

Status Update
PAC Date January 23, 2025

Chapter 25, Saskatchewan Cancer Agency - Saskatchewan Cancer Agency - Drug Supply Management from 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
1. We recommended the Saskatchewan Cancer Agency formally document its processes for updating the approved list of cancer drugs (i.e., formulary) available to treat cancer patients.	239	Implemented	<ul style="list-style-type: none"> The process for updating the cancer drug formulary was documented within the terms of reference for its Drug & Therapeutics Committee The terms of reference clearly establishes the frequency for updating the formulary and also includes documentation and approval requirements for various types of formulary changes. 	N/A	Implemented
2. We recommended the Saskatchewan Cancer Agency establish a timeframe for making decisions on physician requests for exception cancer drugs.	240	Implemented	<ul style="list-style-type: none"> The Agency has a case-by-case review program for exception drug requests. In March 2023, the Agency updated its policy to include a target to approve or deny exception drug requests within five business days. 	N/A	Implemented

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3. We recommended the Saskatchewan Cancer Agency set out, in writing, relevant factors it expects staff to consider when deciding to purchase cancer drugs directly rather than using group purchasing methods.	240	Implemented	<ul style="list-style-type: none"> The Agency documents and considers relevant factors before approving the purchase of cancer drugs directly through tendering or single/sole sourcing, rather than using group purchasing methods. The Agency documents the rationale when choosing a particular drug acquisition pathway, including factors for staff to consider when purchasing cancer drugs directly. 	N/A	Implemented
4. We recommended the Saskatchewan Cancer Agency document its rationale, and seek approval, when purchasing cancer drugs using the single or sole source purchasing methods.	240	Implemented	<ul style="list-style-type: none"> The Agency documents and considers relevant factors before approving the purchase of cancer drugs directly through tendering or single/sole sourcing, rather than using group purchasing methods. The Agency documents the rationale when choosing a particular drug acquisition pathway, including factors for staff to consider when purchasing cancer drugs directly. 	N/A	Implemented

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5. We recommend the Saskatchewan Cancer Agency formally document when and who completed potential supplier evaluations when tendering for cancer drug purchases.	241	Implemented	<ul style="list-style-type: none"> The Agency maintains documentation of when and who completed potential supplier evaluations when tendering for cancer drug purchases. The Agency uses an evaluation matrix to score each bid received for a tender. Members of the Agency's pharmacy team complete the evaluations and provide an overall score for each proposal. The Agency developed a work standard for evaluating and awarding tenders to potential suppliers, including requirements for all evaluation committee members to declare they are independent. Additionally, the Agency requires all members to sign an award submission form documenting the evaluation committee's final award decision. 	N/A	Implemented

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Chapter 17, Saskatchewan Cancer Agency - Screening Program for Breast Cancer from 2023 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
<p>Outstanding Recommendation:</p> <p>1. We recommended the Saskatchewan Cancer Agency periodically report to senior management and the Board on key performance information for the screening program for breast cancer.</p> <p><i>(2016 Report – Volume 1, p. 178, Recommendation 5; Public Accounts Committee agreement February 26, 2019)</i></p>	180	Implemented	<ul style="list-style-type: none"> The Saskatchewan Cancer Agency has established cascading metrics for the Breast Screening Program, updated quarterly and readily accessible to management and executive leadership. 	N/A	Implemented

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Chapter 23, Saskatchewan Cancer Agency - Delivering the Screening Program for Colorectal Cancer from 2023 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
<p>Outstanding Recommendation:</p> <p>1. We recommended the Saskatchewan Cancer Agency analyze if its promotional strategies help increase participation in its Screening Program for Colorectal Cancer.</p>	<p>(2020 Report – Volume 2, p. 152, Recommendation 1; Public Accounts Committee agreement January 12, 2022)</p>	<p>Implemented</p>	<ul style="list-style-type: none"> • Amalgamated Prevention and Screening Departments to strengthen focus on outreach and health promotion. • Hired a Business Intelligence Specialist to support evaluation and data analysis. • Developed an Outreach and Engagement Framework, including an evaluation component. • Enhanced community engagement through events and direct communications with health-care providers. • Created a Colorectal Screening Outreach strategy to address participation gaps, especially among younger age groups (50–54 years). 	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • Implemented

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Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
			<ul style="list-style-type: none"> Collaborated with Communications for website redesign, branding and a public awareness campaign. Created a tracking tool to measure engagement effectiveness and improve processes. 		
<p>Outstanding Recommendation:</p> <p>2. We recommended the Saskatchewan Cancer Agency work with the Saskatchewan Health Authority to reduce the time patients wait for colonoscopies with an aim to provide these services within the nationally accepted benchmark for colorectal cancer screening programs.</p>	2020 Report – Volume 2, p. 158, Recommendation 3; Public Accounts Committee agreement January 12, 2022	Implemented	<ul style="list-style-type: none"> Established a Quality Improvement Committee to address navigation and wait time issues. Participated in Ministry-led Provincial Endoscopy Committee to develop strategies. Implemented a reporting tool for quarterly wait-time monitoring. Developed and began expanding Navigation Services across regions. Increased resource capacity by hiring Nurse Navigators (2.0 FTEs) 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> Implemented

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			<ul style="list-style-type: none"> Worked collaboratively with SHA to align priorities and strategies for endoscopy improvements. 		
<p>Outstanding Recommendation:</p> <p>3. We recommend the Saskatchewan Cancer Agency work with the Saskatchewan Health Authority to determine a timeframe (benchmark) for providing patients and health-care providers with pathology results related to screening for colorectal cancer.</p>	(2020 Report – Volume 2, p. 160, Recommendation 3; Public Accounts Committee agreement January 12, 2022)	Partially Implemented	<ul style="list-style-type: none"> Communicated the need for pathology timeframes with SHA leadership. Developed and began using a quarterly reporting tool to monitor result timelines. Shared findings with the Lab Quality Improvement Committee to guide improvement efforts. SCA and SHA agreed upon target of 95% of patients within 14 days. 	<ul style="list-style-type: none"> Finalization of agreed upon benchmark with SHA’s Lab Medicine Anatomic Pathology Discipline Review Committee 	<ul style="list-style-type: none"> Spring 2025

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<p>Outstanding Recommendation:</p> <p>4. We recommend the Saskatchewan Cancer Agency periodically include analysis of key quality indicator results for its Screening Program for Colorectal Cancer in its reports to senior management and the Board.</p>	(2020 Report – Volume 2, p. 162, Recommendation 6; Public Accounts Committee agreement January 12, 2022)	Implemented	<ul style="list-style-type: none"> Hired a Business Intelligence Specialist to build analytic capacity. Developed a standardized reporting framework approved by leadership and the Board. Integrated trending and historical data into quality reports to improve decision-making. Worked with Epidemiology department to assess additional metrics for timely reporting. 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> Implemented
<p>Outstanding Recommendation:</p> <p>5. We recommend the Saskatchewan Cancer Agency report on results of key quality indicators timely for its Screening Program for Colorectal Cancer.</p>	(2020 Report – Volume 2, p. 162, Recommendation 5; Public Accounts Committee agreement January 12, 2022)	Implemented	<ul style="list-style-type: none"> Assessed national quality indicators and aligned reporting metrics. Developed dashboard for timely access to key performance indicators. Fostered integration of evidence-based metrics into regular operations and quality improvement discussions. 		<ul style="list-style-type: none"> Implemented

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<p>Outstanding Recommendation:</p> <p>6. We recommend the Saskatchewan Cancer Agency align quality indicators it regularly uses to report on the Screening Program for Colorectal Cancer with nationally accepted indicators.</p>	<p>(2020 Report – Volume 2, p. 163, Recommendation 6; Public Accounts Committee agreement January 12, 2022)</p>	<p>Implemented</p>	<ul style="list-style-type: none"> Assessed national quality indicators and aligned reporting metrics. Integrated national benchmarks into internal reporting framework. Built analytic capacity by hiring a Business Intelligence Specialist and leveraging tools for dashboards. Collaborated with the Epidemiology and Performance Measurement teams to finalize CPAC-aligned indicators. Embedded indicator tracking into leadership reports and quality-improvement discussions for continuous refinement. 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> Implemented