Chapter 19 and 26 - Saskatchewan Health Authority - Analyzing Surgical Biopsies in Regina and Saskatoon Labs Efficiently from 2022 and 2024 Report of the Provincial Auditor 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 |
|--|------|----------------|--|---------------------------------------|--------------------------------|
| Outstanding Recommendation: 1. We recommended the Saskatchewan Health Authority implement a consistent approach for prioritizing and issuing timely diagnosis reports for surgical biopsies. (2018 Report – Volume 2, p. 144, Recommendation 3; Public Accounts Committee agreement March 1, 2022) | 245 | Implemented | The Saskatchewan Health Authority (SHA) has worked to develop consistent performance metrics. Performance metrics have been implemented following integration with the Laboratory Information System. The Provincial guidelines on prioritizing and issuing timely diagnoses was implemented in December 2024. with monthly monitoring of internal quality targets starting in January 2025. | • N/A Implemented | N/A Implemented |

Chapter 19 and 26 - Saskatchewan Health Authority - Analyzing Surgical Biopsies in Regina and Saskatoon Labs Efficiently from 2022 and 2024 Report of the Provincial Auditor 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 |
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| Outstanding Recommendation: 2. We recommended the Saskatchewan Health Authority educate healthcare providers on properly completing surgical biopsy requisitions for Regina and Saskatoon labs. (2018 Report – Volume 2, p. 147, Recommendation 6; Public Accounts Committee agreement March 1, 2022) | 246 | Implemented | The SHA revised the surgical biopsy requisition form a detailed completion guide. The new form and guide have been communicated to stakeholders and fully implemented. Lab Medicine is now monitoring compliance of completed requisitions through scheduled quarterly reviews. | N/A Implemented | N/A Implemented |

Chapter 19 and 26 - Saskatchewan Health Authority - Analyzing Surgical Biopsies in Regina and Saskatoon Labs Efficiently from 2022 and 24 Report of the Provincial Auditor Volume 2 **Recommendation and Status at Time** Page Actions Taken to Implement since **Planned Actions for** Timeline for **Current Status** of Audit PA Report Implementation Implementation **Outstanding Recommendation:** Implemented A new process has been N/A -• N/A - Implemented 246 • (Provincial Auditor 2024 implemented to review the Implemented 3. We recommended the Volume 2) maintenance logs to identify Saskatchewan Health Authority noncompliance in a timely require its labs to keep records of manner. preventative maintenance completed by technical staff on its surgical biopsy equipment. (2018 Report – Volume 2, p. 149, Recommendation 7; Public Accounts Committee agreement March 1, 2022)

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|-----------------------|---|--|--------------------------------|
| Outstanding Recommendation: 1. 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. (2019 Report – Volume 1, p. 193, Recommendation 1; Public Accounts Committee agreement March 1, 2022) | 217 | Partially Implemented | Completed Facility Condition Index (FCI) assessments and quality assurance checks. Implemented updated reporting tools and integrated FCI data into the capital plan. Updates to the FCI and measurable service objectives have been finalized for owned and operated facilities. Service objectives and associated reports for the FCI have been documented, with supporting Work Standards implemented. Initiated preventative and deferred maintenance reporting from the Computerized Maintenance Management System (CMMS). | Continue work with Saskatoon teams on how to best utilize preventative and demand maintenance data as a management tool to ensure accurate metrics and determine if designated thresholds are appropriate. | March 31, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|----------------|---|---------------------------------------|--------------------------------|
| Outstanding Recommendation: 2. 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. (2019 Report – Volume 1, p. 195, Recommendation 2; Public Accounts Committee agreement March 1, 2022) | 218 | Implemented | A work Standard has been developed and implemented outlining user access levels to the CMMS. Access levels within CMMS are established to ensure data integrity, with restrictions in access to make data changes. | • N/A Implemented. | N/A Implemented |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|--|---|--|--------------------------------|
| Outstanding Recommendation: 3. We recommended the Saskatchewan Health Authority maintain complete information on each of its key healthcare facilities and components located in the City of Saskatoon and surrounding areas to enable the preparation of a comprehensive maintenance plan. (2019 Report – Volume 1, p. 196, Recommendation 3; Public Accounts Committee agreement March 1, | 218 | Implemented (Provincial Auditor 2022 Volume 2) | The SHA has reviewed and updated facility information to ensure completeness. | • N/A – Implemented. | N/A - Implemented |
| 2022)Outstanding Recommendation:4. 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.(2019 Report – Volume 1, p. 198, Recommendation 4; Public Accounts Committee agreement March 1, 2022) | 219 | Partially Implemented | Critical Building Operations Maintenance Programs (BOMPs) are implemented in the CMMS, standardizing minimum preventative maintenance (PM) frequencies based on Canadian codes and standards. BOMPs are applied only where equipment data has been aligned with BOMP standards. | Further implementation of BOMPs is continuing. This includes documentation of maintenance frequency and code requirements. Implementation of Phase 2 Building Operations Maintenance Program standards is targeted to be complete by June 30, 2025. | June 30, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Outstanding Recommendation: 5. We recommended the Saskatchewan Health Authority use its planned maintenance activities as an input to setting its Saskatoon-area maintenance budget. (2019 Report – Volume 1, p. 199, Recommendation 5; Public Accounts Committee agreement March 1, 2022) | 220 | Partially Implemented | Developed a risk-based maintenance plan to prioritize key facilities and support annual capital requests. Reviewed historical information and initiated planning for automated reporting from the CMMS system. | Continue data cleanup to activate updated BOMP's and inform budgetary and operational decisions. Incorporate cleaned data to support ongoing budgetary decisions. Services Saskatoon will update the equipment type data in the Computerized Maintenance Management System to align with provincial BOMP by June 30, 2025. | June 30, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Outstanding Recommendation: 6. 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. (2019 Report – Volume 1, p. 200, Recommendation 6; Public Accounts Committee agreement March 1, 2022) | 221 | Partially Implemented | The SHA developed the Building Operations Maintenance Program (BOMP) and have implemented phase 1 BOMP's into the CMMS system. | The SHA will implement the Building Operations Maintenance Program. Critical BOMPs are created, approved, and implemented in the CMMS. Work moving forward is to complete equipment type matching and updates. | June 30, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Outstanding Recommendation: 7. 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. (2019 Report – Volume 1, p. 201, Recommendation 7; Public Accounts Committee agreement March 1, 2022) | 222 | Partially Implemented | New prioritization process has been developed and staff have been trained as required. Implemented new prioritization process for demand maintenance, including staff training. Finalized and operationalized the prioritization process. Assigned priority ratings to work orders at Royal University Hospital. Expansion of priority ratings to sites in Saskatoon and surrounding rural areas was completed in October 2024 via Saskatoon Call Center. The Intake system now prioritizes for all Saskatoon and area sites. | Ongoing staff training to adopt prioritization process underway. After-hours prioritization needs will be addressed with retraining of after-hours staff on the Prioritization Work Standards. | March 31, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementatior |
|--|------|-----------------------|--|--|--------------------------------|
| Outstanding Recommendation: 8. 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. (2019 Report – Volume 1, p. 201, Recommendation 8; Public Accounts Committee agreement March 1, 2022) | 222 | Partially Implemented | The SHA has operationalized the newly developed process. The updated prioritization work standard has been implemented for all Saskatoon and area sites. Service level targets have been established using CMMS data. The first report was available in November 2024, and managers are now able to observe staff use of CMMS. Reporting is reviewed by managers, with additional staff training provided to meet the targets. | The SHA has drafted a reporting and escalation strategy associated with an updated Demand Maintenance Prioritization Work Standard. Implementation of the escalation strategy to occur by March 31, 2025. This will enable notification to managers when targets are not being met and corrective actions can be reviewed with staff to ensure accuracy and consistency of data. | March 31, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Outstanding Recommendation: 9. We recommended the Saskatchewan Health Authority consistently document the priority of capital maintenance projects undertaken in the City of Saskatoon and surrounding areas. (2019 Report – Volume 1, p. 202, Recommendation 9; Public Accounts Committee agreement March 1, | 223 | Implemented | The SHA has developed a two- year capital planning process supported by the documented rationale for project prioritization. | • N/A – Implemented. | N/A – Implemented |
| 2022) | | | | | |
| Outstanding Recommendation: 10. We recommended the Saskatchewan Health Authority report to senior management the results of maintenance activities for its key healthcare facilities and components located in the City of Saskatoon and surrounding areas. (2019 Report – Volume 1, p. 204, Recommendation 10; Public Accounts Committee agreement March 1, 2022) | 224 | Implemented (Provincial Auditor 2022 Volume 2) | Monthly reports for budget execution and maintenance performance are provided to senior leaders. | • N/A – Implemented. | N/A - Implemented |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|--|---|---------------------------------------|--------------------------------|
| Outstanding Recommendation 1. We recommended the Saskatchewan Health Authority provide consultant care for less urgent or non-urgent patients outside of its emergency departments. (2013 Report – Volume 2, p. 225, Recommendation 2; Public Accounts Committee agreement January 15, 2015) | 184 | Implemented (Provincial Auditor 2023 Volume 1) | The Saskatchewan Health Authority (SHA) reviewed patient traffic in Saskatoon and developed a strategy to divert, as appropriate, those patients from emergency departments. The SHA has implemented initiatives to enhance specialist access and optimize hospital capacity. These include expanding cardiology and neuroscience virtual consultation services for regional hospitals and implementing the Saskatoon Capacity Action Plan. | • N/A - Implemented | N/A - Implemented |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|-----------------------|---|--|--------------------------------|
| Outstanding Recommendation: 1. We recommended the Saskatchewan Health Authority require health care professionals involved in patient care prepare a comprehensive, multidisciplinary patient care plan. (2015 Report – Volume 1, p. 157, Recommendation 2; Public Accounts Committee agreement September 17, 2015) | 188 | Partially Implemented | The SHA is working to standardize inpatient processes to allow teams to develop multidisciplinary patient care plans. | The SHA will continue efforts to standardize inpatient processes. The SHA continues to work towards physician contracts which will support multi- disciplinary rounding at the bedside. | December, 2025 |
| Outstanding Recommendation: 2. We recommended the Saskatchewan Health Authority require staff to follow the policy when completing medication reconciliations prior to discharging patients. (2015 Report – Volume 1, p. 164, Recommendation 8; Public Accounts Committee agreement September 17, 2015) | 189 | Partially Implemented | The SHA has implemented policies and procedures to support Medication Reconciliation and Medication Safety. | The SHA continues to work with staff and physicians to improve compliance with its medication reconciliation policies and procedures. | December, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|--|---|---------------------------------------|--------------------------------|
| Outstanding Recommendation: 1. We recommended the Saskatchewan Health Authority reassess the role of human resources in promoting employee attendance to enable more timely resolution of issues causing employee absenteeism. | 216 | Implemented (Provincial Auditor 2023 Volume 2) | Saskatchewan Health Authority (SHA) has enhanced its attendance management processes by expanding the role of Human Resources (HR) and implementation of the Human Resources Target Operating Model. The model provides targeted support to managers through specialized roles and HR business partners, streamline access to resources, and ensure consistent, effective management of absenteeism across the organization. | • N/A - Implemented | N/A - Implemented |

| Recommendation and Status at Time of Audit | Page | Current Status | | Actions Taken to Implement Since PA Report | | Planned Actions for Implementation | Timeline for Implementation |
|--|------|-----------------------|--|--|---|---------------------------------------|--------------------------------|
| Outstanding Recommendation: 2. We recommended the Saskatchewan Health Authority monitor that those responsible for employee attendance management document discussions and actions with employees who have excessive absenteeism. | 217 | Partially Implemented | SHA has scheduled the full implementation of the Provincial Attendance Support program for Spring 2025, which will include education tools such as videos and other resources to support managers in addressing absenteeism. The program will introduce a formal attendance support process for employees with excessive absenteeism, requiring managers to use checklists to document discussions and ensuring proper documentation for future intervention if needed. | June 30, 2025 | | | |
| Outstanding Recommendation: 3. We recommended the Saskatchewan Health Authority analyze significant causes of its employees' absenteeism and implement targeted strategies to address them. | 218 | Implemented | • | The Accommodations and Attendance Management portfolio has initiated reporting and analysis of absenteeism causes, refining manual data collection processes for accuracy. Additionally, information packages for the top nine absenteeism categories, including educational resources in print and video formats, were developed and fully implemented by December 2023 to support employee awareness and attendance improvement. | • | N/A Implemented | N/A Implemented |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement Since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|----------------|--|---------------------------------------|--------------------------------|
| Outstanding Recommendation: 4. 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. | 218 | Implemented | In September 2024, the Accommodations and Attendance Management portfolio presented an annual update to the Governance & Human Resource Committee (GHRC) of the SHA Board of Directors, covering attendance support initiatives and key absenteeism causes. | • N/A Implemented | N/A Implemented |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|--|---|---|--------------------------------|
| Outstanding Recommendation: 1. 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. | 223 | Partially Implemented (Provincial Auditor 2023 Volume 2) | Saskatchewan Health Authority (SHA), in collaboration with the Provincial Affiliates Resource Group (PARG), supported the affiliates and HCOs through the signing of the Principle's and Services Agreements. | • The Principles and Services Agreement has been finalized by the SHA and PARG and has been signed by almost all affiliates and Health Care Organizations (HCO). | June 30, 2025 |
| (2017 Report – Volume 1, p. 168, Recommendation 2; Public Accounts Committee agreement February 26, 2019) | | | | | |

Chapter 25, Saskatchewan Health Authority – Overseeing Contracted Special-Care Homes in Saskatoon and Surrounding Area from 2023 Report of Provincial Auditor – 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 |
|---|------|--|---|--|---|---|--------------------------------|
| Outstanding Recommendation: 2. 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. (2017 Report – Volume 1, p. 170, Recommendation 3; Public Accounts Committee agreement February 26, 2019) | 224 | Partially Implemented (Provincial Auditor 2023 Volume 2) | • | SHA, in collaboration with the Provincial Affiliates Resource Group (PARG), supported the affiliates and HCO's through the signing of the Principle's and Services Agreements. | • | The Principles and Services Agreement outlines the expected accountability relationship between the SHA and Affiliates. The SHA is onboarding special-care homes to a new electronic format for capturing corrective action plans for identified Quality Indicators and enhancing accountability. The Principles and Services Agreement has been finalized by the SHA and PARG and has been signed by almost all affiliates and HCO. | June 2025 |

Chapter 25, Saskatchewan Health Authority – Overseeing Contracted Special-Care Homes in Saskatoon and Surrounding Area from 2023 Report of Provincial Auditor – 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 |
|--|------|--|---|---|--------------------------------|
| Outstanding Recommendation: 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. (2017 Report – Volume 1, p. 171, Recommendation 4; Public Accounts Committee agreement February 26, 2019) | 224 | Partially Implemented (Provincial Auditor 2023 Volume 2) | The Principles and Services Agreement was finalized by SHA and the Provincial Affiliate Resource Group (PARG), incorporating clearly defined service expectations, performance measures, targets, and reporting requirements for special- care homes. SHA monitors performance indicators for the LTC sector and ensure corrective action plans are in place when targets are not met. | SHA will continue to support special-care homes in meeting service expectations by providing tools for resident- centered plans and complete the onboarding of homes to the electronic format for capturing and monitoring quality indicators, ensuring alignment with the Ministry's Guidelines. The escalation process for unmet performance measures and targets is outlined within the Principles and Services Agreement The Principles and Services Agreement has been finalized by the SHA and PARG and has been signed by almost all affiliates and HCO. | June 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement Since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|---|---|---------------------------------------|--------------------------------|
| Outstanding Recommendation: | 225 | No Longer Relevant to the Saskatchewan Health | • N/A | • N/A | N/A |
| We recommended the | | Authority because the | | | |
| Saskatchewan Health Authority | | Ministry is now doing | | | |
| periodically inspect special-care | | inspections | | | |
| homes to assess if they comply | | | | | |
| with key areas of the Ministry | | | | | |
| of Health's Program Guidelines | | | | | |
| for Special-care Homes. | | | | | |
| (2017 Report – Volume 1, p. | | | | | |
| 176, Recommendation 5; Public | | | | | |
| Accounts Committee | | | | | |
| agreement February 26, 2019) | | | | | |

Chapter 25, Saskatchewan Health Authority – Overseeing Contracted Special-Care Homes in Saskatoon and Surrounding Area from 2023 Report of Provincial Auditor – Volume 2

Volume 2 **Recommendation and Status at** Page Current Status Actions Taken to Implement Since Planned Actions for Timeline for Time of Audit PA Report Implementation Implementation **Outstanding Recommendation:** 225 Partially Implemented June 2025 SHA incorporated a structured The Principles and Services ٠ ٠ (Provincial Auditor 2023 process into the Principles Agreement has been finalized **5.** We recommended the Volume 2). and Services Agreement, by the SHA and PARG and has Saskatchewan Health Authority enabling the issuance of been signed by almost all take prompt action when it written notices of nonaffiliates and HCO. finds non-compliance with key compliance and requiring The SHA is onboarding ٠ measures that assess specialaffiliates to submit corrective special-care homes to a new care homes compliance with action plans. electronic format for the Ministry of Health's capturing corrective action Program Guidelines for Special-٠ The SHA staff in Saskatoon plans for identified Quality care Homes. have introduced a continuous Indicators and enhancing improvement process to accountability. (2017 Report – Volume 1, p. ensure compliance with 177, Recommendation 6; Public Ministry of Health guidelines Accounts Committee and improve assessment agreement February 26, 2019) accuracy in Special Care Homes. The process prioritizes homes previously flagged for non-compliance, focusing on sustaining remediation efforts and addressing gaps. Formal reports are shared with leadership teams to support ongoing improvements.

Chapter 25, Saskatchewan Health Authority – Overseeing Contracted Special-Care Homes in Saskatoon and Surrounding Area from 2023 Report of Provincial Auditor –

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Dutstanding Recommendation: We recommended the Saskatchewan Health Authority formally assess whether mental health and addictions services are meeting client demand and make adjustments where necessary in its Northeast integrated service area. (2018 Report – Volume 1, p. 113, Recommendation 1; Public Accounts Committee agreement February 26, 2019) | 229 | Implemented (Provincial Auditor 2023 Volume 2) | Mental Health and Addiction Services aligned with Canadian Institute for Health Information (CIHI) Wait Time standards and expanded resources, including nurse practitioners and pharmacy positions, to enhance service delivery through a team- based, stepped care model. Child and Youth Psychiatry waitlists decreased through added community support, and a similar team-based model for adult psychiatry is being developed with | N/A Implemented | N/A Implemented |

Chapter 26 - Saskatchewan Health Authority – Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from 2023 Report of Provincial Auditor – 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 |
|---|------|--|---|---|---|--|---|
| Outstanding Recommendation: 2. 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. (2018 Report – Volume 1, p. 114, Recommendation 3; Public Accounts Committee agreement February 26, 2019) | 230 | Partially Implemented (Provincial Auditor 2023 Volume 2) | • | Psychiatry notes are now integrated into the Mental Health and Addictions Information System (MHAIS), ensuring centralized and accurate client records for improved decision-making. MHAIS was successfully implemented in SHA Regina Community programs as of March 31, 2024. MHAIS has been successfully implemented in one Community Based Organization. | • | Enhancements to MHAIS functionality are planned for psychiatry / physicians' requirements (prescribing and labs). There will be a focus on expanding MHAIS to CBOs operating addiction treatment services. | Improved functionality for psychiatrists/phy sicians: Dec. 2026 Expansion to CBOs: estimate January 2028 |

Chapter 26 - Saskatchewan Health Authority – Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from 2023 Report of Provincial Auditor – 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 |
|---|------|--|---|---------------------------------------|--------------------------------|
| Outstanding Recommendation: 3. We recommended the Saskatchewan Health Authority identify and analyze clients who frequently use mental health and addictions services to determine how they may be better served in its Northeast integrated service area. | 231 | Implemented (Provincial Auditor 2023 Volume 2) | SHA has implemented dedicated support teams, such as the Community Recovery Team and Police and Crisis Team, to provide tailored interventions for frequent service users, improving outcomes and reducing inpatient stays. | N/A Implemented | N/A Implemented |
| (2018 Report – Volume 1, p. 114, Recommendation 4; Public Accounts Committee agreement February 26, 2019) | | | | | |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement Since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|--|--|---|---|
| Outstanding Recommendation: 4. 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. (2018 Report – Volume 1, p. 120, Recommendation 5; Public Accounts Committee agreement February 26, 2019) | 232 | Partially Implemented (Provincial Auditor 2023 Volume 2) | The SHA is working in partnership with the Ministry of Social Services to enhance housing and support for youth mental health and addictions, with progress underway in key communities. A contract was signed with a Community-Based Organization (CBO) in Prince Albert on November 1, 2024. | SHA will continue to collaborate to develop and implement middle-tier residential support for youth in key cities, with additional government funding and collaborative efforts to reduce reliance on hospital-based care and improve long-term stability and recovery. | Saskatoon- Implemented Regina – In progress operational date March 31, 2026 Prince Albert – Contract signed November 1 ,2024. Operational date March 2026. |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement Since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Dutstanding Recommendation: 5. We recommended the Saskatchewan Health Authority document evidence of follow-up when clients do not maintain their scheduled mental health and addictions treatment in its Northeast integrated service area. (2018 Report – Volume 1, p. 123, Recommendation 9; Public Accounts Committee agreement February 26, 2019) | 234 | Implemented (Provincial Auditor 2023 Volume 2) | SHA has maintained a rigorous follow-up protocol to contact outpatient clients who miss appointments within 24 hours and conducted further training sessions to address knowledge gaps and enhance documentation compliance. SHA continues quarterly and monthly reviews of client files to analyze missed appointments, refine corrective action plans, and address barriers to client engagement and communication lapses. | • N/A Implemented | N/A Implemented |

Chapter 26 - Saskatchewan Health Authority – Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from 2023

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Outstanding Recommendation 1. We recommended the Saskatchewan Health Authority give hospital staff, responsible for patient care, formal training updates on infection prevention and control practices at least annually. (2018 Report – Volume 2, p. 158, Recommendation 1; Public Accounts Committee agreement March 1, 2022) Status – Partially Implemented | 199 | Implemented | Provincially standardized Infection Prevention and Control (IPAC) training and education for onboarding and orientation has been developed. Annual IPAC education is mandatory and is available online for all SHA staff. Reminders and status updates towards 100% annual completion target are communicated quarterly. | • N/A - Implemented | N/A - Implemented |

| Recommendation and Status at Time of | Page | Current Status | Actions Taken to Implement since | Planned Actions for Implementation | Timeline for |
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| Audit | | | PA Report | | Implementation |
| Outstanding Recommendation 2. We recommended the Saskatchewan Health Authority use external observers to conduct regular blind direct observation hand-hygiene compliance audits in its hospitals. | 200 | Implemented (Provincial Auditor 2024 Volume 1) | • Full launch of provincial Clean Hands Auditing Program occurred October 31, 2024, including the requirement for regular blind direct observation compliance audits. | • N/A - implemented | N/A - implemented |
| (2018 Report – Volume 2, p. 161, Recommendation 2; Public Accounts Committee agreement March 1, 2022) Status – Partially Implemented | | | | | |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
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| Outstanding Recommendation We recommended the Saskatchewan Health Authority actively monitor actions taken by Regina hospitals' patient- care units with lower than acceptable hand-hygiene compliance rates. | 201 | Implemented | • The SHA hand hygiene policy was updated and communicated in September 2024, and includes accountabilities for monitoring, reporting, and developing Corrective Actions when hand hygiene rates are lower than acceptable thresholds. | • N/A - Implemented | N/A - Implemented |
| (2018 Report – Volume 2, p. 163, Recommendation 3; Public Accounts Committee agreement March 1, 2022) Status – Not Implemented | | | | | |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|--|---|------------------------------------|--------------------------------|
| Outstanding Recommendation 4. We recommended the Saskatchewan Health Authority regularly give senior management a written analysis of emerging risks and causes based on trends of hospital- acquired infections. | 202 | Implemented (Provincial Auditor 2024 Volume 1) | The Infection Prevention and Control (IPAC) Epidemiologist is providing quarterly updates on trends and risks to senior management. | N/A - Implemented | N/A – Implemented |
| (2018 Report – Volume 2, p. 166, Recommendation 4; Public Accounts Committee agreement March 1, 2022) Status – Not Implemented | | | | | |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|-----------------------|---|--|--------------------------------|
| New Recommendation: 1. We recommend the Saskatchewan Health Authority work with its partners to update the Provincial Tuberculosis Strategy, with input from high-risk populations and communities | 113 | Partially Implemented | As part of the Public Health Agency of Canada's (PHAC) engagement for the development of a Pan- Canadian TB Elimination Strategy, Saskatchewan Health Authority (SHA) took part in national and provincial Tuberculosis (TB) Roundtable discussions, addressing key issues such as TB detection and treatment in urban and rural settings, education, social determinants of health, and immigration. On November 21, 2024, the Saskatchewan TB Partnership reviewed the findings from the Roundtable discussions. This included updating the Terms of Reference and adjusting the membership to ensure proper representation. | The compiled summaries from the Roundtable discussions are expected to be completed by early 2025. These summaries will inform the Saskatchewan TB Partnership's efforts to align the provincial strategy with federal TB goals and address community-specific needs. SHA and its partners will continue collaborating to develop a comprehensive and inclusive Provincial Tuberculosis Strategy, incorporating the updated findings from the Roundtable discussions. | June 30, 2026. |

| Recommendation and Status at Time of Audit | Page | Current Status | | Actions Taken to Implement since PA Report | | Planned Actions for Implementation | Timeline for Implementation |
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| New Recommendation: 2. We recommend the Saskatchewan Health Authority track and assess when individuals are notified about tuberculosis cases during contact investigations. | 118 | Implemented | • | SHA ensures prompt notification and assessment of individuals potentially exposed to active TB cases using the TB Prevention and Control (TBPC) SK Management System, aligned with Canadian TB Standards. The system ensures | • | Implemented | N/A Implemented |
| | | | | comprehensive tracking and management of TB contact investigations, following the Contact Investigation Cascade of Care process. | | | |
| | | | • | SHA has developed work standards and an evaluation tool to monitor database utilization and adherence to timelines for TB contact investigations. | | | |

| Recommendation and Status at Time of Audit | Page | Current Status | | Actions Taken to Implement Since PA Report | | Planned Actions for Implementation | Timeline for Implementation |
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| New Recommendation: We recommend the Saskatchewan Health Authority utilize criteria to determine an appropriate treatment delivery method(s) for patients with tuberculosis. | 121 | Partially Implemented | • | SHA uses established indicators and criteria, aligned with Canadian Tuberculosis Standards and organizational policies, to inform physician recommendations for treatment delivery methods. | • | SHA plans to evaluate treatment effectiveness and client satisfaction, considering factors like treatment completion, barriers to adherence, and social determinants of health. SHA is working with Digital Imaging, Human Resources, and other partners to expand access to care in high-incidence communities through closer- to-home services and telehealth options. Insights from ongoing initiatives and the anticipated Pan-Canadian TB Elimination strategy will guide updates to policies and work standards, ensuring treatment delivery methods meet client needs and improve health outcomes. | June 30, 2026. |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement Since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|-----------------------|--|---|--------------------------------|
| New Recommendation: We recommend the Saskatchewan Health Authority determine the most efficient and effective tuberculosis care model (i.e., virtual, clinical) to use for tuberculosis care in the province. | 122 | Partially Implemented | SHA is committed to determining the most efficient and effective TB care model by evaluating both virtual and clinic-based delivery methods for TB management. This evaluation will include an analysis of patient care needs, health service accessibility, and resource utilization to identify the model that best meets the needs of diverse populations across the province. | SHA plans to conduct an indepth analysis to identify the most efficient and effective TB care model, considering the needs of diverse populations across the province. SHA will leverage insights from collaborations with stakeholders and advancements in telehealth and virtual care technologies to optimize TB care delivery. The goal is to improve access to high-quality services, maintain efficiency, and address the needs of high-risk and underserved communities. | March 31, 2026 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement Since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|-----------------------|---|--|--------------------------------|
| New Recommendation: We recommend the Saskatchewan Health Authority set clear expectations for making the public aware of tuberculosis outbreaks | 124 | Partially Implemented | SHA is working to incorporate guidelines developed by the Junior Public Health Officer with the Northern Inter-Tribal Agency (NITHA) into TB outbreak management protocols. These guidelines are expected to improve public awareness and communication during outbreaks. SHA has engaged with leadership and Medical Health Officers (MHOs) to develop guidelines for reporting TB outbreaks, including providing outbreak information to the public through SHA internet portal. | SHA plans to finalize and implement the guidelines from NITHA, aligning with public health practices to improve communication and coordination during outbreaks. SHA will continue developing specific guidelines for reporting TB outbreaks in non-NITHA communities to ensure consistency in outbreak communication. SHA will revise roles and responsibilities based on feedback from the TB Partnership meeting, ensuring improved coordination and support during TB outbreaks. | June 30, 2026. |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement Since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|-----------------------|--|--|--------------------------------|
| New Recommendation: 6. We recommend the Saskatchewan Health Authority analyze and report on key information related to tuberculosis services | 126 | Partially Implemented | SHA developed a reporting template in Spring 2024 to track TB current state, trends, outbreaks, and the status of investigations. Distribution of this report has been expanded to include all Saskatchewan Medical Health Officers (MHOs) and a broader group of Executive Leadership to increase awareness of TB incidence in communities. | SHA is in the early stages of reviewing the current annual surveillance report to identify areas for improvement. The goal is to create a summarized version for public access, enhancing transparency while respecting community needs. | June 30, 2026. |

Chapter 17 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from 2024 Report of the Provincial Auditor 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 |
|--|------|-----------------------|--|---|--------------------------------|
| Outstanding Recommendation 1. We recommended the Saskatchewan Health Authority report to senior management, the Board, and the public actual results against key measures to assess the success of its ground ambulance services at least annually. (2016 Report – Volume 2, p. 141, Recommendation 7; Public Accounts Committee agreement February 26, 2019) | 195 | Partially Implemented | Implemented Computer-Aided Dispatch (CAD) system including a data analytics module that supports reporting against key measures. | Within the 2025-26 fiscal year, SHA EMS will report key metrics on ground ambulance services to the SHA Executive Leadership team, the SHA Board, the Ministry of Health, and the Public. | March 31, 2025 |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------|--|--|---------------------------------------|--------------------------------|
| Outstanding Recommendation 1. We recommended the Saskatchewan Health Authority formally and systematically assess the quality of MRI services that radiologists provide. | 250 | Implemented (Provincial Auditor 2024 Volume 2) | The Saskatchewan Health Authority (SHA) has implemented a peer review system to formally and systematically assess the quality of MRI services provided by our radiologists. | • N/A - Implemented | N/A - Implemented |
| (2017 Report – Volume 1, p. 143, Recommendation 4; Public Accounts Committee agreement June 13, 2018) | | | | | |

| Recommendation and Status at Time of Audit | Page | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------|--|---|---------------------------------------|--------------------------------|
| Outstanding Recommendation 2. We recommended the Saskatchewan Health Authority regularly monitor the quality and timeliness of MRI services that contracted private MRI operators provide. (2017 Report – Volume 1, p. 144, Recommendation 6; Public Accounts Committee agreement June 13, 2018) | 251 | Implemented (Provincial Auditor 2024 Volume 2) | The SHA has implemented measures to regularly monitor the quality and timeliness of MRI services provided by contracted private MRI operators. | • N/A - Implemented | N/A - Implemented |
| | | | | | |
| Outstanding Recommendation 3. We recommended the Board of the Saskatchewan Health Authority receive periodic reports on the timeliness and quality of MRI services, including actions taken to address identified deficiencies. (2017 Report – Volume 1, p. 146, Recommendation 7; Public Accounts Committee agreement June 13, 2018) | 251 | Implemented (Provincial Auditor 2024 Volume 2) | The SHA has revised its reporting structure to ensure that senior management receives detailed reports on the timeliness and quality of MRI services. | • N/A - Implemented | N/A - Implemented |

| Recommendation and Status at Time of Audit | Page of 2024 Report | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|--|------------------------|--------------------------|---|---|--------------------------------|
| Outstanding Recommendation: 1. 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. (2018 Report – Volume 2, p. 80, Recommendation 1; Public Accounts Committee agreement March 1, 2022) | 47 | Partially Implemented | • The ITSA 2.0 was signed in September 2024 between SHA and eHealth Saskatchewan (eHealth), defining governance and service management. Key advancements include the addition of a sub-committee for IT risk, security, and privacy, as well as the implementation of cybersecurity key performance indicators. | Subsequent versions will continue to advance the ITSA schedules between the parties. March 2025 is the target date for meeting an adequate service agreement. | March 31, 2025 |
| Outstanding Recommendation: 2. We recommended the Saskatchewan Health Authority separate incompatible duties. (2019 Report – Volume 2, p. 86, Recommendation 3; Public Accounts Committee agreement March 1, 2022) | 48 | Partially Implemented | Manual processes have been implemented to mitigate the risks associated with duties not being separated. Vendor management has been restructured for better separation of duties, and a conflict-reporting system is being refined to ensure compliance, with regular reporting expected after system stabilization. | Fully implement the AIMS system to consolidate payroll functions and establish automated segregation controls. | March 31, 2026 |

| Recommendation and Status at Time of Audit | Page of 2024 Report | Current Status | Actions Taken to Implement since PA Report | Planned Actions for Implementation | Timeline for Implementation |
|---|------------------------|-----------------|---|---|--------------------------------|
| Outstanding Recommendation: 3. We recommend the Saskatchewan Health Authority document and share an overall lesson learned report for the AIMS project with other government agencies. | 49 | Not Implemented | • N/A | Management will facilitate the completion of a formal lessons learned report for the AIMS project once implemented. | March 31, 2026 |
| (2023 Report – Volume 2, p. 54, Recommendation 1; Public Accounts Committee has not yet considered this recommendation as of November 4, 2024) | | | | | |