91 LE. WILSON \$157.655.23 LECUYER, NADINE S \$118 381 11 LEE, CINDY H Y LEE. GILBERT Q LEE. HARVEY B LEE. SANDRA LEE, SANTINA LEE, TREVOR J LEE TREVOR W LEE. VIVIAN K LEE. WILFRED LEE-CHEN, BEVERLEY LEEN. DESMOND A LEE-WING, MATTHEW W LEFAS, GEORGIA M LEHMANN, HEATHER LEI. BENNY T C LEIBL, MARLI LEICHT, RICHARD LEITAO, DARREN J LELOKA, C MATHABO LEMMEX. DEVIN B LENOSKI, STEPHANE LEONHART, MICHAEL W LEPAGE, MATTHEW LESLIE, WILLIAM D⁴ LESPERANCE, SARAH C L LETKEMAN, RICHARD C LEUNG SHING, LOUIS P LEUNG. EDWARD LEUNG, GABRIELLE LEVI. CLIFFORD LEVIN, BRENDA L LEVIN, DANIEL P4 LEVY, SHAUNA B LEWIS, ANTHONY B LEYLEK. AHMET LEYLEK, MELIKE L LEZEN. JESSICA E LI. AIMEE LI, GORDON J LI, KEVIN LI, WILLIAM LIM, SIOK HOON LINDENSCHMIDT, RICHARD B LINDENSCHMIDT, RICHARD R LINDQUIST, CHRISTOPH

\$171,364.31 \$292.564.74 \$343.565.83 \$979.586.49 \$108,897.42 \$419,487,34 \$387 825 17 \$677,067.84 \$108,160.16 \$536,276.86 \$175.170.73 \$1,017,569.82 \$252,081.02 \$127.809.22 \$394.772.58 \$440,128.65 \$1,752,986.44 \$446,007.45 \$422,086.69 \$443,450.66 \$403,482.22 \$249.801.81 \$91,736.46 \$922,838.68 \$269,377.66 \$430,167.15 \$198,224.71 \$152,671.73 \$123,620.24 \$585.733.78 \$450,272.64 \$173.937.22 \$336,301.79 \$317,809.99 \$217.603.80 \$169,491.44 \$118.913.75 \$184,945.09 \$543,847.38 \$191,781.05 \$425,036.13 \$160,948.39 \$578,584.76 \$148,975.22 \$1.006.000.25

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$1.303.850.85

\$1.355.347.63

\$450,153.57

\$300,584.38

\$790,362.32

\$166,530.13

\$169,267.90

\$252.269.90

\$385,364.38

\$501.768.41

\$673,752,93

\$85 532 31

\$190.362.20

\$409.817.96

\$255.339.38

\$706,273.06

\$426.742.19

\$109.048.90

\$200 073 79

\$382,133.12

\$233,202.08

\$249,350.79

\$752.374.32

\$185,397.84

\$550.846.98

\$663.845.51

\$103.903.74

\$231,967.03

\$375,718.70

\$240,364.35

\$90,855.71

\$619.852.16

\$526.079.85

\$214,491.59

\$204,110.21

\$283,295.22

\$278,325.24

\$511,202.45

\$365,331.43

\$235,476.50

\$123.674.00

\$288,871.10

\$506,245.47

\$699,381.53

\$893,735.97

\$658.846.60

\$239,671.87

\$302.232.55

\$236,787.54

\$122.306.82

\$528,155.37

\$135,510.03

\$629,506.22

\$131,150.32

\$572,055.45

\$319.332.04

\$1,183,282.29

(Continued)

LINDSAY, DANIEL J² LINDSAY, DUNCAN C LING. JUSTIN W LIPINSKI, GRAZYNA LIPSCHITZ, JEREMY LITTLEFORD, JUDITH A LITVINOV, ALEXEY LIU. JUNLIANG LIU, MONICA H LIU. RICHARD Y LIU. SHUANGBO LIVINGSTONE CAM LLANOS, ROMEO LLOYD. ALISSA J LLOYD, ROBERT L LOBATO DE FARIA, RICARDO LOEWEN, CALVIN G LOEWEN, ERIN D M LOEWEN SYLVIA R LOGSETTY, SARVESH LOISELLE, JOEL A LONE, SADIA J LONG. ADRIAN L LONGBOTTOM, GREGORY J LONGSTAFFE, JAMES LONGSTAFFE, ROBERT C LOPEZ GARDNER, LEONORA L LOPEZ VILLA, ELIDA LOPEZ, APRYL LOPEZ, MIRTHA LOTHER, SYLVAIN A LOUDON, MICHAEL LOVE, MICHAEL LOWDEN, CAMERON S LU, PAUL B LUDWIG, JOSEPH LUDWIG, LOUIS LUDWIG, SORA M LUHNING, KIEL LUK. TSE LI LUKIE, BRIAN J LULASHNYK. BEN J LUM MIN. SUYIN LUQMAN, ZUBAIR LYONS, EDWARD A² LYSACK, DAVID A LYTWYN, JAMES REI MABIN, DEBORAH MACAULAY, AARON MACDIARMID, ANDREW L MACDONALD, AUSTIN MACDONALD, PETER MACDOUGALL, BRENDAN MACDOUGALL, GRANT MACEK, RALF K W MACHADO DE SOUZ, CAMILA MACINTOSH. ETHEL L

MACINTOSH, JASON MACKALSKI, BARBARA A MACKAY, MICHAEL J MACKENZIE, G SCOTT MACKENZIE, LAUREN J MACLEOD, BRUCE A MACMILLAN, MICHAEL B MACNAIR, TRACY L MADI, LUBNA MADISON, ADENA M MAGARRELL, CYNTHIA MAGSINO KAREN MAGUIRE, DOUG MAHARAJ, IAN G MAHARAJH. DAVE A MAHAY, ARIC MAHAY, RAJ K MAHDI, TAHSEEN MAHON KENDRA F MAIER, JOANNE C MAITI. SOUBHIK MAITI, SOURABH MAJEAU, LADONNA MAKAR, BRYCE MAKSYMIUK, ANDREW W MAKSYMOWICZ, ANET MALABANAN, EDILBERTO MALCHY, BRIAN A MALEKALKALAMI, AZADEH MALEK-MARZBAN, PEIMAN MALIK, ABID I MALIK, AMRIT MALIK, BITTOO S MALIK. RAJNISH N MALO, STEVEN MAMMEN, THOMAS² MAN, ADA W Y MANCINI, ENRICO V MANISHEN, WAYNE J MANN, AMRINDER MANN, ANISH S MANNESS, ROBERT C MANSARAY, MARCELLA MANSOUR, HANY M S MANSOURI, BEHZAD MANUSOW, JOSHUA S MARAIS, FRANCOIS MARANTZ, JEFFREY² MARANTZ, JESSE I MARCH, JUSTIN TY MARCOUX, MORGAN J MARE, ABRAHAM C MARIN, SAMANTHA MARKS, SETH D MARRIOTT, JAMES J MARSH, JONATHAN MARSHALL, ALEXIS

\$107.331.13 \$543.697.94 \$133,928.99 \$675.293.19 \$228,520.67 \$106,913.31 \$389,769.24 \$1.054.609.36 \$541,616.82 \$492.328.56 \$87,463,75 \$143 919 62 \$343.696.27 \$682.656.25 \$255.439.03 \$502,382,39 \$692,453.61 \$311.244.70 \$205 534 89 \$92,305.74 \$482.668.64 \$1,162,903.99 \$354.902.18 \$278,485.53 \$118,303.68 \$490.082.98 \$460.310.88 \$126,400.03 \$493,541.76 \$1,385,404.82 \$397,766.03 \$655.555.78 \$1,551,236.02 \$747.432.01 \$143,719.22 \$887,720.33 \$337,595.00 \$152,314.38 \$378,635.93 \$233,774.44 \$361,910.05 \$148.418.81 \$97,734.11 \$411,707.01 \$1,019,851.58 \$2,251,398.68 \$547.624.55 \$1,199,500,47 \$336.860.40 \$641,169.52 \$252,216.19 \$316,416.25 \$141,111.58 \$170,669.36 \$98.475.60 \$534,502.28 \$356.321.10

MARTENS, DAVID B MARTENS, M DAWN² MARTENS-BARNES, CAROLYN MARTIN, DAVID MARTIN, KATHRYN MARTIN, MARISSA K MARTINEZ, EDDSEL R MASLOW, KENNY D MASSICOTTE, KRISTINE MATHEN, MATHEN K MATHEW GEORGE MATHIESON, ANGELA L MATHISON, TRINA L MATSUBARA, TIMOTHY K MATTELIANO, ANDRE A MATTHEWS, CHRIS M MAXIN, ROBERT MAYBA JOHN I MAYCHER, BRUCE W² MAZUR. STEPHEN MAZURAT, ANDREA³ MCCAMMON, JAMES R MCCAMMON, RICHARD J MCCANNELL, MELANIE G MCCARTHY, BRENDAN G MCCARTHY, TIMOTHY G MCCLARTY, BLAKE M² MCCRAE, HEATHER MCCREA, KRISTIN MCDONALD, HEATHER D MCDONALD, PATRICK J MCEACHERN, JAMES D MCELHOES, JASON R MCFADDEN, L R MCFEE, COLIN D MCGILL, DUSTIN MCGINN, GREG MCGREGOR, GREGOR I MCGREGOR, JYOTI M MCINTYRE, IAN L MCINTYRE, IAN W MCKAY, MICHAEL A MCKIBBIN, LUNDY MCKINNON, ANDREW MCLEAN, NORMAN J MCLEOD, JARET K MCLEOD, MALCOLM MCMILLAN, STEWART MCMILLAN, TAMARA L MCMULLEN, AMANDA J MCNAMEE, DAVID A MCNAUGHT, JENNIFER MCNEILL, SHAYNA DA MCPHEE, LISA C² MCTAGGART, DAWN LYNN MCTAVISH, WILLIAM G

MARSHALL, TONISHA

\$457.927.96 \$428,400.27 \$4,720,220,46 \$148.665.25 \$443,846.51 \$184,706.16 \$353,923.08 \$384.071.83 \$678,533.81 \$98.971.07 \$654,437,44 \$692 660 02 \$441,383.64 \$346.679.18 \$338.435.55 \$1,160,243.34 \$317.510.30 \$161.946.85 \$1.560.876.22 \$1,648,430.57 \$417.093.46 \$752,878.44 \$289.050.93 \$138,504.38 \$264,723.94 \$372,290.53 \$562.654.31 \$990,250.42 \$105,535.06 \$327,150.79 \$408,143.93 \$166.296.80 \$1,005,776.17 \$372.770.29 \$91,286.98 \$434,615.54 \$155,125.75 \$288,798.70 \$262,433.81 \$225,096.62 \$262,663.69 \$459.193.79 \$445,475.81 \$445,655.39 \$457,061.30 \$625,995.09 \$212,469,68 \$304,939.71 \$101.950.00 \$94,734.25 \$182,709,43 \$130,372.90 \$108,411.74 \$175,539.12 \$1,673,274.98 \$102,962.29 \$152,194,10

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$122.698.43

\$734.309.69

\$109,492.47

\$301,607.60

\$535,725.31

\$630,087.47

\$127,585.31

\$643.332.25

\$839,807.64

\$538.637.68

\$128.300.29

\$433 420 25

\$332,091.76

\$143.529.32

\$94.027.72

\$535,855.90

\$128,768.18

\$100.227.58

\$417,567.72

\$217,157.19

\$266,046.39

\$935,249.16

\$387.011.07

\$356,162.37

\$205.618.08

\$325,956,18

\$135.375.44

\$138,443.32

\$938,729.98

\$262,950.28

\$431,996.46

\$792,042.21

\$128,332.33

\$366.060.75

\$519,389.58

\$112,390.56

\$292,684.61

\$148,384.76

\$193,623.67

\$670,364.40

\$410.571.42

\$276,807.64

\$376,959.80

\$94,120.16

\$315,308.73

\$125,457.80

\$96.212.84

\$1,188,587.25

\$312.316.02

\$632,348.47

\$240,540.96

\$269,755.98

\$711,729.30

\$385,992.85

\$169.505.79

\$1,108,491,20

\$1,588,907.03

(Continued)

MEDD. THOMAS M MEGALLI BASALI. SHERIF F MEGALOOIKONOMOS, PANAGIOTI MEHRABI, FARANAK MEHTA, P G MELLON, AARON M MELO ALFARO, LINDSEY C MEMAURI. BRETT F MEMON, GHULAM MEMON, RUKHSANA MENARD, CHANTALLE MENARD SHELLA MENDOZA, KENNETH R MERADJE, KATAYOUN MERCIER, MATTHEW MEREDITH, TREVOR J MERK, NICOLAS R MESTITO DAO, IRENE METCALEE JENNIEER MHANNI, AIZEDDIN MIAN. MUHAMMAD MICFLIKIER, AARON MICKS, TAFT G MIKHAIL, SAMY N F MILLAR, KYLE A MILLER, DAVID L MILLER, DONALD M MILLER, JACOB B MILLER, LISA MILLER, TAMARA L MILLIGAN, BRIAN E MILLO, NOAM Z MILLS, JEREMY J MILNER, JOHN F MINDERS, LODEWYK MINHAS, KUNAL K S MINK, STEVEN MINUK, EARL MINUK, LEONARD A MIRMULSTEIN, ANDREA MIS, ANDREW A MITCHELL, RYAN T M MITTELSTADT, MATTHEW MOAWAD, VICTOR F MODDEMANN, DIANE MODIRROUSTA, MANDANA MOFFATT, DANA C M MOGA, IUSTIN MOGHARBEL, HUSSAIN MOGHAREH, MOHAMMAD MOHAMED. MUFTA A M MOHAMMED, AHMED M E MOHAMMED, UMAR ABBA MOLLER, ERIKA E MOLLER. PHILIP R MOLTZAN, CATHERINE MOMOH. JOHN T

MONGRU, PADMA P MONKMAN, LISA M MOODY, JANE K MOONEY, OWEN T MORAN DE MULLER, KAREN MOREIRA E LIMA, RODRIGO MOROUZ, YAMANA MORRIS, AMANDA F MORRIS, ANDREW L MORRIS, MELANIE MORROW, CHRISTOPH MORSARA AVNEETS MOTTOLA, JEFFREY C MOUSSA, NESREEN M MOUTON, ROBERT W MSHIU. MERLYN MUIRHEAD, BRIAN MUJAWAR, QUAIS M MULCHEY KIMBERLEY MULLER DELGADO, HELLMUTH MUNIKAR, MING MUNS, PAUL MURRAY, KEN MURUG, IRINA MUSLEH, ABDALLAH MUSTAFA AL-GHIR, HASSAN A MUSTAFA, ARJOWAN MUSTAPHA, SHAREEF F MUTHIAH, KARUPPAN MUTTER, THOMAS C MYHRE, JOEL R MYKYTIUK, PATRICIA MYSORE, PRIYANKA NAGRA, SUNIT NAIDOO, JENISA^{1, 5} NAIR, SHONA NAIYEJU, OLANREWAJ NANTAIS, JORDAN NARASIMHAN, SOWMYA NARVEY, STEFANIE NASHED, MAGED NASIR, MAHMOOD NASIR, NOREEN NASR, NAGWA Y I NASSAR, MARK NAUSE, LEANNE N NAVARRO E LIMA, LAIS HELE NAWROCKA, DOROTA NAYAK, JASMIR G NAZAR-UL-IMAN, SAIYED NAZIM. RESHAD FA NCHE ANYE, MARCEL NEILY, SAMUEL ER NEIMAN, ARIEL NELL. ANTOINE M NELSON, TYLER NEMANI. SAILAJA

\$258.498.01 \$127.613.20 \$173,182.49 \$105.307.66 \$1,552,128.10 \$235,062.86 \$266,739.73 \$544.635.26 \$364,322.13 \$145.295.03 \$318,437,93 \$207 687 20 \$878,152,68 \$459.501.05 \$286.794.43 \$547,658.45 \$104.476.94 \$255.375.01 \$488.810.81 \$98,706.52 \$252.683.14 \$311,733.01 \$529.167.66 \$265,788.94 \$504,682.99 \$851,723,74 \$270.518.91 \$336,691.33 \$1,019,849.33 \$391,810.54 \$435,006.24 \$752,955.04 \$843,615.84 \$475.925.25 \$41,406,282.61 \$244,308.43 \$688,071.09 \$227,473.46 \$198,816.97 \$203,685.30 \$218,996.85 \$579.105.85 \$435,757.67 \$346,606.89 \$220,894.06 \$365,222.27 \$228.282.58 \$135,621.56 \$974.948.98 \$702,508.33 \$117,796.08 \$302,483.96 \$375,174.04 \$95,333.67 \$863.261.09 \$299,669.29 \$339.178.75

NEPON, JACK NEPON, JOSH NEUDORF. MATTHEW NEUFELD, DONNA M NEUFELD, GREGORY M NEVO, BENEDICT NEWMAN, SUZANNE NG, MARCUS C NGUYEN, HOANG DUN NGUYEN, LIEN NGUYEN LOAN NGUYEN, MAI P NGUYEN, QUYEN NGUYEN, TAI VAN NGUYEN, THANG N NICHOL, DARRIN W NICHOL, MICHAEL P NICKEL JARROD F NICOLL, BRADEN J NIGAM, RASHMI NIJJAR, SATNAM S NIRAULA, SAROJ NISHAT, SAMINA NISSAN RAMEN NJIONHOU KEMENI, MARIE M NKOLE, KELECHI NKOSI, JOEL E NOBLE, RACHEL LU NOEL, COLIN NOLIN, STEVEN V NOSEIR, MATTA SHA NOSEWORTHY, GRAHAM NOSTEDT, MICHELLE NOUR, SAMAN NOVEL, MARINO M NWANKWOR, IKEDINACH NYHOF, HAROLD W NYOMBA, BALANGU L OBARA, ROBERT OBERMAN, SAUL S OBEROI, SAPNA OBIORA, VICTOR O'CARROLL, AOIFE OCHONSKA, MARGARET OGARANKO, C P OGINNI, OLAYINKA OGUNLANA, DOROTHY P O'HAGAN, DAVID B O'KEEFFE, KIERAN M OKOLO, NKEMDILIM OKORAFOR, IKENNA N OKORO, THERESA OKOYE, CHIJIOKE OKPALEKE, CHRISTOPH OLA, OPEYEMI B OLADINI. OLUWATOSI

NEMETH. PETER

\$181.792.01 \$231,007.02 \$327,798.54 \$96.581.45 \$141,936.66 \$228,381.65 \$388,295.22 \$97.054.81 \$214,865.76 \$318,720,26 \$97.007.66 \$147 442 81 \$394,513.31 \$424.694.55 \$529.493.69 \$364,013.79 \$234.847.37 \$285,202,18 \$429 755 98 \$147,899.94 \$754.854.17 \$385,702.89 \$105.990.65 \$236,317.19 \$264,035.59 \$385.607.98 \$109.138.03 \$226,481,25 \$291,647.25 \$449,321.89 \$539,095.45 \$538,356.22 \$162,867.09 \$613.086.40 \$102,696.38 \$286.785.04 \$189,383.21 \$789,642.70 \$224,922.70 \$903,069.25 \$487,771.76 \$90.974.92 \$136,674.27 \$139,942.94 \$835,181.79 \$250,727.37 \$281.328.46 \$909,250.95 \$556.745.99 \$246,181.16 \$152.157.94 \$447,789.22 \$228,556.75 \$344,158.21 \$140.869.05 \$487,523.48 \$510.326.98

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$687.820.84

\$621,452,13

\$327,488,94

\$273.777.55

\$310,422.39

\$126,985.11

\$622,124.69

\$453,460,11

\$388.325.00

\$136.048.53

\$268 276 95

\$245,664.14

\$459.636.24

\$661.801.20

\$286,554.57

\$521.402.71

\$90.372.96

\$230 660 71

\$531,896.26

\$388,822.09

\$175,976.61

\$949.855.90

\$106.416.91

\$262,313.19

\$236,734.99

\$373,449.30

\$333,711.07

\$494.885.49

\$122,878.45

\$327,016.63

\$85,820.58

\$752,302.07

\$374,675.74

\$854,075.93

\$228,939.30

\$575.572.30

\$111,703.98

\$279,431.17

\$283,569.98

\$666,585.22

\$258,856.59

\$150.400.93

\$184,527.10

\$319,992.69

\$784,334.40

\$790,402.17

\$90,296.21

(Continued)

OLAYEMI, FUNMILAYO OLD. JASON OLIVIER, ERIN P OLSON, ROBYN L OMELAN, CRAIG K OMELAN, GRAEME D OMICHINSKI, L MICHAEL OMODUNBI, OLADIPUPO OMODUNBI, OLUWATUMI OMOIKE, IZIEGBE O O'NEIL, LIAM J ONG ALDRICH ONG. GEORGE H ONITA, NDUBUISI ONWURAH, DONATUS U ONYSHKO, DANIEL J OOMAH, SACHA RAJ OPEJIN, ADETOLA A OPPENHEIMER MARK W ORLIKOW, EVAN ORMISTON, JOHN D ORUKPE, AIRIDULU OSAGIE. IFEOMA W OSEI-BONSU, ADELAIDE OSLER E GIGI OSUORAH, DONATUS I OTA, CHIDINMA OWUSU, NANA PACHAL, CINDY ANN PACIN, ONDREJ PACIN, STEFAN PAGURA, JINA PAIGE, DENNIS J PALATNICK, CARRIE S PALETTA, ANTONIO PALITSKY, DANIEL J PAMBRUN, PAUL PANASKEVICH, TATIANA PANDEY, ANIL K PANDIAN, ALAGARSAMY PANG, EILEEN G PANNU, FAZEELAT PAPEGNIES, DEREK PAPETTI, SELENA PAQUIN, FRANCINE PARACHA, MUHAMMAD PARADIS, DANIELLE PARADOSKI, SAMANTHA PARHAM. SHELLEY M PARK, ANNY PARKER, KENNETH R PARPIA, YASIN PARR, CHRISTOPH PARTAP, NADINE A PARTYKA, JOSEPH W PASKVALIN, MARIO PATEL, AMANDA

PATEL, PAVITRA PATEL, PRAFUL C PATEL, PREMAL PATEL. S V PATENAUDE, AMANDA F PATHAK, KUMAR A PAUL, JAMES T PAUL. NIRANJAN \$174,520.80 PAULLA GALDINO, JENNYFER PAULS, RYAN J PEDERSON, KRISTEN PEEDICAIL JOSEPH SA PEITSCH, LORRAINE PELOQUIN, CHRISTIAN PENNER, BRITTANY PENNER, CHARLES G PENNER, KURT PENROSE, MICHAEL PEPELASSIS DIONYSIOS PERCHE, JASON M PERETZ. DAVID PEREZ CORTES VI, ARMELLE M PERIJA, BRITTANY \$324,002.34 PERL. EYTAN J \$160,767.43 PERMACK, SHELDON M \$452,786,18 PERNAROWSKI, KATHERINE PERRIN, DAVID \$389.047.70 PERRY, DARYL I PERVEEN, SADIA PESCHKEN, CHRISTINE PESUN, IGOR J PETERS, BRIAN \$338.859.16 PETERS, HEIN PETERS, JEREMY PETROPOLIS, CHRISTIAN PETROPOLIS, MARIA A T PHILLIPS, MICHAEL L PICKERING, CHRISTINE PIERCE, RYAN T PIETERSE, WERNER PIETERSE, WICKUS PILAT, EDWARD J PILKEY, BRADLEY D PINETTE, GILLES D PINNIGER, GREGORY W PINSK, MAURY N \$142,187.38 PINTIN-QUEZADA, JULIO PIO, ANTON PIRZADA. MUNIR A PIRZADA, SHAN PITZ. MARSHALL PLESTER, JENNIFER PLETT, JEREMY K PLETT, MICHAEL G \$526.883.45 PLEWES, MICHAEL E \$751,541.50 POETTCKER, ROBERT J \$275,761.89 POHL. BLANE L

\$243.870.38 \$459.718.64 \$605.537.62 \$314.315.57 \$1,183,023.66 \$816,312.40 \$199,935.88 \$470.657.46 \$357,174.78 \$551.150.25 \$114,752,74 \$244 520 30 \$189.710.67 \$133.744.42 \$150.248.79 \$134,824.34 \$182,793.03 \$375.024.65 \$235 372 66 \$426,403.67 \$828.811.62 \$219,701.46 \$314.900.56 \$321,546.71 \$350.244.61 \$660.204.90 \$278.982.33 \$482,893.78 \$449,210.87 \$131,294.01 \$144,482.61 \$608.066.11 \$560,224.42 \$124.221.04 \$1,049,072.45 \$249,693.55 \$348,496.60 \$294,121.09 \$274,493.19 \$349,895.84 \$473,977.26 \$384.659.44 \$660,073.25 \$890,072.29 \$267,785.44 \$130,282.52 \$130.157.95 \$208,614.24 \$601.374.51 \$488,033.12 \$110,886.66 \$339,509.22 \$95,867.96 \$136,702.16 \$623.788.71 \$550,214.38 \$161.964.32

POLIMENI, CHRISTINE POLIMENI, JOSEPH O POLIQUIN, VANESSA POLLOCK, BRADLEY POOLE, CODY M POON, ALANA POON, WAYNE W C POOYANIA, SEPIDEH POPESCU, ANDRA D POPESKI, DIANNE K POPOFF, DARYL POPOWICH SHAUNDRA PORHOWNIK, NANCY R PRASAD, BENJAMIN PREACHUK, CHRIS T J PREMATILAKE, SURAJ P PRENOVAULT, JEAN PREUN, JENNIFER PRICE CHRISTOPH PRICE, RUSSELL J PRICE, SHANDIS L PRINSLOO, JOCHEMUS PROBER, MARK ALAN PROCTOR, CHRISTOPH PRODAN, OREST PROMISLOW, STEVEN PSOOY, KAREN J PUAR, RIPNEET PUNDYK, KATHERINE PUNTER, FIONA PUTTAERT, BRETT D PUTTAERT, DOUGLAS PYLYPJUK, CHRISTY L PYMAR, HELEN C QADIR, MUNIR QAMAR, SHAISTA QUESADA, RICARDO RAABE, MICHAEL A RABAN, ROSHAN RABSON, JOHN L R RADULOVIC, DEJANA RAE. JAMES A RAFAY, MUBEEN F RAFIKOV, MARAT F RAGHAVENDRAN, S RAHMAN, JENNIFER RAHMAN, MEHWISH RAIISI, SETAREH RAIMONDI, CHRISTINA RAIZEN, MARILYN RAMADAN, ABDUL N RAMGOOLAM, RAJEN RAMKISSOON, REECE RAMOS, PATRICIA RAMSAY, CAREY ANT RAMSAY, JAMES A RAMSEY. CLARE D

\$86.164.50 \$90.853.12 \$277,207.03 \$536.203.67 \$209,909.53 \$297,197.96 \$215,658.43 \$596.547.76 \$330,962.60 \$489,490,65 \$216.889.71 \$429 970 72 \$481,866.67 \$153.785.37 \$3.149.840.67 \$508,811.42 \$432.693.41 \$134,170,75 \$483 814 59 \$357,944.87 \$142.577.97 \$270,402.52 \$168.683.94 \$242,606.64 \$98.518.73 \$515.085.60 \$127.495.82 \$305,055.21 \$147,929.78 \$335,571.30 \$169,529.70 \$132,201.39 \$346,455.19 \$273.737.96 \$241,184.70 \$276,430.60 \$297,309.46 \$513,900.39 \$466,189.45 \$1,122,300.24 \$992,339.00 \$256.075.25 \$138,096.49 \$817,277.21 \$313,828.25 \$755,516.26 \$252.177.54 \$184,794.29 \$312.763.17 \$406,502.61 \$268,155.55 \$389,502.97 \$547,795.01 \$363,513.83 \$409,686.10 \$363,648.83 \$292.613.06

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$239.390.26

\$213.535.36

\$915,678.42

\$945.076.24

\$902,993.12

\$108,369.35

\$150,729,27

\$140,231.29

\$338.211.30

\$716.742.26

\$723 911 23

\$911,480.31

\$495.474.52

\$654.638.53

\$100,270.94

\$382.563.82

\$415.020.10

\$706 322 64

\$459,710.06

\$623,121.03

\$761,022.88

\$496.803.43

\$173,270.32

\$117.916.86

\$665.579.23

\$116.277.74

\$177,325.14

\$818,109.42

\$93,599.24

\$615,066.93

\$184.764.16

\$375,610.09

\$331.400.11

\$676,405.54

\$238,486.48

\$492,566.08

\$204,072.40

\$293,099.55

\$222,905.77

\$397.813.82

\$497.037.02

\$526,682.22

\$451,862.31

\$741,267.88

\$138.462.72

\$88,406.49

\$149.587.30

\$264,714.80

\$407,554.78

\$320,771.95

\$472,777.98

\$636,765.78

\$160,508.67

\$202,843.41

\$410.859.58

\$1,153,517.79

\$1,139,232.81

(Continued)

RANDHAWA, NIRMAL K RANDHAWA, SUKHWINDE RANDUNNE, AVANTHI RANDUNNE, AYODYA S RASOOL, AMERA RATCLIFFE, GREGORY E RATHOD, SHRINIVAS RATNA, SAYOAN RATNAPALA, HARANKAHA RATZLAFF, MATTHEW RAUBENHEIMER, JOHANN P RAUCH JOHAN F RAVANDI, AMIR RAVI RAJ. -RAZA, IRFAN RECKSIEDLER, CARMEN REDA, ANDREW W REDA, JOHN E REDA YOUSEE REED, JASON M REHSIA. NAVNEET S REHSIA, SABEER S REHSIA, SACH I REIMER, ANGELA M REIMER, DARREN K REIMER, DAVID J REIMER, HEINZ REIMER, MURRAY B REITMEIER, SHAYNE REMPEL, REGINA R RESLEROVA, MARTINA³ RETROSI, GIUSEPPE REYNEKE, ANNEMIE REYNOLDS, JAMES L REYNOLDS, JODY J REZAZADEH, SHADI REZK, EMAD A RHOMA, SALAHALDE RICCI BARTOL, MARIA F RICHARDS, CERI ANNE RICHARDS, MICHAEL D RICHARDSON, CINDY J RICHARDSON, SCOTT RICHELLE, JACQUELIN RIEL, STEFAN L RIGATTO, CLAUDIO RIMMER, EMILY K RING, HEATHER RINGAERT, KEN RIPSTEIN, JONATHAN RIST. JAMIE LEE RITCHIE, JANET RIVARD, JUSTIN D RIZK, ABDALLA M ROBERTS, JANET R ROBERTS, KRIS A ROBERTS, LESLEY FI

ROBERTSON, REAGAN LE ROBILLARD, SUSAN C ROBINSON, C CORRINE ROBINSON, CHRISTINE ROBINSON, DAVID B ROBINSON, DEBBIE J ROBINSON, WESLEY K ROCHA, GUILLERMO ROCHE, GAVIN RODRIGUES, DANIEL RODRIGUEZ MARRE, ILDEGUL ROF BRUCE F ROETS, WILLEM G ROGOZINSKA, LUDWIKA ROHALD, PAM ROMAN, MANAL ROMAN, NADER RONA, CESAR RONDEAU JOCELYNE ROSCHER, COLIN ROSENBLAT, KARA ROSENTHAL, MARGOT ROSENTHAL, PETER ROSS. F KATH ROSS. JAMES F ROSS, TIMOTHY K ROUSSEAU, SKYE R ROUSSIN, BRENT C ROUX, JAN ROY, DANIELLE ROY, HAVEN ROY, MAURICE J ROZBACHER, ADRIAN ROZBACHER, ANDREA RUDDOCK, DEANNE L RUFFO, CARSTON B RUMBOLT, BRIAN R RUSH, DAVID N RUSK, RICHARD C RUSSELL, SAMANTHA RUST, LEN RUTHERFORD, MAEGAN M RUZHYNSKY, JENNIFER RUZHYNSKY, VLADIMIR RYALL, LORNE A RYZ, KRISTA S SAAD. VERA N SAADIA, VIVIEN SABAPATHI, KARTHIK SABESKI, LYNNE M SABZWARI, ANS SAEED, MAHWASH F SAFFARI, HAMIDEH SAGANSKI, EMILY SAKLA, MARY S S SALA, TANYA N SALAKO, ADEWALE S

\$595.564.55 \$308.133.69 \$343,992.29 \$357.952.62 \$243,173.00 \$469,028.54 \$303,555.73 \$1,311,148.09 \$594,953.23 \$595.205.59 \$434.086.73 \$168 587 18 \$307.938.97 \$236.822.56 \$545.969.15 \$478,628.15 \$450,493.81 \$569,188,82 \$128 728 63 \$863,270.01 \$93,091.13 \$153,932.58 \$185.730.53 \$95,669.04 \$956,229.88 \$935,129,89 \$284.572.15 \$281,765.36 \$335,680.61 \$496,786.52 \$282,885.06 \$176,508.75 \$368,460.42 \$100.226.86 \$402,150.90 \$99,916.26 \$114,246.23 \$134,996.91 \$459,716.02 \$413,618.68 \$128,382.53 \$368.842.81 \$288,487.43 \$427,207.82 \$106,147.09 \$634,308.42 \$138.588.21 \$202,673.77 \$304.338.46 \$377,466.96 \$515,048.05 \$336,114.25 \$247,363.94 \$288,087.96 \$440,162.23 \$131,049.41 \$457.483.36

SALEM. FAYEZ SALTEL, MARC E J SALTER, JENNIFER SALTER-OLIVER, BELYNDA A SAM, ANGELA SAM, DIANA SAMARASENA, ISHANI G SAMBORSKI, CORY SAMI. SAHAR SAMOIL, MARY F S SAMUELS LEWIS SANDHAWALIA, SHUBHKARM SANDHU, KERNJEET SARANCHUK, JEFFERY W SAREEN, SANJAY SARLAS, EVANGELOS SARPONG, SIMON K SATHIANATHAN CHRISTIE SAUNDERS, KEVIN SAWA, GAIL F SAWATZKY, MARTINA SAWICH. SHAUNA SAWKA, SANDRA E SAWYER, JEREMY A SAWYER, SCOTT K SAXENA, MILIND SAYED, SUHAIL SAYFEE, SIAMAK SCHACTER, GASHA I SCHAFFER, STEPHEN A SCHANTZ, DARYL SCHELLENBERG, ANGELA E SCHERLE, KURT SCHIFKE, WILLIAM G SCHMIDT, BRIAN J SCHMIDT, DAPHNE SCHNEIDER, CAROL E SCHROEDER, ALVIN N SCHROEDER, FRANCIS M SCHULTZ, ALEXANDER SCHUSTER, WOLFGANG SCHUTT, VIVIAN A SCHWARTZ, ANNA G SCHWARTZ, LEONARD D SCOTT, JASON SCOTT, KRISTEN SCOTT, SARA SCOTT-HERRIDGE, JOEL SCRAMSTAD, CARLY SEAMAN, KENNETH SEAMAN, MICHAEL K SEFIDGAR, MEHDI SEGSTRO, RONALD J SEIFER. COLETTE M SEITZ, ANDREW R SELLERS, ELIZABETH

SALAMON. ELIZABETH

\$863.186.96 \$574,598.57 \$515,136,73 \$346.455.25 \$148,860.02 \$1,372,394.76 \$231,142.74 \$366.297.68 \$109,901.84 \$259.511.54 \$240.521.10 \$666 085 44 \$88,958,93 \$221.711.54 \$711.046.00 \$340,545.42 \$143.570.00 \$158,948,30 \$649 135 01 \$248,543.04 \$180.889.38 \$94,399.73 \$119.115.40 \$180,700.01 \$429,912.07 \$909.302.11 \$140.623.13 \$93,560.83 \$193,310.57 \$233,692.17 \$163,385.92 \$267,957.37 \$502,186.99 \$126.272.87 \$312,873.66 \$103,580.44 \$103,153.66 \$410,367.49 \$366,485.30 \$306.743.24 \$181,811.18 \$109.854.93 \$501,178.44 \$204,469.87 \$405,408.86 \$445,752.93 \$255.433.22 \$341,115.67 \$755.014.75 \$167,340.31 \$344.239.20 \$892,357.39 \$610,213.92 \$102,722.81 \$474,885.00 \$189,643.82 \$105.554.81

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

SEMUS, MICHAEL J \$274.021.47 SEN, ROBIN \$242.793.23 SEQUEIRA, ALASTAIR \$414,995.69 SEQUEIRA, SANGITA \$85,552.67 SETHI, KRISHAN \$133,377.05 SEWELL, GARY \$187,249.96 SEXTON, LAURA A \$170,422.81 SHAFFER. SETH \$532.124.70 SHAH, ASHISH H \$1,248,228.22 SHAH. BHARAT \$98.012.69 SHAH, SYED A A \$136,734,79 SHAIKH NASIR \$683 773 07 SHAKER, MARIAN \$1,405,527.07 SHAMLOU MONTAZE, AMIR HASS \$312.858.09 SHANKAR, JAI JAI S \$687.042.99 SHANKS, MICHELLE \$112,359,41 SHANTI, MOHAMMAD \$1.030.826.83 SHARIATI, MAJID \$312,786,71 SHARIFE FARHANA \$348.498.01 SHARIFF, TAHARA J \$247,641.21 SHARKEY, JAMES B \$527.782.40 SHARKEY, RHYS \$187,782.29 SHARMA, ADITYA \$288.262.62 SHARMA, DEEPTI \$308,090.16 SHARMA, SAVITA \$107.175.81 SHARMA, SHELLY \$268,903,79 SHATSKY, MORLEY \$201.068.90 SHAW, JAMES A \$230,429.08 SHAWYER, ANNA C \$336,558.11 SHAYEGI NICK, ANITA \$823,743.29 SHELL, MELANIE \$277,206.31 SHELTON, PAUL A \$112.819.71 SHENODA, KAMAL L M \$432,244.41 SHENOUDA, MERVAT \$323.448.45 SHEPERTYCKY, MARTHA R \$507,753.90 SHEPS, MICHAEL D \$930,450.73 SHERBO, EHREN \$174,372.11 SHIFFMAN, FRANK H \$582,535.96 SHIRLEY, JENNA \$208,636.22 SHIROKY, JONAH \$388,162.74 SHOBAYO, OLADAPO F \$208,501.48 SHOEWU, OLUWAFEMI \$425.756.23 SHOKRI, AHVAN \$767,466.01 SHOKRI, MOHAMMAD \$538,455.66 \$278,967.19 SHOUKRY, SAHAR SHUCKETT, PAUL \$102,361.15 SHUMSKY, DAVID \$121.224.56 SHUNMUGAM, RAVENDREN \$981,560.83 SICKERT, HELGA G \$255.840.67 SIDAROUS, AMAL M \$718,175.19 SIDDIQUI, FAISAL S \$290.725.93 SIDDIQUI, ISSAR \$648,273.82 SIDHOM, CHERINE R \$575,096.03 SIDHU, GURVEEN K \$220,996.90 SIDHU, PRINCE \$291,202.03 SIDRA GERGES, MAGED E \$346,091.90 SIDRA-GERGES, MARINA \$140.201.84

SIEMENS, JASON M SIGURDSON, LEIF JOHN SIKORA, FELIX J SILAGY, STEWART SILHA, JOSEF SILHOVA, DASA SILVAGGIO, JOSEPH SILVER, CARLA D SILVER, NORMAN A SILVER, SHANE SIMARD-CHIU, LESLIE A SIMONS FRANCES F SIMONSON, DON W SIN. TRA SINGH, AMARJIT SINGH, HARMINDER SINGH. MANEESHA SINGH, MONTY M SINGH NEAL SINGH, PRABHJOT SINGH, RAMANDIP SINGH, RENATE G SINGH, RICKY D SINGH, ROBINDER SINGH. SHIRIN SINGH, VIKRAMJIT SINGH-ENNS, SONIA SIQUEIRA BRIGLI, FELIPE SIVANANTHAN, GOKULAN SIVANANTHAN, KAMALANAY SIVASANKAR, RAMAN SKAKUM, KURT K SKAKUM, RUTH SKEAD, LENNARD SKINNER, JAMES T SKRABEK, PAMELA J SKRABEK, RYAN Q SLUTCHUK, MARVIN SMAL, SAMUEL J SMITH, CATHERINE SMITH, ERIK R SMITH. LOUIS F SMITH, RILEY SNEATH, JASON SNOVIDA, LIOUBOV SOCHOCKI, MICHAEL P SODHI, POONAM SODHI, VIJAY K SOLIMAN, MAGDI F L SOMMER, HILLEL M SONI. ANITA SONI, NANDINI R SONOIKI, TAIWO G SOOKERMANY, NATASHA SOOKHOO, SIUCHAN SOPEL, MRYANDA SOUFI, YOUCEF

\$141.914.53 \$954.961.37 \$386.688.53 \$932.839.59 \$1,092,304.84 \$321,135.60 \$287,230.64 \$286.550.72 \$796,715.59 \$2.238.079.04 \$183,739,90 \$151 788 26 \$170.316.38 \$265.219.90 \$136.338.22 \$777,637.69 \$263,080.93 \$162.063.36 \$108.561.26 \$172,287.24 \$195,688.50 \$733,275.94 \$599.354.14 \$882,557.63 \$548,778.54 \$566.808.05 \$136.049.13 \$193,243.21 \$229,412.32 \$557,891.68 \$517,580.11 \$218.861.00 \$213,409.34 \$476.508.61 \$89,408.11 \$207,610.42 \$992,451.01 \$140,978.19 \$397,504.73 \$233,479.86 \$239,816.17 \$842.467.50 \$421,454.01 \$2,498,429.40 \$244,700.10 \$333,188.97 \$131.143.66 \$654,828.71 \$822.779.51 \$344,144.90 \$693,433.70 \$399,827.52 \$546,592.11 \$92,445.25 \$850.113.52 \$303,656.92

\$773.447.81

SPANO, STEFANIA SPEER, MARGARET SPEZIALI, CRAIG D SPOONER, AARON J SPRINGMAN, MAEGAN SRINATHAN, SADEESH K ST GODDARD, JENNIFER ST JOHN, PHILIP D ST VINCENT, ANTHONY STAINES, KENTON M STANIFORTH CHRISTINA STANIFORTH, CHRISTOPH STANKO, LORRAINE STAPLETON, CIELLE STASIUK, ALLISON D STEIGERWALD, SARAH STELZER, JOSE STEPHENSEN MICHAEL C STERN, SHERYL STEVENSON, LAUREL E STILLWATER, LAURENCE STITZ. MARSHALL STOCKL, FRANK A STOCKWELL, KEVIN STOFFMAN, JAYSON M STONE, JAMES STOROSCHUK, GREGORY W STORSLEY, LEROY J STOSKI, ROXANN M² STRANG, DAVID G STRANGES, GREGORY A STRANK, ROYDAN K STRIDE-DARNLEY, BENJAMIN STROESCU, DANIELA V STROH, GREGORY STRONGER, LYLE STRUMPHER, JOHANN STRZELCZYK, JACEK² SUD. ANIL K SULAIMAN, WASAN S S SULAIMAN-BARADI, RIZQA SURDHAR, IAN S SUSKI, LISA SUSSER, MOSES M SUTHERLAND, DONNA E SUTHERLAND, ERIC N SUTHERLAND, IAN SCOTT SUTHERLAND, JAMES G SUTTON, IAN R SYED, ALI SZAJKOWSKI, TERRENCE SZELEMEJ, PAUL T JONG, GEERT W TADROUS, JACQUELIN TAGIN, MOHAMED A TAIYE-AKINSUN, AKINWALE

SPANGELO, LISA MICH

\$236.418.93 \$90.679.02 \$279,284.09 \$93.372.95 \$556,620.00 \$207,629.04 \$300,716.31 \$256.572.45 \$250,122.05 \$165.559.42 \$505.672.44 \$352 213 69 \$216,178.31 \$572.739.40 \$116.116.58 \$465.859.28 \$602.334.08 \$322.308.86 \$116 367 92 \$145,854.37 \$269.436.60 \$1,333,118.54 \$457,404,40 \$2,399,711.29 \$384,163.52 \$88.226.12 \$306.582.77 \$290,542.39 \$737,479.92 \$638,532.22 \$129,167.57 \$649,582.74 \$452,380.80 \$121.023.90 \$379,592.36 \$117,813.03 \$372,245.99 \$415,716.41 \$4,707,848.39 \$938,943.82 \$173,510.45 \$96.263.42 \$100,701.12 \$94,756.61 \$164,803.48 \$287,984.96 \$570.305.22 \$522,476.83 \$317.591.01 \$572,768.01 \$155,486.66 \$363,544.48 \$104,321.67 \$233,357.76 \$372.731.98 \$144,798.81 \$108.806.49

Schedule of Payments for Fiscal Year Ended March 31, 2023

\$482.636.84

\$621.911.86

\$539,114.87

\$284,039.59

\$440,077.12

\$785,154.78

\$424,265.83

\$841.608.99

\$862,967.64

\$397.738.28

\$616.521.33

\$154 631 63

\$331,535.34

\$387.936.25

\$586.667.53

\$521,606.27

\$382.317.13

\$192.051.33

\$486 337 46

\$239,658.76

\$306,936.62

\$407,237.72

\$829.389.86

\$125,787.94

\$91.495.78

\$305.859.60

\$279.701.39

\$387,020.68

\$364,326.26

\$106,374.01

\$225,040.49

\$252.752.51

\$210,334.58

\$183.567.29

\$115,761.59

\$180,151.82

\$380,725.80

\$173,782.36

\$252,533.41

\$339,964.68

\$558,953.77

\$865.407.62

\$294.095.37

\$536,165.73

\$686,896.65

\$983,578.28

\$216.737.33

\$761,997.73

\$301.971.53

\$382,837.39

\$194,616.85

\$171,607.93

\$270,938.57

\$259,118.98

\$137,556.57

\$401,333.86

\$518,799,15

(Continued)

TAIYE-AKINSUN, OLUSEYI TAM. JAMES W TAMAYO MENDOZA, JESUS A TAN, EDWARD TAN, LAWRENCE TANDON, RICHA TANGRI, NAVDEEP TAPPER, JASON A TARASKA, VICTORIA TARASKA, VINCENT A TARIQ. MUHAMMAD TASSI HISHAM TATINENI, RANJIT K TAWFIK, VIOLA L TAYLOR, HUGH R TAYLOR, SUSAN N TEGG. TYLER TEILLET, MARC E TENENBEIN MARSHALL TEO, SWEE L TESKEY, LINDSAY S THAMES, JOYCE THESS. BERNARD A THIELMANN, ALEXANDRA THIESSEN, MACLEAN THIESSEN, PHOEBE THILLE. SUZANNE M THOMAS, SHAWN T THOMAS, SUNU THOMPSON, CURTIS ST THOMPSON, ELIZABETH THOMPSON, LEANNE J THOMPSON, SUSAN B THOMPSON, THOMAS R THOMSON, BRENT R J THOMSON, GLEN T D THOREN, JACALYN THORINGTON, KRYSTAL M THORLAKSON, DEREK THORLAKSON, IAN J THORLEIFSON, MULLEIN D THWALA, ANDREA B TIEN-ESTRADA, JOAN TING, TOMMY W TISCHENKO, ALEXANDER TISSERA, PONSUGE A TISSEVERASINGHE, ANNALIESE TKACZYK, NICHOLAS TODARY FAHMY, YVETTE TOEWS, KAREN A TOEWS, MATTHEW E TOOLE, JOHN W P TOOP, ALEXA TORBIAK, LINDSAY TRACHTENBERG, AARON TRAN, CUC P TRAN, MIMI

TRELOAR, KELBY TREPEL, SIMON TRINH, HANG TRIVEDI, ANURAG TSANG, DOMINIC TSANG, JAMES F TSANG, MAE TINA TSANG, SUSAN T TSE, WAI CHING TSUYUKI, SEAN H² TUFESCU, TED TUNOVIC EDIN TURABIAN, B MICHAEL TURGEON, THOMAS TURK, WILLIAM J TURNER, BLAIRE D TURNER, ROBERT B TURNER, SHELLEY A TURNER TRENT UDOW, SEAN J UDUEHI. EKATA A ULLAH, SHAHLA I UNARAIN, INDRANIE UNGARIAN, JILLIAN UNGER, JASON B A UTKO, PAWEL UWABOR, WISDOM O UYS. THARINA UZWYSHYN, MIRA VAN ALSTYNE, MURRAY VAN AMSTEL, LEANNE L VAN CAESEELE, PAUL G1 VAN DAM, AVERI VAN DE VELDE. ROCHELLE VAN DEN HEEVER, JESAJA W VAN DER WESTHUI, LUCAS C VAN DER ZWEEP, JOHN VAN DIJK, CODY VAN DYCK, ALLISON VAN JAARSVELDT. WERNER VAN NIEKERK, ETIENNE VAN RENSBURG, C JANSE VAN RENSBURG, P D JANSE VAN ROOYEN, M LOUIS VAN, ROYCE VANCURA, DAVID VANDERHEYDEN, KARA L VANDERHOOFT, LUKE JOHN VANDERHOOFT, REBECCA H VATTHEUER, ANNABEL VEGA-ARROYO, MIGUEL VELASCO SORDO, LUIS RAMO VENDITTI, MARCELLO VENDRAMELLI, MARK P VENKATESAN, NITHYA VENTER, DIRK J VERGARA, DERRICK Y

\$338.566.94 \$176.867.02 \$219,352.17 \$480.389.47 \$495,290.62 \$868,042.08 \$223,107.98 \$100.761.79 \$114,659.27 \$2.550.534.44 \$585.845.84 \$311 349 91 \$176.687.88 \$583.059.43 \$259,905.50 \$409.812.94 \$422,885.97 \$181.337.05 \$182 125 26 \$220,887.96 \$151,748.75 \$521,011.68 \$183.176.05 \$314,746.62 \$296,450.13 \$528,964,17 \$412.773.41 \$358,631.18 \$117,742.12 \$255,777.80 \$968,773.59 \$85,162.97 \$88,927.70 \$495.140.96 \$605,330.55 \$374,351.66 \$434,892.18 \$140,603.05 \$105,384.49 \$501,539.43 \$247,288.06 \$460.235.11 \$581,402,26 \$655,915.84 \$385,681.65 \$497,062.44 \$155.542.22 \$528,155.24 \$198.775.13 \$141,132.20 \$197,264.41 \$193,697.45 \$268,970.30 \$154,248.88 \$192,999.87 \$576,313.00

\$622.547.95

VERITY, SHAWN D VERMEULEN, SONJA L VERNON, JAMES VERRELLI, MAURO³ VIALLET, NORBERT R VICKAR, ERIC L VIDAL, RYAN VIGNUDO, SILVIA VILLA HERNANDEZ, JUAN VILLEDA, JOSE A VIPUI ANANTHAN MANOHARY VIRDI, PARAMVIR VISCH. SHAWN H R VISSER, GERHARDT VISSER, ROBIN C H VIVIAN, MARK A² VLCEK, LUBOMIR VLOK NICOLAAS VOSTERS, NICOLE K VUKSANOVIC, MILOS V M WACHUKWU, CHINYERE WADHWA, ANKUR WAHBA HANNA, TALAAT W WAKEMAN, M STEWART WALDMAN, JEFFREY C WALKTY, ANDREW WALLACE, MARC G WALLACE, SHARON E WALMSLEY, CHRISTOPH WALTERS, JUSTIN J³ WALTERS, LESLEA A WANG, ANGUS N WANIGASEKARA, WANIGASEK WARDEN, SARAH K WAREHAM, KRISTEN B WARELIS, ADAM WARKENTIN, RAY WARNAKULASOORIY, RIVIRAJ WARRACK, CHRISTOPH WARRAICH, GUNWANT WARRAICH, KANWARJIT WARRAICH, NAVROOP WASEF, MERVAT S WASEF, NAGY S WATSON, HEATHER WATTERS, TIMOTHY WAYE, LEON R L WEBAR VALDIVIES, JAVIER WEBB, JOANNA WEINBERG, TESSA WENGEL, TIFFANY WETTIG, KARA B WHEELER, JEFFREY WHITE, BRUCE K WHITE, SANDRA WHITLEY, REBECCA C

VERGIS. ASHLEY

\$815.833.90 \$319.819.90 \$175,849.29 \$866.020.19 \$710,680.91 \$536,890.31 \$451,809.06 \$249.636.88 \$265,126.94 \$118.375.14 \$307.597.64 \$169 499 97 \$330,222,89 \$281.809.23 \$411.350.70 \$489,572.62 \$978,934.14 \$188.565.32 \$396 648 99 \$200,586.65 \$578,417.69 \$287,576.06 \$273.588.66 \$631,006.91 \$132,597.43 \$192.667.89 \$123.187.45 \$793,804.19 \$249,488.77 \$455,542.00 \$851,947.34 \$294,187.79 \$286,775.64 \$99.969.49 \$180,060.24 \$292,168.72 \$393,008.08 \$381,819.18 \$103,689.62 \$274,528.33 \$177,919.64 \$455.218.65 \$150,305.78 \$300,769.12 \$280,463.28 \$242,606.96 \$189.046.46 \$438,598.37 \$493.292.54 \$128,542.22 \$149,192.45 \$305,257.97 \$509,725.61 \$338,142.03 \$369.715.41 \$131,653.83 \$98.750.32

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

WHITTAKER, ELIZABETH WHITTAKER, LAUREN WICKLOW, BRANDY A WIEBE, CHRIS J WIEBE, JENNIFER WIEBE, SANDRA WIEBE, TANNIS H WIENS, ANTHONY V WIENS, JAMES J WIENS, NICOLE WIESENTHAL, BENJAMIN WILD KIM J WILLIAMS, CHRISTOPH WILLIAMS, J DAVID WILLIAMSON, D WILLIAMSON, KELVIN W WILLOWS, JIM R WILSON, ANDREA GA WILSON GREGORY P WILSON, JENNIFER WILSON, MURRAY² WINCHAR, KELCEY WINOGRODZKA, CHRISTINA WINOGRODZKI, ARTHUR WISEMAN, MARNI C WISEMAN, NATHAN WOELK, CORNELIUS WOLFE, KEVIN B WOLFE, SCOTT A WONG, CLINT S WONG, ELLIOT J WONG, JAS WONG, JASON WONG, RALPH P W WONG, STEPHEN G WONG, TURNLY WONG, VERONICA WOO, CASEY WOO, NOBBY WOO, VINCENT C WOOD, HENRY WOODMASS, JARRET WOODROW, LINDSEY WORB, ANDREW WORDEN, TYLER A WORKMAN, WILLIAM WOSNITZA, KARI MARI WOURMS, VINCENT P WTOREK, PIOTR THO WU. EASON WU. TED CHIA WUERZ, TERENCE XU, QI YALE, ROBERT YAMAMOTO, JENNIFER YAMASHITA, MICHAEL YAMSUAN, MARLEN

\$391,514.81

\$324,267.00

\$277,430.87

\$566,630.79

\$459,015.83

\$654,553.25

\$811,162.96

\$186,362.68

\$608.628.25

\$428,594.77

\$123,517.29

\$281,263.54

\$196,718.05

\$133,587.45

\$412,527.02

\$281.173.17

\$138,191.24

\$86,399.08

\$270,738.07

\$219,279.12

\$141,239.43

\$172,734.21

\$713,558.13

\$211,582.25

\$137,183.64 \$255,715.24 YANG, LIN \$484,249.05 YANKOVSKY, ALEXEI \$171.454.61 \$101,552.26 YAWORSKI, DANIEL N \$187,900.34 \$454,034.29 YEHUDAIFF, DORON \$159,986.84 \$104,077.98 YING, STEPHEN M² \$1,135,029.54 \$368,141.49 YIP, BENSON \$228,808.45 \$361,428.98 YORK, RYAN J \$319,904.50 YOUNG, JEANNE \$558,083.62 \$296,371.34 \$687,089.40 YU, ADELICIA \$1,189,639.90 YUONESS, SALEM A⁴ \$1,214,128.54 \$305.139.80 ZABOLOTNY, BRENT P \$121.693.68 \$402.023.22 ZABORNIAK KARVER M \$515.508.90 \$314.557.06 \$262,566.35 ZACHARIAS, JAMES³ \$718,633.02 \$245,318.00 ZAHIRI, MAJID \$531,926.84 \$121,473.30 ZAKI, AMEL E \$444.910.06 \$823,710.50 ZAKI, MAGDY F \$625,597.21 \$87,969.19 ZARRABIAN, MOHAMMAD \$1,184,128,40 \$103.338.12 ZEILER, FRED \$910.734.96 \$602.555.66 ZELENIETZ, CALEB S G \$329.679.29 \$145,262.62 ZHANG, HANBO \$207,617.52 \$2,353,510.23 ZHANG, JASON J \$138,876.91 \$89,927.11 ZHANG, SURONG \$811,765.48 \$310,222.74 ZHANG, YIYANG \$560,302.08 \$231,882.76 ZHOU, BOWEN \$270,220.96 \$1,286,368.17 ZIA, ZAFFAR MA \$174,624.71 \$215.090.01 ZIAEI SABA, SHAHNAZ \$470.983.35 ZIEROTH. SHELLEY R \$246.308.38 \$145.647.60 \$690,585.61 ZIESMANN, MANFRED \$784,618.09 \$398,253.66 ZIESMANN, MARKUS T \$307,007.06 \$726,181.99 ZIMMER, KENNETH W \$303,454.95 \$208,317.72 ZIOMEK, ANNA M \$265,902.16 \$217,190.44 ZOHNI, KHALED \$279,960.63 ZYLBERMAN, MELINA \$187,563.45 \$125,829.27

Explanatory Notes:

- (1) Director of a private laboratory facility. Services may be provided by a group of practitioners, but are billed in the name of a single practitioner for administrative efficiencies. (See pages 15-17 for list of facilities).
- (2) Director of a private radiology facility. Services may be provided by a group of practitioners, but are billed in the name of a single practitioner for administrative efficiencies. (See pages 17-20 for list of facilities).
- (3) Billings for dialysis services representing the work of more than one physician. (See page 20-21 for list of facilities).
- (4) Director of a nuclear medicine facility. Services may be provided by a group of practitioners, but are billed in the name of a single practitioner for administrative efficiencies. (See page 21 for list of facilities).
- (5) Director of a patient service center facility. Services may be provided by a group of practitioners, but are billed in the name of a single practitioner for administrative efficiencies. (See page 21-22 for list of facilities).

Laboratory Directors and Facilities	
Akash Gupta	Canadian Blood Services - Platelet Immunology Laboratory
Amin Kabani	Altona Community Memorial Health Centre
	Arborg & District Hospital
	Beausejour Hospital
	Bethesda Regional Health Centre
	Boissevain Health Centre
	Boundary Trails Health Centre
	CancerCare Manitoba - Hematology Laboratory
	Carberry Plains Health Centre
	Carman Memorial Hospital
	Centre de Sante Notre-Dame Health Centre
	Churchill Health Centre
	Concordia Hospital
	Dauphin Regional Health Centre
	Deloraine Health Centre
	DeSalaberry District Health Centre
	E. M. Crowe Memorial Hospital
	Flin Flon General Hospital
	Gillam Hospital
	Gladstone Health Centre

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

Glenboro Health Centre Grace Hospital Grand Rapids Nursing Station Grandview District Hospital Hamiota District Health Centre Health Sciences Centre Health Sciences Centre - Transplant Immunology Laboratory Hunter Memorial Hospital Johnson Memorial Hospital Lakeshore General Hospital Lorne Memorial Hospital Lynn Lake District Hospital Melita Health Centre Minnedosa Health Centre Misericordia Health Centre Morris General Hospital Neepawa Health Centre **Pinawa Hospital** Pine Falls Health Complex Portage District General Hospital **Riverdale Health Centre Roblin District Health Centre** Rock Lake Health District Hospital **Russell Health Centre** Selkirk Regional Health Centre Seven Oaks General Hospital Snow Lake Health Centre Souris Health Centre St. Boniface General Hospital Ste. Anne Hospital Ste. Rose General Hospital Stonewall & District Health Centre Swan Valley Health Centre The Pas Health Complex Thompson General Hospital **Tiger Hills Health Centre** Tri-Lake Health Centre Victoria Hospital Virden Health Centre Vita & District Health Centre

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

	Westman Regional Laboratory Services
David Szwajcer	CancerCare Manitoba - Cellular Therapy Laboratory CancerCare Manitoba - Histocompatibility Laboratory
Jenisa Naidoo	Dynacare (100 - 830 King Edward Street, Winnipeg, Manitoba) Dynacare (30 Lakewood Boulevard, Winnipeg, Manitoba)
Paul Van Caeseele	Cadham Provincial Laboratory

Radiology Directors and Facilities	
Alessandra Cassano-Bailey	Seven Oaks General Hospital
Ashraf Goubran	St. Boniface General Hospital
Blair Henderson	Altona Community Memorial Health Centre Bethesda Regional Health Centre Boundary Trails Health Centre Carman Memorial Hospital Centre de Sante Notre-Dame Health Centre DeSalaberry District Health Centre Lorne Memorial Hospital Morris General Hospital Portage District General Hospital Rock Lake Health District Hospital Ste. Anne Hospital Vita & District Health Centre
Blake McClarty	St. Boniface General Hospital
Brian Hardy	Prota Clinic
Bruce Maycher	McIvor X-Ray Clinic St. Boniface General Hospital Transcona X-Ray Clinic
Daniel Lindsay	Arborg & District Hospital

Manitoba Health Services Insurance Plan The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

	Beausejour Hospital Churchill Health Centre Dauphin Regional Health Centre E. M. Crowe Memorial Hospital Express Care X-Ray Clinic Flin Flon General Hospital Gillam Hospital Grand Rapids Nursing Station Hunter Memorial Hospital Johnson Memorial Hospital Lac du Bonnet Health Centre Lakeshore General Hospital Lynn Lake District Hospital Pinawa Hospital Pine Falls Health Complex Selkirk Regional Health Centre Snow Lake Health Centre
	The Pas Health Complex
	Thompson General Hospital
Edward Lyons	Maples Surgical Centre Men's Health Clinic Manitoba
Francisco Avila Flores	Grandview District Hospital Hamiota District Health Centre Riverdale Health Centre Roblin District Health Centre Russell Health Centre Shoal Lake - Strathclair Health Centre Ste. Rose General Hospital Swan Valley Health Centre
Hugh Eaglesham	Assiniboine X-Ray Clinic Charleswood X-Ray Clinic Lakewood Medical Centre Meadowood X-Ray Clinic Pembina X-Ray Clinic Winnipeg Clinic

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

J. Michael Davidson	Fort Whyte Imaging (310- 1020 Lorimer Boulevard, Winnipeg, Manitoba) Fort Whyte Imaging (405 Fort Whyte Way, Oak Bluff, Manitoba) Legacy X-Ray Clinic Manitoba X-Ray Clinic (1155 Concordia Avenue, Winnipeg, Manitoba) Munroe X-Ray Clinic Park City X-Ray Clinic Seven Oaks X-Ray Clinic Sport Manitoba
Jacek Strzelczyk	Deer Lodge Centre Grace Hospital
James Koenig	Pan Am Clinic (300 Portage Avenue, Winnipeg, Manitoba) Pan Am Clinic (315 Chancellor Matheson Road, Winnipeg, Manitoba) Pan Am Clinic (75 Poseidon Bay, Winnipeg, Manitoba) Pan Am Clinic WRHA (75 Poseidon Bay, Winnipeg, Manitoba)
Jeffrey Marantz	Health Sciences Centre Manitoba Clinic Mount Carmel Clinic
Jordan Fogel	St. Amant
Lisa McPhee	Manitoba X-Ray Clinic (3263 Portage Avenue, Winnipeg, Manitoba) Manitoba X-Ray Clinic (LL4-400 Tache Avenue, Winnipeg, Manitoba)
M. Dawn Martens	Radiology Consultants of Winnipeg (105 - 2110 Main Street, Winnipeg, Manitoba) Radiology Consultants of Winnipeg (1550 - 1120 Grant Avenue, Winnipeg, Manitoba) Radiology Consultants of Winnipeg (2255 Pembina Highway, Winnipeg, Manitoba)
Marco Essig	Health Sciences Centre WRHA MRI Clinic
Mark Vivian	Victoria Hospital
Martin Bunge	Health Sciences Centre - Children's Hospital Rehabilitation Centre for Children
Mary Jacob	C.W. Wiebe Medical Centre

The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

Murray Wilson	Breast Health Centre BreastCheck (5 - 25 Sherbrook Street, Winnipeg, Manitoba) BreastCheck (620 Frederick Street, Brandon, Manitoba) Canadian Diagnostic Imaging X-Ray @ Atlantic Medical X-Ray on Corydon
Noam Millo	Health Sciences Centre
	Shared Health - Diagnostic Services
Roxann Stoski	Concordia Hospital
Sean Tsuyuki	Misericordia Health Centre
	Riverview Health Centre
	Tache Facilities Limited
Stephen Ying	Health Sciences Centre
Thomas Mammen	Boissevain Health Centre
	Brandon Regional Health Centre
	Carberry Plains Health Centre
	Deloraine Health Centre
	Glenboro Health Centre
	Melita Health Centre
	Minnedosa Health Centre
	Neepawa Health Centre
	Souris Health Centre
	Tiger Hills Health Centre
	Tri-Lake Health Centre
	Virden Health Centre
Wayne Harrison	Brandon Clinic Medical Corporation
	Clement Block Laboratory and X-Ray Services

Dialysis Directors and Facilities

Andrea Mazurat

SOGH Hemodialysis

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

Don Allan	Sherbrook Centre Dialysis Unit
Herman Lam	Central Dialysis Unit
James Zacharias	Manitoba Local Renal Health Centres
Jay Hingwala	Home Hemodialysis, HSC
Joe Bueti	HSC Renal Program
Justin Walters	Hemodialysis
Martina Reslerova	Peritoneal Dialysis
Mauro Verrelli	SBH Renal Program
Sara Dunsmore	Peritoneal Dialysis & Renal Clinic
Sean Armstrong	Home Hemodialysis SOGH Renal Program

Nuclear Medicine Directors and Facilities

Bohdan Bybel	Health Sciences Centre Seven Oaks General Hospital
Daniel Levin	Grace Hospital
John Sutherland	Nuclear Management Company Limited
Salem Yuoness	Brandon Regional Health Centre
William Leslie	St. Boniface General Hospital Victoria Hospital

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

Patient Service Centre Facility Directors and Facilities

Dr. Amin Kabani

Dr. Areej Shibani

Dr. Jenisa Naidoo

Baldur Health Centre Birtle Health Centre Deer Lodge Centre **Emerson Health Centre Erickson Health Centre** Kin Place Health Complex Lac du Bonnet Health Centre MacGregor Health Centre McCreary/Alonsa Health Centre Mount Carmel Clinic Niverville Primary Health Care Centre Pembina Manitou Health Centre **Reston Health Centre Riverview Health Centre Rossburn Health Centre** Selkirk Medical Centre Shoal Lake - Strathclair Health Centre St. Amant St. Claude Health Centre Wawanesa Health Centre Whitemouth District Health Centre Winnipegosis & District Health Centre Harmony Medical Center Dynacare (103 - 381 Stonebridge Crossing, Steinbach, Manitoba)

Dynacare (103 - 381 Stonebridge Crossing, Steinbach, Manitoba) Dynacare (111-1225 St. Mary's Road, Winnipeg, Manitoba) Dynacare (1-2077 Pembina Highway, Winnipeg, Manitoba) Dynacare (130 - 30 Stephen Street, Morden, Manitoba) Dynacare (135 Plaza Drive, Winnipeg, Manitoba) Dynacare (1455 Henderson Highway, Winnipeg, Manitoba) Dynacare (1-515 Sterling Lyon Parkway, Winnipeg, Manitoba) Dynacare (1600 Portage Avenue, Winnipeg, Manitoba) Dynacare (31 First Street South, Beausejour, Manitoba) Dynacare (3-1581 Regent Avenue West, Winnipeg, Manitoba) Dynacare (330 Third Avenue, Stonewall, Manitoba)

Manitoba Health Services Insurance Plan The Public Sector Compensation Disclosure Act

Schedule of Payments for Fiscal Year Ended March 31, 2023

(Continued)

Dr.

Dr.

	Dynacare (3-3655 Portage Avenue, Winnipeg, Manitoba)
	Dynacare (385 Main Street, Winkler, Manitoba)
	Dynacare (425 St. Mary Avenue, Winnipeg, Manitoba)
	Dynacare (55 Marion Street, Winnipeg, Manitoba)
	Dynacare (620 Dennis Street, Brandon, Manitoba)
	Dynacare (622 Main Street, Oakbank, Manitoba)
	Dynacare (633 Lodge Avenue, Winnipeg, Manitoba)
	Dynacare (785 Keewatin Street, Winnipeg, Manitoba)
	Dynacare (790 Sherbrook Street, Winnipeg, Manitoba)
	Dynacare (D-2211 McPhillips Street, Winnipeg, Manitoba)
Kelly MacDonald	BioScision Diagnostics Inc.
. Mohammad Abidullah	Wheat City Medical Clinic

Appendices

Appendix A – Other Reporting Entities

Other Reporting Entities (OREs) are accountable to the Minister. OREs are directly or indirectly controlled by government as prescribed by the Public Sector Accounting Board.

The following Other Reporting Entities (OREs) form part of the department's consolidated results:

The seven Service Delivery Organizations (SDOs):

1. CancerCare Manitoba

CancerCare Manitoba is the provincially mandated cancer agency and provides clinical services to both children and adults. For more information please visit: CancerCare Manitoba (cancercare.mb.ca)

2. Interlake-Eastern Regional Health Authority

Interlake-Eastern Regional Health Authority is responsible for the planning and delivery of health care service to meet the needs of the population they serve. For more information please visit: Interlake-Eastern Regional Health Authority (ierha.ca)

3. Northern Regional Health Authority

Northern Regional Health Authority is responsible for the planning and delivery of health care service to meet the needs of the population they serve. For more information please visit: Northern Regional Health Authority (northernhealthregion.com)

4. Prairie Mountain Health

Prairie Mountain Health is responsible for the planning and delivery of health care service to meet the needs of the population they serve. For more information please visit: Prairie Mountain Health (prairiemountainhealth.ca)

5. Shared Health

Shared Health leads the planning and coordination of the integration of patient-centred clinical and preventive health services across Manitoba. The organization also delivers specific province-wide health services and supports centralized administrative and business functions for Manitoba health organizations. For more information please visit: Shared Health (sharedhealthmb.ca)

6. Southern Health-Santé Sud

Southern Health-Santé Sud is responsible for the planning and delivery of health care service to meet the needs of the population they serve. For more information please visit: Southern Health-Santé Sud (southernhealth.ca)

7. Winnipeg Regional Health Authority

Winnipeg Regional Health Authority (WRHA) is responsible for the planning and delivery of health care service to meet the needs of the population they serve. For more information please visit: Winnipeg Regional Health Authority (wrha.mb.ca)

Other agencies funded by the SDOs:

St. Amant

St. Amant is a comprehensive resource for Manitobans with developmental disabilities and autism. For more information please visit: St. Amant (stamant.ca)

Personal Care Homes

Personal Care Homes improve long-term care residents' quality of life by providing them the care and services that encourage them to remain as personally independent as possible.

3885136 Manitoba Association Inc. (operating as Calvary Place Personal Care Home) – For more information please visit: (calvaryplacepch.com)

Actionmarguerite (Saint-Boniface) (Saint-Vital) and (St. Joseph) – For more information please visit: (actionmarguerite.ca)

Bethania Mennonite Personal Care Home – For more information please visit: (bethania.ca) Donwood Manor Personal Care Home – For more information please visit: (donwoodmanor.org)

Eden Mental Health Centre – For more information please visit: (edenhealthcare.ca)

Fred Douglas Personal Care Home – For more information please visit: (freddouglassociety.com)

Holy Family Home Inc. and Sisters Servants of Mary Immaculate Plant Fund – For more information please visit: (holyfamilyhome.mb.ca)

Lions Personal Care Home – For more information please visit: (lhc.ca) Luther Home Corporation Personal Care Home – For more information please visit: (wrha.mb.ca)

Meadowood Manor Personal Care Home – For more information please visit: (meadowoodmanor.com)

Menno Home for the Aged Inc. (Personal Care Home 1122 Division) – For more information please visit: (southernhealth.ca)

Niverville Heritage Personal Care Home Inc. – For more information please visit: (heritagecentre.ca)

Odd Fellows and Rebekahs (Personal Care Homes Inc. Golden Links Lodge) – For more information please visit: (goldenlinks.mb.ca)

Park Manor Care Inc. – For more information please visit: (parkmanor.ca)

Pembina Place Mennonite Personal Care Home Inc. – For more information please visit: (bethania.ca)

Prairie View Lodge – For more information please visit: (southernhealth.ca)

Rest Haven Nursing Home – For more information please visit: (southernhealth.ca)

Rock Lake Health District – For more information please visit: (southernhealth.ca)

Salem Home Inc. – For more information please visit: (southernhealth.ca)

Southeast Personal Care Home – For more information please visit: (southeastpch.ca)

Tabor Home – For more information please visit: (southernhealth.ca)

The Convalescent Home of Winnipeg – For more information please visit: (tchw.com)

The Salvation Army Golden West Centennial Lodge – For more information please visit: (goldenwestlodge.ca)

The Saul and Claribel Simkin Centre Personal Care Home – For more information please visit: (simkincentre.ca)

Villa Youville – For more information please visit: (southernhealth.ca)

West Park Manor Personal Care Home – For more information please visit: (wrha.mb.ca)

Community Health Agencies

Community Health Agencies serve the needs of the most vulnerable residents and work towards helping our community find its collective footing.

Clinique Youville Clinic – For more information please visit: (youville.ca)

Hope Centre Health Care Incorporated – For more information please visit: (hopecentrehealthcare.com)

Klinic Incorporated (Operating as Klinic Community Health Centre) – For more information please visit: (klinic.mb.ca)

MFL Occupational Health and Safety Centre – For more information please visit: (ohcmb.ca)

Main Street Project – For more information please visit: (mainstreetproject.ca)

Mount Carmel Clinic – For more information please visit: Aboriginal Health & Wellness Centre (mountcarmel.ca)

Nine Circles Community Health Centre – For more information please visit: (ninecircles.ca)

NorWest Co-op Community Health Centre – For more information please visit: (norwestcoop.ca)

Sexuality Education Resource Centre Manitoba – For more information please visit: (serc.mb.ca)

Women's Health Clinic – For more information please visit: (womenshealthclinic.org)

Appendix B – Statutory Responsibilities

Any statutes that are not assigned to a particular Minister are the responsibility of the Minster of Justice, as are any amendments to Acts. The department of Health operates under the authority of the following acts of the Continuing Consolidation of the Statutes of Manitoba:

The Anatomy Act (A80) The CancerCare Manitoba Act (C20) – repealed on July 1, 2022 The Chiropractic Act (C100) The Defibrillator Public Access Act (D22) The Dental Association Act (D30) The Dental Hygienists Act (D34) The Denturists Act (D35) The Elderly and Infirm Persons' Housing Act (E20) (except with respect to elderly persons' housing units as defined in the act) The Emergency Medical Response and Stretcher Transportation Act (E83) The Health Administration Act (H20) The District Health and Social Services Act (H26) The Health System Governance and Accountability Act (H26.5) The Health Care Directives Act (H27) The Health Sector Bargaining Unit Review Act (H29) The Health Services Insurance Act (H35) The Hearing Aid Act (H38) The Hospitals Act (H120) The Human Tissue Gift Act (H180) The Licensed Practical Nurses Act (L125) The Manitoba Medical Association Dues Act (M95) The Medical Laboratory Technologists Act (M100) The Midwifery Act (M125) The Naturopathic Act (N80) The Occupational Therapists Act (05) The Occupiers' Liability Act (section 9.1) (08) The Opticians Act (O60) The Optometry Act (O70) The Personal Health Information Act (P33.5) The Pharmaceutical Act (P60) The Physiotherapists Act (P65) The Podiatrists Act (P93) The Prescription Drugs Cost Assistance Act (P115) The Private Hospitals Act (P130)

The Protection for Persons in Care Act (P144) The Psychologists Registration Act (P190) The Public Health Act (P210) The Radiation Protection Act (unproclaimed) (R5) The Registered Dietitians Act (R39) The Registered Psychiatric Nurses Act (R45) - repealed on June 1, 2022 The Registered Respiratory Therapists Act (R115) The Regulated Health Professions Act (R117) The Sanatorium Board of Manitoba Act (S12) – repealed on June 1, 2022 The Reporting of Supports for Child Survivors of Sexual Assault Act (Trained Health Professionals and Evidence Collection Kits) (unproclaimed) (S234) The Terry Fox Legacy Act (T45) The Testing of Bodily Fluids and Disclosure Act (T55) The Tobacco Damages and Health Care Costs Recovery Act (T70) The Universal Newborn Hearing Screening Act (U38)

In addition, policies specific to departmental programs are documented in the General Manual of Administration and various Manitoba government catalogues and publications.

Glossary

Alignment – The process of enabling all employees to see how their day-to-day actions are consistent with the values of the organization and how living those values is contributing to overall success. Creating alignment ensures employees are working toward the common goal, or vision.

Appropriation – amount voted by the Legislative Assembly approving the maximum amount that may be expended on a specific program or major activity during a fiscal year.

Main Appropriation – the total amount of each resolution passed by the Legislative Assembly as reported in the printed estimates of expenditure.

Sub Appropriation – the total amounts applicable to the various breakdowns of the main appropriations in the printed estimates of expenditure.

Authority – In the financial tables throughout this report, represents the authorized votes approved by the Legislative Assembly in the Estimates of Expenditure (budget) as well as any changes (if applicable) as a result of government reorganizations, allocations from Enabling Appropriations, or and virement transfers between Main appropriations within the department. For a full reconciliation of the Printed Estimates of Expenditure to the Authority please see the Expense Summary by Appropriation report in the Report on the Estimates of Expenditure and Supplementary Information.

Balanced Scorecard – is an established integrated strategic planning and performance measurement framework. Implementation of Balanced Scorecards in the Manitoba government is a major initiative that is intended to strengthen the alignment of department level work with government priorities, improve accountability and transparency, and to deliver better outcomes for Manitobans.

Baseline - The starting data point for the performance measure.

Borrowings – Borrowings are securities issued in the name of the province to capital markets investors. Securities include debentures, treasury bills, promissory notes, medium-term notes and Manitoba Savings Bonds.

Full-Time Equivalent (FTE) – A measurement for number of positions. Every full-time regular position represents one full-time equivalent position. Other categories (ex:. term, departmental, seasonal, contract) are measured in proportional equivalents, ex: a program with a vote of 1.50 term FTE could hire staff in any combination that results in a total of one-and-one-half years (or 78 weeks) of employment (ex: 6 staff for 3 months (13 weeks) each; 2 staff for 9 months (39 weeks) each; 1 full-time and 1 half-time staff for 1 year; 3 half-time staff for 1 year; etc.).

Government Reporting Entity (GRE) – Includes core government and Crown organizations, government business entities and public sector organizations such as regional health authorities, school divisions, universities and colleges.

Grants – Public money provided to an individual, organization or another government to assist in attaining their objectives and for which the government does not receive a good or service.

Gross Domestic Product (GDP) – Represents the total market value of all final goods and services produced in the Manitoba economy.

Guarantees – The province, in the normal course of business, may provide a guarantee to honour the repayment of debt or loans of an organization, primarily GBEs. Such a guarantee is provided on the Manitoba Hydro Savings Bonds.

Interfund Activity – Public Sector Accounting Standards adjustments including Health and Education Levy and Employee Pension and Other Contributions, attributed to the entire department.

Key Initiatives – These are the specific programs, activities, projects, or actions an organization will undertake to meet performance targets. Initiatives are often projects or events that aim to improve a process or an outcome in one of the four perspectives.

Measure – A measure is a standard used to evaluate and communicate performance against expected results. Measures are normally quantitative in nature, capturing numbers, dollars, percentages, and so on. Reporting and monitoring measures helps an organization gauge progress toward effective implementation of strategy.

Mission Statement – A mission statement defines the core purpose of the organization — why it exists, and reflects employees' motivations for engaging in the organization's work. Effective missions are inspiring, long-term in nature, and easily understood and communicated.

Objective – The objective is a concise statement describing the specific things an organization must do well to execute its strategy. Objectives often begin with an action verb such as increase, reduce, improve, or achieve. Strategy Maps are comprised entirely of objectives. "Strengthen respect in our workplace" is an example of an objective.

Other Reporting Entity (ORE) – Reporting organizations in the GRE such as Crown corporations, government agencies, government business entities and public sector organizations such as regional health authorities, school divisions, universities and colleges that are directly or indirectly controlled by the government, as prescribed by Public Sector Accounting Board – excludes core government.

Perspective – In balanced scorecard language, perspective refers to a category of performance objectives. The standard four perspectives are: Quality of Life, Working Smarter, Public Service and Value for Money.

Special Operating Agencies (SOA) – Service operations within departments granted more direct responsibility for results and increased management flexibility needed to reach new levels of performance. SOAs embrace market disciplines of the private sector while adhering to the public policy imperatives of government. Annual business plans define financial goals and performance targets. SOAs have the ability to raise capital outside of the Consolidated Fund.

Strategy – This represents the broad priorities adopted by an organization in recognition of its operating environment and in pursuit of its mission. Situated at the centre of the balanced scorecard system, all performance objectives and measures should align with the organization's strategy.

Strategy Map – The strategy map is a one-page visual representation of what must be done well to execute strategy. Strategy maps reflect performance objectives spanning the four perspectives, combining to tell the organization's strategic story.

Target – The target presents the desired result of a performance measure. They provide organizations with feedback about performance.

Values – Values represent the deeply-held beliefs of the organization, which are demonstrated through the day-to-day behaviours of all employees. An organization's values make an open proclamation about how it expects everyone to behave. Values should endure over the long-term and provide a constant source of strength for an organization.

Virement – Refers to a transfer of authority between operating expenditure appropriations within a department.

Vision – The vision serves as the guiding statement for the work being done. A powerful vision provides everyone in the organization with a shared image of the desired future. It should answer why the work being done is important and what success looks like.