

**Health PEI Board of Directors  
AGENDA  
Hogan A Room – Mill River Resort  
Thursday, June 3, 2021  
2:45-4:30pm**

4.0 MEETING AGENDA				In	Di	De
4.1	2:45	Review of Agenda	Chair			X
5.0 CONSENT AGENDA ITEMS						
5.1	2:50	Health PEI Board Minutes ○ April 1, 2021	Chair			X
5.2		Board Correspondence <i>None at this time</i>				
6.0 BUSINESS ITEMS						
6.1	2:55	CEO Report to Islanders (10 minutes)	Dr. M. Gardam, Interim CEO	X		
6.2	3:05	Board Chair Report (10 minutes)	Chair	X		
7.0 PRESENTATIONS						
7.1	3:15	Governance & Health Outcomes	Mr. Martin Ruben	X		
7.2	3:45	Midwifery Service	Ms. Mary Acorn, Policy Analyst, Department of Health & Wellness	X		
8.0 RESOLUTIONS/MOTIONS						
8.1	4:00	Resolutions/motions from In-camera session	Chair			X
9.0 STANDING ITEMS						
9.1	4:05	Ministerial Directives	Dr. M. Gardam, Interim CEO	X		
10.0 QUESTION PERIOD						
10.1	4:15	• Questions (10 minutes)	Chair		X	
11.0 ADJOURNMENT AND NEXT MEETING						
• Regular Board Meeting (August 5, 2021 – Location TBD)						

# Health PEI

June 3, 2021

## Board of Directors – Public Minutes

Hogan A Boardroom – Mill River Resort, Bloomfield

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**Chair:** Derek Key

**Members:** Helen Flynn, Colleen Parker, Kathleen MacMillan, Andrea Slys and Dr. Richard Wedge

**HPEI Staff:** Dr. Michael Gardam, Acting CEO  
Belinda White, CAO  
Daphne MacDougall, Executive Assistant

**Guests:** Mr. Stu Neatby, Reporter, Journal-Pioneer  
Mr. Martin Ruben, Member of Public  
Ms. Kelley Rayner, Director of Primary Care & Chronic Disease, Health PEI

## 4.0 CONVENING THE MEETING

### 4.1 Review of Agenda Items

The Chair reviewed the agenda for the public session. The June 3, 2021 agenda was approved as circulated.

## 5.0 CONSENT AGENDA

### 5.1 Minutes of April 1, 2021

Minutes accepted as submitted.

***MOTION: It was moved by Mr. Randy Goodman and seconded by Ms. Helen Flynn that the Board minutes of April 1, 2021 be approved as submitted.***

***MOTION CARRIED***

### 5.2 Correspondence

No correspondence received.

## 6.0 BUSINESS ITEMS

### 6.1 CEO Report to Islanders

Dr. Michael Gardam, Acting Health PEI CEO, provided a verbal CEO report to Islanders. Some highlights include:

- Health PEI has done extremely well in our response to the pandemic; especially the Provincial Lab Services department;
- The organization structure is working well in terms of the new leadership structure as positions continue to be filled through the hiring process;

- There is considerable interest in working with various partners, including the Recruitment & Retention Secretariat, to fill vacancies across the system to continue to build Health PEI;
- In a period of real transition at Health PEI with informing the public and staff of what is going on within the organization.

## **6.2 Board Chair Report**

Mr. Derek Key, Health PEI Board Chair, provided a verbal report to the public.

This is the first public meeting that has taken place since the changes to the Health Act. A committee chaired by Dr. Richard Wedge is being structured to conduct the search for a permanent CEO for Health PEI. Mr. Key commended Dr. Gardam and the Executive Leadership Team for the hiring of an Executive Director of Human Resources and the work they have been doing to address the significant HR challenges across the system.

Mr. Key updated Mr. Randy Goodman has taken the lead on the development and implementation of an HR Task Force. As we work through the Strategic Plan, the goal is to be successful at the end of the three-year plan rather than still in the same predicament.

An acknowledgement of the Board to be focused, responsible and accountable in order to have the same expectations of system and leadership at Health PEI. Our Premier has indicated the expectation of Health PEI to address the PCH surgery issues.

The Annual General Meeting will be held in October; all financial reports will be available at this meeting for the public. The goal is to have the strategic plan in place by this time as well.

## **6.3 Health of Governance in Health PEI**

Mr. Key welcomed Mr. Martin Ruben to the Board meeting to present on governance and health outcomes on PEI. Mr. Ruben has a background as a public auditor with the office of the Auditor General of Canada in Winnipeg, New York and Ottawa for 30 years conducting financial and performance audits. Mr. Ruben has been a resident of Victoria, PEI since 2017.

Mr. Ruben outlined a number of items regarding the role and expectations of the Health PEI Board as defined on the Government of PEI website. Also included in Mr. Ruben's presentation were a number of items that are missing from the public website and gaps within the system structure from his perspective.

Mr. Ruben added speaking from his experience that healthcare on PEI is a challenge as it is too small to have its own healthcare system at the level currently in place. He suggested Health PEI define what can be achieved and make the service regional vs. provincial; rather than procuring services from other provinces that Health PEI manage healthcare with other provinces. He added this is the only way he feels Health PEI will

be able to meet the performance indicators of its Strategic Plan. Mr. Ruben asked the Board to consider the following:

- Recognize the seriousness of the issues raised in his presentation and the impact of these issues on the health of Islanders;
- Develop more comprehensive and realistic Strategic and Operational plans;
- Develop stronger systems, practices and culture around management for results;
- Request the Office of the Auditor General to carry out a wide scope performance audit;
- Implement an internal audit function that would provide advice and assurance on the organization's corporate governance, policies and operations;
- Implement a health care ombudsperson function;
- Advocate with the government to address weaknesses in governance that preclude the delivery of health care services and provide good health care outcomes;
- Make the operations of Health PEI more transparent.

Mr. Key thanked Mr. Ruben for his presentation. The suggestions within his presentation that are within the scope of the Health PEI Board will be kept in mind for consideration.

#### **6.4 Midwifery Services**

Ms. Kelley Rayner, Director of Primary Care and Chronic Disease with Health PEI, joined the meeting to present on Midwifery Services to the Board.

A Midwifery Services Steering Committee is in place within Health PEI with both Ms. Rayner and Dr. Krista Cassell as co-chairs of this committee. Midwifery is regulated and publicly funded in Canada. Currently on PEI, family physicians and nurse practitioners provide prenatal care for low risk pregnancies for the first two trimesters and then patients are sent to an obstetrician for their final trimester. There is one family physician on PEI who continues to manage their patients through the third trimester and delivery.

Government of PEI has endorsed development and implementation of midwifery services. Midwives have applied for regulation under the Registered Health Professionals Act. Ms. Rayner updated the Board members on the current engagement activities including online focus groups and an online survey, which will be shared with the Board members to participate in.

Early engagement with key stakeholders example obstetricians, is very important in the successful implementation of the program. Once the program is up and running, it will provide much needed support to alleviate the pressure on our obstetricians. The plan is to launch midwifery by the end of 2022.

Mr. Key thanked Ms. Rayner for providing the informative presentation to the Board.

## 7.0 RESOLUTIONS/MOTIONS

### 7.1 Resolutions and Motions from in-camera session:

- **MOTION:** It was moved by Ms. Andrea Slys and seconded by Mr. Randy Goodman that the minutes of April 1, 2021 and May 7, 2021 be approved as circulated with the amendments as noted. **MOTION CARRIED**
- **MOTION:** It was moved by Mr. Randy Goodman and seconded by Ms. Colleen Parker to recommend the increase the number of general surgeons at PCH from three to four as recommended by the Premier. **MOTION CARRIED**
- **MOTION :** It was moved by Ms. Colleen Parker and seconded by Dr. Richard Wedge to approve the OE 2.1 Quality & Safety Risk Report (Q4) and OE 2.11 External Relationships as compliant. **MOTION CARRIED**
- **MOTION:** It was moved by Ms. Helen Flynn and seconded by Dr. Richard Wedge to approve the Medical Directives as submitted with the proviso the Health PEI Board members do not have the technical expertise to critique them. **MOTION CARRIED**
- **MOTION:** It was moved by Dr. Richard Wedge and seconded by Mr. Randy Goodman that all forthcoming Medical Directives be delegated for authorization by the Chief Medical Officer until the updated Medical Staff Bylaws are approved. **MOTION CARRIED**
- **MOTION:** It was moved by Mr. Randy Goodman and seconded by Ms. Kathleen MacMillan to have the terms of reference for the HR Task Force as submitted. **MOTION CARRIED**
- **MOTION:** It was moved by Mr. Randy Goodman and seconded by Mr. Peter MacDonald that the Board approve the Financial Statements in principal subject to a conversation between the Chair and vice chair with the Auditor General's office when the final statements are prepared. **MOTION CARRIED**
- **MOTION:** It was moved by Mr. Randy Goodman and seconded by Ms. Helen Flynn to approve the terms of reference for the CEO Search Committee as circulated. **MOTION CARRIED**

#### **MOTION:**

***It was moved by Ms. Helen Flynn and seconded by Mr. Randy Goodman to approve the motions from the June 3, 2021 In-Camera Meeting***

**MOTION CARRIED**

## 8.0 STANDING ITEMS

### 8.1 Ministerial Directives:

Nothing to report.

## 9.0 QUESTION PERIOD

Mr. Stu Neatby on behalf of the Journal-Pioneer posed the following questions (highlighted in bold):

***Why increase the complement of general surgeons at PCH if already having issues retaining the current three?***

Dr. Gardam replied increasing the complement will both help with the backlog of surgeries and allow a decrease in the on-call schedule requirements for the general surgeons.

***Do we know how many nurses need to be recruited to fill all positions across the system?***

Dr. Gardam noted he is not sure of the exact number of nursing vacancies but there is a significant number.

***Have exit surveys been comprehensively requested of exiting nurses in the past year?***

The Board has made it very clear that exit interviews are taking place and in the past year this has improved. A comprehensive plan has been developed to also capture why people stay as well; this will be valuable information for ongoing recruitment efforts.

**Action → A high level summary will be provided to Mr. Neatby.**

**Action → Mr. Neatby requested a copy of the resource plan for both nurses and physicians.**

Mr. Martin Ruben posed the following question (highlighted in bold):

***Why is Health PEI not responsible for its own recruitment efforts?***

There are three parties that all participate in the recruitment piece for our system including Health PEI, the Recruitment and Retention Secretariat, which is housed within the Department, and the Public Service Commission who are responsible for classifying, posting and participating in the interview process of recruitment.

## **10.0 MOTION TO ADJOURN**

It was moved by Ms. Andrea Slys to adjourn the June 3, 2021 Public meeting of the Board.

**Meeting Adjourned**

# Health of Governance in Health PEI

Presentation by Martin Ruben, FCPA, FCGA  
3 June 2021



“Health care is the only civil system where new technology makes prices go up instead of down.

*Jaan Tallinn, Estonian computer programmer and investor known for his participation in the development of Skype in 2002 and FastTrack/Kazza, a file-sharing application, in 2000*





# What I plan to present



1

## Who am I?

And...why I am here to speak to you today

2

## What I am seeing

My view in from the outside

3

## What I was hoping to find

Guidance available from professional bodies

4

## What I would like for the Board to consider

My hope for a better health system in PEI

# Who is Martin Ruben



Martin Ruben, FCPA, FCGA

Martin Ruben Consulting

Victoria, PE

Public auditor with the Office of the Auditor General of Canada in Winnipeg, New York and Ottawa for 30 years conducting financial and performance audits

Public sector manager for 2 years, developing policy and leading IT development projects

Public auditor with Office of the Auditor General in Cayman Islands for 8 years conducting financial and performance audits - Building capacity in public sector with focus on health care, social programs, and land use planning.

Consulting to public sector for last 4 years in strategic planning, results based management and capacity building, in Canada and internationally

# My move to PEI

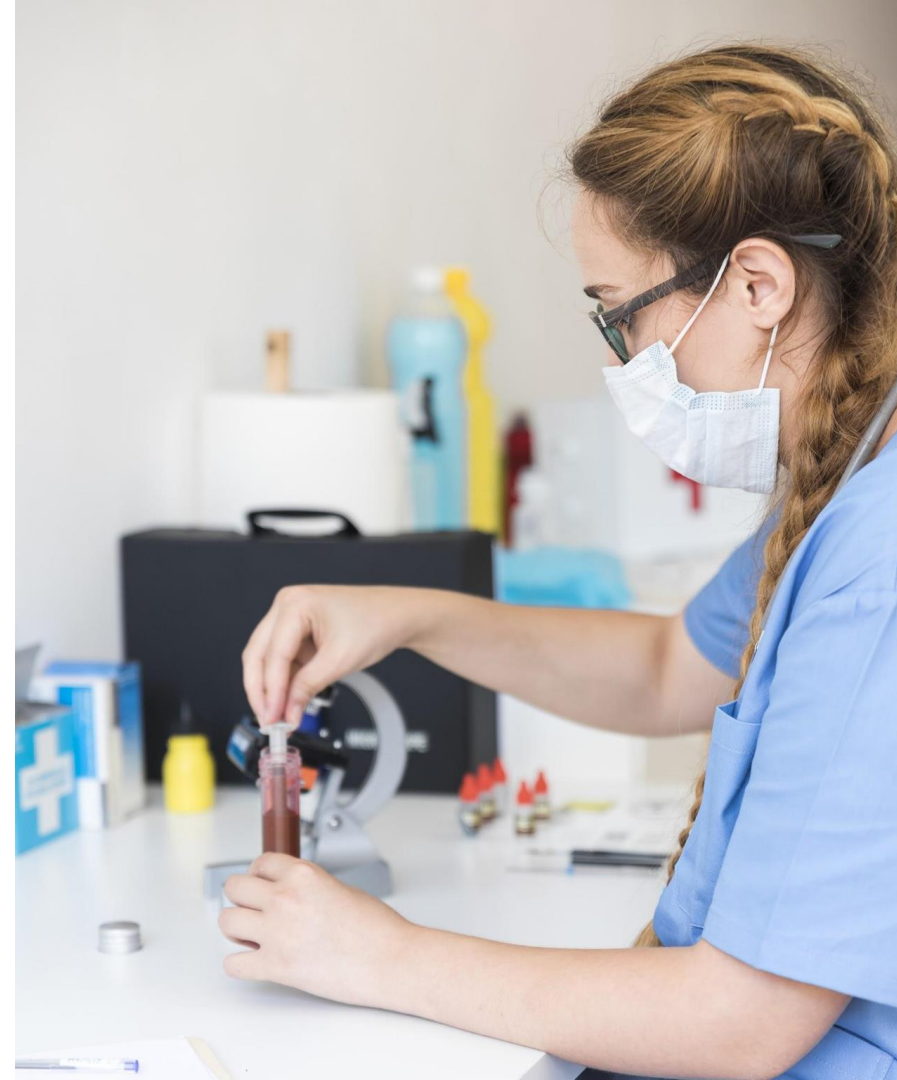
Moved to Victoria, PEI in April 2017

Wanted to get to know about the Government of PEI

Researched history and governance framework

Developed vision for strengthening governance in the PEI government and its agencies

Approached the PEI Government to provide observations and advice (not services) – **still a public servant**



## Why I am here today

- Conducted wide scope health care performance audit and did a significant benchmarking exercise in the Caribbean
- Provided ongoing advice for improvements to the Cayman Islands government including health care
- Approached CEO about my observations in 2017 – no engagement
- Board resignation in 2018 – associated governance risks were not acknowledged and mitigated
- Response to Guardian articles
- Recent remarks by the Premier and Minister of Health and Wellness during the debate on Bill 106
- Concerns about our own health care when we arrived in PEI and ongoing

**Belief that Islanders deserve good health care**

# Definitions


**Governance** determines who has power, who makes decisions, how other players make their voice heard and how account is rendered

**Corporate governance** refers to the process and structure for overseeing the direction and management of a corporation so that it carries out its mandate and objectives effectively

**Accountability** is a relationship based on obligations to demonstrate, review, and take responsibility for performance, both the results achieved in light of agreed expectations and the means used



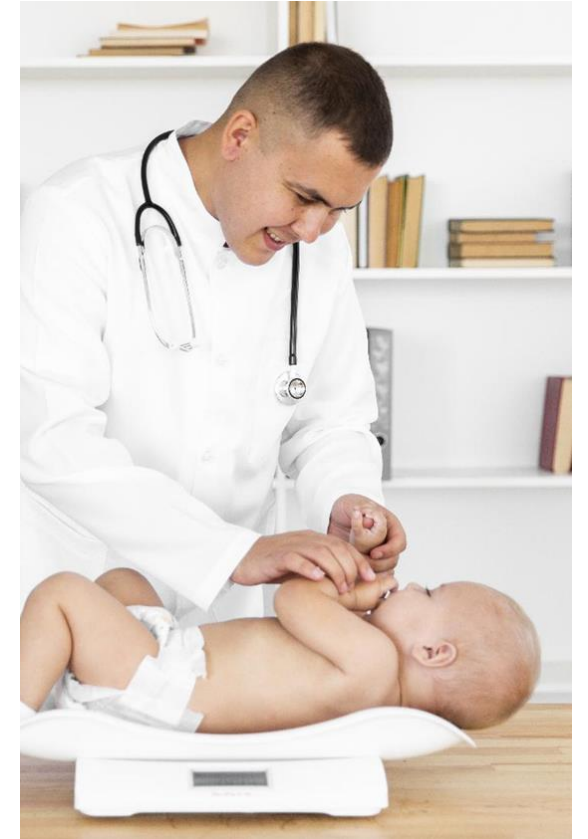
# Accountability principles

- Clear roles and responsibilities
  - Clear performance expectations
  - Balanced expectations and capacities
  - Credible reporting
  - Reasonable review and adjustment
- 

# Health PEI is a Crown Corporation

- Created in 2010
- The Health PEI Board of Directors governs the agency, is accountable to the Minister of Health and Wellness and works collectively on behalf of all Islanders to ensure the management and delivery of safe, quality health care. The board also oversees the Chief Executive Officer who works with a broad range of dedicated health care professionals and administrative staff to provide high quality health care that is measured against national standards.

*(from Health PEI website)*





# Health PEI is a Crown Corporation

- The governance regime attempts to balance the Crown corporation's relationship with the government—between the corporation's autonomy in day-to-day activities and the government's appropriate direction and control.
- **The legislation places the board of directors at the centre of the governance regime for Crown corporations.**
- Under this governance regime, the board oversees the management of each corporation and holds management responsible for its performance; it is responsible for establishing the corporation's strategic direction, safeguarding the corporation's resources, monitoring corporate performance, and reporting to the government and Parliament.
- **The corporation is accountable to Parliament through a responsible minister.**



# Role of the Health PEI board

According to **good governance**, the Board of Directors, has the following roles with regard to its responsibility to direct the affairs of the Crown corporation:

- a. Provide continuity for the corporation
- b. **Select, appoint and hold to account the CEO**
- c. Develop the corporation's strategic plan and ensure the corporation is positioned to fulfill its responsibilities
- d. Ensure the corporation has sufficient resources to operate effectively
- e. Ensure the corporation has the policies and practices in place that ensure the corporation can operate effectively
- f. Provide an accounting for their responsibilities to the shareholder (Government of PEI)
- g. Ensure Minister has capability to inform the legislative body

# Role of the Health PEI board

The board is responsible for the **control** and management of Health PEI and the planning, organization and delivery of health services in Prince Edward Island.

- **Employing the Chief Executive Officer;**
- **Setting the strategic direction of Health PEI, in line with the priorities of government;**
- **Monitoring executive / organizational performance in relation to achievement of the strategic direction and compliance with board policies;**
- Monitoring the budget and ensuring required financial and other reporting requirements are met;
- **Monitoring the risks of the organization and the policies in place to manage those risks;**
- Monitoring organizational quality and safety processes;
- Approval of medical staff by-laws and execution of board related duties outlined therein;
- Providing a framework for public and stakeholder engagement;
- Providing to the Minister plans and reports in line with policy and accountability requirements; and
- Organizing committees, activities, and general processes through which to conduct its business

*<https://www.princeedwardisland.ca/en/information/executive-council-office/health-pe-i-board-of-directors>*



## What I am seeing

Lack of a comprehensive strategic direction for health care on PEI – (Ministry responsibility)

Weak accountability between the CEO and Board of Health PEI

Board is not at the centre of the governance regime

Weak accountability between Health PEI and the Department

Weak accountability between the Department and the Legislative Assembly

Inappropriate role of the Minister – both in legislation and in operations

Significant changes in senior and middle management

# What I am seeing

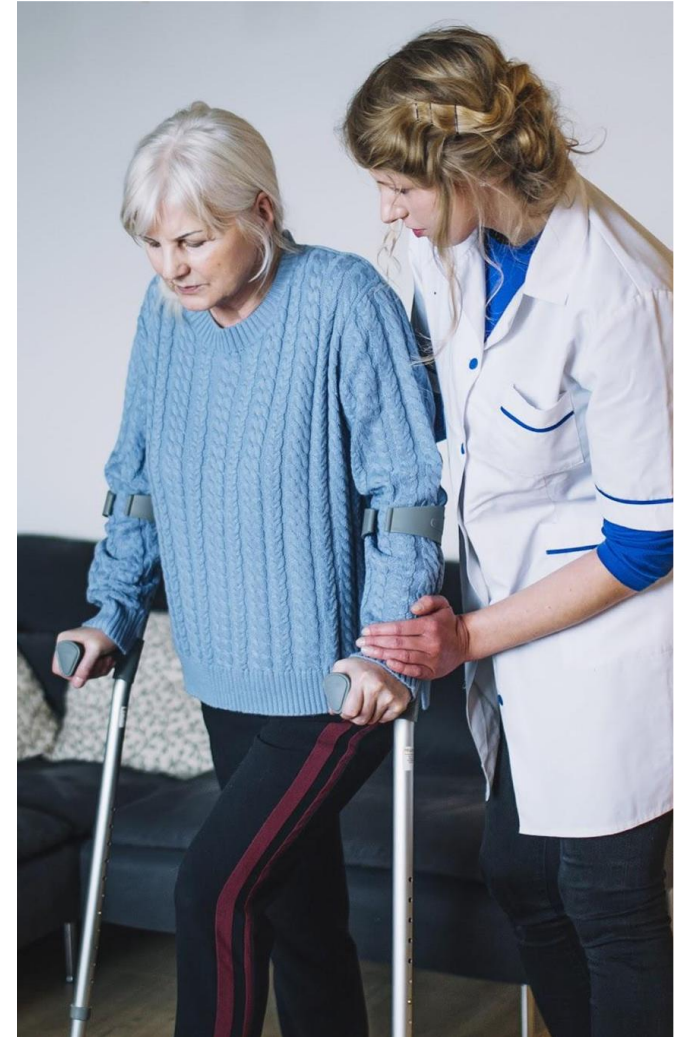
Business plan for 2020-21 is not available, business plan for 2019-20 does not provide information about change / sustaining agenda including associated costs

Incomplete action plans / strategic initiatives not being fulfilled

Lack of internal audit that provides management and the board with assurance about the design and operations of the risk and management framework


Lack of an integrated risk management framework

Weak performance compared to other provinces



## What I concluded from my observations

**Health PEI governance and corporate governance needs to be strengthened as it currently cannot provide the basis for good health care services performance and ensure good health outcomes for Islanders**



## What I was hoping to find

- Good legislation
- Good governance
- Good accountability relationships
- Good planning
- Good reporting
- Good outcomes

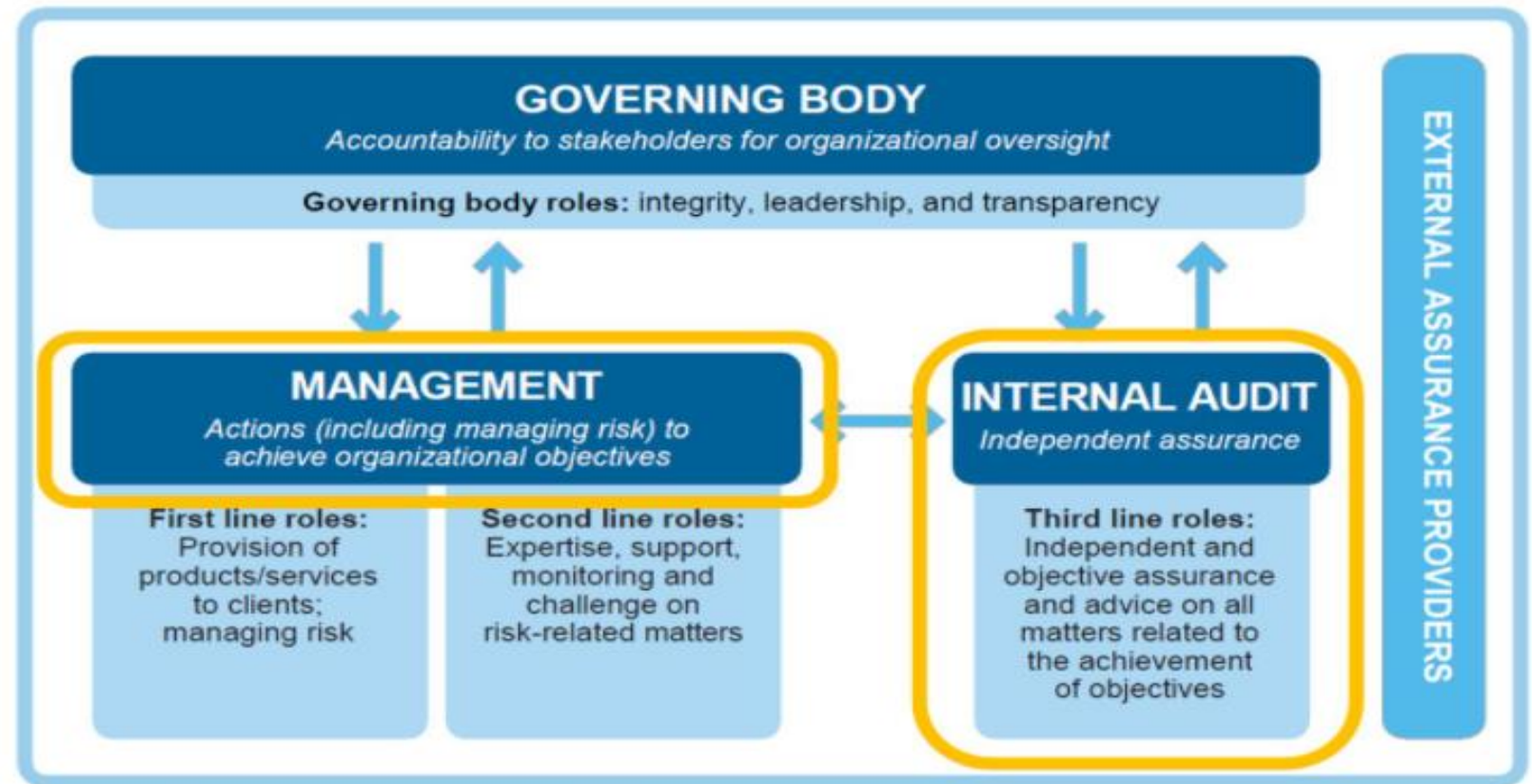


**Good governance = Good outcomes**




# What I was hoping to find

## The IIA's Three Lines Model




**KEY:** ↑ Accountability, reporting   ↓ Delegation, direction, resources, oversight   ↔ Alignment, communication, coordination, collaboration

## What I would like the Board to consider

1. Recognize the seriousness of the issues raised in this presentation and their impact on the health of Islanders
  2. Develop more comprehensive/realistic strategic plan / operational plans
  3. Develop stronger systems, practices and culture around management for results
  4. Request the Office of the Auditor General to carry out a wide scope performance audit
- 



## What I would like the Board to consider

5. Implement an internal audit function that would provide advice and assurance on the organization's corporate governance, policies and operations
  6. Implement a health care ombudsperson function
  7. Advocate with the government to address weaknesses in governance that preclude the delivery of health care services and provide good health care outcomes
  8. Make the operations of Health PEI more transparent
- 

**Thank you for your attention**

Martin Ruben, FCPA, FCGA

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[www.martinruben.ca](http://www.martinruben.ca)

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# Bringing Midwifery Services to Island Families

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## About Midwifery

### What is a midwife?

Midwives are health care providers that care for their clients before and throughout pregnancy, labour, birth, and the postpartum period. Midwives are experts in low-risk, normal pregnancy and birth.<sup>1</sup>

### Midwifery in Canada

Midwifery is regulated and publicly funded in Canada by provincial and territorial governments. Once PEI and Yukon implement programs, midwifery services will be available in every province and territory.

### What are the core principles of midwifery care in Canada?<sup>2 3</sup>

#### Informed Choice

Midwives respect their clients as the primary decision makers about their own care. Midwives allow enough time during each client visit to provide evidence-based information, answer questions, and have meaningful discussion.

#### Partnership

Midwives work collaboratively with their clients in a non-authoritarian way to ensure the needs and experiences of each individual and family are respected.

#### Evidence-based Care

Midwives combine research, evidence-based guidelines, clinical experience and the unique values and needs of their clients to provide safe, high quality health care.

#### Continuity of Care

Midwives work in pairs or small teams, to ensure their clients almost always receive care from a midwife they have met. Midwives are on call at all times to answer questions, discuss concerns, or to care for their clients during labour and birth.

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<sup>1</sup> Association of Ontario Midwives, What is a Midwife?

<sup>2</sup> Canadian Association of Midwives, What is a Midwife?

<sup>3</sup> Canadian Association of Midwives, The Canadian Midwifery Model of Care Position Statement

## Choice of Birth Place

Midwives are equipped to care for their clients at home, in a hospital, at a birth centre, or in a health clinic. Midwives provide care to clients in their birth setting of choice, depending on the facilities available in each area.

## Collaborative Care

Midwives are health care providers who work independently and in collaboration with other healthcare professionals as needed.

## Professional Autonomy

As autonomous primary health care providers, midwives provide comprehensive care during pregnancy, labour, postpartum and the newborn period. Midwives work in home, hospital and community settings, including maternity centres and birth centres. Midwives access emergency services as needed. Where available, midwives maintain hospital privileges for the admission of clients and their newborns. Midwifery in Canada is a direct entry profession and is self-regulated. Midwifery services are publicly funded and integrated within the Canadian healthcare system.

# Introducing Midwifery Services to PEI

## Why introduce midwifery to PEI?

Integrating midwives into PEI's health care system will increase options for quality maternity care available to Island families. Solutions have been put in place to ensure all parents receive the prenatal care they need, such as prenatal care provision by Family Physicians and Nurse Practitioners. Additional options will help to enhance maternal care services. Health care consumers have voiced a desire to access midwifery care. Midwifery services will enable more parents to receive care from the same provider throughout their pregnancy and reduce pressures placed on health care providers and hospitals, while improving health outcomes. Midwifery care is associated with high client satisfaction rates, and decreased rates of medical intervention.<sup>4</sup>

## How is the work being done?

Health PEI and the Department of Health and Wellness have set up a Midwifery Services Steering Committee to guide the midwifery services development process. The committee is composed of a variety of members with diverse backgrounds and perspectives, representing the varied and complex factors and considerations involved in ensuring a sustainable maternity care system that provides high quality health care to Island families.

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<sup>4</sup> Patricia A. Janssen et al., Outcomes of Planned Hospital Birth Attended by Midwives Compared with Physicians in British Columbia. (2007).

## What work has been done so far?

The Midwifery Services Steering Committee has formed a number of active working groups dedicated to the development of sustainable midwifery services. Steering Committee and working group members have created a guiding framework for the development of midwifery services, a Midwifery Services Program Development Lead has been hired, regulations are currently being developed, stakeholder engagement is underway, and the Steering Committee is continuing to meet regularly to advance the midwifery services development process.

## Engagement

### What is the purpose of engagement?

As part of the midwifery services development process, a number of focus groups are taking place to share information about midwifery and to gain feedback to inform program elements, regulations, and the implementation plan. A survey is also being used to gain additional information.

### Who is being engaged?

Perinatal care providers, other health care providers, community partners, citizens and other government departments are being asked to provide information and guidance.

### What happens after engagement?

Following engagement activities, the Steering Committee will review the findings, as well as information gathered from other sources, and finalize the midwifery service development plan.

# Bringing Midwifery Services to PEI Families

May 2021

## What is a midwife?

Midwives are health care providers that care for their clients before and throughout pregnancy, labour, birth, and the postpartum period.

Midwives are experts in low-risk, normal pregnancy and birth.

- Comprehensive care
- Informed choice
- Partnership
- Evidence-based care
- Choice of birth place
- On call 24/7

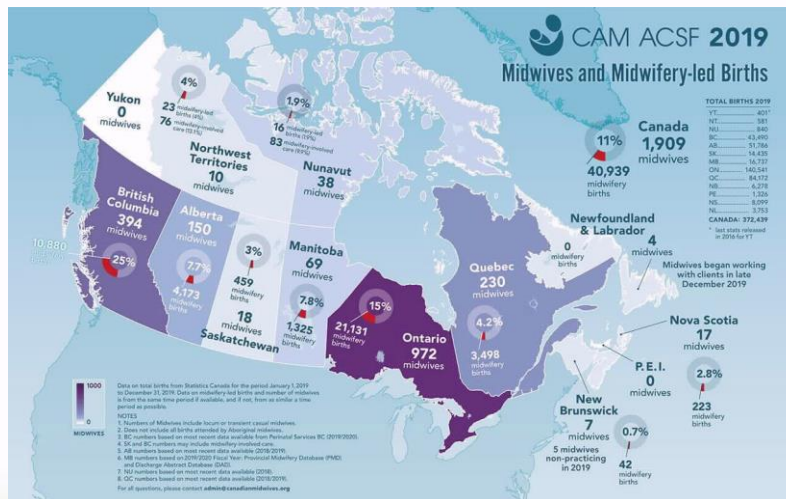
## Midwifery in Canada

- Midwifery is regulated and publicly funded in Canada by provincial and territorial governments.
  - Once PEI and Yukon implement programs, midwifery services will be available in every province and territory.
- Midwives complete a specialized four-year undergraduate degree program followed by a new registrant year (similar to a paid internship or residency) before becoming Registered Midwives.

Health PEI

One Island Health System

## Midwifery Across Canada



Health PEI

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## The current landscape in PEI

- One health authority - Health PEI
- Two Hospitals providing obstetrics
  - Prince County Hospital (PCH) and Queen Elizabeth Hospital (QEH)
- Low-risk prenatal care provided by Family Physicians and Nurse Practitioners throughout first two trimesters
- Maternal care provided by Obstetricians and one Family Physician
- Approximately 1400 births per year, about 1350 take place at PCH and QEH
- Public Health Nurses, Family Physicians and Nurse Practitioners provide postnatal care

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## Why bring midwifery to PEI?

- Increase options so that individuals can choose the care that is best for them and their family.
- Enable more parents to receive care from the same provider throughout their pregnancy, labour, birth, and postpartum period.
- Reduce pressures placed on current health care providers and hospitals.
- Positive health outcomes for parents and newborns.

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## Deciding to introduce midwifery

Government endorsed development and implementation of midwifery services.

Consumer demand for midwifery care.

Midwives have applied for regulation under the *Registered Health Professions Act*.

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## The development process

Current progress:

- Midwifery Services Steering Committee includes key stakeholders, including midwifery
  - Working groups have been formed
  - Project Management Team
- Two midwives have been hired to aid in development process
  - Chief Advisor
  - Development Lead
- Work plan and framework has been developed
- Regulations development initiated
- Midwife positions being developed
- **Engagement strategy underway**

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## **Moving Forward**

### **Establishing Client-centred Midwifery Services**

Health PEI would like to hear from childbearing individuals and others who are interested in accessing midwifery care to ensure the midwifery services being developed meet the needs of Island families.

You are welcome to share your feedback and insights here today or through the online survey linked below.

<https://forms.gle/nEvdZg92wvFTVMVm7>

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## **Questions About Midwifery Care?**

Before we proceed to the feedback portion of this session, please feel free to ask any questions you have about midwifery care.

Keep in mind that PEI's midwifery services are under development. Some details may not be available until later in the development process.

**Health PEI**

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## We Want to Know

**What do you value most when choosing a care provider for your pregnancy, labour, birth, and postpartum period?**

- Location of services?
- Relationship?
- Continuity of care?
- Evidenced-based care?
- Informed choice?
- Provider's skillset, experience, and outcomes?
- Culturally appropriate care?
- Other?

**Health PEI**

One Island Health System

## We Want to Know

How do you think midwifery care can contribute to positive childbearing experiences for Island families?

**Health PEI**

One Island Health System

## **We Want to Know**

What are some of the barriers you and others in your community face when accessing maternity care?

Will midwifery services help to overcome these barriers?

**Health PEI**

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## **We Want to Know**

Are you likely to choose to access midwifery care?

Why or why not?

**Health PEI**

One Island Health System

## We Want to Know

Please feel free to share other feedback or insights surrounding the development of midwifery services in PEI.

**Health PEI**

One Island Health System

## For more information

Contact:

**Melissa Roberts**

Midwifery Services Program Development Lead

[melissa@prairiemidwives.ca](mailto:melissa@prairiemidwives.ca)

**Thank you for your time and insights!**

**Health PEI**

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