

Chapter 6, Saskatchewan Health Authority - Delivering Opioid Addiction Treatment Services, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>New Recommendation:</p> <p>1. We recommend the Saskatchewan Health Authority provide clear and easily accessible information to the public about opioid addiction treatment services available in the province.</p>	78	Partially Implemented	<p>Enhanced SHA public webpages to improve clarity and access to information on opioid addiction treatment services.</p> <p>Initiated interim and future state web solutions, including Virtual Access to Addictions Medicine (VAAM), to strengthen public access and navigation.</p> <p>Launched Virtual Access to Addictions Medicine public-facing webpage and aligned content across SHA and Ministry of Health platforms.</p>	<p>Implement a permanent, centralized web solution to further enhance public access to opioid addiction treatment service information.</p> <p>Expand distribution of standardized materials through community partners and health care settings.</p> <p>Incorporate broader public awareness activities into future planning to continue improving visibility and access to services.</p>	March 31, 2027
<p>New Recommendation:</p> <p>2. We recommend the Saskatchewan Health Authority analyze provincial supply and demand for its opioid addiction treatment services.</p>	80	Partially Implemented	<p>Completed a provincial current state mapping of Opioid Agonist Therapy (OAT) services to assess supply, demand, and geographic distribution.</p> <p>Conducted needs and readiness assessment of communities to determine suitable sites for onboarding to VAAM program.</p> <p>Onboarded 20 communities and surrounding areas where there is high need for OAT services.</p>	<p>Conduct further analysis, including surveys and scans, to identify factors contributing to wait times and unmet demand.</p> <p>Use ongoing analysis to inform phased expansion into underserved areas and guide future funding and service planning.</p> <p>Develop pathways to ensure continuity of care upon release from provincial and federal corrections facilities.</p>	March 31, 2027

LEGISLATIVE ASSEMBLY
MAY 29 2026
PROCEDURAL SERVICES

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<p>New Recommendation:</p> <p>3. We recommend the Saskatchewan Health Authority implement standardized approaches (e.g., work standards, IT system) for its opioid addiction treatment services across the province.</p>	83	Partially Implemented	<p>Engaged the provincial OAT project team and SHA Clinical Standards to begin assessing and developing provincial work standards for opioid addiction treatment services.</p> <p>Initiated development of standardized training and orientation materials, starting with the VAAM program for broader implementation across OAT services to support consistent service delivery.</p> <p>Began collaboration with SHA Digital Health, eHealth, and the Ministry of Health to explore options for standardized and coordinated data and IT approaches.</p>	<p>Develop and implement provincial work standards aligned with College of Physicians and Surgeons of Saskatchewan guidance.</p> <p>Advance the establishment of a Community of Practice to support consistent application of standards and shared learning across the province.</p> <p>Advance standardized data and IT processes to improve consistency, reporting, and decision-making.</p> <p>Implement provincial oversight mechanisms to support consistent service delivery and resource alignment.</p>	March 31, 2028

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<p>New Recommendation:</p> <p>4. We recommend the Saskatchewan Health Authority consistently assess opioid withdrawal symptoms before prescribing Opioid Agonist Therapy (OAT) medication to clients receiving outpatient opioid addiction treatment services.</p>	85	Partially implemented	<p>Initiated a provincial scan to understand current opioid withdrawal assessment tools and practices used across OAT clinics. Identified a standardized opioid withdrawal assessment tool for use within the VAAM program.</p> <p>Engaged the OAT Prescriber Advisory Committee to review best practices and provide clinical guidance on standardized assessment use.</p> <p>Integrated standardized withdrawal assessment tools into provincial training and orientation materials for VAAM.</p>	<p>Develop and implement a provincial clinical procedure for opioid withdrawal assessment prior to prescribing OAT medication.</p> <p>Integrate standardized withdrawal assessment tools into provincial training and orientation materials for OAT.</p> <p>Implement routine monitoring to confirm consistent completion and documentation of assessments.</p> <p>Establish follow-up and corrective processes where assessments are not completed.</p>	March 31, 2027
<p>New Recommendation:</p> <p>5. We recommend the Saskatchewan Health Authority provide timely outpatient opioid addiction treatment services (initial and follow-up) to clients with opioid use disorder.</p>	86	Partially Implemented	<p>Established a maximum three-day wait-time target for initial outpatient appointments and communicated this to operational teams.</p> <p>Identified key performance indicators for VAAM, including wait times, and initiated monitoring to address gaps and support timely access.</p> <p>Conducted a scan of current client engagement practices to inform strategies for maintaining engagement during wait periods.</p>	<p>Continue optimizing prescriber hours and expand virtual OAT programs to improve access, particularly in high-demand and remote areas.</p> <p>Implement regular reporting on wait times and service access to ensure accountability and prompt corrective action.</p> <p>Develop and implement strategies to keep clients engaged while waiting for</p>	March 31, 2028

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				treatment, including interim counselling and peer support.	
<p>New Recommendation:</p> <p>6. We recommend the Saskatchewan Health Authority consistently complete discharge/transfer plans for clients receiving inpatient opioid addiction treatment services.</p>	88	Implemented	<p>Established standardized discharge/transfer protocols for inpatient addiction treatment programs, per Saskatchewan Alcohol and Drug Services Program guidelines.</p> <p>Established a work standard for file audits to ensure consistent completion and documentation of discharge plan.</p> <p>Updated staff orientation and training to incorporate the new discharge planning work standards.</p>	N/A - Implemented	N/A - Implemented
<p>New Recommendation:</p> <p>7. We recommend the Saskatchewan Health Authority offer Opioid Agonist Therapy (OAT) medications to clients with opioid use disorder while receiving social detox services.</p>	89	Partially Implemented	<p>VAAM services expanded and made immediately available to all detox and treatment centers as of December 2025.</p> <p>Implemented VAAM staff training to reinforce proper client engagement.</p>	<p>Continue supporting VAAM expansion to include all detox and recovery centers across the province.</p> <p>Reinforce proper OAT delivery and client engagement.</p> <p>Use ongoing monitoring to evaluate impact and improve service delivery where needed.</p>	March 31, 2028

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<p>New Recommendation:</p> <p>8. We recommend the Saskatchewan Health Authority consistently track, analyze, and report key performance information related to delivering opioid addiction treatment services in the province.</p>	89	Partially Implemented	<p>Identified key performance indicators (KPIs) for VAAM to evaluate program effectiveness and inform future expansion.</p> <p>Engaged SHA Digital Health and Data Analytics in data collection from electronic medical records across VAAM and brick-and-mortar clinics.</p> <p>Initiated review and standardization of wait-time reporting practices to ensure accuracy and consistency.</p> <p>Began exploring client satisfaction surveys to assess service quality and outcomes.</p>	<p>Key Performance indicators (KPIs) for OAT services to pilot in brick-and-mortar site.</p> <p>Implement standardized data collection and analysis across all opioid addiction treatment facilities to monitor trends, identify gaps, and guide service improvements.</p> <p>Continue enhancing wait-time reporting and consider public reporting of selected KPIs to improve transparency and accountability.</p> <p>Launch regular client satisfaction surveys to measure treatment impact and inform service delivery improvements.</p>	March 31, 2028

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Chapter 12, Saskatchewan Health Authority—Maintaining Healthcare Facilities in Saskatoon and Surrounding Areas, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority establish measurable service objectives for its key healthcare facilities and critical components located in the City of Saskatoon and surrounding areas.</p> <p>Status—Implemented</p>	145	Implemented	<p>The SHA completed Facility Condition Index assessments (FCI) for healthcare facilities in Saskatoon and surrounding areas and established measurable service objectives for facility condition monitoring.</p> <p>Facility condition information is being used to support maintenance and capital planning decisions.</p> <p>Annual assessments will continue to support ongoing monitoring and planning.</p>	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority control the accuracy and reliability of maintenance data in its IT system for key healthcare facilities and components located in the City of Saskatoon and surrounding areas.</p> <p>Status—Implemented</p>	146	Implemented	<p>Computerized Maintenance Management System (CMMS) implemented in October 2023. Role-based access controls restrict data changes.</p> <p>Audit logs track all changes. Work order tracking supports data completeness and monitoring.</p> <p>Standardized maintenance processes implemented.</p>	N/A - Implemented	N/A - Implemented

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Chapter 12, Saskatchewan Health Authority—Maintaining Healthcare Facilities in Saskatoon and Surrounding Areas, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority consistently set the nature, extent, and frequency of preventative maintenance activities for similar categories of key healthcare facilities and components located in the City of Saskatoon and surrounding areas.</p> <p>Status— Intent of Recommendation Met.</p>	147	Implemented	<p>Building Operations Maintenance Programs established define preventive maintenance scope, frequency, procedures, and standards.</p> <p>Standardized maintenance work orders align with manufacturer and safety requirements.</p>	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority complete preventative maintenance on its key healthcare facilities and components located in the City of Saskatoon and surrounding areas within expected timeframes.</p> <p>Status—Partially Implemented</p>	147	Partially Implemented	<p>The SHA has developed work standards, supported by a Building Operations Maintenance Program, and implemented a computerized system to guide and manage preventative maintenance activities for key healthcare facilities and components in Saskatoon and surrounding areas, with an emphasis on completing maintenance within established and expected timeframes.</p>	<p>The SHA continues to advance and refine its maintenance programs and work standards to strengthen consistency and better ensure preventative maintenance activities are completed within expected timeframes.</p>	December 31, 2026

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Chapter 12, Saskatchewan Health Authority—Maintaining Healthcare Facilities in Saskatoon and Surrounding Areas, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority have written guidance for classifying and prioritizing requests for demand maintenance on key healthcare facilities and components located in the City of Saskatoon and surrounding areas.</p> <p>Status—Partially Implemented</p>	149	Implemented	<p>A work standard has been developed and implemented.</p> <p>Training in the prioritization process has been provided to the maintenance staff.</p>	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority complete demand maintenance in line with priority rankings for key healthcare facilities and components located in the City of Saskatoon and surrounding areas.</p> <p>Status—Partially Implemented</p>	149	Partially Implemented	<p>The SHA has implemented its Computerized Maintenance Management System to monitor and manage demand maintenance activities, including centralized routing, prioritization of work and oversight of performance against established priority levels and service expectations.</p>	<p>The SHA is strengthening its oversight framework through the development and testing of performance reporting within the Computerized Maintenance Management System, including key performance indicators and an escalation process, to improve follow-up on delays and variances.</p>	September 30, 2026

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Chapter 12, Saskatchewan Health Authority—Maintaining Healthcare Facilities in Saskatoon and Surrounding Areas, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority use its planned maintenance activities as an input to setting its Saskatoon-area maintenance budget.</p> <p>Status—Partially Implemented</p>	151	Partially Implemented	<p>The SHA established a risk-based maintenance planning approach focused on key facilities and assets in Saskatoon and surrounding areas to prioritize needs and support budget planning.</p> <p>A CMMS has been implemented to capture asset condition, lifecycle, and maintenance data to improve the quality of planning and decision making.</p>	<p>The SHA is advancing the use of CMMS to support forecasting of planned maintenance activities and related costs as part of the budgeting process.</p> <p>Ongoing work includes improving data quality, standardizing asset information, and building reporting capabilities to enable full integration of maintenance planning into budget development.</p>	March 31, 2027
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority consistently document the priority of capital maintenance projects undertaken in the City of Saskatoon and surrounding areas.</p> <p>Status—Implemented</p>	152	Implemented	<p>Formal capital planning process implemented with defined prioritization criteria. Multi-year capital plans developed. Projects selected based on risk, condition, and deferred maintenance.</p>	N/A - Implemented	N/A - Implemented

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Chapter 13, Saskatchewan Health Authority – Purchasing Goods and Services, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority follow its procurement policy (e.g., document rationale) when using single or sole source purchasing methods.</p> <p>Status—Implemented</p>	156	Implemented	Contract Award Summary Form implemented to document procurement decisions, including rationale for single source and exception-based procurement.	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority follow its single and sole source requirements when using credit cards to purchase goods and services over \$5,000.</p> <p>Status—Implemented.</p>	156	Implemented	Credit card requirements are reinforced for transactions of over \$5,000. Mandatory training for cardholders and approvers implemented. Monthly monitoring of credit card transactions, including review of high-value purchases and documentation.	N/A - Implemented.	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority authorize the initiation of purchases consistent with its written delegation of signing authority.</p> <p>Status—Implemented</p>	158	Implemented	Policy reinforced through communication, training, orientation, and onboarding. Procurement and Finance confirm alignment with delegated authority.	N/A - Implemented	N/A - Implemented

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Chapter 13, Saskatchewan Health Authority – Purchasing Goods and Services, 2025 Report– Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority authorize contracts for goods and services in accordance with its delegation of authority.</p> <p>Status—Implemented</p>	158	Implemented	Contract approval controls are embedded in procurement process. Procurement leadership reviews authorization compliance. Training and onboarding reinforce requirements.	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority obtain conflict of interest declarations from tender subcommittee members, as required by its conflict of interest policy.</p> <p>Status—Implemented</p>	159	Implemented	Updated procurement process requires conflict of interest declarations for all evaluation members. Procurement Checklist confirms completion and retention.	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority consistently evaluate potential suppliers when tendering for the purchase of goods and services.</p> <p>Status—Implemented</p>	159	Implemented	Standardized evaluation criteria introduced for procurement processes. Procurement review confirms evaluation completion prior to award.	N/A - Implemented	N/A - Implemented

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Chapter 13, Saskatchewan Health Authority – Purchasing Goods and Services 2025 Report– Volume 1					
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<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority consistently communicate supplier award decisions for public tenders as required by its procurement policy.</p> <p>Status—Implemented</p>	160	Implemented	Award notifications completed as per procurement policy. Procurement Checklist ensures compliance. Quarterly monitoring confirms notifications are issued.	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority establish a formal process to assess and track supplier performance.</p> <p>Status—Not Implemented</p>	161	Implemented	Implemented formal vendor performance complaint process with impact rating and tracker, Performance survey at end of contracts, and AIMS Dashboard Reporting.	N/A - Implemented	N/A - Implemented

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Chapter 14, Saskatchewan Health Authority – Safe and Timely Discharge of Patients from Regina Hospitals, 2025 Report - Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority require healthcare professionals involved in patient care prepare a comprehensive, multidisciplinary patient care plan.</p> <p>Status – Intent of Recommendation Met</p>	164	Intent of Recommendation Met	<p>SHA implemented the Collaborative Inpatient Care (CIC) model within Regina hospitals to support coordinated multidisciplinary care planning and patient discharge processes.</p> <p>The model includes multidisciplinary bedside rounds, team-based communication, and coordinated discharge planning processes involving patients and families.</p>	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority require staff to follow the policy when completing medication reconciliations prior to discharging patients.</p> <p>Status – Implemented</p>	165	Implemented	<p>SHA implemented monitoring and reporting processes to assess compliance with medication reconciliation requirements for acute care patients at admission and discharge.</p> <p>Pharmacy Services conducts regular audits of patient files in Regina hospitals, with results reviewed through established oversight committees and reported quarterly to the SHA Board of Directors.</p>	N/A - Implemented	N/A - Implemented

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Chapter 15, Saskatchewan Health Authority – Treating Patients at Risk of Suicide in Northwest Saskatchewan, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority work with others (e.g., Ministry of Health) to analyze key data about rates and prevalence of suicide attempts to rationalize services made available to patients at risk of suicide.</p> <p>Status—Implemented</p>	165	Implemented	<p>The Suicide-related data was analyzed using multiple sources. High-risk communities and populations were identified. Mental health resources reallocated to higher-need areas. New community-based mental health roles deployed.</p>	N/A- Implemented	N/A- Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority give suitable training to staff located in northwest Saskatchewan caring for patients at risk of suicide.</p> <p>Status— Implemented</p>	170	Implemented	<p>Mandatory training was provided to staff which also aligned with their roles and service setting.</p> <p>Training tracking system was implemented with manager oversight for completion and compliance.</p>	N/A- Implemented	N/A- Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority follow its established protocols to provide psychiatric consultations to patients accessing emergency departments in northwest Saskatchewan who are at high risk of suicide.</p> <p>Status— Implemented</p>	170	Implemented	<p>Work standards implemented for suicide risk screening and psychiatric consultation.</p> <p>Centralized referral pathways established. On-call psychiatry access provided through various methods.</p> <p>Standardized suicide risk assessment used by trained clinicians.</p>	N/A- Implemented	N/A- Implemented

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Chapter 15, Saskatchewan Health Authority – Treating Patients at Risk of Suicide in Northwest Saskatchewan, 2025 Report – Volume 1					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority address barriers to using videoconferencing to provide psychiatric services to communities in northwest Saskatchewan.</p> <p>Status— Implemented</p>	171	Implemented	Telehealth services reviewed and standardized across northern communities. Work standards implemented for videoconferencing. Orientation tools and no-show tracking tools introduced. Staff trained on telehealth facilitation. Missed appointment monitoring implemented.	N/A- Implemented	N/A- Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority analyze reasons patients at risk of suicide miss appointments for mental health outpatient services to help address barriers.</p> <p>Status—Implemented</p>	171	Implemented	Standardized no-show tracking process implemented across Northwest Saskatchewan. Follow-up required for all missed appointments. Corrective actions introduced including appointment reminders and transportation supports.	N/A- Implemented	N/A- Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority follow up with patients (who attempted suicide) discharged from emergency departments in northwest Saskatchewan to encourage treatment, where needed.</p> <p>Status—Implemented</p>	173	Implemented	Standardized follow-up processes implemented across all Northwest service centers. Work standards define discharge, referral, and follow-up requirements. Mental health intake staff conduct follow-up, confirm referrals, and arrange services. Follow-up is aligned with clinical risk levels.	N/A- Implemented	N/A- Implemented

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Chapter 06, Saskatchewan Health Authority, 2025 Report – Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority Separate incompatible duties.</p> <p>Status—Implemented (for Payroll and Vendor Changes)</p>	41	Implemented	Controls were implemented to support segregation of duties across vendor setup, payroll processing and payment activities. This includes the creation of a work standard and monthly monitoring of new vendor creation.	N/A - Implemented	N/A Implemented
<p>New Recommendation:</p> <p>1. We recommend the Saskatchewan Health Authority regularly monitor whether users with conflicting roles process payment transactions without involving others.</p>	42	Partially Implemented	The SHA completed a review in 2025–26 to identify users with access to process invoices and payments.	<p>Review user requirements to reduce the number with conflicting roles allowing invoice processing and approval, where possible.</p> <p>Reports will be developed to ensure users with conflicting roles are not processing payments without involving others, these will be reviewed monthly.</p>	<p>Reports will be developed by June 30, 2026.</p> <p>Review of conflict situations will be completed by Sept 30, 2026.</p>
<p>New Recommendation:</p> <p>2. We recommend the Saskatchewan Health Authority prepare and review sufficient financial reconciliations.</p>	43	Implemented	The Saskatchewan Health Authority improved its reconciliation process by setting clear timelines, assigning responsibility, and putting monitoring in place. All reconciliations were completed on time as of March 31, 2026.	Continued compliance with reconciliation timelines, tracking and standardization of reconciliation processes across all accounts will continue.	N/A Implemented

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<p>New Recommendation:</p> <p>3. We recommend the Saskatchewan Health Authority consistently maintain approved timecards to support payroll amounts.</p>	44	Partially Implemented	Manager responsibility for timely timecard approval has been reinforced. Payroll issued regular reminders and monitoring processes to identify missing or unapproved timecards are reported to leaders.	<p>Continue to issue regular reminders to Managers regarding their responsibilities regarding time approval.</p> <p>Work continues to develop an automated time validation and scheduling system with online approval capabilities.</p>	<p>Reminders have been implemented.</p> <p>Timeline for implementation of new system is end of fiscal year 2027-28.</p>
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority sign an adequate service level agreement with eHealth Saskatchewan to enable monitoring of the quality and timeliness of eHealth’s provision of IT services.</p> <p>Status—Implemented</p>	44	Implemented	A master service agreement was signed between eHealth and the SHA in May 2022.	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority document and share an overall lessons learned report for the AIMS project.</p> <p>Status—Implemented</p>	44	Implemented	Lessons learned were documented and shared with other government agencies in 2024.	N/A - Implemented	N/A - Implemented

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Chapter 26, Saskatchewan Health Authority – Overseeing Contracted Special-Care Homes in Saskatoon and Surrounding Area, 2025 Report – Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority enter into contracts with special-care homes that clearly set out expected accountability relationships between itself, the special-care home, and the Ministry of Health.</p> <p>Status: Implemented</p>	251	Implemented	SHA finalized and signed updated “Principles and Services Agreements” with all 15 contracted special-care homes in Saskatoon and surrounding area by August 2024	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority work with the Ministry of Health to confirm performance measures that it requires contracted special-care homes to report on to help them assess each home’s compliance with the Ministry of Health’s Program Guidelines for Special-care Homes and improve quality of resident care.</p> <p>Status: Implemented</p>	252	Implemented	<p>SHA collaborated with the Ministry of Health to establish standardized performance measures, targets, and quarterly reporting requirements for contracted special-care homes.</p> <p>Measures were developed using jurisdictional scans and Canadian Institute for Health Information benchmarking data.</p>	N/A Implemented	N/A - Implemented

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Chapter 26, Saskatchewan Health Authority – Overseeing Contracted Special-Care Homes in Saskatoon and Surrounding Area, 2025 Report – Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority clearly define service expectations related to quality of care, and include targets for related key performance measures and all key reporting requirements in its contracts with special-care homes.</p> <p>Status: Implemented</p>	252	Implemented	<p>New contracts signed in 2024 clearly define service expectations including long-term care, respite care, palliative care, rehabilitative care, occupancy expectations, and prohibition of double occupancy rooms.</p> <p>Contracts include embedded performance targets, quarterly reporting obligations, and critical incident reporting requirements.</p>	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority take prompt action when it finds non-compliance with key measures that assess special-care homes compliance with the Ministry of Health’s Program Guidelines for Special-care Homes.</p> <p>Status: Implemented</p>	253	Implemented	<p>SHA implemented structured monitoring and escalation processes for contracted special-care homes. Homes submit quarterly reports against established performance targets and are required to develop corrective action plans when targets are not achieved.</p> <p>SHA monitors implementation of corrective actions through follow-up reporting, onsite verification, and post-inspection audits.</p>	N/A - Implemented	N/A - Implemented

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Chapter 27, Saskatchewan Health Authority – Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Area, 2025 Report – Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority develop a strategy to collect key mental health and addictions client information from healthcare professionals for the provincial integrated mental health record system.</p> <p>Status: Implemented</p>	258	Implemented	SHA developed and implemented the Mental Health and Addictions Information System (MHAIS) as a provincial platform to capture mental health and addictions client information within a single integrated record across inpatient and outpatient settings. MHAIS is fully implemented across all inpatient acute care facilities.	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority collaborate with the Ministry of Social Services to enhance access to housing options for mental health and addictions clients.</p> <p>Status: Implemented</p>	259	Implemented	SHA collaborated with the Ministry of Social Services and other provincial partners through the Provincial Approach to Homelessness (PATH) initiative launched in October 2023. PATH includes expansion of supportive housing units and emergency shelter spaces across Saskatchewan communities.	N/A - Implemented	N/A - Implemented

Chapter 24, Saskatchewan Health Authority—Filling Hard-to-Recruit Healthcare Positions, 2025 Report– Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority determine in which facility locations across the province it expects to have the most significant shortages of hard-to-recruit positions.</p> <p>Status—Partially Implemented</p>	235	Partially Implemented	The SHA uses a provincial vacancy dashboard to monitor hard-to-recruit positions by occupation, facility, and vacancy duration. Provincial workforce forecasting is in place to identify multi-year staffing gaps.	Geographic-level forecasting is being developed through Analytics and Workforce Planning. Pilot work is underway at selected sites to model staffing needs by geography. Expansion to additional geographies is planned as tools mature.	December 31, 2026
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority implement targeted plans to address recruitment and retention for specific hard-to-recruit positions where it expects to have significant gaps.</p> <p>Status—Partially Implemented</p>	235	Partially Implemented	<p>Recruitment plans are in place under the Health Human Resources (HHR) Operational Plan and aligned with provincial HHR Action Plan and the Patients First Healthcare Plan.</p> <p>Targeted strategies are in place to address both geographical and service line needs.</p>	Strengthen use of local workforce data to reflect community-specific barriers such as housing and geography. Work with the Saskatchewan Health Care Recruitment Agency and other stakeholders to address these barriers for longer term retention.	December 31, 2026
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority analyze whether clinical placements for students are a successful recruitment strategy for hard-to-recruit positions.</p> <p>Status—Implemented</p>	237	Implemented	A centralized tracking system captures student placement and employment outcomes. Annual analysis is completed across 19 hard-to-recruit occupations.	N/A - Implemented	N/A - Implemented

Status Update
PAC Date: June 04, 2026

Chapter 24, Saskatchewan Health Authority—Filling Hard-to-Recruit Healthcare Positions, 2025 Report– Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority periodically determine whether post-secondary training seats purchased out of province are successful at addressing vacancies for hard-to-recruit positions.</p> <p>Status—Implemented</p>	238	Implemented	The SHA tracks students using out-of-province training seats and monitors employment outcomes. Engagement during training supports recruitment planning. For graduates in selected programs, approximately 80 percent were hired by the SHA.	N/A - Implemented	N/A - Implemented
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority implement a First Nations and Métis recruitment and retention plan to help fill hard-to-recruit positions.</p> <p>Status—Partially Implemented</p>	239	Partially Implemented	<p>First Nations and Métis recruitment and retention plan is in place under the Health Human Resources Operational Plan. It includes partnerships with Indigenous institutions, targeted recruitment, bursary support, and cultural supports such as access to Elders and talking circles.</p> <p>Quarterly and annual monitoring of strategy measures; talent attraction; community and partner engagement.</p>	Complete performance measurement framework, including finalization of targets.	September 30, 2026

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Chapter 24, Saskatchewan Health Authority—Filling Hard-to-Recruit Healthcare Positions, 2025 Report– Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority centralize its analysis of staff exit surveys to inform retention strategies for hard-to-recruit positions.</p> <p>Status—Partially Implemented</p>	240	Partially Implemented	Exit survey data is centralized through a third-party provider. Data is consistently collected and shared with executive leadership.	Formal analysis of exit survey data is underway to identify key themes, root causes of turnover, and retention risks in hard-to-recruit positions.	September 30, 2026
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority establish further measures to evaluate the success of its recruitment and retention activities for hard-to-recruit positions.</p> <p>Status—Implemented</p>	240	Implemented	Performance measures are in place under the Health Human Resources Operational Plan. Reporting includes vacancy trends, recruitment outcomes, and staffing levels by classification and location. Regular reporting is provided to SHA leadership, SHA Governance and Human Resources Committee of the Board and the Ministry of Health.	N/A - Implemented	N/A - Implemented

Status Update
PAC Date: June 04, 2026

Chapter 25, Saskatchewan Health Authority – Minimizing Employee Absenteeism in Kindersley and Surrounding Areas, 2025 Report – Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority monitor that those responsible for employee attendance management document discussions and actions with employees who have excessive absenteeism.</p> <p>Status—Partially Implemented</p>	244	Partially Implemented	<p>The SHA implemented a new Attendance Support Program, supported by standardized tools and resources to help managers address excessive absenteeism.</p> <p>The SHA is advancing a provincial approach to attendance management and return-to-work services through a competitive procurement process to engage an external service provider.</p>	SHA plans to implement an integrated, vendor-supported case management and documentation system in 2026.	Pilot to begin in Q2-2026-27. Full implementation by December 31, 2026
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority analyze significant causes of its employees’ absenteeism and implement targeted strategies to address them.</p> <p>Status—Partially Implemented</p>	245	Partially Implemented	<p>The SHA continues to collect absenteeism information through attendance discussions and reporting processes, identifying physical health, mental health, and chronic disease as primary drivers.</p> <p>Through the procurement process, the SHA is seeking enhanced analytics and reporting capabilities, including reasons for the cause of absenteeism.</p>	SHA plans to implement enhanced analytics supported by a vendor solution in 2026.	Pilot to begin in Q2-2026-27. Full implementation by December 31, 2026

Status Update
PAC Date: June 04, 2026

Chapter 25, Saskatchewan Health Authority – Minimizing Employee Absenteeism in Kindersley and Surrounding Areas, 2025 Report – Volume 2					
Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
<p>Outstanding Recommendation:</p> <p>We recommended the Saskatchewan Health Authority give the Board periodic reports on the progress of attendance management strategies in reducing employee absenteeism and related costs.</p> <p>Status—Partially Implemented</p>	246	Partially Implemented	<p>SHA currently provides summary absenteeism reporting to the Board’s Governance and Human Resources.</p> <p>The procurement process requirements include enhanced reporting on attendance performance for board oversight.</p>	<p>SHA will implement enhanced reporting to the Board supported by the vendor partnership.</p> <p>This enhanced reporting will strengthen governance, transparency, and evidence-based decision-making.</p>	<p>Pilot to begin in Q2-2026-27. Full implementation by December 31, 2026</p>