

June 12, 2023

Mr. John Davison President & CEO PSEC Secretariat Suite 210 – 880 Douglas Street Victoria, BC V8W 2B7

Dear Mr. Davison:

Re: 2022/2023 Statement of Executive Compensation - Provincial Health Services Authority

The 2022/2023 Statement of Executive Compensation of the Provincial Health Services Authority (PHSA) has been reviewed and approved by myself as Board Chair of PHSA. I confirm the following:

- The board is aware of the executive compensation paid in the prior fiscal year.
- The compensation information being disclosed is accurate and includes all compensation paid by PHSA, foundations, subsidiaries or any other organization related to or associated with PHSA. It also includes the value of any pre or post-employment payments made during the 12-month period before or after the term of employment.
- Compensation was within approved compensation plans and complies with government guidelines including the Taxpayer Accountability Principles.

Sincerely,

Tim Manning, ICD.D Board Chair, PHSA

St. Mannie

Att.

## Public Sector Executive Compensation Reporting Provincial Health Services Authority (PHSA) Statement of Executive Compensation 2022/23

#### COMPENSATION DISCUSSION AND ANALYSIS

Provincial Health Services Authority (PHSA) plans, manages and evaluates specialty and province-wide health care services across BC, working with the five geographic health authorities and the First Nations Health Authority to meet local and provincial needs. The goal is to ensure that everyone in the province has access to the kind of specialized health services they need, when they need them, wherever they happen to live.

PHSA achieves this goal by fulfilling two main roles:

- 1. It is responsible for managing and governing well-known specialized programs and services:
  - BC Autism Network
  - o BC Cancer
  - o BC Centre for Disease Control
  - BC Children's Hospital and Sunny Hill Health Centre
  - BC Early Hearing
  - BC Emergency Health Services (including BC Ambulance Service, BC Bedline, and BC Trauma)
  - BC Mental Health Substance Use Services (including Forensic Psychiatric Services, Child and Youth Mental Health, and Corrections Services)
  - BC Renal
  - BC Surgical Patient Registry
  - BC Transplant
  - BC Women's Hospital + Health Centre
  - Cardiac Services BC
  - Health Emergency Management
  - o Indigenous Health
  - Lower Mainland Biomedical Engineering
  - Lower Mainland Health Information Management
  - Lower Mainland Medical Imaging Program
  - Lower Mainland Pharmacy Services
  - Medical Mobile Unit
  - Perinatal Services BC
  - Population & Public Health
  - Provincial Laboratory Medicine Services
  - Provincial Language Services
  - Provincial Infection Control Network
  - Provincial Retinal Disease Treatment
  - Provincial Supply Chain Services
  - Services Francophone
  - Stroke Services BC
  - o Trans Care BC
  - o Trauma Services BC
- 2. It plans, coordinates, evaluates and, in some cases funds specialized services delivered by the regional health authorities. PHSA's role supports the accessibility, quality, efficiency and effectiveness of province-wide programs and services.

PHSA is a member employer of the Health Employers Association of BC and is governed by the HEABC Compensation Reference Plan. The Plan has been developed pursuant to the statutory requirements of the Public Sector Employers Act and is applied across the member employers of HEABC for non-union, management and executive roles within healthcare. The Plan was

refreshed in November 2015 to align with Government's recommendation of a common compensation philosophy for the broader public sector using shared principles aligned with the Province's Taxpayer Accountability Principles. As with other public employers, we are also subject to policies determined by the Public Sector Employers Council Secretariat (PSEC).

## **Compensation Principles**

PHSA's compensation principles have been updated to reflect government's core principles and are consistent with the compensation principles contained in the Compensation Reference Plan Guidelines. The core principles are:

- **Performance**: Compensation programs support and promote a performance-based (merit) organizational culture.
- **Differentiation**: Differentiation of salary is supported where there are differences in the scope of the position within an organization, and/or due to superior individual team contributions.
- Accountability: Compensation decisions are objective and based upon a clear and well
  documented business rationale that demonstrates the appropriate expenditure of public
  funds.
- **Transparency**: Compensation programs are designed, managed, and communicated in a manner that ensures the program is clearly understood by employees and the public while protecting individual personal information.

## **Compensation Policy Objectives**

PHSA's Compensation Policy Objectives are consistent with the updated compensation policy objectives contained in the Compensation Reference Plan Guidelines. The objectives are as follows:

- A defensible compensation system recognizes the responsibility of the health sector to establish compensation levels that acknowledge fairness and the public's ability to pay. Compensation levels in the health sector will reflect the market average and will not lead the market. This ensures that taxpayers receive the maximum benefits from qualified individuals occupying jobs in the health sector.
- 2. External equity requires competitive levels of compensation be established, that address issues of attraction and retention, by analyzing compensation practices in relevant labour markets including British Columbia health sector bargaining associations.
- 3. Internal equity requires the relative worth of jobs be established by measuring the composite value of skill, effort, responsibility and working conditions.
- 4. Compensation will reinforce and reward performance through measurable performance standards that support and promote a performance based culture.
- 5. Compensation policies will comply with the intent and requirements of legislation and be non-discriminatory in nature.

## **Compensation Survey**

HEABC is responsible for conducting an annual cash compensation survey to ensure appropriate internal and external equity are maintained.

Job market matches shall be appropriate to the type of position: local for administrative support positions; and provincial or national for managerial positions and provincial, national and international for executive positions. The comparison of compensation shall be relevant to the PSEC approved external labour markets.

## Reference Salary Ranges

A defensible compensation system responds to broad equity issues. The Plan recognizes the responsibility of the health sector to establish compensation levels that acknowledge fairness and the public's ability to pay, re-enforcing the notion of accountability. Fundamental to this statement is the fact that compensation practices in the health sector cannot lead the market, while providing appropriate levels of compensation that support recruitment and retention needs. This ensures that taxpayers receive the maximum benefits from qualified individuals occupying jobs within the health care sector, further re-enforcing the notion of accountability.

HEABC is responsible for providing healthcare employers with reference salary ranges. The reference salary ranges will be based on the 50th percentile of the blended market survey. The salary reference ranges will include provisions for an adequate range and spread of salary rates to differentiate developmental, job standard, and above standard rates.

Employers will administer salaries within the reference salary ranges and compensation guidelines.

Circumstances may require employers to address compression or inversion issues between non-contract staff and directly supervised bargaining unit employees. A differential of up to 15% may be established where there is a functional supervisory role, with responsibility and accountability for outcomes. This differential does not form part of the comparison ratio calculation.

#### **Organization Information Plan**

The Organization Information Plan provides a means of grouping organizations with similar characteristics for the purpose of comparing pay practices of the employer groups to their relevant labour markets and establishing discrete salary ranges for each of the employer groups.

#### **Role Assessment Plan**

The Role Assessment Plan (a point factor job evaluation plan) provides a means of establishing an equitable hierarchy of jobs within an organization, as well as a comparison of jobs across the healthcare sector. The hierarchy of jobs is determined by assessing the skill, effort, responsibility, and working conditions inherent in all jobs in HEABC member organizations.

## **Application of the Compensation Reference Plan**

Newly hired employees are placed on the appropriate salary range based on the new hire's work experience, skills, and competencies for placement within the salary range established for the job, in most circumstances, PHSA works with HEABC and PSEC to review Market regularly and establish competitive rates.

Performance reviews are conducted annually (April each year) using a comprehensive employee performance and development plan tool. The amount of adjustments varies based on the employee's performance evaluation score.

## **Executive Compensation**

The CEO and each named executive officer (NEO) are reported in the Summary Compensation Table of this disclosure pursuant to the Public Sector Executive Compensation Reporting Guidelines. We are unique from the other five geographic health authorities, in that PHSA has a specialized and province-wide mandate. As such, we provide high quality, specialized services in areas such as oncology, paediatrics, psychiatry and perinatal care. As a result, we employ a higher number of specialists than other health authorities. In addition, due to our structure, we are responsible for and report out on the Programs and Services that comprise PHSA, the senior leaders of which are employees of those Programs/Services or may be paid by a partner organization in some instances (eg. an academic centre).

#### **Benefits**

PHSA executive benefit package (Standard Executive Benefit Plan – refreshed in January 2015) is comparable to other health sector employers in British Columbia and includes the following key elements:

#### Medical Services Plan

The PHSA covers the premium costs for participation of the employee and their eligible dependent(s) in the British Columbia Medical Services Plan.

#### **Extended Health Benefits Plan**

The Plan provides employees and their dependent(s) with prescription drug reimbursement and other approved paramedical services subject to yearly maximum levels and a deductible of \$100/year effective January 2015. PHSA pays the cost of premiums.

#### **Dental Plan**

PHSA pays the cost of a Dental Plan that provides to the employee and their dependent(s) 100% reimbursement for Basic Services, Prostheses, Crowns, Bridges, and Orthodontics.

### **Group Life Insurance**

This plan provides a non-evidenced benefit of five (5) times annual salary to a maximum of \$1,000,000 to the beneficiary or estate of a deceased employee. PHSA pays the cost of premiums.

### **Dependent Group Life Insurance**

This plan provides for \$10,000 spousal insurance and \$5,000 insurance for each dependent child. PHSA pays the cost of premiums.

#### **Accidental Death and Dismemberment**

This plan provides up to five (5) times annual salary to a maximum non-evidenced coverage of \$1,000,000 in the event of accidental death or dismemberment. PHSA pays the cost of premiums.

#### Long Term Disability Insurance

This plan provides continuing income in the event of total disability after a qualifying period. The taxable benefit is 77% of pre-disability gross salary to a maximum non-evidenced monthly benefit of \$10,000. PHSA pays the cost of premiums.

#### **Pension Plan**

Eligible executives participate in the Municipal Pension Plan or the Public Service Pension Plan. This plan has contributions from the employer and employee, as established by the Pension Board.

#### **Perquisites**

The CEO and the Executive Vice President are provided a vehicle allowance, if eligible. Parking is paid for by PHSA for the CEO and executive staff located at PHSA's corporate office.

#### **Annual Leave**

Subject to portability rules, executives are eligible for annual vacation entitlements as follows:

- Up to a maximum of twenty (20) days after one (1) year of service and up to four (4) years of service.
- After four (4) years of continuous service, one (1) additional day for each additional year of employment, up to a maximum of thirty-five (35) days.

# **Provincial Health Services Authority**

## **Summary Compensation Table at 2023**

|  |            |   |           |           |  |                                    |            | revious Two Years Totals<br>Total Compensation |  |
|--|------------|---|-----------|-----------|--|------------------------------------|------------|--|--|
| Name and Position  | Salary     | Holdback/Bonus/<br>Incentive Plan<br>Compensation | Benefits  | Pension   | All Other<br>Compensation<br>(expanded<br>below) | 2022/2023<br>Total<br>Compensation | 2021/2022  | 2020/2021                                      |  |
| David Byres, President & CEO   | \$ 369,200 | -   | \$ 16,087 | \$ 34,372 | \$ 10,293  | \$ 429,952                         | \$ 221,011 | \$ 47,431                                      |  |
| Reka Gustafson, VP, Public Health & Deputy Officer   | \$ 179,926 | -   | \$ 4,712  | \$ 12,877 | -  | \$ 197,515                         | \$ 463,870 |  |  |
| Leanne Heppell, Executive Vice President, BC Emergency Health Services and Chief Ambulance Officer | \$ 300,519 | -   | \$ 41,168 | -         | \$ 6,667   | \$ 348,354                         |            |  |  |
| Scott MacNair, Executive Vice President Business<br>Operations                                     | \$ 296,400 | -   | \$ 17,167 | \$ 27,595 | \$ 953   | \$ 342,115                         | \$ 340,851 | \$ 132,588                                     |  |
| Shannon Malovec, Executive Vice President, Digital Health, Information Services and Innovation     | \$ 278,384 | -   | \$ 17,037 | \$ 24,984 | -  | \$ 320,405                         |            |  |  |
| Susan Wannamaker, Executive Vice President, Clinical Service Delivery, PHSA                        | \$ 310,432 | -   | \$ 15,911 | -         | -  | \$ 326,343                         | \$ 342,209 | \$ 313,292                                     |  |
| Jason Wong, Interim Executive Medical Director, BC<br>Centre for Disease Control                   | \$ 293,829 | -   | \$ 14,179 | \$ 27,356 | \$ 21,723  | \$ 357,087                         |            |  |  |

## **Summary Other Compensation Table at 2023**

| Name and Position   | All Other<br>Compensation | Severance | Vacation<br>Payout | Paid Leave | Vehicle /<br>Transportation<br>Allowance | Perquisites /<br>Other<br>Allowances | Other     |
|---|---------------------------|-----------|--------------------|------------|--|--------------------------------------|-----------|
| David Byres, President & CEO  | \$ 10,293                 | -         | -                  | -          | \$ 9,573                                 | -                                    | \$ 720    |
| Reka Gustafson, VP, Public Health & Deputy Officer  | -                         | -         | -                  | -          | -  | -                                    | -         |
| Leanne Heppell, Executive Vice President, BC<br>Emergency Health Services and Chief Ambulance Officer | \$ 6,667                  | -         | -                  | -          | \$ 6,000                                 | -                                    | \$ 667    |
| Scott MacNair, Executive Vice President Business<br>Operations  | \$ 953                    | -         | -                  | -          | -  | -                                    | \$ 953    |
| Shannon Malovec, Executive Vice President, Digital Health, Information Services and Innovation        | -                         | -         | -                  | -          | -  | -                                    | -         |
| Susan Wannamaker, Executive Vice President, Clinical Service Delivery, PHSA                           | -                         | -         | -                  | -          | -  | -                                    | -         |
| Jason Wong, Interim Executive Medical Director, BC<br>Centre for Disease Control                      | \$ 21,723                 | -         | -                  | -          | -  | -                                    | \$ 21,723 |

## Notes

| David Byres, President & CEO  | General Note:     Effective April 1st 2022, Dr. David Byres annualized salary increased to \$369,200. This was due to a performance based increase for the 2021/2022 performance year.  Other Note:     \$720 is for professional association/membership dues.   |  |  |  |
|---|--|--|--|--|
| Reka Gustafson, VP, Public Health & Deputy Officer  | General Note:  Dr. Reka Gustafson's last day with PHSA as VP, Public Health & Deputy Officer was September 10th 2022. We are currently recruiting for this VP, Public Health & Deputy Officer role. Dr. Jason Wong has taken on additional responsibilities of this role (temporary acting capacity) while we work to fill the position permanently.   |  |  |  |
| Leanne Heppell, Executive Vice President, BC<br>Emergency Health Services and Chief Ambulance Officer | General Note:     Effective January 17th 2022, Leanne Heppell has been appointed to the role of Executive Vice President, BC Emergency Health Services and Chief Ambulance Officer.  Other Note:     \$667 is for professional association/membership dues.  |  |  |  |
| Scott MacNair, Executive Vice President Business<br>Operations  | General Note:  Effective April 1st 2022, Scott MacNair's annualized salary was increased to \$296,400. This was due to a performance based increase for the 2021/2022 performance year.  Other Note:  \$953 is for employer paid parking.  |  |  |  |
| Shannon Malovec, Executive Vice President, Digital Health, Information Services and Innovation        | General Note:  Effective July 13th 2022, Shannon Malovec was appointed to the position of Vice President, Digital Health Information Services and Innovation; position left vacant further to the retirement of the former incumbent on April 1, 2022. Included in FY 2022/23 total compensation is pay for Shannon Malovec in her previous role as Chief Digital Health Officer during the period of April 1st to July 12th 2022, in the amounts of: \$73,835 in Actual Base Salary, \$3,370 in Statutory and Health Benefits, and \$9,114 in Pension Contributions.  |  |  |  |
| Susan Wannamaker, Executive Vice President, Clinical Service Delivery, PHSA                           | General Note:  Effective April 1st 2022, Susan Wannamaker's annualized salary was increased to \$310,432. This was due to a performance based increase for the 2021/2022 performance year.   |  |  |  |
| Jason Wong, Interim Executive Medical Director, BC Centre for Disease Control                         | General Note:  Effective September 3rd, 2022 Dr. Jason Wong was appointed as Interim Executive Medical Director, BC Centre for Disease Control and took additional responsibilities that were formerly assigned to the VP Public Health, Deputy officer position. Included in FY 2022/23 total compensation is pay for Dr. Jason Wong in his previous role as Medical Director, Clinical Prevention Services during the period of April 1st to September 2nd 2022, in the amounts of: \$139,310 in Actual Base Salary, \$3,753 in Statutory and Health Benefits, and \$11,353 in Pension Contributions.  Other Note:  \$21,723 is for extraordinary events compensation (additional time associated with COVID-19 work). |  |  |  |