PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 14 - Saskatchewan Health Authority from the 2018 Report of the Provincial Auditor Volume 2

Chapter 12 – Saskatchewan Health Authority from the 2019 Report of the Provincial Auditor Volume 2

Chapter 12 – Saskatchewan Health Authority from the 2020 Report of the Provincial Auditor Volume 2

Chapter 11 – Saskatchewan Health Authority from the 2021 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. New Recommendation  We recommend that 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 has not yet considered this recommendation)  Status—Partially Implemented	2018, Ch.14 - P.80 2019, Ch.12- P.81 2020, Ch.12- P.77 2021, Ch.11- P.63	Partially Implemented	<ul> <li>An IT Governance structure has been implemented.</li> <li>The SHA is collaborating with eHealth on the development of an Information Technology Service Agreement (ITSA).</li> <li>A project plan has been developed and legal counsel has been engaged to assist with this work.</li> </ul>	<ul> <li>Participants from eHealth, the SHA and the Ministry of Health will continue the development of the ITSA.</li> <li>The ITSA will be drafted, reviewed and approved in a staged approach as corresponding schedules are completed by the work streams.</li> </ul>	2022-23
2. New Recommendation  We recommend the Saskatchewan Health Authority implement an approved code of conduct policy including permitted vendor-sponsored travel.  (2019 Report - Volume 2, p. 83, Recommendation 1, Public Accounts Committee has not yet considered this recommendation) Status - Implemented	2019, Ch.12- P.83 2020, Ch.12- P.78	Implemented – (Provincial Auditor 2020 Report, Volume 2)	<ul> <li>The SHA approved and implemented a conflict of interest policy in December 2019, which includes sufficient details on permitted vendor-sponsored travel.</li> <li>The Provincial Auditor noted that this recommendation was implemented in the 2020 Report Volume 2.</li> </ul>	N/A - Implemented	N/A

PAC Date: March 1, 2022

3. New Recommendation  We recommend the Saskatchewan Health Authority document its due diligence procedures used to validate suppliers before adding them into its financial system.  (2019 Report - Volume 2, p.84, Recommendation 2, Public Accounts Committee has not yet considered this recommendation) Status - Implemented	2019, Ch.12- P.84 2020, Ch.12- P.78	Implemented – (Provincial Auditor 2020 Report, Volume 2)	N/A- Implemented	N/A - Implemented	N/A
4. New Recommendation  We recommend the Saskatchewan Health Authority separate incompatible duties.  (2019 Report – Volume 2, p.86, Recommendation 3, Public Accounts Committee has not yet considered this recommendation)  Status—Partially Implemented	2019, Ch.12- P.86 2020, Ch.12- P.77 2021, Ch.11- P.64	Partially Implemented	Some issues relating to the segregation of incompatible duties for making payments have been addressed.	This recommendation is expected to be fully addressed with the implementation of the new Administrative Information Management System (AIMS) in 2022.	June 30, 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
1. New Recommendation  We recommend that the Saskatchewan Health Authority assess the impact of the surgical biopsy labs receiving accreditation through different bodies.	P. 140	Implemented - SHA	The Provincial Executive Committee for Laboratory Medicine has assessed the impact and approved the use of both Western Canadian Diagnostic Accreditation Alliance (Saskatoon) and College of American Pathologists (Regina) to provide accreditation to ensure the SHA surgical biopsy labs meet the highest levels of quality.	N/A - Implemented	N/A – Implemented
2. New Recommendation  We recommend 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.	P. 141	Implemented - SHA	A Memorandum of Understanding was completed and signed on December 14, 2020.	N/A - Implemented	N/A – Implemented
3. New Recommendation  We recommend the Saskatchewan Health Authority implement a consistent approach for prioritizing and issuing timely diagnosis reports for surgical biopsies.	P. 144	Partially Implemented - SHA	Provincial performance metrics including standardized turnaround time data for Saskatoon and Regina are provided to the Executive Director Lab Medicine, Provincial Head Lab Medicine, VP, Executive Physician and Ministry of Health on a monthly basis.	A Provincial Standard     Operating Procedure that     will be implemented at all     five Anatomic Pathology     labs. The draft Standard     Operating Procedure is     expected to be reviewed     and approved in 2022, with     implementation to follow     thereafter.	December 31, 2022

4. New Recommendation  We recommend 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.	P. 145	Partially Implemented - SHA	•	Saskatoon implemented a specimen tracking system in December 2018. An RFP for Immunohistochemistry was completed for Saskatoon and Regina, which included specimen tracking for Regina.	Vendor installation to occur in 2022.	December 31, 2022
5. New Recommendation  We recommend that the Saskatchewan Health Authority formally assesses the surgical biopsy process at its surgical biopsy labs to identify factors inhibiting timely diagnosis.	P. 147	Implemented - SHA	•	Constraints were identified that impact the turnaround time and inhibit timely diagnosis. To address them, renovations were completed in Regina with three new grossing workstations and equipment installed.	N/A – Implemented	N/A – Implemented
6. New Recommendation  We recommend that the Saskatchewan Health Authority educates healthcare providers on properly completing surgical biopsy requisitions for Regina and Saskatoon labs.	P. 147	Partially Implemented - SHA	•	A provincial general surgical requisition form was developed in consultation with stakeholders. The approved form is available for use by clinicians.	Roll out and training to occur in 2022	December 31, 2022
7. New Recommendation  We recommend the Saskatchewan Health Authority require its labs to keep records of preventative maintenance completed by technical staff on its surgical biopsy equipment.	P. 149	Implemented - SHA	•	Maintenance logs have always been in place but were not consistently completed by staff in Saskatoon. Staff have been reminded to complete the logs. Management reviews the maintenance logs weekly to identify non-compliance in a timely manner. Recommendation is fully implemented.	N/A - Implemented	N/A – Implemented

PAC Date: March 1, 2022

Chapter 24 - Saskatchewan Health Authority - Preventing and Controlling Hospital-acc	uired Infections in the Regina General Hospital and Pasqua Hospital from 2018
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. New Recommendation  We recommend that the Saskatchewan Health Authority give hospital staff, responsible for patient care, formal training updates on infection prevention and control practices at least annually.	P. 158	Partially Implemented - SHA	<ul> <li>The development of provincially standardized Infection Prevention and Control training and education for onboarding and orientation has been completed.</li> <li>An annual Infection Prevention and Control education module is now available online for all SHA staff.</li> </ul>	Once the Administrative     Information Management System     (AIMS) is implemented, steps will be initiated to make this training mandatory for all staff.	December 31, 2022
2. New Recommendation  We recommend that the Saskatchewan Health Authority use external observers to conduct regular blind direct observation hand-hygiene compliance audits in its hospitals.	P. 161	Partially Implemented - SHA	A standard process for performing blind hand hygiene audits has been developed and posted on the intranet site.	Further development of the provincial hand hygiene audit program was delayed due to the COVID-19 pandemic response.      Beginning January 2022, units/facilities in Regina will be taking part in a trial with a new hand hygiene audit platform that will include direct observation by auditors (all efforts will be made to conduct direct observations as blind as possible).	December 31, 2022
3. New Recommendation  We recommend that the Saskatchewan Health Authority actively monitor actions taken by Regina hospitals' patient-care units with lower than acceptable hand-hygiene compliance rates.	P. 163	Partially Implemented - SHA	<ul> <li>Regina Leaders were reminded to continue hand hygiene auditing, reporting and improvement initiatives.</li> <li>Measures and mechanisms for continuous improvement were developed as part of a</li> </ul>	Beginning in January 2022,     units/facilities in Regina will be     taking part in a trial with a new     hand hygiene audit platform that     will include standardized     compliance reports.	December 31, 2022

PAC Date: March 1, 2022

			provincial hand hygiene accountability and reporting structure.	Compliance with the provincial hand hygiene policy will be monitored and managed accordingly. The trial is expected to be complete by March 31, 2022.	
4. New Recommendation  We recommend that the Saskatchewan Health Authority regularly give senior management a written analysis of emerging risks and causes based on trends of hospital-acquired infections.	P. 166	Implemented - SHA	Updates on trends and risks associated with hospital- acquired infections are provided to senior leaders on a quarterly basis.	N/A - Implemented	N/A – Implemented

Chapter 12 - Saskatchewan Health Au	Chapter 12 - Saskatchewan Health Authority—Maintaining Saskatoon and Surrounding Area Health Care Facilities from 2019 Report Of 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		
1. New Recommendation  We recommend the Saskatchewan Health Authority establish measurable service objectives for its key health care facilities and critical components located in the City of Saskatoon and surrounding areas.	P. 193	Implemented - SHA	<ul> <li>The SHA prepared a high-level assessment of the Saskatoon-area critical infrastructure in fall 2018, with measurable service objectives for critical systems.</li> <li>The SHA developed and implemented a Provincial Capital Asset Plan with measurable service objectives for all assets in the 2020-21 fiscal year.</li> </ul>	N/A – implemented	N/A – implemented		
2. New Recommendation  We recommend the Saskatchewan Health Authority control the accuracy and reliability of maintenance data in its IT system for key health care facilities and components located in the City of Saskatoon and surrounding areas.	P. 195	Partially Implemented - SHA	• N/A	<ul> <li>The SHA will implement processes to control system access and utilization. In addition, the SHA is implementing a software update to track all changes made in the system.</li> <li>Procurement of a Computerized Maintenance Management System (CMMS) is in progress.</li> </ul>	March 31, 2023		
3. New Recommendation  We recommend the Saskatchewan Health Authority maintain complete information on each of its key health care facilities and components located in the City of Saskatoon and surrounding areas to enable the preparation of a comprehensive maintenance plan.	P. 196	Partially Implemented - SHA	<ul> <li>Work standard for entering facility information into the maintenance system has been established.</li> <li>Completeness of information has been reviewed for 19 critical systems within the Saskatoon facilities.</li> </ul>	The SHA is planning to verify all information for key facilities and components in the Saskatoon area.	December 31, 2022		

PAC Date: March 1, 2022

Chapter 12 - Saskatchewan Health Au	thority—M	laintaining Saskatoon and	Surrounding Area Health Care Facilities	from 2019 Report Of Provincial Au	ditor - 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
4. New Recommendation  We recommend the Saskatchewan Health Authority consistently set the nature, extent, and frequency of preventative maintenance activities for similar categories of key health care facilities and components located in the City of Saskatoon and surrounding areas.	P. 198	Partially Implemented - SHA	• N/A	The SHA will implement processes for preventative maintenance of assets.	October 31, 2022
5. New Recommendation  We recommend the Saskatchewan Health Authority use its planned maintenance activities as an input to setting its Saskatoon-area maintenance budget.	P. 199	Partially Implemented - SHA	• N/A	The SHA is developing a risk based plan to maintain its Saskatoon-area facilities.	June 30, 2022
6. New Recommendation  We recommend the Saskatchewan Health Authority complete preventative maintenance on its key health care facilities and components located in the City of Saskatoon and surrounding areas within expected timeframes.	P. 200	Partially Implemented - SHA	• N/A	The SHA is developing standardized procedures to ensure preventative maintenance is completed in a timely manner.	June 30, 2022

PAC Date: March 1, 2022

Chapter 12 - Saskatchewan Health Au	thority—N	laintaining Saskatoon and	Surrounding Area Health Care Facilities	from 2019 Report Of Provincial Au	ditor - 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
7. New Recommendation  We recommend the Saskatchewan Health Authority have written guidance for classifying and prioritizing requests for demand maintenance on key health care facilities and components located in the City of Saskatoon and surrounding areas.	P. 201	Partially Implemented - SHA	• N/A	The SHA is developing written guidance to help Saskatoon-area maintenance staff prioritize demand maintenance requests.	June 30, 2022
8. New Recommendation  We recommend the Saskatchewan Health Authority complete demand maintenance in line with priority rankings for key health care facilities and components located in the City of Saskatoon and surrounding areas.	P. 201	Partially Implemented - SHA	• N/A	The SHA is developing a reporting system to monitor completion rates and compliance to priority ratings.	June 30, 2022
9. New Recommendation  We recommend the Saskatchewan Health Authority consistently document the priority of capital maintenance projects undertaken in the City of Saskatoon and surrounding areas.	P. 202	Implemented - SHA	The SHA has implemented a provincial process for capital intake, prioritization and approval that uses consistent criteria, and evidence to support scoring.	N/A – Implemented	N/A – Implemented

PAC Date: 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
10. New Recommendation  We recommend the Saskatchewan Health Authority report to senior management the results of maintenance activities for its key health care facilities and components located in the City of Saskatoon and surrounding areas.	P. 204	Implemented - SHA	Monthly reports about capital budget execution and preventative and demand maintenance performance are provided to SHA senior management.	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
1. New Recommendation  We recommend the Saskatchewan Health Authority work with others (e.g., Ministry of Health) to analyze key data about rates and prevalence of suicide attempts to rationalize services made available to patients at risk of suicide.	P. 207	Implemented - SHA	<ul> <li>Key Data has been acquired and analyzed to rationalize the alignment and allocation of resources for suicide prevention.</li> <li>Additional resources have been dedicated to areas of highest need.</li> </ul>	N/A- Implemented	N/A- Implemented
2. New Recommendation  We recommend the Saskatchewan Health Authority give suitable training to staff located in northwest Saskatchewan caring for patients at risk of suicide.	P. 211	Partially Implemented - SHA	<ul> <li>SHA identified training needs for staff and applicable training has been provided to all northwest Mental Health and Addictions staff.</li> <li>More work needs to be done on training staff working in other areas.</li> </ul>	N/A- Implemented	N/A- Implemented
3. New Recommendation  We recommend the Saskatchewan Health Authority follow its established protocols to provide psychiatric consultations to patients accessing emergency departments in northwest Saskatchewan who are at high risk of suicide.	P. 214	Partially Implemented - SHA	A process for referring from Emergency Departments for psychiatric consultation has been developed.	An Algorithm for emergency room physicians and clinicians for direct and immediate consultations to LINK or 24 Hour on call Psychiatrists for patients at high risk of suicide needs to be implemented in the Northwest	March 31, 2022

PAC Date: 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
4. New Recommendation  We recommend the Saskatchewan Health Authority address barriers to using videoconferencing to provide psychiatric services to communities in northwest Saskatchewan.	P. 215	Not Implemented - SHA	N/A- Not Implemented	<ul> <li>Implementation of this recommendation has been delayed due to COVID-19.</li> <li>Mental Health Addiction Services will consult further with Digital Health, the Chief Psychiatrist and Primary Health Care Physicians to develop a plan to address barriers in using videoconferencing.</li> </ul>	December 31, 2022
5. New Recommendation  We recommend the Saskatchewan Health Authority analyze reasons patients at risk of suicide miss appointments for mental health outpatient services to help address barriers.	P. 217	Partially Implemented - SHA	Work standards have been implemented for tracking and identifying reasons for clients at risk of suicide not attending appointments	A process to analyze reasons for not attending appointments will be developed.	April 30, 2022
6. New Recommendation  We recommend the Saskatchewan Health Authority follow up with patients (who attempted suicide) discharged from emergency departments in northwest Saskatchewan to encourage treatment, where needed.	P. 219	Implemented - SHA	The process of following up with clients who are recently discharged from emergency departments and are at the risk of self-harm has been expanded and implemented in all sites in northwest Saskatchewan.	N/A- Implemented	N/A- Implemented

PAC Date: 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
7. New Recommendation  We recommend the Saskatchewan Health Authority conduct risk-based file audits of patients at risk of suicide in northwest Saskatchewan.	P. 220	Partially Implemented - SHA	Regular risk based file auditing and reporting as per Ministry of Health guidelines has resumed and will continue.	The former Keewatin Yatthé Health Region will implement the Mental Health Addictions and Information System (MHAIS), along with file auditing and reporting in the near future.	March 31, 2022
8. New Recommendation  We recommend the Saskatchewan Health Authority periodically inspect the safety of its facilities in northwest Saskatchewan providing services to Patients at risk of suicide.	P. 221	Not Implemented - SHA	N/A- Not Implemented	Implementation of this recommendation has been delayed due to COVID-19.	December 31, 2022

PAC Date: March 1, 2022

Chapter 39 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from the 2019 Report of the Provincial Auditor - Volume 2

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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
1. Outstanding Recommendation:  We recommended the Ministry of Health, along with regional health authorities, formally assess whether the distribution of ambulance services are optimal for responding to patient demand.	P. 295	Partially Implemented - SHA	The SHA Emergency Medical Services (EMS) portfolio has developed a proposal to stabilize rural and remote ambulance services, which addresses service delivery issues as well as key recruitment and retention challenges.	The SHA will continue to work with the Ministry of Health to advance plans for optimizing the distribution of ambulance services in Saskatchewan.	December 31, 2022
(2016 Report – Volume 2, p. 131, Recommendation 1; Public Accounts Committee agreement February 26, 2019) Status—Not Implemented					
2. Outstanding Recommendation:  We recommended Cypress Regional Health Authority update its contracts related to the provision of ground ambulance services to include service quality expectations and periodic reporting on them.	P. 296	Partially Implemented	All contracted services in the Southwest region, with the exception of one, have signed new performance based contracts.	The remaining performance- based contract is expected to be executed by the end of 2022.	December 31, 2022
(2016 Report – Volume 2, p. 133, Recommendation 2; Public Accounts Committee agreement February 26, 2019) Status—Partially Implemented					

PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 39 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from the 2019 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
3. Outstanding Recommendation:  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.	P. 297	Implemented- Ministry	Working within the current legislation, Ministry of Health, SHA and EMS industry stakeholders collaboratively worked to develop a consistent provincial ground EMS performance based contract template.	N/A- Implemented	N/A - Implemented
(2016 Report – Volume 2, p. 134, Recommendation 3; Public Accounts Committee agreement February 26, 2019) Status—Not Implemented			<ul> <li>The Ministry continues to monitor SHA's progress on implementation of performance based contracts with contracted ambulance service providers to determine if any future changes to legislation are required.</li> </ul>		
4. Recommendation:  We recommended Cypress Regional Health Authority confirm ground ambulance operators operating in its region hold current ambulance licenses.  (2016 Report – Volume 2, p. 135, Recommendation 4; Public Accounts Committee agreement February 26, 2019)  Status—Implemented	P. 298	Implemented (Provincial Auditor 2019 Volume 2)	N/A- Implemented	N/A - Implemented	N/A - Implemented

PAC Date: March 1, 2022

Chapter 39 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from the 2019 Report of

Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
5. Outstanding Recommendation  We recommended Cypress Regional 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) Status—Partially Implemented	P. 298	Implemented - SHA	The SHA is monitoring response times against targets with monthly and quarterly reports being provided to the South West Manager of EMS and the Director of EMS-South. The reports include the reason(s) specific calls did not meet response time targets.	N/A - Implemented	N/A – Implemented
6. Outstanding Recommendation  We recommend Cypress Regional 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 6; Public Accounts Committee agreement February 26, 2019) Status—Partially Implemented	P. 298	Implemented - SHA	The SHA is monitoring response times against targets with monthly and quarterly reports being provided to the South West Manager of EMS and the Director of EMS-South. The reports include the reason(s) specific calls did not meet response time targets.	N/A - Implemented	N/A – Implemented

PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 39 - Saskatchewan Health Authority – Delivering Accessible and Responsive Ground Ambulance Services in Southwest Saskatchewan from the 2019 Report of

Recommendation and Status at Time of Audit	Page	Current Status	Actions Taken to Implement since PA Report	Planned Actions for Implementation	Timeline for Implementation
7. Outstanding Recommendation We recommend Cypress Regional	P. 300	Partially Implemented - SHA	Performance metrics are included in the Performance Based Agreements.	Reporting against     performance metrics is     expected to be implemented	October 31, 2022
Health Authority report to senior management, the Board, and the public actual results against key measures to				with the new Computer- Aided Dispatch system, planned to go begin in	
assess the success of its ground ambulance services at least annually.				October 2022.	
(2016 Report – Volume 2, p. 141, Recommendation 7; Public Accounts					
Committee agreement February 26, 2019)					
Status—Not Implemented					

PAC Date: March 1, 2022

Chapter 35 – Saskatchewan Health Authority – Providing Timely and appropriate Home-Care Services in the City of Prince Albert and Surrounding Area from the 2019 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
1. Recommendation  We recommended that Prince Albert Parkland Regional Health Authority follow its established policies and procedures and complete the needs assessments as required for homecare services.	P. 324	Implemented (Provincial Auditor 2019 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented
(2014 Report – Volume 2, p. 264, Recommendation 4; Public Accounts Committee agreement September 17, 2015) Status – Implemented					
2. Recommendation  We recommended that Prince Albert Parkland Regional Health Authority require the review and approval by a supervisor of home-care plans.  (2014 Report – Volume 2, p. 265, Recommendation 5; Public Accounts Committee agreement September 17,	P. 326	Implemented (Provincial Auditor 2019 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented
2015) Status – Implemented					

PAC Date: March 1, 2022

Chapter 35 – Saskatchewan Health Authority – Providing Timely and appropriate Home-Care Services in the City of Prince Albert and Surrounding Area from the 2019 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
3. Recommendation  We recommended that Prince Albert Parkland Regional Health Authority prepare and approve work schedules consistent with home-care plans.	P. 326	Implemented (Provincial Auditor 2019 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented
(2014 Report – Volume 2, p. 265, Recommendation 6; Public Accounts Committee agreement September 17, 2015) Status – Implemented					

PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 40 - Saskatchewan Health Authority — Delivering Provincially Funded Childhood Immunizations in La Ronge and Surrounding Area from the 2019 Report of the Provincial Auditor - Volume 2

Chapter 33 - Saskatchewan Health Authority — Delivering Provincially Funded Childhood Immunizations in La Ronge and Surrounding Area from the 2021 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. Recommendation:	Ch.40 – P.304	Implemented (Provincial Auditor	N/A- Implemented	N/A - Implemented	N/A - Implemented
We recommended the Saskatchewan		2019 Volume 2)			
Health Authority periodically formally		,			
analyze and report childhood					
immunization coverage rates by					
community.					
(2017 Report – Volume 1, p. 123,					
Recommendation 1; Public Accounts					
Committee agreement February 26,					
2019)					
Status—Implemented					
2. Recommendation:	Ch.40 – P.305	Implemented (Provincial Auditor	N/A - Implemented	N/A - Implemented	N/A - Implemented
We recommended the Saskatchewan		2019 Volume 2)			
Health Authority properly store					
vaccines as required by the					
Saskatchewan Immunization Manual.					
(2017 Report – Volume 1, p. 125,					
Recommendation 2; Public Accounts					
Committee agreement February 26,					
2019)					
Status—Implemented					

PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 40 - Saskatchewan Health Authority — Delivering Provincially Funded Childhood Immunizations in La Ronge and Surrounding Area from the 2019 Report of the Provincial Auditor - Volume 2

Chapter 33 - Saskatchewan Health Authority — Delivering Provincially Funded Childhood Immunizations in La Ronge and Surrounding Area from the 2021 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
3. Recommendation:	Ch. 40 – P.306 Ch. 33 – P.242	Implemented (Provincial Auditor	N/A - Implemented	N/A - Implemented	N/A - Implemented
We recommended the Saskatchewan		2021 Volume 2)			
Health Authority regularly reconcile					
its on-hand vaccine inventory to					
quantities recorded in its records.					
(2017 Report – Volume 1, p. 125,					
Recommendation 3; Public Accounts					
Committee agreement February 26,					
2019)					
Status—Implemented					
4. Recommendation:	Ch. 40 – P.307	Implemented	N/A - Implemented	N/A - Implemented	N/A -
We recommended the Saskatchewan	Ch.33 – P.243	(Provincial Auditor			Implemented
Health Authority document and make		2021 Volume 2)			
staff aware of emergency event					
recovery plans as required by the					
Saskatchewan Immunization Manual.					
- Casta Cast					
(2017 Report – Volume 1, p. 126,					
Recommendation 4; Public Accounts					
Committee agreement February 26,					
2019)					
Status—Implemented					

PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 40 - Saskatchewan Health Authority — Delivering Provincially Funded Childhood Immunizations in La Ronge and Surrounding Area from the 2019 Report of the Provincial Auditor - Volume 2

Chapter 33 - Saskatchewan Health Authority — Delivering Provincially Funded Childhood Immunizations in La Ronge and Surrounding Area from the 2021 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
5. Recommendation:	Ch. 40 – P.307 Ch. 33 – P.244	Implemented (Provincial Auditor	N/A - Implemented	N/A - Implemented	N/A - Implemented
We recommended the Saskatchewan		2021 Volume 2)			
Health Authority periodically give its Board coverage rate information as it					
relates to provincially funded					
childhood immunizations.					
(2017 Report – Volume 1, p. 128,					
Recommendation 5; Public Accounts					
Committee agreement February 26,					
2019)					
Status—Implemented					

PAC Date: 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
1. Outstanding Recommendation:  We recommended Regina Qu'Appelle Regional 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) Status – Partially Implemented	P. 310	Partially Implemented - SHA	The SHA is in the process of implementing the Accountable Care Unit Model of Care (ACU) at the Regina General Hospital.	The SHA will formalize physician commitment to participate in daily multidisciplinary rounds at the patient's bedside resulting in the patients and family being a part of and understanding the daily care plan.	December 31, 2022
2. Outstanding Recommendation:  We recommended Regina Qu'Appelle Regional 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) Status – Partially Implemented	P. 311	Implemented - SHA	Medication Reconciliation has been implemented on all Medical Surgical inpatient units in the Regina hospitals. Processes are consistent with Accreditation Canada requirements.	N/A - Implemented	N/A- Implemented

PAC Date: 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
3. Recommendation:	P. 312	Implemented - (Provincial	N/A - Implemented	N/A - Implemented	N/A - Implemented
We recommended Regina Qu'Appelle		Auditor 2019			'
Regional Health Authority follow its policy		Volume 2)			
to document patient instructions and					
discuss those instructions with patients before discharge.					
(2015 Report – Volume 1, p. 159,					
Recommendation 4; Public Accounts					
Committee agreement September 17,					
2015)					
Status—Implemented					

PAC Date: 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	P. 246	Implemented (Provincial Auditor	N/A – Implemented	N/A – Implemented	N/A - Implemented
We recommended Sun Country		2020 Volume 1)			·
Regional Health Authority consistently					
complete patient medication profiles					
by documenting patients' weight – Implemented.					
(2013 Report – Volume 2, p. 244,					
Recommendation 12; Public Accounts					
Committee agreement January 15,					
2015)					
Status – Implemented					

PAC Date: 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
1. Recommendation:  We recommended the Saskatchewan Health Authority track actual dates of each stage of MRI services and reasons for rescheduling MRI appointments to help it determine the causes of significant waits of patients for MRI services.  (2017 Report – Volume 1, p. 141, Recommendation 2; Public Accounts Committee agreement June 13, 2018) Status—Implemented	P. 249	Implemented (Provincial Auditor 2020 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented
2. Recommendation:  We recommended the Saskatchewan Health Authority validate the accuracy of MRI services data in its Radiology Information System.  (2017 Report – Volume 1, p. 141, Recommendation 3; Public Accounts Committee agreement June 13, 2018) Status—Implemented	P. 249	Implemented (Provincial Auditor 2020 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented

PAC Date: 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
3. Outstanding Recommendation:  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) Status – Partially Implemented	P. 250	Implemented - SHA	<ul> <li>Since December 2021, weekly robust reporting and analysis on MRI services is provided to operational leaders. This allows timely changes to address any concerns.</li> <li>Additionally, reporting to senior leaders is occurring in a monthly basis.</li> </ul>	N/A - Implemented	N/A - Implemented
4. Outstanding Recommendation:  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) Status – Partially Implemented	P. 252	Partially Implemented - SHA	The SHA and radiologists are in the process of developing a Peer Learning program that will be dependent on technology updates to the provincial system.	<ul> <li>The implementation of Peer Learning program and Peer Review system has been delayed due to COVID-19.</li> <li>The Peer Review system will be the foundation for assessing quality of MRI services that radiologists provide.</li> </ul>	March 31, 2023
5. Recommendation:  We recommended the Saskatchewan Health Authority regularly monitor the selection and volume of MRI scans sent to private MRI operators.  (2017 Report – Volume 1, p. 144, Recommendation 5; Public Accounts Committee agreement June 13, 2018) Status—Implemented	P. 252	Implemented (Provincial Auditor 2020 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented

PAC Date: 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
6. Outstanding Recommendation:  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) Status – Partially Implemented	P. 254	Partially Implemented - SHA	Weekly and monthly analysis reporting on MRI services including contracted private are provided to operational and senior leaders within Medical Imaging.	<ul> <li>The reporting is being continually reviewed and enhanced via an iterative evaluation process.</li> <li>Measurements of timeliness will require IT enhancements and/or the implementation of intensive manual processes. This is delayed due to COVID-19.</li> </ul>	December 31, 2022
7. Outstanding Recommendation:  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) Status – Partially Implemented	P. 254	Implemented - SHA	<ul> <li>At December 2021 monthly and weekly (when appropriate) analysis reports on MRI services are provided to senior leadership.</li> <li>Since amalgamation, these types of reports are submitted to senior leadership rather than the Board.</li> </ul>	N/A – Implemented	N/A – Implemented

PAC Date: March 1, 2022

Chapter 26 - Saskatchewan Health Authority — Maintaining Medical Equipment in Healthcare Facilities in Melfort and Surrounding Area from the 2020 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	P.258	Implemented (Provincial Auditor 2020	N/A - Implemented	N/A - Implemented	N/A - Implemented
We recommended Kelsey Trail		Volume 1)			
Regional Health Authority maintain					
all equipment in accordance with the required standards.					
(2010 Report – Volume 2, p. 183,					
Recommendation 2; Public Accounts					
Committee agreement January 19,					
2011)					
Status—Implemented					

PAC Date: March 1, 2022

Chapter 27 - Saskatchewan Health Authority — Medication Management in Long-Term Care Facilities in Kindersley and Surrounding Area from the 2020 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
1. Recommendation:  We recommended the Saskatchewan Health Authority use a multidisciplinary approach (e.g., physicians, nurses, and pharmacists) for finalizing medication plans for long-term care residents.  (2014 Report – Volume 2, p. 245, Recommendation 6; Public Accounts Committee agreement September 17, 2015)	P. 260	Implemented (Provincial Auditor 2020 Volume 1)	• N/A – Implemented	N/A – Implemented	N/A - Implemented
2. Recommendation:  We recommended the Saskatchewan Health Authority follow its established policies and procedures for medication changes for its long-term care residents.  (2014 Report – Volume 2, p. 250, Recommendation 11; Public Accounts Committee agreement September 17, 2015) Status—Implemented	P. 260	Implemented (Provincial Auditor 2020 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented

PAC Date: March 1, 2022

Chapter 27 - Saskatchewan Health Authority — Medication Management in Long-Term Care Facilities in Kindersley and Surrounding Area from the 2020 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
3. Recommendation:	P. 260	Implemented (Provincial Auditor 2020	N/A – Implemented	N/A - Implemented	N/A - Implemented
We recommended the Saskatchewan		Volume 1)			· ·
Health Authority follow its policy for					
documenting, in the long-term care					
residents' medical records, all of the					
medication-related activities.					
(2014 Report – Volume 2, p. 248,					
Recommendation 10; Public Accounts					
Committee agreement September 17,					
2015)					
Status—Implemented					

PAC Date: March 1, 2022

Chapter 27 - Saskatchewan Health Authority — Medication Management in Long-Term Care Facilities in Kindersley and Surrounding Area from the 2020 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
4. Outstanding Recommendation:  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)  Status – Not Implemented	P. 261	Implemented - SHA	<ul> <li>Clinical Nurse Educators provide (through regional clinical education) education to all care staff on the use of medications as a restraint which includes a review of the Least Restraint Policy and Procedure, specifically highlighting the restraint use process and need for consent.</li> <li>As of the summer of 2020, a new education program was rolled out for all RNs &amp; LPNs in Long Term Care. This education used videos and on-line work for the Least Restraint and Consent for High Risk Medication policies. Regular random audits that have been completed indicate staff is following policy and obtaining consent for high-risk medications.</li> </ul>	• N/A – Implemented	N/A- Implemented

PAC Date: March 1, 2022

Chapter 27 - Saskatchewan Health Authority — Medication Management in Long-Term Care Facilities in Kindersley and Surrounding Area from the 2020 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
5. Outstanding Recommendation  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. 220, Recommendation 12; Public Accounts Committee agreement September 17, 2015)  Status – Not Implemented	P. 261	Implemented - SHA	<ul> <li>A policy requiring informed written consent from long-term care residents or their designated decision makers for changes in high-risk medication was created, and was implemented in the former Heartland Health Region in October 2015.</li> <li>As of June 30, 2021, regular random audits indicate staff are following policy and obtaining consent for high-risk medications.</li> </ul>	N/A - Implemented	N/A - Implemented
6. Recommendation  We recommended the Saskatchewan Health Authority establish a process to identify trends, needs, and issues related to medication management in its long-term care facilities.  (2014 Report – Volume 2, p. 242, Recommendation 2; Public Accounts Committee agreement September 17, 2015) Status—Implemented	P. 262	Implemented (Provincial Auditor 2020 Volume 1)	• N/A – Implemented	N/A – Implemented	N/A – Implemented

PAC Date: March 1, 2022

Chapter 27 - Saskatchewan Health Authority — Medication Management in Long-Term Care Facilities in Kindersley and Surrounding Area from the 2020 Report of the
Provincial Auditor - Volume 1

Recommendation and Status at Time	Page	Current Status	Actions Taken to Implement since	Planned Actions for	Timeline for
of Audit			PA Report	Implementation	Implementation
7. Recommendation:	P. 262	Implemented	N/A – Implemented	N/A – Implemented	N/A –
		(Provincial Auditor 2020			Implemented
We recommended the Saskatchewan		Volume 1)			
Health Authority collect and analyze					
information to improve medication					
plans for long-term care residents.					
(2014 Report – Volume 2, p. 254,					
Recommendation 17; Public Accounts					
Committee agreement September 17,					
2015)					
Status—Implemented					

PAC Date: March 1, 2022

Chapter 28 - Saskatchewan Health Authority – Minimizing Employee Absenteeism from the 2020 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
1. Outstanding Recommendation:  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.  (2017 Report – Volume 2, p. 187, Recommendation 1; Public Accounts Committee agreement February 26, 2019)  Status – Partially Implemented	P. 264	Partially Implemented	Human Resources provides reporting on employees whose sick time exceeds the regional average to Managers for review and follow-up.	Work to further define the role of Human Resources in this area will be addressed as part of the Administrative Information Management System (AIMS) development phase two.	December 31, 2022
2. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority implement standard detailed checklists to aid in conducting and documenting meetings with employees who have excessive absenteeism.  (2017 Report – Volume 2, p. 188, Recommendation 2; Public Accounts Committee agreement February 26, 2019) Status—Implemented	P. 265	Implemented (Provincial Auditor 2020 Volume 1)	The Provincial Auditor noted that the recommendation has been implemented in 2020 Report Volume 1.	N/A – Implemented	N/A – Implemented

PAC Date: 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
3. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority monitor that those responsible for employee attendance management document discussions and actions with employees who have excessive absenteeism.  (2017 Report – Volume 2, p. 188, Recommendation 3; Public Accounts Committee agreement February 26, 2019) Status – Partially Implemented	P. 266	Partially Implemented - SHA	Human Resources developed processes for monitoring documentation of discussions with employees who have excessive absenteeism.	<ul> <li>This work was paused due to COVID-19.</li> <li>These processes will be updated and implemented as part of the Administrative Information Management System (AIMS) development phase two.</li> </ul>	December 31, 2022
4. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority analyze significant causes of its employees' absenteeism and implement targeted strategies to address them.  (2017 Report – Volume 2, p. 190, Recommendation 4; Public Accounts Committee agreement February 26, 2019)  Status – Not Implemented	P. 266	Partially Implemented - SHA	• N/A	This will be addressed as part of the Administrative Information Management System (AIMS) development phase two.	December 31, 2022

PAC Date: 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
5.Outstanding Recommendation:	P. 267	Partially Implemented - SHA	• N/A	This will be addressed as part of the Administrative Information	December 31, 2022
We recommended the Saskatchewan		, , , , , , ,		Management System (AIMS)	
Health Authority give the Board				implementation.	
periodic reports on the progress of					
attendance management strategies in					
reducing employee absenteeism and					
related costs.					
(2017 Report – Volume 2, p. 190,					
Recommendation 5; Public Accounts					
Committee agreement February 26,					
2019)					
Status – Not Implemented					

PAC Date: March 1, 2022

Chapter 29 - Saskatchewan Health Authority — Overseeing Contracted Special-care Homes in Saskatoon and Surrounding Area from 2020 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
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1. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority work with the Ministry of Health to clarify the accountability relationship between the Authority, the special care homes, and the Ministry of Health.	P.271	Implemented (Provincial Auditor 2020 Volume 1)	N/A- Implemented	N/A - Implemented	N/A - Implemented
(2017 Report – Volume 1, p. 167, Recommendation 1; Public Accounts Committee agreement February 26, 2019) Status—Implemented					
2. Outstanding Recommendation:  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.  (2017 Report – Volume 1, p. 168, Recommendation 2; Public Accounts Committee agreement February 26, 2019) Status-Partially Implemented	P. 271	Partially Implemented - SHA	The SHA is negotiating a new standard agreement with the Provincial Affiliate Resource Group (PARG).	The SHA will continue to work with the Provincial Affiliate Resource Group to finalize the standard agreement and supporting schedules.	July 1, 2022

PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 29 - Saskatchewan Health Authority — Overseeing Contracted Special-care Homes in Saskatoon and Surrounding Area from 2020 Report of the Provincial Auditor - Volume 1

Recommendation and Status at	Page	Current Status	Actions Taken to Implement since PA	Planned Actions for	Timeline for
Time of Audit	rage	Current Status	Report	Implementation	Implementation
			•	·	•
3. Outstanding Recommendation:	P. 273	Implemented -	The Ministry updated the Program	• N/A	N/A -
		SHA	Guidelines for special care homes		Implemented
We recommended the			and used the guidelines that are		
Saskatchewan Health Authority work			related to quality of care to		
with the Ministry of Health to			develop an inspection process for		
confirm performance measures that			compliance. The inspections will		
it requires contracted special care			inform the Ministry, SHA, and		
homes to report on to help them			affiliates of performance of each		
assess each home's compliance with			home and corrective action plans		
the Ministry of Health's Program			will be reported to the Ministry		
Guidelines for special care homes					
and improve quality of resident care.			This work is completed and the		
			inspection process is being led by		
(2017 Report – Volume 1, p. 170,			the Ministry.		
Recommendation 3; Public Accounts			,		
Committee agreement February 26,					
2019)					
Status – Partially Implemented					

PAC Date: March 1, 2022

Chapter 29 - Saskatchewan Health Authority — Overseeing Contracted Special-care Homes in Saskatoon and Surrounding Area from 2020 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
4. 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) Status – Partially Implemented	P. 273	Partially Implemented	• N/A	As part of the new Principles and Services Agreement being negotiated with the Provincial Affiliate Resource Group, the SHA will determine key performance measures and reporting requirements including targets and document those in schedules to the agreement.	July 1, 2022
5. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority periodically inspect special care 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) Status – Not Implemented	P. 274	Implemented - SHA	The Ministry of Health began inspecting long-term care (LTC) homes to ensure compliance with the Program Guidelines for Special Care homes in December 2021.	Routine inspections will occur on a three year cycle and may occur more frequently should issues arise.	December 31, 2022

PAC Date: March 1, 2022

Saskatchewan Health Authority

Chapter 29 - Saskatchewan Health Authority — Overseeing Contracted Special-care Homes in Saskatoon and Surrounding Area from 2020 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
6. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority take prompt action when it finds non- compliance with key measures that assess special care homes compliance with the Ministry of Health's Program Guidelines for special care homes.	P. 274	Not Implemented - SHA	• N/A	Work continues on the Principles and Services Agreement by the SHA and Provincial Affiliate Resource Group, which will include a framework for non- compliance with agreed upon key measures.	July 1, 2022
(2017 Report – Volume 1, p. 177, Recommendation 6; Public Accounts Committee agreement February 26, 2019) Status – Not Implemented					

PAC Date: March 1, 2022

Chapter 22 - Saskatchewan Health Authority—Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from the 2021 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
1. Outstanding 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)  Status—Not Implemented	P. 243	Not Implemented	N/A – Not Implemented	<ul> <li>Counselling wait times are being monitored with corrective action plans developed when targets are not met.</li> <li>Options will be explored for increasing access to these services in response to growing demand.</li> <li>Efforts in this area have been impacted by COVID-19 and recruitment challenges.</li> </ul>	December 31, 2022
2. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority implement a provincial integrated mental health record system to record services provided to mental health and addictions clients.  (2018 Report – Volume 1, p. 113, Recommendation 2; Public Accounts Committee agreement February 26, 2019)  Status—Implemented	P. 246	Implemented (Provincial Auditor 2021 Volume 1)	N/A- Implemented	N/A - Implemented	N/A - Implemented

PAC Date: March 1, 2022

Chapter 22 - Saskatchewan Health Authority—Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from the 2021 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
3. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority develop a strategy to collect key mental health and addictions client information from healthcare professionals for the provincial integrated mental health record system.	P. 246	Not Implemented	• N/A	There is provincial work occurring regarding the integration of a provincial health record that will be inclusive of mental health and addiction client information.	December 31, 2022
(2018 Report – Volume 1, p. 114, Recommendation 3; Public Accounts Committee agreement February 26, 2019) Status—Not Implemented					
4. Recommendation:  We recommended the Saskatchewan Health Authority use a model to assist staff in better matching appropriate services to mental health and addiction clients' needs in its Northeast integrated service area.  (2018 Report – Volume 1, p. 121, Recommendation 6; Public Accounts Committee agreement February 26, 2019) Status—Implemented	P. 248	Implemented (Provincial Auditor 2021 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented

PAC Date: March 1, 2022

Chapter 22 - Saskatchewan Health Authority—Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from the 2021 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
5. Outstanding Recommendation:  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.  (2018 Report – Volume 1, p. 114, Recommendation 4; Public Accounts Committee agreement February 26, 2019)  Status—Partially Implemented	P. 249	Partially Implemented	• N/A	<ul> <li>Communication Recovery Team tracking client episode of care for approximately 25% of clients to better understand client needs.</li> <li>SHA will continue to use Mental Health and Addictions Information System (MHAIS) reporting features to understand client service usage.</li> <li>Once data collection/analysis is complete, SHA will use the information to better serve clients.</li> </ul>	December 31, 2022
6. Outstanding Recommendation:  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) Status—Not Implemented	P. 250	Not Implemented	• N/A	<ul> <li>Work to implement this recommendation is ongoing. Due to COVID-19 response, no further provincial work has occurred with the exception of the Assisted Self-Isolate Site work.</li> <li>The pre- and post-treatment beds and residential support beds for this area are set for implementation by March 1, 2022.</li> </ul>	December 31, 2022

PAC Date: March 1, 2022

Chapter 22 - Saskatchewan Health Authority—Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from the 2021 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
7. Recommendation:  We recommended the Saskatchewan Health Authority require staff to document the post-detox support arranged for detox clients in its Northeast integrated service area.  (2018 Report – Volume 1, p. 122, Recommendation 7; Public Accounts Committee agreement February 26, 2019) Status—Implemented	P. 250	Implemented (Provincial Auditor 2021 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented
8. Recommendation:  We recommended the Saskatchewan Health Authority assess alternatives to decrease the number of mental health and addiction clients that do not show up for scheduled appointments or treatment in its Northeast integrated service area.  (2018 Report – Volume 1, p. 123, Recommendation 8; Public Accounts Committee agreement February 26, 2019)  Status—Implemented	P. 251	Implemented (Provincial Auditor 2021 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented

PAC Date: March 1, 2022

Chapter 22 - Saskatchewan Health Authority—Providing Timely Access to Mental Health and Addictions Services in Prince Albert and Surrounding Areas from the 2021 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
9. Outstanding Recommendation:  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)	P. 252	Partially Implemented (Provincial Auditor 2021 Volume 1)	Processes have been implemented that require documentation of follow-up when clients do not maintain their scheduled appointments.	<ul> <li>Management will implement a review process to ensure there is consistent documentation of follow-up when clients do not maintain scheduled appointments.</li> <li>This work was delayed due to COVID-19.</li> </ul>	December 31, 2022
Status—Partially Implemented  10. Recommendation:  We recommended the Saskatchewan Health Authority accurately track and report wait times to access outpatient mental health and addictions services in its Northeast integrated service area.  (2018 Report – Volume 1, p. 123, Recommendation 10; Public Accounts Committee agreement February 26, 2019) Status—Implemented	P. 253	Implemented (Provincial Auditor 2021 Volume 1)	N/A- Implemented	N/A - Implemented	N/A - Implemented

PAC Date: March 1, 2022

Chapter 23 - Saskatchewan Health Authority – Triaging Emergency Department Patients in Saskatoon Hospitals from the 2021 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
1. Recommendation:  We recommended the Saskatchewan Health Authority (formerly Saskatoon Regional Health Authority) put processes in place to ensure emergency department patients see physicians within established time goals.	P. 256	Implemented (Provincial Auditor 2021 Volume 1)	• N/A - Implemented	N/A - Implemented	N/A - Implemented
(2013 Report – Volume 2, p. 233, Recommendation 7; Public Accounts Committee agreement January 15, 2015) Status—Implemented					
2. Recommendation:  We recommended the Saskatchewan Health Authority (formerly Saskatoon Regional Health Authority) staff routinely reassess patients in emergency department waiting rooms to determine that their conditions have not deteriorated.  (2013 Report – Volume 2, p. 232, Recommendation 5; Public Accounts Committee agreement January 15, 2015) Status—Implemented	P. 257	Implemented (Provincial Auditor 2021 Volume 1)	N/A - Implemented	N/A - Implemented	N/A - Implemented

PAC Date: March 1, 2022

Chapter 23 - Saskatchewan Health Authority – Triaging Emergency Department Patients in Saskatoon Hospitals from the 2021 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
3. Outstanding Recommendation:  We recommended the Saskatchewan Health Authority (former Saskatoon Regional Health Authority) provide consultant care for less-urgent or non-urgent patients outside of its emergency departments.  (2013 Report – Volume 2, p. 225,	P. 258	Partially Implemented - SHA	System flow initiatives are being identified for implementation in Saskatoon to address ongoing acute care capacity challenges.	<ul> <li>Implementation of this recommendation has been delayed due to COVID-19.</li> <li>By March 31, 2022, SHA plans to establish electronic tracking of patients presenting to support improvements in this area.</li> </ul>	March 31, 2023
Recommendation 2; Public Accounts Committee agreement January 15,					
2015)					
Status – Partially Implemented					