

SASK HEALTH

DECEMBER 2019



INSIDE

- Connecting your care /3
- Enhancing quality and safety /5
- Jim Pattison Children's Hospital /7
- Reducing waits at Regina clinic /9
- Seamless experience /11
- Telehealth saving patients time, travel /12



saskhealthauthority.ca



Saskatchewan
Health Authority

Working together to improve our health and well-being

What a difference two years can make.

The Saskatchewan Health Authority (SHA) has evolved from being a concept to reality where signs of transformation are evident across the province and at every level of the organization. Staff and physicians, along with patients, families, Indigenous and community partners, are working together in new ways to establish a co-ordinated provincial approach to plan and deliver health care.

Our aim is to provide high-quality, safe, inclusive care that's locally delivered and provincially strengthened. In the area of newborn care, for example, we are enhancing the neonatal special care nursery in Prince Albert's Victoria Hospital to allow more sick babies to remain in that city. At the same time, we're providing state-of-the-art services at the new Jim Pattison Children's Hospital in Saskatoon. This provincial facility, now available to children, mothers and families, is expected to put us at the forefront of research and innovation.

By connecting research, clinical evidence and innovation with front-line providers, we are facilitating new ways of improving care across Saskatchewan – ways that include local voices and better co-ordination of services and programs.

Through the establishment of community teams that include physicians as leaders we are making better service connections so patients, clients, residents and their families get the right care, in the right place, at the right time, from the right health care provider, as close to home as possible.

Part of this focus includes improving access to mental health and addictions services as well as building system capacity. This year, we opened new treatment beds across the province, provided more programs for youth, launched community recovery teams and are offering online mental health therapy through a partnership with the University of Regina. This work is among the many ways we are fulfilling the recommendations of the *Advisory Panel on Health System Structure Report*, the blueprint for the formation of the SHA.

Improving the health and well-being of First Nations and Métis people is important to us. In March, we formally committed to fulfilling the health care Calls to Action, outlined in the Truth and Reconciliation Commission of Canada's report. We aspire to create a safe and welcoming environment for everyone.

Step by step, we are working to methodically put a structure in place that supports connected care in the community and within our facilities, enables stability, supports cultural safety and allows us to deliver on foundational pieces of work.

Through the systematic development of our health system, we are realizing our mission to *work together to improve our health and well-being. Every day. For everyone.*



A handwritten signature in black ink, appearing to read 'S. Livingstone'.

Scott Livingstone
Chief Executive Officer (CEO)
Saskatchewan Health Authority



A handwritten signature in black ink, appearing to read 'R.W. Carter'.

R.W. (Dick) Carter
Chairperson, Board of Directors
Saskatchewan Health Authority

Patient advisor brings northern perspective to role



Terri Hansen-Gardiner

I'm pleased to be included in *SaskHealth*, Saskatchewan Health Authority's second annual report to the community as a representative of one of the hundreds of citizens who serve as patient and family advisors to the health care system.

In 2011, I was diagnosed with breast cancer. I'm happy to say I am now cancer-free but going through cancer care was an eye-opening experience.

I saw so many Indigenous people struggling to get care and to understand the care they were being provided. I promised myself when I got better I would make it my mission to be a voice for Indigenous people and for those who live in northern Saskatchewan. In 2014, I became a member of the Patient and Family Advisory Council with the Saskatchewan Cancer Agency. In 2019, I was honoured to be asked to serve as a patient and family advisor with the Saskatchewan Health Authority's (SHA's) newly formed Patient and Family Leadership Council. Members include 16 patient and family advisors, seven SHA members who are leaders and six SHA staff supports. We meet six times a year; our first meeting was in June 2019.

I live in Île-à-la-Crosse and, in my role as a patient advisor with the cancer agency, I have travelled all over northern Saskatchewan. This summer, I went with the Saskatchewan Cancer Agency's northern health bus as it visited women in 30 northern communities. This service makes sure women in northern and rural areas have access to care they might not otherwise be able to receive.

Sometimes I serve as an interpreter. People are really pleased that I speak my native language and, for some, it makes more sense to hear their health information explained in Cree.

Language can be a barrier to care. So can distance. People in the North don't always have access to care where they live and have to travel a long way for services. If you're on a fixed income and you are diagnosed with cancer, not everyone realizes you might not be able to afford to go to appointments.

As a member of the Patient and Family Leadership Council, I am sharing these issues with the other council members. We are all dedicated to the same thing: working together to embed and advance a culture of patient and family centred care. As partners with the SHA leadership, we are co-designing projects, policies and strategies to make meaningful change for all people of Saskatchewan. Part of this work includes supporting the Truth and Reconciliation Commission of Canada's health care Calls to Action.

Improving health care for everyone, no matter where they live or what language they speak, is essential to me. Cancer opened my eyes and now I see that I have an important role to play. Improving the health system is really my calling.

Terri Hansen-Gardiner
Patient and Family Advisor
Île-à-la-Crosse



Connecting your care

We're bringing health care closer to you. Meeting your health needs to keep you healthier and out of the hospital is important to us.

We're focusing on improving collaborative, team-based care in the community and in the hospital as well as on enhancing access to mental health and addictions services. We want to ensure you receive seamless, high-quality, safe care whether you move from hospital unit to hospital unit, between care providers or community services or are discharged from the hospital to home.

A number of new and ongoing initiatives are helping better connect your care:

- Providing you with health care closer to your community or even in your home is an important part of this work. One example is a new program in Regina that provides paramedics with specialized training so they can treat palliative patients in their homes. A second example is the recent move of Four Directions Community Health Centre in Regina to a more centralized location. Now, North Central residents have better access to a full range of health care services provided by a collaborative team of health professionals.
- In the hospital, the introduction of bedside nursing rounds and interdisciplinary rounds are bringing health care teams together to co-ordinate care and keep patients and their families informed and involved.
- We're expanding mental health and addictions services.
 - We've launched eight community recovery teams around the province to take better care of people with complex and persistent mental health issues as close to home as possible.
 - We plan to create more than 140 new beds to treat and/or support individuals with mental health and addictions challenges. These include approximately 75 residential support beds for those with mental illness, approximately 50 pre- and post-addiction treatment beds and 22 in-patient addiction treatment beds, six of which are dedicated to youth.
 - We're supporting the mental health of young people through the launch of programming in five high schools and a partnership to create a safe space and outreach service in Saskatoon.
- Local services are strengthened provincially with the September opening of the Jim Pattison Children's Hospital in Saskatoon and the grand opening of the Saskatchewan Hospital North Battleford this past March.



Dan Lindsay, and his son Michael Lindsay-Sayer, meet with public health nurse Jennifer Bellegarde at Four Directions Community Health Centre.

Community recovery teams improve quality of clients' lives

Dozens of people are benefiting from a new provincial initiative designed to provide client-centred support to individuals with serious and persistent mental illness for whom traditional mental health services are not frequent or intensive enough.

“There are people in our community with mental health and addictions issues that need an intense, daily service in order to stay out of the emergency room and psychiatric unit. The community recovery team was created to get these high-end, high-needs people stabilized and hooked up with as many services as possible, so they don’t fall through the cracks,” said Murray Hubick, manager of Regina’s Community Recovery Team.

In 2019, eight teams were established across the province. They are located in Regina, Saskatoon, Prince Albert, North Battleford, Yorkton, Moose Jaw, Weyburn and Swift Current. Each interdisciplinary team includes social workers, a community health nurse, an occupational therapist, an addictions counsellor and an assessor co-ordinator. Clients are referred through adult psychiatric units and the emergency department.

Community Recovery Teams

Client-centered, customized support for individuals with serious, persistent mental illness and very complex needs.

Teams are flexible and may include:

- Nurse
- Social worker
- Occupational therapist
- Peer specialist
- Addiction counsellor
- Vocational specialist
- Other recovery support staff

Team transforms man's life

When Murray Hubick met Ross,* he was not in a good place.

Ross was panhandling and sleeping on the streets, after having been banned from every shelter in Regina for bad behaviour. He was in and out of jail, the emergency department and detox centres.

Then Hubick and Regina’s Community Recovery Team got involved.

Six months later, Ross has an apartment and access to the food bank and social services. He’s meeting regularly with a psychiatrist and taking his medication every day.

“He’s come a long way... The police and his psychiatrist can’t believe the transformation.”

– Murray Hubick, manager, Community Recovery Team



Regina’s Community Recovery Team helps change lives.

He has a good relationship with the police, who recently took him for a ride at his request and treated him to an ice cream.

“He’s come a long way,” said Hubick. “We go to his residence every day to give him his daily meds and a weekly injection, and we have our Police and Crisis team visit him on weekends. The police and his psychiatrist can’t believe the transformation from what he was like before to what he’s like today.”

*Name has been changed to protect the identity of the individual.

Call HealthLine at 8-1-1 for
Mental Health and Addictions support

HealthLine 811
HEALTHLINEONLINE.CA +++

Saskatchewan Health Authority

Delivering safe, high-quality care

We're creating a culture that promotes the safety of patients, residents, employees and physicians. Patient, employee and physician safety are not mutually exclusive; good working conditions help prevent patients and providers from experiencing physical, emotional or psychological harm.

In 2019, we carried out essential work that will direct our quality and safety efforts in the years to come. We signed the Saskatchewan Health Authority (SHA) Safety Charter, developed our four-year accreditation model and created a quality and safety plan, all of which support our long-term vision: *Healthy People, Healthy Saskatchewan*.

These initiatives will guide the organization in providing patient and family centred care and services, helping create a climate

of psychological and cultural safety while proactively focusing on the elimination of preventable harm. The recent experience-based co-design events in maternal and children's programs and the toolkit implemented at Yorkton and District Nursing home are two ways we're building safety into our system.

Our foundational work creates a framework to drive continuous learning and improvement. Ensuring staff and physicians employ the most effective practices so patients receive the most appropriate care is part of this focus.

Ensuring you get the safest quality of care is our priority. *We work together to improve our health and well-being. Every day. For everyone.*



Pain clinic expansion part of bigger opioid response



The Regina Chronic Pain Clinic is expanding its delivery of services from 1.5 to 5 days per week by March 2020.

"Our goal is to decrease waitlists while offering appropriate treatment and resources for people with chronic pain, chronic pain syndrome and substance use disorder as well as support for opioid tapering," said Robert Parker, manager of the Stewardship and Clinical Appropriateness Department. "Providing mentorship and training for family physicians and other providers who prescribe medications will support this goal."

The primary health care clinic is currently staffed by a physician, a licensed practical nurse, a registered psychiatric nurse and a pharmacist who are supported through partnerships with other care providers within and outside of the Saskatchewan Health Authority. Staff personalize therapies to patients' needs, using a variety of treatment methods, including exercise and physiotherapy, to reduce patients' pain.

Flo Karnes, a registered nurse, is a patient of the clinic.

"I reaped the benefits of experts who believe there is a 'better way,'" she wrote in a letter praising the care she received at the clinic. "I have been able to continue in a job I love and continue to provide care to people... I am now a 'success story,' my pain is better and, overall, my life has improved."

Flo Karnes says she's a clinic "success story."



Tabitha Clayson (left) would like care gaps addressed.

Drawing from patients' and families' insights

Navigating the health system can be challenging, especially when you have complex care needs.

"Patient and family centred care has really lived at a philosophy level for a long time; it's been difficult to implement the tools to support it," said Cathy Cole, director of Patient and Client Experience Program Support and Development.

"Experience-based co-design is one of those core tools that will help us turn recommendations into actions."

What is experience-based co-design? It means consulting those who have experience with the health care system (patients, families and care providers) and then designing something better together.

Staff with maternal and children's care programs at Wascana Rehabilitation Centre (WRC) in Regina, the Alvin Buckwold Child Development Centre in Saskatoon and the Pediatrics Unit in Prince Albert volunteered to do just this. In June, they surveyed and interviewed 52 family members and 51 staff about their experiences, "asking them about how they felt during each step of their visit or their work and why," said Cole.

By September, they had collected enough information to host three co-design events. Tabitha Clayson was one of 15 family members who participated.

Clayson's five-year-old son, Finnegan, has complex care needs. She and her son frequently visit the WRC.

Closing the gaps in care is important to her. "The hand-off of care needs to be improved," she noted, "because, as children grow, certain services and funding expire. Also, there's just not enough information being exchanged by providers."

Clayson's insights, along with dozens of other recommendations for improving maternal and children's care, are being revised and prioritized. The list includes everything from parking to wait lists to care transitions. Program changes in response to these recommendations will take place over the coming months.

Yorkton team building culture of safety

A 2019 initiative to improve safety on the Skinner Memory Care Unit at Yorkton and District Nursing Home has resulted in safer care for patients, residents and staff.

"It's about changing the culture, about promoting the presence of safety rather than an absence of harm," said Danielle Bellamy, director of Continuing Care Southeast for the Saskatchewan Health Authority.

Beginning in January 2019, as part of a national Canadian Patient Safety Institute project, managers, staff and a family advisor worked together to understand the current culture of safety on the unit, known as a neighbourhood, and then develop and implement tools that would build safety practices into staff members' daily work.

"We created a toolkit to facilitate discussions and educate our teams on different types of harm that can occur and we provided an avenue through daily team discussions for staff to work through identified safety concerns so that teams are empowered to problem-solve in the moment."

The results are exciting.

The neighbourhood saw a 42 per cent decrease in reported resident harm and a 69 per cent decrease in reported staff injuries, when comparing January to June of 2019 with the same time period in 2017.

There was also a significant reduction in the use of anti-psychotic drugs among residents who do not have a diagnosis of psychosis. This rate dropped 83 per cent between December 2018 and June 2019.

"I think it's really encouraging," said Bellamy.

The safety tools and practices created in the neighbourhood have been adopted in a second neighbourhood at the care home and at Gateway Lodge in Canora.



Promoting safety is a priority for Skinner Memory Care Unit staff.



Saskatchewan's children's hospital opens

A decade's worth of hard work and determination culminated with the opening this fall of the Jim Pattison Children's Hospital (JPCH) in Saskatoon, Saskatchewan's first dedicated children's and maternal hospital.

"It started with a simple vision: Provide world-class health care for Saskatchewan children and families for generations," said Premier Scott Moe at the hospital's grand opening on Sept. 5. "The facility will provide hope and healing, and will have an impact on Saskatchewan that is sure to extend far beyond the walls of this hospital."

The five-floor, 176-bed facility, opened Sept. 29.

It offers state-of-the-art equipment and amenities for children, mothers and families from across the province and will put

Saskatchewan at the forefront of research and innovation. Centrally located on the University of Saskatchewan campus, the JPCH offers neonatal intensive care, pediatric intensive care, general pediatrics, pediatric emergency and ambulatory services. Maternal services include labour and birth, prenatal and postpartum care, maternal fetal medicine and maternal outpatients. The facility also includes the new Royal University Hospital Adult Emergency Department.

Additional features include special family spaces, indoor and outdoor play areas, a theatre, a child-minding area and Saskatchewan's first Pediatric Sleep Lab, which means children no longer need to travel out of the province for sleep studies. Kid-friendly images of wolves, frogs, moose and other animals and Saskatchewan scenes line the walls and define spaces.

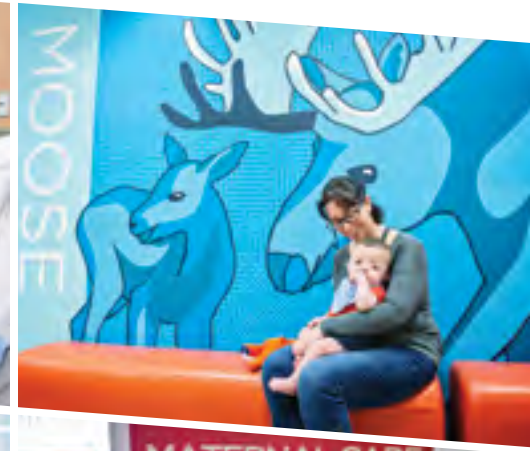
continued on page 8

All patient rooms are private, providing space for visitors and a place for parents or partners to sleep. Moms-to-be can labour, give birth and stay with their new baby and supportive partner all in the same room while sick children will have their parents close at hand, reducing stress on both patients and families.

Patients and families worked alongside frontline health care professionals and physicians to better inform the project teams

and staff worked through a review process of the new space for more than two years. Months prior to the opening, clinical teams began training in their new areas, rehearsing scenarios and refining processes and procedures to ensure an optimal care environment.

Approximately 2,400 employees now work at the site. Recruitment is on track to secure more than 72 full-time



designing signage, wayfinding and patient and family spaces such as the pediatric outpatient area, family spaces, a privacy zone for inpatient teenagers and main lobby amenities.

“The goal of having patient and family advisors in any capital project is to ensure that, as we’re building a patient-centred building, we bring the perspective and experiences of patients and families into all aspects of planning,” said Corey Miller, vice president of Provincial Programs.

“We truly do not understand the needs of our patients the way they do through their learned experiences. It’s been paramount to have their input and involvement,” said Miller.

Kimberley Camboia, a patient and family advisor, said participating in the hospital’s creation was a once-in-a-lifetime event that has allowed her to “build a future for my daughter” while serving as a representative of other patients and families across the province.

To ensure a smooth transition to the new facility, hundreds of Saskatchewan Health Authority (SHA) leaders, physicians,

pediatric physicians in more than 20 pediatric medical and pediatric surgical specialties.

“This hospital is the culmination of a vision and commitment of numerous individuals – the Jim Pattison Children’s Hospital Foundation staff and donors, the Government of Saskatchewan, hundreds of health care staff, physicians and leaders,” said Scott Livingstone, CEO of the SHA. “Together, with the important input and support of Saskatchewan families, these collective efforts have brought us to this historic moment.”

Brynn Boback-Lane, president and CEO of the JPCH Foundation, said the children’s hospital “means the start of a new era of care for Saskatchewan families. Words cannot adequately express our heartfelt appreciation for the time and funds that made this possible.”

The total capital cost for the JPCH is \$285.9 million. The province provided about \$257 million in capital costs, while the JPCH Foundation and donor contributions totalled about \$75 million for capital costs (\$28.3 million), hospital equipment and furniture (\$46.6 million).

Mental health community recovery teams are launched in Saskatoon, Weyburn, Moose Jaw, Regina and Yorkton.



Schools in Regina, Sandy Bay, North Battleford and Balgonie introduce a Mental Health Capacity Building Pilot Project.



The SHA Safety Charter is signed.

Six new addictions beds open at Saskatoon-based Calder Centre.



Swift Current's helipad is certified for use.



Turtleford area's helipad is certified for use.



The Patient and Family Leadership Council meets for first time.



Regina General Hospital extends its hours of mental health crisis support.



Four Dir Health C moves to better

JAN

FEB

MAR

MAY

JUN

JUL

AUG



Cumberland House Health Centre begins offering harm reduction services.



The SHA formally commits to implementing the Truth and Reconciliation Commission of Canada's health care Calls to Action.



Saskatchewan Hospital North Battleford officially opens.

Mental health community recovery teams introduced in Swift Current, Prince Albert and North Battleford.

The province commits \$12 million for the construction of a new long-term care home in Meadow Lake.

The Lloydminster Hospital helipad is celebrated with a grand opening.



The SHA is awarded \$3.5 million to lead CAN Health West Network.

Plans are underway to open 75 residential support beds for people with severe, persistent mental health needs.



The Jim Pattison Children's Hospital heliport opens.



The SHA and the Northern Lights School Division in La Loche sign a memorandum of understanding to improve health outcomes.



The province announces its intention to create an organ donation registry.



TH



Royal U open



lections Community Centre in Regina to 1504 Albert St. r serve clients.



Saskatchewan residents are now able to search and view their medical information online with the introduction of MySaskHealthRecord.

The pasteurized Donor Human Milk Program launches at Dr. F. H. Wigmore Regional Hospital in Moose Jaw.

Construction work to upgrade the heliport at the Victoria Hospital in Prince Albert begins.



The Moose Jaw Family Wellness Centre holds its grand opening.



The SHA marks its second anniversary.

SEP

Plans to open 50 new addiction treatment beds announced.

Plans are underway to upgrade the neonatal special care nursery at Prince Albert's Victoria Hospital to a Level 2b neonatal intensive care unit.



the SHA and the Meadow Lake Tribal Council sign a memorandum of understanding to work together.



The children's emergency and University Hospital adult emergency at Jim Pattison Children's Hospital.



The Jim Pattison Children's Hospital officially opens.

OCT

\$10 MILLION

The province invests \$10 million to fund 1,700 more surgeries.

Youth will soon have access to six new residential addiction treatment beds in southern Saskatchewan.

DEC

#SASKHEALTH QUICK FACTS

2 MILLION+ WEBSITE PAGE VISITS

40,000 EMPLOYEES

1,211,356 PEOPLE SERVED

2700+ Physicians

39

Average age of citizens

15.4% Senior Population

\$3.97 Billion Operating Budget (2019-20)

616,781 EMERGENCY DEPARTMENT VISITS

15,364 Babies born

115,493 CT scans

34,678 MRI Visits

32,271 Inpatient Surgeries

56,851 Day Surgeries

2,276 (INPATIENT)

8,626 (LONG TERM CARE)

129,716 EMS GROUND AMBULANCE CALLS

30,000+ VOLUNTEERS

600+ Patient & Family Advisors

79.7

LIFE EXPECTANCY

\$35.9 Million Raised by Health Foundations and Through Donations

Partners in leadership

For the first time in our province's history, our health care system has introduced a medical leadership structure to ensure physicians have an active role in the design, implementation and operation of a system that is more integrated, efficient and patient-centred.

This new structure is based on a dyad, or co-leadership, model that partners administrative leaders and physician leaders in a complementary, decision-making relationship to foster shared accountability and open, transparent communication.

As system leaders, physicians support our organizational direction. This includes improving cultural safety – learning Cree is one approach – and strengthening appropriateness of care through campaigns such as Choosing Wisely.

Nipawin physicians and staff study Cree

Physicians and staff from Primary Health Care (PHC), Nipawin Hospital and Pineview Lodge are participating in conversational Cree classes through lunch-and-learn sessions. Led by Rose Sinclair, a Cree language instructor from the Nipawin Oasis Community Centre, the classes are the result of primary care providers expressing interest in improving their understanding of Indigenous culture.



Rose Sinclair teaches a class.

“People wanted more access to Cree language so that they could engage in more meaningful conversations and as a way to build trust with clients. We understand we are only learning a few basic words, but it is a good start,” said Rhonda Teichreb, PHC manager.

Participants say the popular Cree classes have provided them with skills they could immediately apply in their interactions with Cree speaking clients.

Dr. Melissa Fillis, who works at the Nipawin Medi-Clinic, said she picked up a few phrases during the class and a few on the job when visiting patients at the Red Earth Cree Nation.

“I learned how to say, ‘Where’s your pain?’ I also learned how to say, ‘Astam,’ which means ‘Come here,’ and ‘Awas,’ which means ‘Go away,’” she said with a laugh.

Fillis estimates between 40 and 50 per cent of her patients speak Cree. She said learning the language is important to her and “would bridge a gap between the medical system and the Cree community, for sure. It surprises people in a good way when you speak their language.”

Initial classes focused on an introduction to Cree. As a result of participants’ feedback, the community centre added a conversational Cree class in October focused on end-of-life care.

New iron treatment to reduce waits, increase access to clinic

A new type of iron introduced at Pasqua Hospital’s Ambulatory Care Infusion Clinic in Regina is expected to reduce wait times and ensure timely care for patients who need iron infusions.

“Our goal is to treat more patients sooner while ensuring they receive appropriate and high-quality care,” said Sara Cursons, a registered nurse and the clinic co-ordinator.

The clinic began providing iron isomaltoiside to patients in September. The drug requires significantly fewer treatments and less time to restore iron levels than previous forms of intravenous iron. Implementation of the new treatment follows the Choosing Wisely campaign, a physician-led initiative to reduce unnecessary tests, treatment and procedures.

“The total amount of time for a patient, depending on what they need for iron sucrose, is 10 to 20 hours over five to 10 weeks,” said Dr. Ryan Lett, the physician lead for the Saskatchewan Health Authority’s (SHA’s) Patient Blood

Management Program. “With iron isomaltoiside, treatment is one to two hours delivered over one or two treatments.”

This means eight to 10 patients will have their iron levels restored in the same amount of time that one does now, said Lett. The treatment is expected to reduce clinic waits and increase clinic access. It will be particularly beneficial for pre-surgical patients with anemia, a condition which increases surgical complications.

The Ambulatory Care Infusion Clinic is the first SHA facility to offer the treatment.



A new type of iron treatment will help ensure timely care.

Collaboration, partnerships create path to better health

We're committed to improving the health and well-being of First Nations and Métis people.

This work involves both recognizing the harms of the past and fostering meaningful and constructive relationships with our partners to develop programs and services that will work towards improving the health of Indigenous people.

The recommendations of the Indigenous Health Working Group – formed more than a year ago on the advice of the *Saskatchewan Advisory Panel on Health System Structure Report* – is guiding this work.

A key recommendation was to ensure First Nations and Métis leadership is embedded throughout the organization. We now have four First Nations and Métis directors located in the northern, central and southern areas of the province and in Saskatoon. They ensure patients have more support navigating the system and access to traditional ways of healing. At the same time, their voices help influence the development of SHA's services and facilities.

To systematically use the wisdom of Elders, the SHA formed the Knowledge Keeper Advisory Council, which held its first meeting this fall. Group members, who include members of the Indigenous community and SHA's executive leadership, provide advice on initiatives to advance the cultural responsiveness of the health system.

We're fostering long-term partnerships with First Nations and Métis partners across the province. In 2019, Meadow Lake Tribal Council and Northern Lights School Division in La Loche both signed agreements with the SHA to work together.

The SHA recognizes the need to build a culturally safe environment, where all patients receive high-quality, safe, inclusive care that's free from harm. Taking part in cultural awareness training is an important first step. This past year, 92 per cent of new employees participated.

Principal among the SHA's 2019 commitments has been its pledge to carry out the health Calls to Action outlined by the Truth and Reconciliation Commission of Canada's 2015 report.

In a ceremony at the First Nations University of Canada in Regina, the SHA joined First Nations and Métis government officials, the Ministry of Health and others to commemorate the signing of a document which gives us a framework to move towards reconciliation.

Residents savour traditional meals

Residents of Saskatchewan Health Authority's long-term care facilities in Île-à-la-Crosse now have traditional options as part of their regular meal schedule.

"The residents were so excited when I told them... that they will now have access to traditional foods including duck, venison, and fish," said Lorraine Roy, a manager at St. Joseph's Hospital.

One of the Calls to Action of the Truth and Reconciliation Commission was to value Indigenous health practices and use them in the treatment of patients in collaboration with Indigenous healers and Elders, when requested. Traditional foods are a fundamental component to the spiritual well-being of an individual and are part of the holistic understanding of health.



Indigenous and health system leaders at the commemoration signing ceremony.

Creating a seamless care experience

Providing you with seamless care as close to home as possible is our priority. Creating one provincial health authority is giving us the opportunity to break down previous boundaries, to innovate and to use resources across the province as one provincial team.

As one entity, we are better positioned to co-ordinate and align health services that support locally delivered, provincially strengthened care.

Co-ordinating and aligning our services will take time but doing so is essential and will create a system where you get the best health care possible, no matter where you live in the province.

Access your personal health information anywhere, anytime



Saskatchewan people can now take their health into their own hands by signing up for MySaskHealthRecord – a secure website that gives eligible residents quick and easy access to their personal health information, such as lab test results, medical imaging reports and clinical visit history.

The Government of Saskatchewan and eHealth Saskatchewan recently launched MySaskHealthRecord, calling it a turning point for the province, as it gives people the information they need to play a more active role in their own health care.

Saskatoon resident Tyler Moss agrees. As a participant in eHealth's pilot project, he has accessed his personal health records for the past three years.

"This program has been a game-changer for me and has empowered me in ways I never thought possible."

Tyler regularly uses the health care system due to his chronic renal condition. He says having quick and easy access to his own health information has improved his appointments with health care professionals.

"Having all of my lab results back within 24 hours allows me to stay proactively ahead of my health."

– Tyler Moss, pilot participant

"I can go into a medical appointment having seen my personal lab results and better prepare myself with questions," said Moss. "Plus, having all of my lab results back within 24 hours is very important to me as it allows me to stay proactively ahead of my health."

MySaskHealthRecord is open to Saskatchewan residents who are 18 years of age and older with a valid Saskatchewan health card, plus a Saskatchewan Government Insurance (SGI) driver's licence or SGI photo ID card.

All personal health information in MySaskHealthRecord is safe and private.

To register for a MySaskHealthRecord account, go to eHealthSask.ca.



Tyler Moss calls the program a game-changer.

Telehealth service saves cerebrovascular patients time and travel

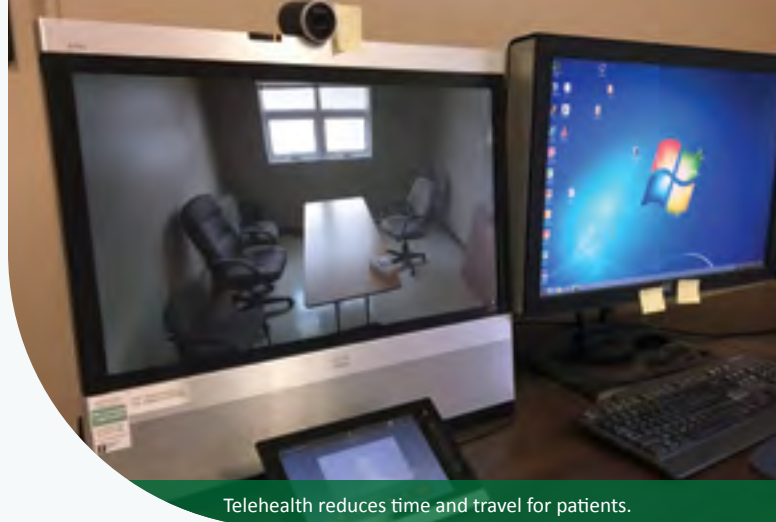
A total of 132,246 – that is the number of kilometres the Saskatchewan Cerebrovascular Centre saved patients in driving over a six-month period.

How?

Through a Telehealth Saskatchewan service that allows patients and physicians to meet by secure videoconference. With nearly 400 telehealth suites available in 139 cities, towns and First Nations communities across the province, patients can drive to the nearest suite within a few minutes to approximately half an hour from their home.

“The program is very patient-centred and efficient, and it saves patients an incredible amount of time and money,” said Dr. Michael Kelly, one of two neurosurgeons who work in the Cerebrovascular Centre, which treats patients with cerebrovascular diseases like stroke and brain aneurysms.

Both Dr. Kelly and Dr. Lissa Peeling are located in Saskatoon, making it difficult and costly for patients living in other cities or remote areas of the province to visit in-person for appointments, especially in the winter months when the weather is unpredictable.



Telehealth reduces time and travel for patients.

“Now it takes patients half an hour out of their day rather than a full day or two,” said Aaron Gardner, one of the registered nurses working in the centre. “Many patients can’t drive themselves, so it doesn’t only affect them but also their friends and families.”

“The telehealth service is confidential, provides excellent image quality and the patients can bring as many people as they want to the appointment,” said Gardner.

“This type of visit versus extensive travelling is so, so great,” said Terry Langelier from Regina who has used the service several times.

About 75 per cent of patients in the cerebrovascular program are seen by telehealth.

SHA to lead CAN Health West Network

The federal government is giving the Saskatchewan Health Authority (SHA) \$3.5 million to lead the creation of the Co-ordinated Accessible National (CAN) Health Network in western Canada.

Through the network, small and medium-sized businesses and start-ups will work with health care organizations to research, develop and refine medical technologies to make them market-ready. The companies will be able to then sell the technologies first to the member network organizations, then to other national and international customers. The global health technology sector is growing rapidly in Canada and around the world, and the CAN Health Network will position Canadian companies for success.

The CAN Health West Network brings together member health care organizations from across the four western provinces, including Vancouver Coastal Health, Alberta Health Services, Research Manitoba as well as the SHA.

Funding for the CAN Health Network is in place until 2022. Further expansion of the national network is planned for Quebec, Atlantic Canada and northern Canada. For more information, visit canhealthnetwork.ca.



Team effort keeps patients and residents safe during wildfire

It was nearly midnight on Monday, April 22 when a text message sparked the need for an urgent conference call with Saskatchewan Health Authority (SHA) staff.

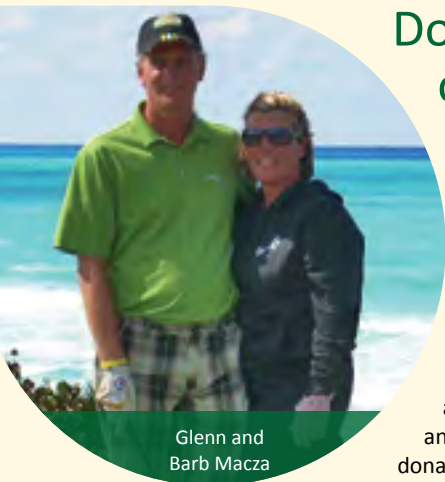
A wildfire burning out of control near Biggar was threatening the community and the Biggar and District Health Centre had been placed on standby for evacuation.

The SHA team began assessing the situation. They were still on the conference call when they received word to evacuate.

“Everyone jumped into action,” said Gayle Riendeau, executive director of Acute Care, Integrated Rural Health of the staff members, physicians and emergency service providers.

In less than an hour, eight acute care patients were headed to Rosetown and 53 long-term care residents were going to Saskatoon City Hospital. Three days would pass before the fire was under control and evacuees could return home.

“Our SHA teams connected regularly to talk about new developments, ensure that our patients and residents were receiving the best possible care and that their families were kept informed about what was happening,” said Nadia Maruschak Clay, an SHA director involved in the City Hospital efforts.



Glenn and Barb Macza

Don't wait: Talk to your family about organ donation

The sudden death of her husband Glenn meant Barb Macza had a big decision to make: should she donate his organs to save the lives of others?

The Maczas had never had that kitchen table talk but, after consulting with their son and Glenn's sister, Barb decided to donate multiple internal organs. That decision saved the lives of seven people waiting on the transplant list.

“It shouldn't have been a decision I ever had to make. But we did. And I'm glad we donated what we did.”

Macza doesn't want others to experience the weight and guilt that accompany the uncertainty of such a question while they're grieving. She hopes conversations about becoming an organ donor, whether living or deceased, will become more commonplace.

“Talk to your spouse. Talk to your kids. It's not a taboo subject. It's amazing how many lives were improved because we donated Glenn's organs.”

To learn more, go to saskhealthauthority.ca/organdonation.

Dementia care program provides care closer to home

Coming to the city for health care services can be difficult for many rural residents. For those with dementia, this effort can be overwhelming. Rural Primary Health Care Memory Clinics address this issue by focusing on early diagnosis and ongoing care for those with the condition.



The clinics are a result of a research project by the Rural Dementia Action Research team (RaDAR), based at the University of Saskatchewan. Five years ago, the RaDAR team began working with the primary health care team in Kipling. The team, supported by the primary health care facilitator, was made up of a nurse practitioner, physicians, home care nurses and an occupational therapist.

“All team members meet the patient on the same day, so the patient has their needs met in one appointment and leaves the clinic with an action plan,” said Jean Daku, a nurse practitioner.

Leanne Lawrence, whose mother is a client of the memory clinic, is grateful for the service. “I felt that I was included right from Day 1.”

Since launching in Kipling, the program has spread to Weyburn, Radville and Bengough.

VISION

Healthy People, Healthy Saskatchewan

MISSION

We work together to improve our health and well-being. Every day. For everyone.

VALUES

SAFETY:

Be aware. Commit to physical, psychological, social, cultural and environmental safety. Every day. For everyone.

ACCOUNTABILITY:

Be responsible. Own each action and decision. Be transparent and have courage to speak up.

RESPECT:

Be kind. Honour diversity with dignity and empathy. Value each person as an individual.

COLLABORATION:

Be better together. Include and acknowledge the contributions of employees, physicians, patients, families and partners.

COMPASSION:

Be caring. Practice empathy. Listen actively to understand each other's experiences.

PHILOSOPHY OF CARE: Our commitment to a philosophy of Patient and Family Centred Care is at the heart of everything we do and is the foundation for our values. This philosophy of care is in essence our culture – who we are, the shared purpose that brings us all together and how our patients and families experience care every day. Through meaningful engagement and co-creating mutually beneficial partnerships among employees, physicians, patients, families, clients and residents, together we ensure a seamless health system that supports *Healthy People, Healthy Saskatchewan*.





Contact Us

Saskatchewan Health Authority Corporate Office

Saskatoon City Hospital

701 Queen Street | Saskatoon, SK | S7K 0M7

306-655-0080 | 1-833-445-0080 (toll free)

General Inquiries: info@saskhealthauthority.ca

Executive Leadership: executive@saskhealthauthority.ca

Healthy People, Healthy Saskatchewan



saskhealthauthority.ca



**Saskatchewan
Health Authority**