Every person deserves a voice.
Every voice deserves to be heard.
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Our Mission
To improve the lives of Nova Scotians by delivering quality audiology and speech-language pathology services.

Our Vision
Every person deserves a voice. Every voice deserves to be heard.
Message from the Board Chair and CEO

This year continued the trend of new and exciting developments in providing services to our patients at Hearing and Speech Nova Scotia. Formerly Nova Scotia Hearing and Speech Centres, we made a decision to change our name to Hearing and Speech Nova Scotia to emphasize our role and mandate in providing services to Nova Scotians and the evolution of providing those services beyond the walls of our clinics – in partnership with allied health professionals, community organizations, and through virtual service delivery.

Our vision: Every person deserves a voice. Every voice deserves to be heard, is ever more poignant in light of the global Black Lives Matter movement. HSNS acknowledges the need to identify and resist racism through proactive scrutiny and change to its practices in consultation with its staff, patients, families, and community stakeholders.

Over the last few years, we have been working hard to enhance the involvement of clients and patients, their families and caregivers throughout their care. This year, Audiologists worked on a project with children who are hearing aid users and their families to identify practical ways of helping aided children learn and participate better in noisy classrooms. We were also excited about the Hearing and Speech partnership with the First Nation community of Eskasoni, which led to an increase in community referrals and easier access to hearing and speech language services for many families in Eskasoni.

For the first time, our Partners in Care Committee, which is made up of patients, clients, family members and staff, helped conduct a review of our physical spaces to help make them more accessible and reflect what is important to patients and clients. This was so successful the next step will be to
provide members of this committee with a hands-on role in the design of new clinic spaces.

Top of mind for the Board this year was the launch of the Hearing and Speech Scholars Endowment. Made possible by the generous donations of Nova Scotians over the years, the endowment is in response to the fact that cultural diversity is underrepresented in the audiology and speech-language pathology fields. Wanting to take a leadership role and do more to promote culturally diversity and representation within these professions, the Board announced a $100,000 Hearing and Speech Scholars Endowment in February. This endowment will help support graduate students in the Dalhousie School of Communication Sciences and Disorders throughout their two-year Speech and Language Pathology or Audiology program, with scholarships of $2,250 per year for two years.

Every year the Board visits HSNS sites in communities across the province, providing members, staff and clients with the opportunity to learn and exchange ideas about services first hand. For example this fall Board members received demonstrations from staff in Truro, discussed communication challenges with a group of adult stroke clients and learned about the benefits of service delivery from the perspective of a grandmother from Sipekne’katik whose grandchild received both audiology and speech-language services over many years.

Throughout the pages of this Annual Report, we have highlighted some of the initiatives that have helped us move our strategic plan forward. This was in fact the last year of Strategic Plan 2020, with 19/23 targets reached or surpassed. While we continued to keep our eye on achieving these goals throughout the year, we also spent time looking ahead with the development of a new four-year strategic plan. We have strived to be client-centric in all of our services, and this continues to be an overarching theme in Strategic Plan 2024. This plan was created to be more accessible to more members of our community by streamlining the language of our values, our strategic goals and our directions for growth. We look forward to presenting our Strategic Plan 2024 to you in our Report to the Community in September.

We have shared some of our performance indicators on page 6 and are proud of our staff who have seen 27,243 individuals and logged more than 58,000 patient visits across 34 clinic sites in 25 communities. Together we have accomplished this and more while remaining on budget.

Hearing and Speech Nova Scotia, along with all organizations in the province and around the world, were tackling the impacts of COVID-19. While our clinics were closed, we were able to continue many services for patients and clients. Our Speech Language Pathologists and Audiologists continued to provide urgent, in-person care at hospitals at the request of specialists for emergency hearing tests, cancer care, or services for those with difficulty swallowing, to name a few. And our professionals have also adapted to the ongoing situation and continue to provide province-wide tele-practice speech therapy sessions and audiology consultation services and are working with our partners to expand on this service.

It’s important to note that Nova Scotians who are experiencing hearing and speech challenges may struggle even more to communicate now. For example, although important, masks impede speech and remove important speech-reading cues and facial expressions. We do not know the full impacts of COVID-19 on the future of our sector, but we can say with certainty that we will be there for Nova Scotians, assisting those who need help to communicate with each other.

On behalf of the Board, we would like to thank all of the staff at Hearing and Speech Nova Scotia for their dedication and hard work every day.

Bert Lewis
Chair

Anne Mason-Browne
CEO
The past four years we have been guided by our Strategic Plan 2020 and are pleased that we have been able to accomplish so much around our strategic directions of enhancing involvement of clients, patients, their families and caregivers throughout their care; improving access to and delivery of services through enhanced collaboration and partnerships; and expanding processes to measure and report on Quality Improvement Initiatives.

We are pleased to have worked this year to develop a new Strategic Plan, which will keep us equally busy over the next four years. The process included the involvement of all staff and Board as well as stakeholders. We look forward to providing more details about Strategic Plan 2024 in our Community Report. In the meantime, here is a sneak peek at our new strategic directions:

- People get the meaningful high-quality services they need.
- Our client and partner voices are heard and inspire us in everything we do.
- Our empowered and supported staff are our biggest advocates.
- Nova Scotians know we are their number one resource for hearing and speech.

**PROGRESS ON 2019-2020 GOALS**

Successful implementation of a new Electronic Medical Records (EMR) system integrating across all clinical services, sites, staff, clinical records and communications information technology.

- 19/21 targets completed
- 3/21 targets in progress with work continued in 2019-2020
- 1/21 targets deferred for future evaluation
VISION
Every person deserves a voice. Every voice deserves to be heard.

Strategic Directions
HSNS will be innovative in enhancing involvement of clients, patients, families, and caregivers throughout their care.
HSNS will improve access to and delivery of services through enhanced collaboration and partnerships.
HSNS will expand its processes to target, measure, and report on Quality Improvement Initiatives.

Goals
Goal #1: To improve access to HSNS services by reducing clients/patients and staff barriers.
Goal #2: To enhance systems that support the safety and wellness of HSNS clients/patients and staff.
Goal #3: To increase client/patient/caregiver participation in their care/services.
Goal #4: To continue development of expert staff to support optimal use of people and material resources.
Goal #5: To increase access to HSNS services through external partnerships.
Goal #6: To implement an effective collaborative care model to guide HSNS practices.
Goal #7: Effective use of a HSNS Ethics Framework for supporting staff and the Board in their decisions.
Goal #8: To enhance accountability, transparency, and stakeholder engagement.
Goal #9: To increase efficiency in use of HSNS informations systems.
Goal #10: To establish a systematic process to support future HSNS improvement initiatives using best practices.

Guiding Practices
• Ethical Framework
• Integrated Quality Framework
• Safety and Wellness Best Practices
• Governance Policies, Practices, Transparency, and Accountability
• Collaborative Practices and Client/Patient and Family Centred Care Principles

Foundation
Mission: To provide the best audiology and speech-language pathology services to Nova Scotians:
• High quality identification, diagnostic, prevention-promotion, and treatment
• Education of clients/patients and families, students, care providers, stakeholders, and communities
• Provincial standard setting, evaluation, and improvement in concert with out professions and partners

Values:
• Learning and Innovation: striving always to explore ways to improve the quality of our work and supporting others to do the same
• Leadership and Professionalism: building on our reputation for professional excellence by providing education to students and professionals, and leading ourselves and others to achieve the best.
• Advocacy and Expertise: working in our communities to promote the best possible communication for all Nova Scotians.
• Respect and Care: caring for each client/patient, their families and caregivers; respecting everyone and their diversity.
• Client/Patient and Family-Centred and Best Quality of Service: striving to meet the particular needs of each client patient while providing equitable access and quality of service for all.
• Partnerships and Collaboration: leading and fostering productive supportive working relationships
• Accountability and Transparency: making the best decisions that are communicated openly and honestly.
In 2019 Hearing and Speech Nova Scotia celebrated 56 years of providing audiology and speech-language services to Nova Scotians.

Hearing and Speech Nova Scotia is a nationally accredited organization, located in 25 communities across Nova Scotia.

46% of patient visits are provided outside of the HRM area

34% of patient visits with hospital in-patients

61% of patient visits with Nova Scotians aged 16 years and younger

NOVA SCOTIANS RECEIVED AUDIOLOGY OR SPEECH LANGUAGE PATHOLOGY SERVICES

27,243

- 7,891 infants had their hearing screened
- There are 393 Nova Scotians with cochlear implants in active care
- 1,126 adults with stroke received assessment and follow up
- 559 children with Autism received services

Your comments and suggestions are important to us. Please share them at hearmyvoice

In January, February and March, the average wait time for core services was just under four months.

Hearing and Speech Nova Scotia (HSNS) provides quality audiology services to all Nova Scotians and speech-language services to preschool children, home school children and adults. HSNS is accredited by Accreditation Canada and provides services from 35 clinic sites in 25 communities throughout Nova Scotia. Our audiologists and speech-language pathologists, licensed with the provincial regulatory college, typically receive over 28,000 referrals each year from families, health care providers, educators and other professionals. This year, client visits or episodes of care including diagnosis, treatment, counseling and caregiver training was provided using provincial standards of care. Most services are provided at no cost to Nova Scotian residents with a valid health card.
Collaborating with Clients on the Future of Care

Hearing and Speech Nova Scotia has long been committed to providing patient-centred care for clients.

The Partners in Care Advisory Committee made up of clients, staff and volunteers allow those involved to share their thoughts and opinions on developments at the centres. In 2018, they started consulting with HSNS staff and clients to develop best practices.

Anne Mason-Browne, the CEO of Hearing and Speech Nova Scotia says that developing an Advisory committee is a great way to ensure clients and staff have a say in the quality improvement plan for the organization. “The Partners in Care Advisory Committee is helping HSNS become as client-centred as possible.”

For the first time, clients participated in facility review and planning for the Halifax area. The research completed helped determine that client demographics, facility supports for best clinical practices, and accessibility were popular topics among those surveyed.

Anne says that the background research being completed is important work. “It’s good to look back and assess what has been done in the past, listen to the ideas of our clients and staff, and see what needs to be done in the future so we can move forward providing better care for families and communities.

From the information gathered, HSNS learned that many of its clients live outside of downtown Halifax. Travelling downtown can be a hassle when it comes to public transit and parking. The research also found that the organization has a growing clientele on the Halifax Mainland and in the Cole Harbour area that cannot easily access one of the existing centres.

Based on the data, recommendations have been put forward outlining how the organization could better serve the community by expanding its services, locating clinics near public transport hubs and ensuring easy and ample parking.

Moving forward, HSNS will continue to engage clients and staff around the physical design and service accessibility of new clinic locations.
HSNS Scholars Endowment to help students from underrepresented communities

Hearing and Speech Nova Scotia announced in February its donation of $100,000 to the Dalhousie School of Communication Sciences and Disorders for the new Hearing and Speech Scholars Endowment. The scholarship will help Nova Scotian students from under-represented populations enrolled in the Masters in Speech-Language Pathology and Audiology programs at Dalhousie University.

"Because our clients come from diverse communities, with a range of linguistic and cultural backgrounds, it’s important that we address this by hiring diverse professionals with lived cultural and linguistic experience to provide accessible and community-based services," says Anne Mason-Browne, CEO of HSNS.

HSNS hopes that Nova Scotia’s rich cultural diversity can be reflected in the audiology and speech-language pathology field with support from the endowment.

"Our hope is that the scholars endowment will help students from under-represented communities who are training to be Audiologists or Speech-Language Pathologists embark on those careers within their communities,” says Bert Lewis, chairman of the board at HSNS.

Ideally, students funded through the scholarship (with $2,250 per year over two years) will remain in Nova Scotia and use their lived cultural and linguistic experience to support community-based clinical services within their under-represented communities.

“I firmly believe in the concept of growing our own professionals to provide services within Eskasoni,” says Sharon Rudderham, director at Eskasoni Community Health Centre. “Scholarships that help support students from underrepresented communities who are studying to become Audiologists or Speech-Language Pathologists is an important step in that direction.”

The Hearing and Speech Scholars Endowment, which honours the personal donations received from clients and families through the years, shines a light on HSNS’s vision: Every Person Deserves a Voice. Every Voice Deserves to be Heard; the goal of this endowment is to support sustainable, accessible and culturally relevant audiology and speech-language pathology services province wide, to all Nova Scotians.

“Our school sees the definite need to attract more students from under-represented populations into the fields of speech-language pathology and audiology,” says Dr. Michael Kiefte, Director of Dalhousie School of Communication Sciences and Disorders. “The establishment of this scholarship is an important step in attracting and recruiting students that can both represent and serve all Nova Scotians.”

Dalhousie University looks forward to awarding the Hearing and Speech Scholars Endowment to its first recipient this September.
Quality Improvement projects help reduce wait times for HSNS clients

The saying "Good things come in threes" proved true this year as HSNS geared up to launch three Quality Improvement projects to help serve more Nova Scotians.

Hearing and Speech Nova Scotia (HSNS) had heard repeatedly from clients that wait times for Audiology services were too long. 'We had some data from our tracking spreadsheets to support that' says Erin Lamond, Chair of the Quality Improvement Working Group, the group leading the projects. 'The problem was, we weren’t sure how to interpret the data and we weren’t sure how to correct the problem'. Following a months-long course called Lean Six Sigma (a quality improvement methodology), three members of the Quality Improvement Working Group set out to launch the projects with team members from a variety of services and regions of Nova Scotia. 'The thing about Lean Six Sigma', says Erin 'is that you have to stop yourself from trying to solve the problem before you have studied what the data are telling you about the problem. ‘Trust the process’ was our mantra. This was really hard for all members of the project team. The team clearly just wanted to get on with it and there were a lot of really great ideas for ‘solving’ the problems. But we were still too early in the Lean Six Sigma process. Solutions? We hadn’t even decided what data we needed to collect, let alone have the right data to lead us to the best solutions', says Erin.

Rather than stick strictly to Lean Six Sigma, the team decided to adopt a more nimble “Plan-Do-Study-Act framework”. The team was able to continue using the data collection and analysis methods from Lean Six Sigma, and at the same time use the Plan-Do-Study-Act strategy to allow the team to ‘get on with it’. The team selected three priority projects, split into three small working groups, and set out to make improvements to wait times for audiology. The projects chosen were:

**The Otoacoustic Emissions (OAE) testing project** has trials at three HSNS sites.

Speech-language pathology best practice is to refer children under 36 months of age to Audiology for hearing screening. However, many of these children have normal hearing and putting them on the regular wait list for Audiology means longer wait times for everyone. The goal of this project is to reduce the number of clients on the wait list by screening the hearing of children under 36 months during their speech-language pathology appointments (where the wait time is usually shorter). Only the children who fail this screening will be added to the audiology wait list. Speech-Language Pathologists and Audiologists have been working together to learn how to use the new screening devices and to develop new templates for the Electronic Medical Record.
“The response from SLPs and families involved in the OAE Screening project has been very positive and the input was directly incorporated in subsequent updates to the procedures” says Angela Ryan, Audiologist Quality Team Lead at HSNS. Although completion of the project was delayed due to the impact of COVID-19, the Standards of Care will be updated based on the final results of all three trials in the Project.

The Administrative Documentation Efficiencies Project examines the time used by audiologists for administrative tasks and identifies efficient strategies for completing necessary non-clinical tasks. “The goal of this project is to increase the amount of time available to audiologists for direct client care by decreasing the amount of time audiologists spend on administrative tasks and indirect clinical activities, therefore decreasing the queue for clinical services,” says Kirsten Hovey, Quality Assistant at HSNS.

The Administrative Efficiencies Project is focusing on three strategies to reach this goal. The first revises the way scheduling is recorded in the Electronic Medical Record to reflect the amount of time needed for the client session, reporting, and documentation. The second strategy reduces the number of no shows and cancellations through automated appointment reminders, streamlining appointment bookings, and filling cancelled appointments. The third strategy identifies and reassigns administrative tasks.

Although progress of the project was delayed due to COVID-19, the work will continue when in-clinic appointments resume in the summer.

The Communication Disorders Technicians (CDT) Project, which focuses on better ways of providing hearing tests for adult clients, was scheduled to be launched in April. Although delayed due to the pandemic, the project made significant strides this year.

Repeat hearing tests, usually at the request of an Ear Nose Throat doctor (ENT) are considered best practice but limit the number of new clients that can be seen by the Audiologist. The goal of this project is to train CDTs to conduct the hearing tests for repeat clients so that audiologists can focus on new clients.

Strategies for this project included training CDTs to conduct tests previously performed by audiologists, developing a reader-friendly report from the Audiologist that the client receives by mail, and providing information clients at the time of booking appointments to help them understand what to expect from their repeat hearing appointment.

Although all three Quality Improvement projects are either put on hold or delayed due to the pandemic, HSNS is set to continue this important work once it’s safe to do so. ‘Be patient and keep rolling’, says Erin. ‘We are hopeful that next year we will have an update to this story and that the update with be a further demonstration of this team’s commitment to reducing wait times for Audiology services at Hearing and Speech Nova Scotia’.
Healthy Beginnings made possible with HSNS and Public Health Services partnership

When Beth Roberts, Speech-Language Pathologist at HSNS in Middleton noticed that many families involved in the Healthy Beginnings Enhanced Home Visiting Program were faced with barriers to accessing services, she decided to investigate the cause.

Healthy Beginnings, a program offered through Public Health Services provides support for families facing challenges, including hearing and speech challenges, through a comprehensive home visiting program. Barriers for families can include fear of judgement, difficulty attending sessions, and challenges following through with treatment recommendations. Beth came to realize that working alongside Angie Hunter, a home visitor with Healthy Beginnings, could help minimize barriers.

"Angie is sometimes involved with these families from the birth of their child and creates a supportive relationship with them," says Beth. "We knew she’d be able to explain our services in an approachable way, helping families get their foot in the door."

A partnership between HSNS and Public Health Services now formed, Angie and Beth made a plan to reduce barriers to accessing services, empower families to engage in treatment, and educate home visitors to assist families with a family-centred, strengths-based approach.

As part of the new engagement process, Angie helps make appointments around bus schedules, sends text reminders, attends initial speech and language appointments, and more.

Receiving feedback that some families struggled to apply what they’ve learned in a clinic setting at home, the partners turned to a ‘train the trainer’ approach to treatment. The two organizations reviewed ways that activities in the Healthy Beginnings curriculum could align with what families were learning in speech therapy.

“This partnership helped me learn the skills and techniques that Beth was teaching to families, allowing me to anchor the learning for families during home visits,” says Angie. “I encourage families to complete their homework between sessions while strengthening their confidence.”

Having made a great start in program implementation, Beth, Angie and Susan Doucette, Clinical Manager of Speech Language Pathology at HSNS looked for additional insights from Speech Language Pathologists in areas like Yarmouth, Bridgewater, and Digby.
97% of all newborn babies received hearing screening in 2019.

Nova Scotia is one of six provinces/territories that meets all five requirements for an Early Hearing Detection and Intervention Program, monitored by the Canadian Infant Hearing Task Force. These components include:

1. Universal hearing screening of newborns
2. Identification of babies with permanent hearing loss
3. Intervention services which include support for technology and communication development
4. Family Support
5. Monitoring and evaluation of the program

“This partnership helped connect professionals from across the province who would have otherwise never had the chance to come together to share their ideas,” says Susan Doucette. “This allowed us to broaden our ideas, and we’re now even considering potentially expanding this beyond the local level.”

Angie, who says the partnership has created an understanding of roles between each team, says it’s also bridged a gap between two very important services. “We’re able to address the barriers, find unity in our messaging using a family-centered approach, and encourage families to feel confident in accessing services.”

Looking forward to the future, HSNS and Public Health Services are considering other ways to support families through expanding education opportunities for home visitors, joint training for professionals and joint programs for families.

“Moving forward, we want to make sure that we’re reaching everyone who needs our services by minimizing barriers,” says Beth. “This partnership has such potential because when everyone works together towards a common goal, everyone succeeds.”
Client / Patient Family Experience Survey 2019

It’s important for all of us at HSNS to understand what patients think about our services and the quality of care they received. Asking for and then acting on this feedback helps us improve. Each year we can then measure how well we’re doing based on these results and identify areas for development.

Over a four-week period in October / November, we received a total of 1,285 survey responses, up 47% from the previous year. This represents a total of 4.7% of all patients seen annually at HSNS.

Here are some of the highlights from the survey:

**HSNS did a better job helping clients and families understand the results of their assessments.**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
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<tbody>
<tr>
<td>95.5%</td>
<td>said they understood the results of their assessment/screening</td>
</tr>
<tr>
<td>99.4%</td>
<td>said they were involved in decisions about their care</td>
</tr>
<tr>
<td>98.2%</td>
<td>said they were provided with the information they needed to make decisions about my care</td>
</tr>
<tr>
<td>97.6%</td>
<td>said that staff counseled them during their care</td>
</tr>
<tr>
<td>97.7%</td>
<td>said staff listen and answer questions</td>
</tr>
</tbody>
</table>

**HSNS staff overwhelmingly treated their clients with respect and considered individual client/family needs during assessment and treatment.**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>said they were treated with respect by staff</td>
</tr>
<tr>
<td>99.7%</td>
<td>said staff considered their individual needs, preferences and values</td>
</tr>
<tr>
<td>99.1%</td>
<td>understand that they can refuse treatment that is offered</td>
</tr>
<tr>
<td>88.1%</td>
<td>understand how to make a complaint or compliment</td>
</tr>
<tr>
<td>99.6%</td>
<td>said staff acted on their complaints or concerns</td>
</tr>
</tbody>
</table>

Clients and families also let us know where we need to improve. Of the almost 1,080 written submissions we received, 95% were positive comments about staff, access to services and being able to participate in their care. Of the 5% who identified areas for improvement, the following were key suggestions:

- Shorten wait times for appointments
- Provide better transitions between people and services
- Make locations easier to access

Share your experience with us anytime by visiting our website at HearMyVoice or complete a full experience survey.
VÉRONIQUE TROTTIER: parler pour les familles

Véronique Trottier was introduced to Hearing and Speech Nova Scotia when her twin boys were in pre-school. Because neither was very vocal, she sought the help of the organization’s Speech Language Pathologists (SLP). While it’s not unusual to wait for an appointment, Véronique’s situation was complicated by the fact that her sons required a bilingual SLP, and there was only one in the Halifax region.

Despite the extra wait time, she says the experience was great. “Once we were seen, our SLP, Lisa Spinney Hutton was able to get the boys engaged and she helped us integrate strategies at home,” says Véronique. “It was very interactive and it gave us that much more experience as parents to help the boys.”

While her boys are no longer clients of HSNS, Véronique stayed with us. She is a member of HSNS’s Partners in Care Advisory Committee – a mix of clients, families and staff – that provides input into HSNS programs and policies.

Véronique saw this not only as a way to give back for the help she and her family received, but to be a voice for bilingual families in Nova Scotia. “I am grateful for what we’ve received, so anything I can do to provide feedback to help make their services better and inevitably help someone else down the road is worth it,” she says.

So far Véronique has helped HSNS review written materials to be more client and family friendly and has offered her experience as a parent on the committee.

“I’m really impressed with the way Partners in Care is modelled within the organization; it’s something more companies should do,” she says. “Bringing in the patient’s outlook along with input from staff is a great way to improve the system.”

Ultimately, she would like to help HSNS improve French language services to Nova Scotians – something HSNS also looks forward to doing.
PERRY JACKSON: Paying it Forward

After 20 years serving as a member of the board of HSNS, Perry Jackson is retiring, but don’t expect him to stop advocating for the organization. Since 2000, Perry has been a highly valued and dedicated member of the board, making a tremendous impact on the organization and the entire team at HSNS.

Perry first became involved with Hearing and Speech Nova Scotia Hearing and Speech Centre after his son Steven had a massive stroke in 1991 and recovered with the help from the organization. That experience is the reason why he wanted to pay it forward and become a part of the board.

“It has been a learning experience for me as well as providing me with an opportunity to “give back” and express in a small way my appreciation for the help our family has enjoyed,” says Perry. “Being a board member alongside such a great group of dedicated members has been a most rewarding experience for me personally, especially having the privilege of serving as the board chair for the majority of my time.”

Over the years Perry has become well-known for his kind heart and his passion to provide the same support he received after his son’s stroke. Perry and his wife Dianne would often refer to HSNS staff as angels from heaven because they provided much-needed assistance and guidance when families need it the most.

HSNS board chair, Bert Lewis says Perry will be missed by the board and the entire organization. “Perry has long been a proud member of the board, and in turn, we have been just as proud to work with him,” says Bert.

“We truly cannot thank him enough for all of the work and countless hours of volunteer time he has graciously given to the organization and the support he so freely expresses to staff.”

Although his time with the board has come to an end, Perry says he will continue to support and follow the organization.

“I am leaving knowing the HSNS board is in excellent hands with so many dedicated individuals. It has been such a pleasure for me personally to have had the opportunity to give back in a small way through serving as a board member,” says Perry. “I am and will continue to be so proud of the service provided by HSNS.”

Over the last 20 years, Perry has served as Chair, Past Chair, and a member of the numerous committees including the board executive, Policy & Governance, Finance and Investment, Strategic Planning, and the Board Accreditation Committee.
Board of Directors
Thank you to our 2019-20 Board of Directors
March 31, 2020

Mr. J. Scott Barnett
(Secretary-Treasurer)
Dartmouth

Mr. Frank Barteaux
(Co-Chair)
Middle Sackville

Mrs. Odille Campbell
D’Escousse

Mrs. Mallory Fowler
Central North River

Mr. Perry Jackson
(Past Chair)
Kentville

Michael Kiefte, PhD
Halifax

Mr. Bert Lewis
(Co-Chair)
Mulgrave

Mrs. Margaret Ann MacCuspic
Grand River

Mrs. Lorna MacMillan
Halifax

Ms. Tammy Manning
Halifax

Ms. Anne Mason-Browne
(CEO, HSNS)
Halifax

Mr. Gordon Moore
Halifax

Ms. Paula Sibley-Fox
(Vice-Chair)
Fall River

Mrs. Helen Smith
Mount Uniacke

Mr. John R. Sylliboy
Halifax

We are a volunteer board of directors and are always looking for new members. If you are interested, please contact Bert Lewis at info@nshsc.nshealth.ca or visit our website at www.nshsc.nshealth.ca.
Hearing and Speech Nova Scotia sites

(A) = Audiology Services
(S) = Speech-Language Pathology Services

AMHERST (A & S)
18 South Albion Street
(902) 667-1141

ANTIGONISH (A & S)
St. Martha’s Regional Hospital
(902) 867-4500 ext 4197

BRIDGEWATER
Site 1 (A & S)
South Shore Regional Hospital
(902) 543-4604 ext 2248

Site 2 (S)
42 Glen Allan Drive, Suite 208
(902) 541-3134

DARTMOUTH
Site 1 (A & S)
45 Alderney Drive, Suite 606
(902) 464-3084

Site 2 (A & S)
South End Rehabilitation Centre
(902) 464-3084

Site 2 (S)
Dartmouth General Hospital
(902) 460-4542

DIGBY (S)
Digby General Hospital
(902) 245-2502 ext 3360

ESKASONI (A & S)
4555 Shore Road
Audio: (902) 919-2300
SLP: (902) 217-3415

EVANSTON (S)
 Strait Richmond Hospital
(902) 625-7238

HALIFAX
Halifax Community Clinic
(A & S)
(902) 492-8201

Halifax-EIBI (S)
7071 Bayers Rd, Suite 160
(902) 473-2329

IWK Health Ctr (A & S)
(902) 470-8049

IWK Health Ctr (A)
Newborn Hearing Screening
(902) 470-7146

QEII Health Sciences Ctr (A & S)
Dickson Building
(902) 473-4349

QEII Health Sciences Ctr (S)
Halifax Infirmary
(902) 473-1835

QEII Health Sciences Ctr (S)
NS Rehabilitation Centre
(902) 473-1232

KENTVILLE (A & S)
Site 1: 10 Webster Street
(902) 679-3100
Site 2: Valley Regional Hospital
(Inpatients only)

LIVERPOOL (S)
Queens General Hospital
(902) 354-3437 ext 1246

LOWER SACKVILLE (A & S)
Cobequid Community Health Centre
(902) 869-6150

LUNENBURG (S)
Fishermen’s Memorial Hospital
(902) 634-8807 ext 1713242

MIDDLETON (S)
Soldiers Memorial Hospital
(902) 825-6160 ext 1762233

MUSQUOODOIT HARBOUR (S)
Twin Oaks/Birches
Continuing Care Centre
(902) 889-4117

NEW GLASGOW (A & S)
Site 1: 112 Provost Street
(902) 755-8858

Site 2: Aberdeen Professional Centre
(Inpatients only)

PICTOU (S)
Sutherland Harris Memorial Ctr
(Inpatients only)

SHEER HARBOR (S)
Eastern Shore Memorial Hospital
(902) 240-5276

SHELBURNE (S)
Roseway Hospital
(902) 875-3011 ext 2269

SYDNEY (A & S)
Site 1: Health Park
45 Weatherbee Road, Ste 106
(902) 564-7577

Site 2: Cape Breton Regional Hospital
(Inpatients only)

SYDNEY MINES (A & S)
Harbour View Hospital
(902) 736-4403

TRURO (A & S)
Colchester East Hants Health Centre
(902) 893-5512

WATERVILLE (S)
Kings Regional Rehabilitation Centre
(902) 538-3103 ext 162

WINDSOR (S)
Hants Community Hospital
(902) 792-2084

YARMOUTH (A & S)
Yarmouth Regional Hospital
(902) 742-3542 ext 1364

PROVINCIAL
ADMINISTRATIVE OFFICE
5657 Spring Garden Road
Suite 401, Box 120
Halifax NS B3J 3R4
(902) 492-8289
## Statement of Financial Position

March 31, 2020

<table>
<thead>
<tr>
<th></th>
<th>Operating Fund</th>
<th>Investment Fund</th>
<th>Foundation Fund</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CURRENT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$ 612,490</td>
<td>$ 57,899</td>
<td>$ -</td>
<td>$ 670,389</td>
<td>$ 791,632</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>1,342,239</td>
<td>269</td>
<td>700</td>
<td>1,343,208</td>
<td>1,669,043</td>
</tr>
<tr>
<td>Interfund receivables</td>
<td>38,948</td>
<td>-</td>
<td>4,070</td>
<td>43,018</td>
<td>34,324</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>36,756</td>
<td>-</td>
<td>-</td>
<td>36,756</td>
<td>47,921</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2,030,433</td>
<td>58,168</td>
<td>4,770</td>
<td>2,093,371</td>
<td>2,542,920</td>
</tr>
<tr>
<td><strong>CAPITAL ASSETS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Note 4)</td>
<td>437,241</td>
<td>-</td>
<td>-</td>
<td>437,241</td>
<td>236,511</td>
</tr>
<tr>
<td><strong>MARKETABLE SECURITIES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(Note 5)</td>
<td>-</td>
<td>484,819</td>
<td>390,868</td>
<td>875,677</td>
<td>1,053,417</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$ 2,467,674</td>
<td>$ 542,987</td>
<td>$ 395,628</td>
<td>$ 3,406,289</td>
<td>$ 3,832,848</td>
</tr>
<tr>
<td><strong>LIABILITIES AND NET ASSETS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>CURRENT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and</td>
<td>$ 1,020,420</td>
<td>$ -</td>
<td>$ -</td>
<td>$ 1,020,420</td>
<td>$ 1,014,376</td>
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<tr>
<td>accrued liabilities</td>
<td>15,256</td>
<td>27,762</td>
<td>-</td>
<td>43,018</td>
<td>34,324</td>
</tr>
<tr>
<td>Interfund payables</td>
<td>1,035,676</td>
<td>27,762</td>
<td>-</td>
<td>1,063,438</td>
<td>1,048,700</td>
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<tr>
<td><strong>DEFERRED CONTRIBUTIONS</strong></td>
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<td></td>
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<tr>
<td><strong>- CAPITAL ASSETS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Note 7)</td>
<td>124,420</td>
<td>-</td>
<td>-</td>
<td>124,420</td>
<td>165,894</td>
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<tr>
<td><strong>SPECIAL PURPOSE FUNDS</strong></td>
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<tr>
<td>(Note 7)</td>
<td>117,968</td>
<td>-</td>
<td>-</td>
<td>117,968</td>
<td>400,582</td>
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<tr>
<td><strong>Total</strong></td>
<td>1,278,064</td>
<td>27,762</td>
<td>-</td>
<td>1,305,826</td>
<td>1,615,176</td>
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<tr>
<td><strong>FUND BALANCES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$ 2,467,674</td>
<td>$ 542,987</td>
<td>$ 395,628</td>
<td>$ 3,406,289</td>
<td>$ 3,832,848</td>
</tr>
<tr>
<td><strong>LEASE COMMITMENTS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Note 11)</td>
<td></td>
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</tr>
<tr>
<td><strong>ON BEHALF OF THE BOARD</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Statement of Revenues and Expenditures

### Year Ended March 31, 2020

<table>
<thead>
<tr>
<th>Fund</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating</td>
<td>16,651,986</td>
<td>15,151,407</td>
</tr>
<tr>
<td>Investment</td>
<td>(35,358)</td>
<td>47,755</td>
</tr>
<tr>
<td>Foundation</td>
<td>(16,676)</td>
<td>47,755</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16,599,952</strong></td>
<td><strong>15,151,407</strong></td>
</tr>
</tbody>
</table>

### REVENUE

- **Department of Health (Note 8)**: $14,739,737
- **Department of Health – EIBI (Note 8)**: $1,523,171
- **Contract Revenue**: 7,805
- **Out of Province**: 286,526
- **Miscellaneous Income**: 54,895
- **Investment Income (loss) (Note 9)**: $(35,358)
- **Recoveries**: 39,852

### EXPENSES

- **Administrative (Note 10)**: 1,090,311
- **Autism program (Note 10)**: 1,555,938
- **Core hearing and speech services (Note 10)**: 9,291,617
- **Donations**: 102,125
- **EIBI (Note 10)**: 1,520,268
- **Investment fees**: 6,529
- **Operational (Note 10)**: 1,550,727
- **Scholarships**: 1,032

### EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES FROM OPERATIONS

<table>
<thead>
<tr>
<th>Fund</th>
<th>1,643,125</th>
<th>(42,919)</th>
<th>(124,661)</th>
<th><strong>1,475,545</strong></th>
<th>383,326</th>
</tr>
</thead>
</table>

### OTHER EXPENSES

- **Amortization of capital assets**: 144,208
- **Lump-sum retirement allowance**: 1,448,546

### EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES

<table>
<thead>
<tr>
<th>Fund</th>
<th>50,371</th>
<th>(42,919)</th>
<th>(124,661)</th>
<th><strong>(117,209)</strong></th>
<th>80,125</th>
</tr>
</thead>
</table>

Full 2019-20 **audited Financial Statements** can be viewed on our website.