December 4, 2018, is a big day for us. It marks exactly one year since 12 former regional health authorities officially came together to combine their collective strengths into one organization, the Saskatchewan Health Authority (SHA).

Through this union, we have become the province’s biggest employer – with more than 40,000 employees and 2,600 physicians serving the people of Saskatchewan.

Although we have amalgamated, we still have much variation and duplication in our processes and systems. We are young and know the work to truly transform our system will take many years.

Despite this, we have already begun to create common ground.

We are establishing stronger teams and making better service connections so patients, clients, residents and their families will experience seamless care, regardless of who they are or where they live in Saskatchewan.

We are supporting a culture that values continuous improvement as well as patient and staff safety, with the goal of better aligning and co-ordinating services system-wide and strengthening the health system’s capacity to provide the right care, in the right place, at the right time, by the right provider.

We’ve also changed how we’re designing – or co-designing – our system by collaborating with patients, physicians, staff and Indigenous groups to create high-quality, safe, inclusive care in an environment that’s spiritually, culturally, socially, emotionally and physically safe.

Together, we are better positioned than ever to build a health system that truly works for the patients, families and residents we serve.

Connecting research, clinical evidence and innovation with front-line providers will facilitate new ways of improving care across Saskatchewan – ways that include local voices and better co-ordination of services across regions and programs.

That is the promise of a truly integrated health system – locally delivered and provincially strengthened.

We know transformation will be a multi-year journey. We also know that our first year has put us on the right path.

As we look back on our first year, don’t look at December 4 as the day we amalgamated; look at it as the day we came together to combine our strengths to improve the lives of the people we serve. Together, we will achieve our shared vision: Healthy People, Healthy Saskatchewan.

Scott Livingstone
Chief Executive Officer (CEO)
Saskatchewan Health Authority

R.W. (Dick) Carter
Chairperson, Board of Directors
Saskatchewan Health Authority
Engaging patients as partners essential to SHA’s evolution

I’m pleased to be included in the Saskatchewan Health Authority’s first annual report to the community as a representative of the hundreds of citizens who serve as patient and family advisors to the health care system.

I became a patient and family advisor this fall. My purpose in this role is to help ingrain a culture of patient- and family-centred care. Some of the ways patient and family advisors are involved include participating in planning sessions, committees, new employee orientation and improvement work.

As system outsiders, we’re less apt to overthink an issue and maybe even more capable of providing a common-sense solution. We help staff see patients as three-dimensional beings – not just as an elbow fracture or a herniated disc.

My first task has been to sit on the provincial practitioner advisory committee. Even though I’m not a doctor, I feel listened to and valued.

Involving us as partners in our care is crucial to a patient- and family-centred system. Physicians naturally focus on keeping patients alive, whereas patients want to focus on being able to live. Fully empowering patients with information and decision making will ultimately lead to happier, more engaged patients who feel ownership over their care.

I have a complex set of diseases. I’ve experienced the very best and the very worst of care.

Some of the care I have received has given me new life. Some of the care I’ve received has taken away so much I’ve investigated ending my life.

I know that unless my care provider respects that quality of life is more important to me than quantity, my care plan won’t match my desires. I’d rather live an awesome life till I’m 50, than a cautious life till I’m 65. Nobody knows what I want more than me. Nobody knows my health experience more than me.

We have the chance to get this right. To engage patients and families in a sincere way to build a system that puts those who use the system first.

I’m hopeful that, as the birthplace of Medicare, Saskatchewan leads the country in this effort, advancing an efficient health care system that treats patients as partners, hears our voices and respects our choices.

Ambrosia Varaschin
Patient Advisor
Saskatchewan Health Authority, Saskatoon
2018 YEAR IN REVIEW

DECEMBER 4 / 2017
Twelve health regions form the Saskatchewan Health Authority.

FEBRUARY 28 / 2018
Cut Knife’s Primary Health Centre officially opens.

APRIL 1 / 2018
The Roy Romanow Provincial Laboratory joins the SHA.

MAY 16 / 2018
Removal of 72-metre high crane signals exterior work on Jim Pattison Children’s Hospital is nearly complete.

MAY 28 / 2018
The SHA Board approves a $3.8 billion operating budget.

APRIL 18 / 2018
Lloydminster helipad construction announced.

FEBRUARY 28 / 2018
The SHA Board approves a $3.8 billion operating budget.

#SASKHEALTH QUICK FACTS

270 Facilities
39.1 Average age of citizens
127,091 EMS ground ambulance calls
615,000+ EMERGENCY ROOM VISITS
SEPTEMBER 27 / 2018
Staff and patients move into the Leader and District Integrated Health Care Facility.

JULY 20 / 2018
The SHA and the Métis Nation-Saskatchewan sign a memorandum of understanding to work together.

JULY 23 / 2018
The Physician Recruitment Agency of Saskatchewan joins the SHA.

SEPTEMBER 27 / 2018
Staff and patients move into the Leader and District Integrated Health Care Facility.

OCTOBER 25 / 2018
The Gardens Community Health Centre officially opens in Regina.

NOVEMBER 5 / 2018
Staff begin moving into the Community Health Centre at Market Mall in Saskatoon.

JULY 20 / 2018
The SHA and the Métis Nation-Saskatchewan sign a memorandum of understanding to work together.

OCTOBER 25 / 2018
The Gardens Community Health Centre officially opens in Regina.

NOVEMBER 16 / 2018
Cabri Medical Clinic officially opens as a primary health care site.

NOVEMBER 13 / 2018
Staff and patients begin moving into Saskatchewan Hospital North Battleford.

15,457
Babies born

112,840
CT scans

34,816
MRIs

30,000+
VOLUNTEERS
Connecting your care

Keeping you healthier in your home and in your community is important to us

We’re bringing care closer to you by standardizing and connecting health care services and processes so you experience seamless care, whether you move from hospital unit to hospital unit, between care providers or community services or are discharged from the hospital to home.

We’re establishing more community primary health care sites, with new centres opening in Saskatoon, Regina, Cut Knife and Cabri.

We’ve assembled more multi-disciplinary care teams that provide in-home services. Regina’s Seniors House Calls and Prince Albert’s Community Paramedicine Services pilot program are two examples.

In the hospital, we’re building collaborative teams that include patients in all plans related to improving their health on our Accountable Care and Connected Care units in Regina, Saskatoon, Lloydminster, North Battleford and Meadow Lake.

Mental health and addictions services are expanding, too.

We’re establishing community-based recovery teams for adults with severe and persistent mental illness at eight sites across the province.

We’re improving access to child and youth mental health services throughout the province.

And, as part of the government’s commitment to improving the province’s mental health services, we’re opening the new Saskatchewan Hospital North Battleford.

Our goal is to ensure you receive connected, appropriate care in a timely fashion whether you live in Saskatoon, Southey or Sandy Bay.
Getting to know the person

Sheldon Hirschfeld is enjoying providing a different kind of practice at a very different pace than what he’d grown used to as a paramedic.

“After 32 years of running, you actually get to spend some time getting to know the person you are helping. You get to play a larger role in the continued care of people.”

Hirschfeld is talking about the Community Paramedicine Services program in Prince Albert, which is being piloted by the Saskatchewan Health Authority and Parkland Ambulance in nine personal care homes.

Pat Chuey, administrator of Good Shepherd Villa, said her team is excited about the program.

She noted that because community paramedics can meet with clients, determine in the moment if intravenous antibiotics are required and, through a phone consultation, get an order to start an IV, most residents no longer need to go to the hospital for this type of treatment.

In its first three months, the program received 98 community paramedic calls. Eighty-seven trips to the emergency department were avoided because of community paramedic care.

“If we have to take a resident to the emergency department, it can be very traumatic,” said Chuey. “They can often be confused when they come back. It takes time for our staff to settle them back into their environment.”

New provincial mental health facility opens

Construction of the new Saskatchewan Hospital North Battleford wrapped up in late fall. Patients from the former hospital moved into the state-of-the-art facility in November.

The 284-bed complex replaces the century-old, 156-bed provincial hospital of the same name. The facility includes 188 psychiatric rehabilitation beds and a 96-bed secure wing for individuals involved in the criminal justice system who have mental health issues.

The project is an innovative partnership involving the ministries of Health, Central Services and Corrections and Policing, along with SaskBuilds and the Saskatchewan Health Authority (SHA). It is part of the government’s commitment to improving provincial mental health services.

Health networks bring care closer to clients

When community paramedics visited Connie Shaw in the hospital to see if she needed help, she was skeptical.

“‘What would I need you guys for?’ I found out pretty quickly. I need them a lot,” said Shaw.

The paramedics are part of a team that belongs to a health network. A health network is comprised of collaborative teams of health professionals, which includes physicians and community partners, who provide fully integrated services to meet the health needs of individuals and communities.

Shaw, who has chronic obstructive pulmonary disease, calls the network team when she has a flare-up or a concern. The team assesses her health, manages her care and provides her with support.

“I have a care team that I can talk to about my illness. They check my SATS [oxygen saturation levels] and listen to my lungs. Laura, the respiratory therapist, comes to see me and gives me exercises. They are a godsend.”

There are four networks serving the Regina area. They are part of the provincial Connected Care strategy, which is improving patient access to community services, in collaboration with physicians in the community.
Fostering trust, optimizing care

The Saskatchewan Health Authority believes safety is everyone’s responsibility. We’re building safety practices into the daily work of staff and physicians through the routine monitoring, tracking and reporting of safety concerns. We support a culture where patients, families, staff and physicians feel comfortable talking about safety and reporting issues through our Stop the Line initiative. We’re also promoting a culture of continuous learning that ensures staff and physicians employ the most effective practices so patients receive the most appropriate care.

The right care, the right place, the right time, the right provider

Getting the right care when and where you need it can be the key to maintaining or improving your health.

Conversely, receiving services that are unnecessary or unsuited to your condition can delay your recovery or even harm you.

Optimizing patient care is a priority of the Saskatchewan Health Authority (SHA).

“Decreasing variation in treatment options ensures that people across the province will receive the most appropriate treatment to address their health concerns,” said Gaylene Molnar, executive director of Clinical Standards for the SHA.

“One way the SHA is accomplishing this goal is through the development of a checklist designed to improve the ordering of CT scan and MRI lumbar spine diagnostic tests. Physicians are provided with a set of criteria to use when assessing a patient with lumbar spine concerns to determine when it’s most appropriate to order a CT scan or an MRI.

In the past, for example, patients may have received both a CT scan and an MRI diagnostic test for lower back pain when an MRI was the appropriate choice.

Results indicate patients are consistently receiving the right procedure and fewer patients are being exposed to unnecessary radiation from a CT scan.

“I’m a patient who has experienced lower back pain, so I was very excited to be part of the development of the checklist,” said Colleen Bryant, a Regina-based patient advisor.

“Using the checklist will ensure the right test is performed at the right time, could help shorten wait times and will help decrease multiple tests for patients,” said Bryant.

Originally, two separate checklists were trialled in Lloydminster, Moose Jaw, Regina, North Battleford, Regina and Saskatoon.

A combined checklist has now been created and plans are underway to implement it throughout the province.
Stay safe: Stop the Line

The Saskatchewan Health Authority (SHA) promotes a culture of safety and invites patients and families — and expects staff and physicians — to identify and report potentially harmful situations as soon as they’re observed.

We use the term “stop the line” to describe the process of interrupting a potentially harmful situation so the issue can be fixed in the moment or escalated before causing harm.

“We want everyone, whether you’re a patient, family member, employee or physician, to feel empowered to report safety issues or concerns,” said Petrina McGrath, executive director of Quality and Safety for the SHA. “When everyone comes forward and ‘stops the line’ and notifies someone of potentially harmful situations, they help us prevent harm before it occurs.”

Delee Cranston, a patient advisor from Moose Jaw, encourages patients and families to let a staff member know if they notice a harmful or potentially harmful situation. At the same time, she asks staff to try to see health care from the patient perspective.

“If someone asks you if you’ve washed your hands, they’re not trying to be rude. They’re asking for their own protection.”

The SHA is working hard to create a trusting culture where everyone feels comfortable reporting hazards, violence, near misses and harm. Raising safety concerns increases the safety and quality of care for everyone.

Not everyone feels comfortable raising concerns in person. If you would prefer to report your concern in confidence, please contact a quality and safety specialist in your area. These professionals will guide you through the safety reporting process.

#SASKHEALTH QUICK FACTS

40,000+ EMPLOYEES

1,193,388

PEOPLE SERVED
Physicians as partners in leadership

For the first time in our province’s history, our health care system has introduced a medical governance structure to ensure physicians have an active role. Efficient health care systems around the world consistently have physicians as leaders who are dedicated to making health care more integrated, efficient and patient centred.

Physician and administrative leaders are working together to establish an environment that fosters shared accountability, joint decision-making authority and open, transparent communication. Our organization’s co-leadership model, or dyad structure, supports this need.

Three physician leaders within the Saskatchewan Health Authority include Chief Medical Officer (CMO) Dr. Susan Shaw and SHA Board members Dr. Preston Smith and Dr. Janet Tootoosis.

Dr. Susan Shaw, CMO

Dr. Susan Shaw balances a career in Critical Care Medicine in Saskatoon with clinical and system improvement work. She is an assistant professor, has held a number of leadership roles and is currently Board chair of the Saskatchewan Health Quality Council.

Working with administrative and physician leaders to improve Saskatchewan’s health care system is one of Shaw’s priorities in her CMO role.

“I want physicians to have the skills, ability, time and resources to do their work and to improve their work, because, if we do that, patients will receive better care and better outcomes, and physicians will be healthier and happier,” she said.

“Saskatchewan has strong physician leaders. The next step is to make it easier for physicians to have more influence, because we know that high-performing health care organizations consistently have physicians as leaders who have the data and analytics to help drive change.”
Dr. Preston Smith, Board of Directors

Dr. Preston Smith is dean of the College of Medicine at the University of Saskatchewan. He has extensive academic and administrative experience and was a family physician in Moncton, N.B. for 25 years.

One of Smith’s defining characteristics is his passion for inspiring and participating in change.

“I like helping people work together to make things better,” said Smith. “I really believe that the advantage to one health care system is that we can start working on finding the best way to do things. If we can get to the point where everyone in Saskatchewan has the best approach to disease x and y, I think the health of Saskatchewan people will benefit.

“I also believe that the more people we can get involved in teaching and research, the more we’ll improve health care. Research shows that doctors who are involved in teaching and research are quicker to adopt innovations, have greater career satisfaction and are more likely to stay in the community they’re in. That’s really important for rural Saskatchewan. So, the more we can get doctors involved, the better our health system will be.”

Dr. Janet Tootoosis, Board of Directors

Dr. Janet Tootoosis, a member of the Poundmaker Cree Nation, is the owner and operator of the North Battleford Medical Clinic and a clinical professor at the University of Saskatchewan.

As a practicing physician, she brings a unique perspective to the Board.

“I get to deliberate with the Board and, the next day, see patients in my clinic and train new physicians. My vantage point gives me a very broad perspective of the entire system. My role is to ensure that the patient and provider voice is central to the organization.”

She would like to see improved integration of health care services that leads to a better experience for patients and health care providers, especially related to primary health care.

“Patient-centred, comprehensive primary care can support people to lead healthy lives and that is why I feel that improving and advancing primary health care is an extremely worthwhile endeavour.”
Therapy with the wag of a tail

Each week, Lady the therapy dog and her owner Glenn Patterson make their rounds at long-term care facilities in Saskatchewan’s southwest, spreading cheer wherever they go.

“I like to see the smiles on the residents’ faces and hear the stories about their dogs and what kind they had,” said Patterson. “And Lady loves to get petted.”

Lady’s therapy dog career began after Glenn’s mother moved into Tatagwa View long-term care facility in Weyburn. In time, Lady got serious about her calling and was enrolled in the St. John Ambulance therapy dog program. With her gentle, calm nature, Lady was a “natural” and passed her test the first time.

Lady is just one of many canine companions that provide healing and comfort for patients, clients, residents and their families across the Saskatchewan Health Authority.

Although Lady is entering mid-life, the plan is for her to continue her visits, bringing happiness to all she meets, one wet nose and wag of the tail at a time.

Building a healthier community

Ile-a-la-Crosse is saying “no more” to crime and crisis with the adoption of the Community Mobilization Program.

The community has formed a partnership with the Saskatchewan Health Authority (SHA), the RCMP, Ile-a-la-Crosse School Division No. 112, the local housing authority and the ministries of Health, Justice and Social Services to implement the program, generally referred to as the Hub. The intent of the Hub is to reduce social issues, such as suicide, school absenteeism and emergency room visits, while providing the families at risk with the support and information they need to develop a positive lifestyle.

“Ultimately, the program is about preventing issues, not reacting to them,” said Byrne Richards, a Hub steering committee member and the SHA director of Mental Health and Addictions for the area.

The Hub members identify potential clients and work together to develop a co-ordinated and integrated approach to their care.
Service saves clients time, travel

A new monitoring service offered by the Yorkton Regional Health Centre lab is changing the lives of cardiac device clients for the better.

“This is saving me a lot of day trips to Regina,” said Norm Grayston.

Grayston has a loop recorder implanted in his chest to record his heart rhythm. Previously, he was required to go to Regina for a 20-minute check-up at Group Medical Services (GMS) Cardiac Rhythm Device Clinic in the Regina General Hospital. The four-hour round trip meant taking time out of his busy schedule and money out of his pocket.

Grayston is among the approximately 300 area clients with cardiac devices, such as pacemakers and cardioverter defibrillators, who now have the information from their devices downloaded in Yorkton. The information is then sent to the GMS clinic where it’s interpreted by trained staff and physicians.

Yorkton and Regina partnered to offer the service, which began in March. Swift Current and Regina are working on a similar arrangement.

Book helps prepare children with autism for blood work

Getting blood work done can be anxiety inducing at the best of times, but for children with autism spectrum disorder (ASD), this simple medical procedure can be extremely challenging.

That’s why Saskatchewan Health Authority’s Laboratory Services and members of the Autism Centre – Child and Youth Services in Regina are working together to make the experience a little less daunting for children with autism.

Together, the team created an illustrated booklet that outlines step by step what children with ASD will experience during their appointment.

“Many children are anxious about situations that are unknown and people with autism often only see small pieces of the big picture,” said Allison Ekdahl-Johnston, mental health therapist with the Autism Program in Regina. “One strategy to help prepare them for the unknown is to show pictures of what to expect.”

The Autism Program sends the booklet to parents prior to the child’s appointment, allowing them time to review the content. At appointment time, the child can then use the story to guide his or her behaviour.

Parents love the book and appreciate being able to walk through the blood-work process in advance.

In conjunction with the introduction of the booklet, the team implemented an appointment system to minimize children’s wait times and improved the comfort and security of the room where blood draws take place.
Collaboration, partnerships create path to better health

The Saskatchewan Health Authority (SHA) is 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.

We are engaging with Indigenous groups to better understand First Nations and Métis needs and to support better health and well-being.

The creation 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 a demonstration of our commitment to this endeavour. The group’s mandate, in part, has been to engage with the First Nations and Métis communities to develop recommendations for improvement.

The working group’s report, Indigenous Health in the new Saskatchewan Health Authority, includes recommendations on service delivery, community engagement, SHA representation, accountability to communities, honouring traditional practices and addressing gaps in care, especially in the North.

Our aim is to work collaboratively to improve the health of Indigenous people and provide culturally responsive programs and services across the province. We can meet this objective through collaboration within the system and by building strong partnerships.

Steps to reconciliation

It’s not often you have the opportunity to walk in someone else’s shoes but the KAIROS Blanket Exercise lets you do exactly that.

The exercise synthesizes 500 years of history from the perspective of Indigenous people into two hours.

Participants mill about on numerous interconnected blankets, symbolizing land. One facilitator narrates while a second walks among the participants, playing the part of a European.

As contact with the European grows, an increasing number of people are asked to sit on the sidelines. Their departure represents population decline from smallpox and colonizing policies such as residential schools.

“The blanket exercise offers an opportunity to view history through the lens of those whose experience is different from what many of us were traditionally taught,” said Vice President of Quality, Safety and Strategy Beth Vachon.

“It’s only through shared understanding and truthful acknowledgement that we, as a health care system, can begin our journey of reconciliation, trust and respect for all,” said Vachon.

The Saskatchewan Health Authority has organized more than 30 blanket exercises since the spring of 2018 and is taking steps to continue offering this invaluable education throughout the province.
Humboldt Strong

Saskatchewan Health Authority’s (SHA’s) physicians and staff have been humbled by the many gestures and tokens of appreciation sent our way for tending to the injured, their families and the community following the Humboldt Broncos bus tragedy on April 6, 2018.

Thank you, everyone, for your thoughtful words, posters, cards, flowers, food and other generous acts.

Wendy Toye, for example, went to extraordinary lengths to blanket us with warmth. Toye lives in Humboldt and owns the Haus of Stitches. Her team’s campaign to provide quilts for the injured, their families and those who cared for them went viral. Quilters sent yellow and green quilts and quilt pieces from across North America and from as far away as Qatar. At last count, approximately 4,000 quilts were made as part of this initiative.

“Although we have heard many comments from workers that they were ‘just doing their job,’ we felt this was a way to show them how grateful we are for what they do and, in many cases, know they went above and beyond on that fateful night,” said Toye.

Many of us are the proud recipients of these hand-crafted comforters. We feel honoured to be included in such a meaningful effort.

Colleagues from across the province lent their support, too.

“Thank you for rising to the cause,” wrote one SHA staff member. Said another, “I, for one, am proud to be part of this organization, and while our team has little direct involvement with this tragedy, we stand ready to assist in any way we can.”

Indeed, staff and physicians from near and far were ready to help at a moment’s notice that night and in the days and months that followed.

“As soon as the calls started to come in, our system mobilized quickly and stood together, ready to provide care,” said Scott Livingstone, CEO of the SHA. “Our health care providers put the needs of many ahead of their own and rallied to do everything possible to care for the Humboldt Broncos and their families.

“We truly responded as a provincial health care system, from our first responders to our staff and physicians and throughout our communities and health care facilities. Lives were saved because of your dedication, determination, compassion and professionalism. I am proud to be your colleague.”

Through this terrible tragedy, we’ve come to understand that the true meaning of community is to not only share the good times but to pull together and support each other through the bad times as well, whether we work together or live halfway around the world.

While the Broncos are back on the ice and the healing continues, we carry the lessons of Humboldt with us in our daily efforts working to provide high-quality care to our patients, clients and residents.
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Healthy People, Healthy Saskatchewan