October 20, 2017

Dear [Name]

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act [Our File #: HCS/087/2017]

On September 25, 2017, the Department of Health and Community Services (the Department) received your request for access to the following records:

“Please provide all correspondence regarding the development of a Long Term Care facility and any licences or approvals given in the Gander area. Included would be letters/applications from proponents and correspondence with the town council. This request would cover January 1, 2017 to present.”

I am pleased to inform you that a decision has been made by John G. Abbott, Deputy Minister for the Department, to provide access to some of the requested information.

Access to the remaining information contained within the records, has been refused in accordance with the following exceptions to disclosure, as specified in the Access to Information and Protection of Privacy Act (the Act):

Section 27(2)(b) – Cabinet Confidence
Section 40(1) – Disclosure Harmful to Personal Privacy

The following pages have been removed:

Pages 7 - 14: Section 27(2)(b)
Pages 11 – 35: Section 27(2)(b)

As required by 8(2) of the Act, we have severed information that is unable to be disclosed and have provided you with as much information as possible.

In accordance with your request for a copy of the records, the appropriate copies have been enclosed.
Please be advised that you may appeal this decision and ask the Information and Privacy Commissioner to review the decision to provide partial access to the requested information, as set out in section 42 of the Act (a copy of this section of the Act has been enclosed for your reference). A request to the Commissioner must be made in writing within 15 business days of the date of this letter or within a longer period that may be allowed by the Commissioner. Your appeal should identify your concerns with the request and why you are submitting the appeal.

The appeal may be addressed to the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner
2 Canada Drive
P. O. Box 13004, Stn. A
St. John’s, NL. A1B 3V8
Telephone: (709) 729-6309
Toll-Free: 1-877-729-6309
Facsimile: (709) 729-6500

You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive the decision of the public body, pursuant to section 52 of the Act (a copy of this section of the Act has been enclosed for your reference).

Please be advised that responsive records will be published following a 72-hour period after the response is sent electronically to you or five business days in the case where records are mailed to you. It is the goal to have the responsive records posted to the Completed Access to Information Requests website within one business day following the applicable period of time. Please note that requests for personal information will not be posted online.

If you have any further questions, please feel free to contact me by telephone at 709-729-7010 or by e-mail at MichaelCook@gov.nl.ca.

Sincerely,

Michael Cook
ATIPP Coordinator
Cabinet confidences

27. (1) In this section, "cabinet record" means

(a) advice, recommendations or policy considerations submitted or prepared for submission to the Cabinet;

(b) draft legislation or regulations submitted or prepared for submission to the Cabinet;

(c) a memorandum, the purpose of which is to present proposals or recommendations to the Cabinet;

(d) a discussion paper, policy analysis, proposal, advice or briefing material prepared for Cabinet, excluding the sections of these records that are factual or background material;

(e) an agenda, minute or other record of Cabinet recording deliberations or decisions of the Cabinet;

(f) a record used for or which reflects communications or discussions among ministers on matters relating to the making of government decisions or the formulation of government policy;

(g) a record created for or by a minister for the purpose of briefing that minister on a matter for the Cabinet;

(h) a record created during the process of developing or preparing a submission for the Cabinet; and

(i) that portion of a record which contains information about the contents of a record within a class of information referred to in paragraphs (a) to (h).

(2) The head of a public body shall refuse to disclose to an applicant

(a) a cabinet record; or

(b) information in a record other than a cabinet record that would reveal the substance of deliberations of Cabinet.

(3) Notwithstanding subsection (2), the Clerk of the Executive Council may disclose a cabinet record or information that would reveal the substance of deliberations of Cabinet where the Clerk is satisfied that the public interest in the disclosure of the information outweighs the reason for the exception.

(4) Subsections (1) and (2) do not apply to
(a) information in a record that has been in existence for 20 years or more; or
(b) information in a record of a decision made by the Cabinet on an appeal under an Act.

Disclosure harmful to personal privacy

40. (1) The head of a public body shall refuse to disclose personal information to an applicant where the disclosure would be an unreasonable invasion of a third party's personal privacy.

(2) A disclosure of personal information is not an unreasonable invasion of a third party's personal privacy where

(a) the applicant is the individual to whom the information relates;

(b) the third party to whom the information relates has, in writing, consented to or requested the disclosure;

(c) there are compelling circumstances affecting a person’s health or safety and notice of disclosure is given in the form appropriate in the circumstances to the third party to whom the information relates;

(d) an Act or regulation of the province or of Canada authorizes the disclosure;

(e) the disclosure is for a research or statistical purpose and is in accordance with section 70;

(f) the information is about a third party's position, functions or remuneration as an officer, employee or member of a public body or as a member of a minister's staff;

(g) the disclosure reveals financial and other details of a contract to supply goods or services to a public body;

(h) the disclosure reveals the opinions or views of a third party given in the course of performing services for a public body, except where they are given in respect of another individual;

(i) public access to the information is provided under the Financial Administration Act;

(j) the information is about expenses incurred by a third party while travelling at the expense of a public body;

(k) the disclosure reveals details of a licence, permit or a similar discretionary benefit granted to a third party by a public body, not including personal information supplied in support of the application for the benefit;
(1) the disclosure reveals details of a discretionary benefit of a financial nature granted to a third party by a public body, not including

(i) personal information that is supplied in support of the application for the benefit, or

(ii) personal information that relates to eligibility for income and employment support under the Income and Employment Support Act or to the determination of income or employment support levels; or

(m) the disclosure is not contrary to the public interest as described in subsection (3) and reveals only the following personal information about a third party:

(i) attendance at or participation in a public event or activity related to a public body, including a graduation ceremony, sporting event, cultural program or club, or field trip, or

(ii) receipt of an honour or award granted by or through a public body.

(3) The disclosure of personal information under paragraph (2)(m) is an unreasonable invasion of personal privacy where the third party whom the information is about has requested that the information not be disclosed.

(4) A disclosure of personal information is presumed to be an unreasonable invasion of a third party's personal privacy where

(a) the personal information relates to a medical, psychiatric or psychological history, diagnosis, condition, treatment or evaluation;

(b) the personal information is an identifiable part of a law enforcement record, except to the extent that the disclosure is necessary to dispose of the law enforcement matter or to continue an investigation;

(c) the personal information relates to employment or educational history;

(d) the personal information was collected on a tax return or gathered for the purpose of collecting a tax;

(e) the personal information consists of an individual's bank account information or credit card information;

(f) the personal information consists of personal recommendations or evaluations, character references or personnel evaluations;

(g) the personal information consists of the third party's name where
(i) it appears with other personal information about the third party, or

(ii) the disclosure of the name itself would reveal personal information about the third party; or

(h) the personal information indicates the third party's racial or ethnic origin or religious or political beliefs or associations.

(5) In determining under subsections (1) and (4) whether a disclosure of personal information constitutes an unreasonable invasion of a third party's personal privacy, the head of a public body shall consider all the relevant circumstances, including whether

(a) the disclosure is desirable for the purpose of subjecting the activities of the province or a public body to public scrutiny;

(b) the disclosure is likely to promote public health and safety or the protection of the environment;

(c) the personal information is relevant to a fair determination of the applicant's rights;

(d) the disclosure will assist in researching or validating the claims, disputes or grievances of aboriginal people;

(e) the third party will be exposed unfairly to financial or other harm;

(f) the personal information has been supplied in confidence;

(g) the personal information is likely to be inaccurate or unreliable;

(h) the disclosure may unfairly damage the reputation of a person referred to in the record requested by the applicant;

(i) the personal information was originally provided to the applicant; and

(j) the information is about a deceased person and, if so, whether the length of time the person has been deceased indicates the disclosure is not an unreasonable invasion of the deceased person’s personal privacy.
Access or correction complaint

42.(1) A person who makes a request under this Act for access to a record or for correction of personal information may file a complaint with the commissioner respecting a decision, act or failure to act of the head of the public body that relates to the request.

(2) A complaint under subsection (1) shall be filed in writing not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16(2).

(3) A third party informed under section 19 of a decision of the head of a public body to grant access to a record or part of a record in response to a request may file a complaint with the commissioner respecting that decision.

(4) A complaint under subsection (3) shall be filed in writing not later than 15 business days after the third party is informed of the decision of the head of the public body.

(5) The commissioner may allow a longer time period for the filing of a complaint under this section.

(6) A person or third party who has appealed directly to the Trial Division under subsection 52(1) or 53(1) shall not file a complaint with the commissioner.

(7) The commissioner shall refuse to investigate a complaint where an appeal has been commenced in the Trial Division.

(8) A complaint shall not be filed under this section with respect to

(a) a request that is disregarded under section 21;

(b) a decision respecting an extension of time under section 23;

(c) a variation of a procedure under section 24; or

(d) an estimate of costs or a decision not to waive a cost under section 26.

(9) The commissioner shall provide a copy of the complaint to the head of the public body concerned.
**Direct appeal to Trial Division by an applicant**

52. (1) Where an applicant has made a request to a public body for access to a record or correction of personal information and has not filed a complaint with the commissioner under section 42, the applicant may appeal the decision, act or failure to act of the head of the public body that relates to the request directly to the Trial Division.

(2) An appeal shall be commenced under subsection (1) not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16(2).

(3) Where an applicant has filed a complaint with the commissioner under section 42 and the commissioner has refused to investigate the complaint, the applicant may commence an appeal in the Trial Division of the decision, act or failure to act of the head of the public body that relates to the request for access to a record or for correction of personal information.

(4) An appeal shall be commenced under subsection (3) not later than 15 business days after the applicant is notified of the commissioner’s refusal under subsection 45(2).
Potential copyright material

If you wish to obtain a copy please contact the ATIPP Office at (709) 729-7072 or atippoffice@gov.nl.ca.
We could add these bullets at the end,

- In addition, across Canada, all jurisdictions are putting in place new approaches to enhance access to health care and support services at home and reduce reliance on facility based services that are best delivered in the community.
- In alignment with the Canadian Health Accord Multilateral Framework this province is developing a Home First Initiative which will see a fundamental shift away from facility based care to community based care. This will broaden government’s response and create options for individuals who now are limited to facility based care when their care needs increase.

This look fine. Annette, we need to add a bullet on community? And need Cory’s input. Cory?

For review ASAP –
Brief key messages for Premier on LTC planning in NL.

Health and Community Services
Long Term Care in Newfoundland and Labrador
July 7, 2017

Summary: The Official Opposition has challenged the government on its plan for increased long term care beds in the province. Questions may arise: What is the plan for increasing long term care beds?
Key messages:

- Providing residents with high quality care in modern facilities is a priority of Government and is identified in *The Way Forward*.

- Our government is proceeding with a new long term care home in Corner Brook. Construction is scheduled to begin this fall.

- In addition to the new long term care home for Corner Brook, Budget 2017 includes a $3.4 million commitment to increase long-term care capacity in central Newfoundland. An announcement for central Newfoundland is on the horizon.

- Increasing capacity in long term care will ease pressure on the health care system. It will also help to ensure appropriate use of acute care beds.

- We are systematically working to increase long term care beds throughout the province. Population projections are informing long term care planning and determining the number of long term care beds required in various regions of the province.
I am still reviewing but sending to you now. Are you comfortable with bullet 2?

From: Timmins, Emily
Sent: Friday, July 7, 2017 9:08 AM
To: Greene, Paul M. <paulgreene@gov.nl.ca>; Tubrett, Denise <dtubrett@gov.nl.ca>; Bridgeman, Annette <AnnetteBridgeman@gov.nl.ca>; Waddleton, Deena <DeenaWaddleton@gov.nl.ca>
Cc: Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>
Subject: URGENT - for review for Premier - HCS - LTC - July 11.docx
Importance: High

For review ASAP –
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Hi Emily,

I’m with the Atlantic Provinces Economic Council. We’re currently working on our annual Major Projects Survey where we track capital projects over $25 million.

We have a number of entries from our 2016 report that I was hoping to get an update for 2017? Information that we’d like to have for 2017 includes; 1.) Spending in 2017, 2.) FTE generated by projects 3.) Any barriers preventing the project from moving forward.

Could you also confirm that the 2017 Budget is $88.2 million for health care infrastructure?

<table>
<thead>
<tr>
<th>Project</th>
<th>Budget</th>
<th>Start</th>
<th>Finish</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Facilities</td>
<td>$43 million</td>
<td>2017</td>
<td>2017</td>
<td>Provincial expenditures for renovations and upgrades to existing health facilities will include $27 million for equipment purchases.</td>
</tr>
<tr>
<td>Mental Health Facility (St. John’s)</td>
<td>$325 million</td>
<td></td>
<td></td>
<td>The province’s plan to replace the aging Waterford Hospital was pushed back in the latest budget. The site for the facility was selected in 2014 and work was set to begin in 2015. A new start date has not been announced.</td>
</tr>
<tr>
<td>Long-Term Care Facilities</td>
<td>$100 million</td>
<td></td>
<td></td>
<td>The Government of Newfoundland and Labrador proposed a total of 360 new long-term care beds on the island portion of the province; 120 new beds in Corner Brook, 120 between Grand Falls-Windsor and Gander and 120 in Northeast Avalon. The RFP process for these projects was cancelled due to budget constraints. These projects will be re-evaluated at a later date. The new facilities were to be constructed, owned and operated privately and integrated into the existing long-term care system with operators being required to meet provincial long-term care standards.</td>
</tr>
<tr>
<td>Health Construction - Various Projects</td>
<td>$64 million</td>
<td>2011</td>
<td>2020</td>
<td>Several smaller projects are planned around the province to improve health care delivery including; $21.6 million for a new electrical substation at the Health Science Centre in St. John’s; $18.3 million for the Green Bay Health Centre in Springdale; a $15.6 for the redevelopment of the endoscopy/cystoscopy suites and laboratory suites at the Newfoundland Regional Health Centre and $9 million for the upgrading the Health Sciences Centre.</td>
</tr>
<tr>
<td>Green Bay Health Center</td>
<td>$18.3 million</td>
<td>2011</td>
<td>2021</td>
<td>Construction of a new health centre to replace the existing Green Bay Health Centre.</td>
</tr>
<tr>
<td>Electrical Substation</td>
<td>$16.8 million</td>
<td>2013</td>
<td>2019</td>
<td>Construction of a new electrical substation at the Health Sciences Centre</td>
</tr>
<tr>
<td>Hospital Redevelopment</td>
<td>$15.4 million</td>
<td>2014</td>
<td>2020</td>
<td>Redevelopment of the endoscopy/cystoscopy suites as well as the laboratory spaces at the Central Newfoundland Regional Health Centre.</td>
</tr>
<tr>
<td>Project</td>
<td>Cost</td>
<td>Year 1</td>
<td>Year 2</td>
<td>Description</td>
</tr>
<tr>
<td>-------------------------------------</td>
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<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Integrated Operating Room</td>
<td>$5 million</td>
<td>2014</td>
<td>2021</td>
<td>Upgrading of the operating room suites at the Health Sciences Centre and St. Clare’s Mercy Hospital.</td>
</tr>
<tr>
<td>Medical Device Reprocessing Redevelopment</td>
<td>$5 million</td>
<td>2014</td>
<td>2017</td>
<td>Redevelopment of the medical device reprocessing area at the Health Sciences Centre.</td>
</tr>
</tbody>
</table>

Thanks,
Hi,

The numbers are good until the last two sentences. I’m not familiar with the Community Healthy Living Fund for $1.79 million or the $1 million for active living programs for youth. Those are not in the HCS budget.

Mike

From: Abbott, John  
Sent: Tuesday, April 04, 2017 1:46 PM  
To: Timmins, Emily <EmilyTimmins@gov.nl.ca>; Tizzard, Mike <miketizzard@gov.nl.ca>; Jewer, Michelle N. <MichelleJewer@gov.nl.ca>  
Subject: RE: URGENT - HCS - Fact Check  

Numbers look fine to me but will wait to have Mike T. confirm.  
John A

From: Timmins, Emily  
Sent: Tuesday, April 04, 2017 1:41 PM  
To: Tizzard, Mike; Jewer, Michelle N.; Abbott, John  
Subject: URGENT - HCS - Fact Check  
Importance: High

Can you please confirm numbers asap?

Sent from my BlackBerry 10 smartphone on the Bell network.

From: Barfoot, Scott <ScottBarfoot@gov.nl.ca>  
Sent: Tuesday, April 4, 2017 1:29 PM  
To: Williams, Tina (HCS)  
Cc: Joyce, Luke; Alcock, Ellen; Mundon, Tansy  
Subject: HCS - Fact Check

Hello Tina,

As I flagged earlier, enclosed is the language that is included in the Budget speech that relates to your department.

This is very time sensitive and we need your feedback by 3:30 p.m. All we need is to ensure that everything is accurate – I stress that we are not making changes to the language.

Please call with any questions or discuss.

Thanks,  
Scott
I would like to take a moment to pause and express our sincere thanks for the outstanding work of the All-Party Committee on Mental Health and Addictions. They took their work seriously and provided meaningful recommendations for government; and government takes its duty seriously as well. Accordingly, we are committing $5 million to advance the committee’s recommendations, supported by $1.4 million of federal funding as part of the 10 year, $73 million agreement made under the Canada Health Accord for mental health.

Through Budget 2017, our government will support family doctors, nurse practitioners, nurses, social workers, paramedics to expand primary health care teams through an investment of $2.5 million.

We have made a multi-year commitment to infrastructure investments in health. This commitment includes $43 million for repairs and renovations at health facilities and the replacement and upgrading of medical equipment. It includes $13.2 million to advance the replacement of Western Memorial Hospital. It includes $7.5 million to advance replacement of the Waterford Hospital, and $4.6 million to increase long-term care capacity in Corner Brook and central Newfoundland.

We also know that the most effective health programs are ones that support healthy living and wellness. That’s why we are committing $1.79 million to the Community Healthy Living Fund. This fund will provide for sports and recreation facilities and infrastructure.

We are also going to encourage youth to use those facilities and infrastructure. We are committing $1 million toward active living programs that are targeted at youth.

Scott Barfoot
Director of Strategic Communications (Planning)
Communications Branch – Executive Council
709-729-4864