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 eHealth Saskatchewan sign an adequate service level agreement with the Saskatchewan Health Authority.	15	Partially Implemented	In May 2022, the first version of the Information Technology Agreement (ITSA – the master service agreement) between eHealth and the SHA was executed.	eHealth and SHA will execute the second version of the ITSA to further define and mature governance, processes and other areas of the arrangement.	Spring 2024
Outstanding Recommendation:  2. We recommended eHealth Saskatchewan have an approved and tested disaster recovery plan for systems and data.	16	Partially Implemented	eHealth has established a disaster recovery program and will continue to work on the required testing of this program.	eHealth will develop performance metrics and have subsequent tests completed on the established disaster recovery program.	Spring 2024

## Chapter 15, eHealth Saskatchewan – Securing Portable Devices from 2022 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:  1. We recommended eHealth Saskatchewan work with the Saskatchewan Health Authority to implement an annual security awareness training program for users of portable computing devices with access to the eHealth IT network.	177	Implemented (Provincial Auditor 2022 Volume 2)	eHealth implemented Security Awareness training for all employees. Additionally, the SHA is engaged and committed to using this training for their employees.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation:  2.We recommended eHealth Saskatchewan implement a written risk-informed plan to protect laptops with access to the eHealth IT network from security threats and vulnerabilities	177	Implemented	eHealth introduced access management and network access policies in 2022.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation:  3. We recommended eHealth Saskatchewan standardize the configuration settings for mobile devices with access to the eHealth IT network to mitigate associated security threats and vulnerabilities	179	Implemented	100% of supported laptops and mobile devices across the provincial health system have been updated to a standard configuration.	• 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 eHealth Saskatchewan analyze the cost- benefits of use of a central mobile device management system to secure and monitor mobile devices with access to the eHealth IT network.	179	Implemented	eHealth has established a common standard and implemented an Mobile Device Management system.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation:  5. We recommended eHealth Saskatchewan take appropriate action to minimize the risk of security breaches when a portable computing device is reported lost or stolen	181	Implemented	eHealth can now disable, via management tool, lost or stolen devices.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation:  6. We recommended eHealth Saskatchewan implement a risk- based plan for controlling network access to mitigate the impact of security breaches	181	Partially Implemented	Implementation of an Information Security Management System is underway.	Continued security program maturity is required.	2023-24

utstanding Recommendation:	182	Partially Implemented	eHealth currently has basic logs to monitor logs for suspicious	<ul> <li>eHealth is currently working with a procured vendor on the</li> </ul>	2023-24
We recommended eHealth			activity	managed service to monitor	
askatchewan utilize key network ecurity logs and scans to				logs.	
ffectively monitor the eHealth IT					
etwork and detect malicious					
-					

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 follow its single and sole source requirements when using credit cards to purchase goods and services over \$5,000.	75	Implemented	The SHA has increased educational awareness for the cardholder purchasing policies and monitors transactions over \$5,000.	N/A - Implemented.	N/A - Implemented
New Recommendation  2. We recommend the Saskatchewan Health Authority follow its procurement policy (e.g., document rationale) when using single or sole source purchasing methods.	76	Implemented	The SHA has updated its process to include documentation of procurement decisions.	N/A - Implemented	N/A – Implemented
New Recommendation  3. We recommend the Saskatchewan Health Authority authorize the initiation of purchases consistent with its written delegation of signing authority.	77	Implemented	The SHA has increased educational awareness surrounding purchase authorization requirements for all employees.	N/A Implemented	N/A Implemented
New Recommendation  4. We recommend the Saskatchewan Health Authority consistently evaluate potential suppliers when tendering for the purchase of goods and services.	79	Implemented	The SHA updated its procurement processes to include evaluations.	N/A - Implemented	N/A - Implemented

performance.

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  5. We recommend the Saskatchewan Health Authority obtain conflict of interest declarations from tender subcommittee members, as required by its conflict of interest policy.	79	Implemented	Processes have been updated to ensure necessary conflict of interest declarations are signed and retained.	N/A - Implemented	N/A - Implemented
New Recommendation  6. We recommend the Saskatchewan Health Authority consistently communicate supplier award decisions for public tenders as required by its procurement policy.	81	Implemented	Processes have been updated to ensure notification of supplier awards is communicated.	N/A - Implemented	N/A - Implemented
7. We recommend the Saskatchewan Health Authority authorize contracts for goods and services in accordance with its delegation of authority.	82	Implemented	The SHA has increased educational awareness surrounding contract authorization requirements for employees.	N/A - Implemented	N/A - Implemented
New Recommendation  8. We recommend the Saskatchewan Health Authority establish a formal process to assess and track supplier	84	Partially Implemented	The SHA has developed an assessment and tracking process for vendors.	Implement tracking process established.	TBD

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 determine in which facility locations across the province it expects to have the most significant shortages of hard-to-recruit positions.	142	Partially Implemented	The SHA and Ministry of Health are collaborating on a five- and ten-year forecast.	Build in community and service level functionality into the forecast.	2025
New Recommendation  2. We recommend 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.	147	Implemented	The SHA has implemented project plans for all hard-to-recruit classifications	N/A – implemented	N/A – implemented
New Recommendation  3. We recommend the Saskatchewan Health Authority analyze whether clinical placements for students are a successful recruitment strategy for hard-to-recruit positions.	148	Partially Implemented	The SHA is developing a comprehensive plan to focus on the success of clinical placements.	Finalize and implement plan for clinical placements.	2024
New Recommendation  4. We recommend 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.	151	Partially Implemented	The SHA and Ministry of Advanced Education are working to understand options for evaluating, tracking and reporting recruitment success related to out of province purchased training seats.	Implement a process to determine the success of out of province purchased training seats.	2024

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  5. We recommend the Saskatchewan Health Authority implement a First Nations and Métis recruitment and retention plan to help fill hard-to-recruit positions.	154	Partially Implemented	The SHA has developed a First Nations and Métis recruitment and retention plan.	The SHA will continue engagement with stakeholders to implement this plan.	2024
New Recommendation  6. We recommend the Saskatchewan Health Authority centralize its analysis of staff exit surveys to inform retention strategies for hard-to-recruit positions.	154	Implemented	The SHA has implemented a new Exit Survey tool and process.	N/A Implemented	N/A – implemented
New Recommendation  7. We recommend the Saskatchewan Health Authority establish further measures to evaluate the success of its recruitment and retention activities for hard-to-recruit positions.	158	Partially Implemented	The SHA is reporting monthly, all chronic permanent full and part-time hard-to-recruit vacancies	The SHA will continue to establish evaluation processes and metrics for strategies.	2024

Chapter 18 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from 2022 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 Ministry of Health, along with Saskatchewan Health Authority, formally assess whether the distribution of ambulance services are optimal for responding to patient demand.  (2016 Report – Volume 2, p. 131, Recommendation 1; Public Accounts Committee agreement February 26, 2019)	197	Implemented (Provincial Auditor 2022 Volume 1)	The Ministry of Health and the SHA conduct supply and demand analysis for provincial ground ambulance services.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation  2. We recommended the Ministry of Health consider updating <i>The Ambulance Act</i> related to contracted ground ambulance service providers to align with contract management best practices.  (2016 Report – Volume 2, p. 134, Recommendation 3; Public Accounts Committee agreement February 26, 2019)	197	Implemented (Provincial Auditor 2022 Volume 1)	The SHA developed a performance based contract template for ground ambulance service providers.	N/A - Implemented	N/A - Implemented

Chapter 18 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from 2022 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  3. We recommended the Saskatchewan Health Authority update its contracts related to the provision of ground ambulance services to include service quality expectations and periodic reporting on them.  (2016 Report – Volume 2, p. 133,	197	Implemented (Provincial Auditor 2022 Volume 1)	The SHA developed a performance based contract template for ground ambulance service providers.	N/A - Implemented	N/A - Implemented
Recommendation 2; Public Accounts Committee agreement February 26, 2019)					
Outstanding Recommendation  4. We recommended the Saskatchewan Health Authority monitor response times against targets for all ground ambulance operators on a regular basis (e.g., monthly or quarterly).  (2016 Report – Volume 2, p. 140, Recommendation 5; Public Accounts Committee agreement February 26, 2019)	198	Implemented (Provincial Auditor 2022 Volume 1)	The SHA requires ambulance services in the South zone to provide monthly statistical and response time reports.	N/A - Implemented	N/A - Implemented

Chapter 18 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from 2022 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  5. We recommended the Saskatchewan Health Authority follow its established policy to obtain completed incident reports (for instances when ground ambulance response times do not meet targets) so it can determine required actions  (2016 Report – Volume 2, p. 140, Recommendation 5; Public Accounts Committee agreement February 26, 2019)	198	Implemented (Provincial Auditor 2022 Volume 1)	The SHA requires ambulance services in the South zone to provide monthly statistical and response time reports.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation  6. 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)	199	Partially Implemented	Performance metrics are included in the updated contracts with ground ambulance service providers.	Reporting against those metrics will be implemented with the new Computer-Aided Dispatch system.	2024

Chapter 20 - Saskatchewan Health Authority — Medication Management in Long-Term Care Facilities in Kindersley and Surrounding Area from 2022 Report of the Provincial Auditor Volume 1

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 follow its policy to obtain informed written consent from long-term care residents or their designated decision-makers before using medication as a restraint.  (2014 Report – Volume 2, p. 251, Recommendation 13; Public Accounts Committee agreement September 17, 2015)	208	Implemented (Provincial Auditor 2022 Volume 1)	The SHA has implemented a review process to ensure compliance with policies occurs.	N/A – Implemented.	N/A - Implemented
Outstanding Recommendation:  2. We recommended the Saskatchewan Health Authority implement a policy requiring informed written consent from long- term care residents or their designated decision-makers for changes in high-risk medication.  (2014 Report – Volume 2, p. 250, Recommendation 12; Public Accounts Committee agreement September 17, 2015)	208	Implemented (Provincial Auditor 2022 Volume 1)	The SHA has improved its documentation surrounding informed consent for changes in high-risk medications.	N/A - Implemented	N/A - Implemented

Chapter 20 - Saskatchewan Health Authority – Treating Patients at Risk of Suicide in Northwest Saskatchewan from 2023 Report of the Provincial Auditor Volume											
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	Percommendation and Status at Time	Dago	Current Status	Actions Taken to Implement since	Planned Actions for	Timeline for					

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 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.  (2019 Report – Volume 2, p. 207, Recommendation 1; Public Accounts Committee agreement March 1, 2022)	193	Implemented	The SHA has obtained key data to analyze and rationalize the alignment and allocation of resources for suicide prevention.	N/A- Implemented	N/A- Implemented
Outstanding Recommendation:  2. We recommended the Saskatchewan Health Authority give suitable training to staff located in northwest Saskatchewan caring for patients at risk of suicide.  (2019 Report – Volume 2, p. 211, Recommendation 2; Public Accounts Committee agreement March 1, 2022)	196	Implemented	The SHA has implemented comprehensive suicide training for all new and existing Mental Health and Addictions staff in the northwest.	N/A- Implemented	N/A- Implemented

Chapter 20 - Saskatchewan Health Authority – Treating Patients at Risk of Suicide in Northwest Saskatchewan from 2023 Report of the Provincial Auditor Volume 1											
Percommendation and Status at Time	Dago	Current Status	Actions Taken to Implement	Planned Actions for	Timeline for						

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 follow its established protocols to provide psychiatric consultations to patients accessing emergency departments in northwest Saskatchewan who are at high risk of suicide.  (2019 Report – Volume 2, p. 214, Recommendation 3; Public Accounts Committee agreement March 1, 2022)	197	Implemented	•	The SHA implemented processes to screen at risk patients and provide access to psychiatric consults in Emergency.	N/A- Implemented	N/A- Implemented
Outstanding Recommendation:  4. We recommended the Saskatchewan Health Authority address barriers to using videoconferencing to provide psychiatric services to communities in northwest Saskatchewan.  (2019 Report – Volume 2, p. 215, Recommendation 4; Public Accounts Committee agreement March 1, 2022)	197	Implemented	•	The SHA developed a work standard and supporting forms to optimize Telehealth/Videoconferencing services.	N/A- Implemented	N/A- Implemented

Chapter 20 - Saskatchewan Health Authority – Treating Patients at Risk of Suicide in Northwest Saskatchewan 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
Outstanding Recommendation:  5. We recommended the Saskatchewan Health Authority analyze reasons patients at risk of suicide miss appointments for mental health outpatient services to help address barriers.  (2019 Report – Volume 2, p. 217, Recommendation 5; Public Accounts Committee agreement March 1, 2022)	198	Implemented	The SHA has implemented a process for tracking and identifying reasons patients at risk of suicide are not attending appointments.	N/A- Implemented	N/A- Implemented
Outstanding Recommendation:  6. 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.  (2019 Report – Volume 2, p. 219, Recommendation 6; Public Accounts Committee agreement March 1, 2022)	199	Implemented	The SHA has expanded the implementation of a process for following up with clients recently discharged to all sites in northwest Saskatchewan.	N/A- Implemented	N/A- Implemented

Chapter 20 - Saskatchewan Health Authority – Treating Patients at Risk of Suicide in Northwest Saskatchewan 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
Outstanding Recommendation:  7. We recommended the Saskatchewan Health Authority conduct risk-based file audits of patients at risk of suicide in northwest Saskatchewan.  (2019 Report – Volume 2, p. 220, Recommendation 7; Public Accounts Committee agreement March 1, 2022)	200	Implemented – (Provincial Auditor 2023 Report, Volume 1)	The SHA has implemented monthly suicide file auditing processes.	N/A- Implemented	N/A- Implemented
Outstanding Recommendation:  8. We recommended the Saskatchewan Health Authority periodically inspect the safety of its facilities in northwest Saskatchewan providing services to patients at risk of suicide.  (2019 Report – Volume 2, p. 221, Recommendation 8; Public Accounts Committee agreement March 1, 2022)	201	Implemented – (Provincial Auditor 2023 Report, Volume 1)	The SHA has implemented a process to inspect the safety of inpatient facilities in Northwest Saskatchewan.	N/A- Implemented	N/A- Implemented

Chapter 19 – Saskatchewan Health Authority	<ul> <li>Efficient Use of MRIs in Regina from 2022 Report of the Provincial Auditor – Volume 1</li> </ul>

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 regularly analyze MRI data to determine causes of significant waits of patients for MRI services.  (2017 Report – Volume 1, p. 140, Recommendation 1; Public Accounts Committee agreement June 13, 2018)	203	Implemented (Provincial Auditor 2022 Volume 1)	The SHA has implemented a process for regularly assessing MRI data to enable evidence based decision making.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation  2. We recommended the Saskatchewan Health Authority formally and systematically assess the quality of MRI services that radiologists provide.  (2017 Report – Volume 1, p. 143, Recommendation 4; Public Accounts Committee agreement June 13, 2018)	204	Partially Implemented	The SHA is developing a peer review and learning program to assess the quality of MRI services provided by radiologists.	The SHA will implement the program once fully developed.	2024

Recommendation 6; 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  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)	204	Partially Implemented	Monthly reports are provided to executive leaders who oversee MRI services.	Once the peer review program is implemented, appropriate reporting for the Board will be developed.	2024
Outstanding Recommendation  4. We recommended the Saskatchewan Health Authority regularly monitor the quality and timeliness of MRI services that contracted private MRI operators provide.	205	Partially Implemented	Monthly reports on timeliness are provided to executive leaders who oversee MRI services.	Once the peer review program is fully implemented, regular monitoring will be developed.	2024

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 that the Saskatchewan Health Authority assess the impact of the surgical biopsy labs receiving accreditation through different bodies.  (2018 Report – Volume 2, p. 140, Recommendation 1; Public Accounts Committee agreement March 1, 2022)	208	Implemented (Provincial Auditor 2022 Volume 2)	Saskatoon and Regina labs now align with the Western Canadian Diagnostic Accrediatation Alliance and College of American Pathologists.	• N/A - Implemented	N/A - Implemented
Outstanding Recommendation:  2. We recommended the Saskatchewan Health Authority enter into a written agreement with the Office of the Chief Coroner about surgical biopsy lab services it provides for forensic autopsies.  (2018 Report – Volume 2, p. 141, Recommendation 2; Public Accounts Committee agreement March 1, 2022)	209	Implemented (Provincial Auditor 2022 Volume 2)	The SHA has entered into a written agreement with the Office of the Chief Coroner.	• 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 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)	210	Partially Implemented	The SHA has worked to develop consistent performance metrics.	Performance metrics will be implemented once integrated with the Laboratory Information System.	2024
Outstanding Recommendation:  4. We recommended the Saskatchewan Health Authority assess the cost-benefit of electronically tracking the location of surgical biopsy specimens throughout the key stages of the lab analysis process.  (2018 Report – Volume 2, p. 145, Recommendation 4; Public Accounts Committee agreement March 1, 2022)	211	Implemented (Provincial Auditor 2022 Volume 2)	The Regina and Saskatoon labs have implemented electronic tracking systems.	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:  5. We recommended the Saskatchewan Health Authority formally assess the surgical biopsy process at its surgical biopsy labs to identify factors inhibiting timely diagnosis.	212	Implemented (Provincial Auditor 2022 Volume 2)	The SHA monitors and tracks lab operations to identify factors that could reduce timely diagnosis.	N/A - Implemented	N/A - Implemented
(2018 Report – Volume 2, p. 147, Recommendation 5; Public Accounts Committee agreement March 1, 2022)					
Outstanding Recommendation:  6. We recommended the Saskatchewan Health Authority educate healthcare providers on properly completing surgical biopsy requisitions for Regina and Saskatoon labs.	213	Partially Implemented	The SHA revised the surgical biopsy requisition form and is developing a completion guide and roll-out plan.	Once the completion guide is complete the new form will be implemented.	2024
(2018 Report – Volume 2, p. 147, Recommendation 6; 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:  7. We recommended the Saskatchewan Health Authority require its labs to keep records of 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)	213	Implemented	A new process has been implemented to reviews the maintenance logs to identify noncompliance in a timely manner.	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 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	The SHA is working to update it Facility Condition Index data for all facilities.	Develop measurable service objectives for key facilities	2024
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	Partially Implemented	Access to current maintenance system data has been restricted.	Implement a new     Computerized Maintenance     Management System.	2024

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
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	The SHA developed the Building Operations Maintenance Program.	The SHA will implement the Building Operations Maintenance Program	2024

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:  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	The SHA has developed a risk-based maintenance plan.	Implement the Computer     Maintenance Management     System.	TBD
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.	The SHA will implement the Building Operations Maintenance Program	2024

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:  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.	Implementation of the new process will be aligned with the implementation of the Computerized Maintenance Management System.	2024
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	New processes have been developed surrounding prioritizing demand maintenance request.	The SHA will operationalize the new process developed.	2024

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:  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, 2022)	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
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.	184	Implemented (Provincial Auditor 2023 Volume 1)	The SHA reviewed patient traffic in Saskatoon and developed a strategy to divert, as appropriate, those patients from emergency departments.	N/A - Implemented	N/A - Implemented
(2013 Report – Volume 2, p. 225, Recommendation 2; Public Accounts Committee agreement January 15, 2015)					

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,	188	Partially Implemented	The SHA is working to standardize inpatient processes to allow for teams to develop patient care plans.	The SHA will continue efforts to standardize inpatient processes.	2024
2015)					
Outstanding Recommendation:  2. We recommended the Saskatchewan Health Authority require staff to follow the policy when completing medication reconciliations prior to discharging patients.	189	Partially Implemented	The SHA has implemented policies and procedures to support Medication Reconciliation and Medication Safety.	The SHA is working with staff and physicians to improve compliance with its medication reconciliation procedures.	2024
(2015 Report – Volume 1, p. 164, Recommendation 8; Public Accounts Committee agreement September 17, 2015)					

Recommendation and Status at Time of Audit	Page of 2023 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.	51	Partially Implemented	In May 2022, the first version of the Information Technology Agreement (ITSA – the master service agreement) between eHealth and the SHA was executed.	eHealth and SHA will     execute the second version     of the ITSA to further define     and mature governance,     processes and other areas     of the arrangement.	Spring 2024
(2018 Report – Volume 2, p. 80, Recommendation 1; Public Accounts Committee agreement March 1, 2022)					
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,	52	Partially Implemented	Manual processes have been implemented to mitigate the risks associated with duties not being separated.	Security access controls and automated processes within the new AIMS system will ensure the separation of duties.	TBD
New Recommendation:  3. We recommend the Saskatchewan Health Authority document and share an overall lessons learned report for the AIMS project with other government agencies.	54	Not Implemented	• N/A	Management will facilitate the completion of a formal lessons learned report for the AIMS project once implemented.	TBD

Chapter 21 - Saskatchewan Health Authority - Preventing and Controlling Hospital-acquired Infections in the Regina General Hospital and Pasqua Hospital from 2022

Report of the Provincial Auditor Volume 1

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 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)	213	Implemented	Provincially standardized Infection Prevention and Control mandatory training has been implemented.	N/A - Implemented	N/A - Implemented
Outstanding Recommendation  2. We recommended the Saskatchewan Health Authority use external observers to conduct regular direct observation hand-hygiene compliance audits in its hospitals.  (2018 Report – Volume 2, p. 161, Recommendation 2; Public Accounts Committee agreement March 1, 2022)	214	Partially Implemented	The SHA implemented a hand hygiene audit program.	Work continues to finalize and expand the program and develop additional educational and training materials	2024

Chapter 21 - Saskatchewan Health Authority - Preventing and Controlling Hospital-acquired Infections in the Regina General Hospital and Pasqua Hospital from 2022 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  3. We recommended the Saskatchewan Health Authority actively monitor actions taken by Regina hospitals' patient-care units with lower than acceptable hand-hygiene compliance rates.	215	Partially Implemented	The SHA implemented a hand hygiene audit program.	Work continues to finalize and expand the program and develop additional educational and training materials.	2024
(2018 Report – Volume 2, p. 163, Recommendation 3; Public Accounts Committee agreement March 1, 2022)					
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.  (2018 Report – Volume 2, p. 166, Recommendation 4; Public Accounts Committee agreement March 1, 2022)	216	Implemented	Quarterly updates on trends and risks are provided to senior management.	N/A - Implemented	N/A – Implemented