# ANNUAL REPORT 2017/2018

## HAY RIVER HEALTH AND SOCIAL SERVICES AUTHORITY





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### STRATEGIC DIRECTION

### **Strategic Priorities**

- Promote a culture within the organization that encourages and supports quality improvement in the delivery of health and social programs.
- Improved access to quality health and social services through an integrated and coordinated care model
- Promote healthy environments that allow the people of Hay River region to live healthy lifestyles
- Provide a healthy, safe workplace that is able to attract, support and retain a competent and skilled workforce.
- Provide health and social services that are sustainable and accountable.
- Establish a culture of client safety that minimizes hazards and client harm by focusing on processes of care.

### Vision

Healthy people living in healthy communities

### Mission

Meeting community needs through quality care and education

### Values

The Hay River Health and Social Services Authority is committed to promoting and providing health and social services in a competent and caring manner that ensures client and staff safety; integrity, accountability and respect We believe in:

- Client and staff safety
- Integrity
- Accountability
- Respect
- Collaboration
- Empowerment

### **MESSAGE FROM THE PUBLIC ADMINISTRATOR**



I am pleased to present the Annual Report for the Hay River Health and Social Services Authority for the fiscal year ending March 31, 2018.

The efforts of our team this year have been dedicated towards the pursuit of our Mission - *Meeting community needs through quality care and education.* We have been successful with a number of initiatives that have aligned our Mission and Vision with our values of client and staff safety, integrity, respect and accountability. Our team has established partnerships, expanded program provision and held dialogue with our communities to help guide us.

I would like to recognize all of the dedicated individuals who work, volunteer and support the Hay River Health and Social Services Authority. We look forward to another positive year.

Michael Maher Public Administrator

### MESSAGE DE L'ADMINISTRATEUR PUBLIC



Je suis heureux de présenter le rapport annuel de l'Administration des services de santé et des services sociaux de Hay River pour l'exercice financier se terminant le 31 mars 2018.

Cette année, notre équipe n'a ménagé aucun effort pour remplir sa mission — répondre aux besoins de la collectivité par des soins de qualité et de la sensibilisation. Un certain nombre d'initiatives couronnées de succès nous ont permis d'harmoniser notre mission et notre vision à l'importance que nous portons à la sûreté, à l'intégrité, au respect et à la responsabilisation de nos patients et de notre personnel. Pour ce faire, notre équipe a créé des partenariats, élargi la prestation de programmes et a maintenu une communication ouverte avec les collectivités.

J'aimerais souligner le travail de toutes les personnes dévouées qui travaillent, font du bénévolat ou contribuent au succès de l'Administration des services de santé et des services sociaux de Hay River de toutes les façons. Il me tarde de poursuivre notre travail.

Michael Maher Administrateur public

### MESSAGE FROM THE CHIEF EXECUTIVE OFFICER



The twelve months summarized in this report provides an overview of our programs and services provided to the residents of Hay River, and the surrounding communities of Enterprise, K'atl'odeeche First Nation, Kakisa and Fort Resolution. The Public Administrator, Senior Management Team and staff continue to be proud of our accomplishments and our ability to meet the many challenges of delivering health and social programs in our Region.

Our Health Authority has been given the opportunity to expand our services to better respond to the needs of our clients. Services such as our Midwifery program, Diabetes program and physician travel clinics have joined a growing list of services that HRHSSA provides locally to those residents living on the K'atl'odeeche First Nation. As we continue to provide programs and services to clients travelling to Hay River from communities throughout the South Slave Region, we are excited to be given the opportunity to reach out and locally support to our surrounding communities.

Our focus as an organization has been to continue to support our staff as we enhance the quality of our care and delivery of services, while increasing efficiency and improve accountability. A primary focus of our work is to maintain an organization that operates under a client/patient and family centered approach that supports the delivery of our services.

In closing, I would like to thank the dedicated staff of the Hay River Health and Social Services Authority, who are clearly committed to continuous improvement and providing a high quality of care. The accomplishments highlighted in this annual report could not be possible without them.

Respectfully submitted,

Erin Griffiths Chief Executive Officer

## MESSAGE DE LA DIRECTRICE GÉNÉRALE



Le présent rapport donne un aperçu des programmes et des services que nous avons fournis aux résidents de Hay River et des collectivités environnantes d'Enterprise, de la Première Nation K'atl'odeeche, de Kakisa et de Fort Resolution au cours de la dernière année. L'administrateur public, l'équipe de la haute direction et tout le personnel continuent d'être fiers de nos réalisations et de notre capacité à répondre à la demande liée à la prestation de programmes de santé et de programmes sociaux dans notre région.

Notre administration de santé a eu la possibilité d'élargir ses services pour mieux répondre aux besoins de ses patients. Des services comme notre programme de sages-femmes, notre programme pour les patients diabétiques et notre clinique santé-voyage assurée par des médecins se sont ajoutés à la liste croissante de services que l'ASSSHR fournit localement aux résidents de la Première Nation K'atl'odeeche. Alors que nous continuons de proposer des programmes et des services aux patients de toutes les collectivités du Slave Sud qui se rendent à Hay River, nous sommes heureux de pouvoir nous déplacer dans les collectivités environnantes pour y offrir des services.

En tant qu'organisation, notre objectif a été de continuer à soutenir notre personnel tout en améliorant la qualité de nos soins et la prestation de nos services, sans oublier l'amélioration de notre efficacité et de notre responsabilisation. L'un de nos objectifs principaux est de demeurer un organisme qui soutient la prestation de services axés sur le patient et la famille.

Finalement, j'aimerais remercier les membres dévoués du personnel de l'Administration des services de santé et des services sociaux de Hay River, déterminés à toujours s'améliorer et à offrir des soins de haute qualité. Les réalisations présentées dans le présent rapport annuel n'auraient pas été possibles sans eux.

Le tout respectueusement soumis,

Erin Griffiths Directrice générale

### FINANCIAL SERVICES

The Finance Department provides financial services to management and staff of the Authority as well as providing financial reporting to outside stakeholders as required. Services include cash handling, accounts receivable, accounts payable, payroll, general ledger maintenance, contribution agreement reporting, variance reporting and many other financial and reporting services.

2017-18 was a year of transition for the finance department. Doug Maclennan joined the team in September as Director, Finance and Administration, replacing Merle Engel who retired in April. Tina Ashcroft, our accounts receivable clerk retired in December. Samantha Berens, our accounting clerk has transitioned in to the receivables role and Evangeline Salbadica accepted the position of accounting clerk.

With the lack of a DFA for several months, Erin Griffiths, CEO, acted as DFA to maintain continuity and respond to the needs of the Department of Health and Social Services. By the end of the year the transition to Doug was complete and all submissions to the GNWT were completed on time. Several of the finance procedure manuals were completed during the year and the final manual, receivables will be completed during the current fiscal year. The next major administrative step for the department will be the move over to the new Heath Centre which will allow for greater efficiencies and a quicker turnaround for financial processing and reporting.

### **FINANCIAL REPORT**

The 2017-18 fiscal year was notable for the fact that for the first time, the Authority was allowed to submit a deficit budget. HRHSSA submitted a deficit budget of \$1.9mm. The largest single component was the pension top up requirement where a net cost of \$850k was forecast, leaving a deficit of slightly over \$1mm for operations which is almost exclusively compensation related.

The total funding received from the Government of the Northwest Territories was \$31.788mm. Of the funding, 26% goes to the operations and administration of the various facilities of the Authority. These totals include facility maintenance, senior management, finance, human resources, information technology, housekeeping, laundry and dietary services. 25% goes to funding the acute care which is the hospital portion of the new facility, including emergency, midwifery, renal and the operating room. 14% goes to residential cares services and 9% each to the clinic portion of the new Health Centre and to social services. The breakdown of the funding is shown in the graph below.

### HAY RIVER HEALTH & SOCIAL SERVICES AUTHORITY

Statement of Financial Position

Statement I

March 31, 2018

		2018	*2017	
Financial Assets				
Cash and cash equivalents, Note 4	\$	1,468,825	\$ 908,800	
Accounts receivable, Note 7		511,509	324,459	
Due from Government of Canada, Note 10		521	1,660	
Trust assets, Note 14		76,391	100,579	
Pensions asset, Note 12		12,464,000	9,507,000	
Total Financial Assets	\$	14,521,246	\$ 10,842,498	
Liabilities				
Accounts payable and accrued liabilities, Note 9		1,079,074	1,616,990	
Employee and payroll-related liabilities, Note 9		1,736,295	1,505,228	
Due to Government of Canada, Note 10		590	-	
Contributions repayable, Note 26		2,354,505	2,007,434	
Employee future benefits and compensated absences, Note 13		1,643,504	1,785,717	
Accountable capital advance, GNWT, Note 28		5,829	5,829	
Deferred revenue, Note 25		797,633	56,633	
Trust liabilities, Note 14		75,051	100,579	
Total Liabilities		7,692,481	7,078,410	
Net Financial Assets (Debt)	\$	6,828,765	\$ 3,764,088	
Non-Financial Assets				
Inventory held for use, Note 8	\$	204,014	\$ 226,013	
Prepaid expenses and deposits, Note 27		272,114	 208,967	
Total Non-Financial Assets	\$	476,128	\$ 434,980	
Accumulated Surplus (Deficit), Note 29	\$	7,304,893	\$ 4,199,068	

\* Reclassified for comparative purposes

Contractual obligations, Note 16 Contingent liabilities, Note 17

App Authority: ved the Public Administrator Chief Executive Officer Director of Finance

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### HAY RIVER HEALTH & SOCIAL SERVICES AUTHORITY

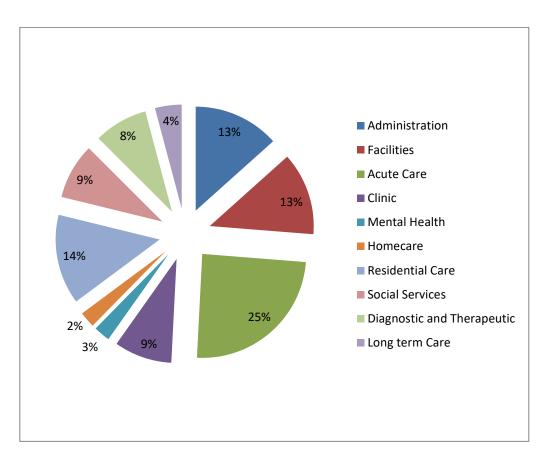
Statement of Operations

For the year ended March 31, 2018

	2018	2018	2017
	 Budget	 Actual	 Actual
Revenue			
Contributions from GNWT, Schedule A	\$ 30,670,631	\$ 31,778,022	\$ 30,235,106
Recoveries	493,450	942,874	 965,200
Sales - Patient Revenues	806,120	765,354	904,616
Contributions from Other Sources	-	-	5,550
Other Income	-	51,268	31,502
Interest	30,000	 50,056	33,232
Total Revenue	 32,000,201	33,587,574	 32,175,206
Expenses			
Administrative and Support Services	9,420,713	7,068,764	7,495,577
Nursing Inpatients Services	6,586,703	5,965,794	5,594,739
Ambulatory Care Services	5,405,379	4,937,396	4,641,529
Diagnostic and Therapeutic Services	2,861,164	2,933,995	2,646,200
Community Health Programs	1,922,260	1,945,097	1,922,582
Community Social Programs	7,703,410	7,690,142	7,156,895
Supplementary Health Programs	-	-	-
Undistributed	 -	-	-
Total Expenses, Note 24	33,899,629	30,541,188	29,457,522
Operating Surplus (Deficit)	(1,899,428)	3,046,386	2,717,684
Unfunded items			
(Increase) Decrease in post-employment benefits, Note 12	-	(2,957,000)	(3,161,000
(Increase) Decrease in employee future benefits and			
compensated absences, Note 13	 -	(142,213)	 69,256
Adjusted operating surplus (deficit) before the undernoted	-	(52,827)	(374,060
Tangible Capital Assets - Rent Expense, Note 15	-	(1,919,038)	(1,984,087
Grant-In-Kind - GNWT assets provided at no cost, Note 15	 	 1,919,038	 1,984,087
Adjusted operating surplus (deficit) for the year	\$ 2	\$ (52,827)	\$ (374,060
Opening Accumulated Surplus (Deficit)		\$ 4,199,068	\$ 1,481,384
Prior year restricted physician funds allocated		59,439	-
Operating Surplus (Deficit)		3,046,386	 2,717,684
Closing Accumulated Surplus (Deficit)		\$ 7,304,893	\$ 4,199,068

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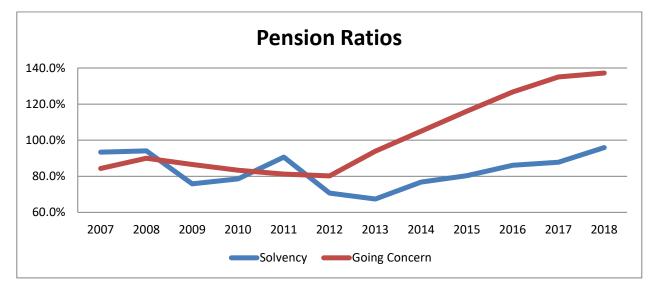
Statement II



Our audited financial statements show a small deficit, as opposed to the larger, budgeted deficit. The largest savings resulted from staffing shortfalls. One nurse practitioner and one manager were not hired resulting in a saving of \$250k. Acute care lost a number of nurses at the start of the year and was not fully staffed again until the end of the year. A significant increase in overtime and the hiring of locum nurses was more than offset by the compensation costs of the shortage resulting in a positive variance of \$560k. We also received and additional \$255k for the cost of running the dialysis unit.

### PENSION

The HRHSSA pension fund continued to grow, aided in part by the top up payments required by Federal Legislation. At January 1, the going concern ratio, representing the ability of the assets to cover off obligations of the members into the future was 137.2%. The solvency ratio, which shows the ability of the pension assets to pay off current liabilities if dissolved rose 8.1 points to 95.9%. This increase reduces the annual supplementary funding requirement by approximately \$450k. The graph below tracks the changes in these ratios since 2007.



### Acute and Ambulatory Care Services

Acute Care Services provides inpatient acute care, palliative care, and alternate levels of care.

Ambulatory Care Service provides 24/7 Emergency care services, a dental surgical program, endoscopy services, hemodialysis, stress testing, pulmonary function testing, Holter monitoring, blood pressure monitoring, phlebotomy services and chronic intravenous therapy infusions.

#### <u>Highlights</u>

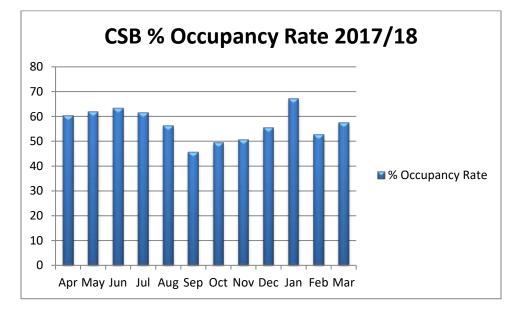
- > 198 Day Surgery procedures: Dental & Endoscopy procedures
- > 49 Pulmonary function tests
- > 5,728 Emergency Department visits
- 1,074 Hemodialysis treatments
- > 59 Holter Monitors

#### Goals achieved

Goal: Onsite training of registered nurses in advanced emergency courses such as Advanced Cardiac Life Support, Pediatric Advanced Life Support, Trauma Nursing Core Course and Emergency Nursing Pediatric Course has continued to maintain the high standard of care provided to our clients.

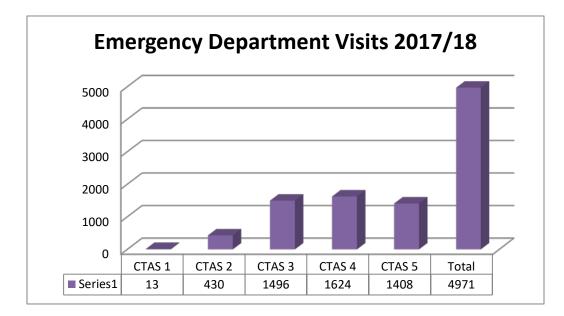
#### Performance Indicators

- Nosocomial monthly Infection tracking
- Infection Control Environmental Audits
- Bed Occupancy Rate





### Acute and Ambulatory Care Services Continued



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### **Clinic Services**

Clinic Services provides primary healthcare to the town of Hay River and the catchment area of Katlo'deeche First Nation, Enterprise, Kakisa, Fort Resolution and Fort Providence.

The Medical Clinic cares for clients who have any number of medical needs. Their needs are met by a group consisting of both resident and locum practitioners who serve our community. The community has access to specialist services, such as Internal Medicine, Pediatrics, General Surgery, through our Specialist Clinics.

Each year we see approximately 16,000 clients for medical clinic visits, 1,400 for visiting specialty clinics and assist with 1,600 outside appointments and medical travel warrants.

#### <u>Highlights</u>

- Training/distribution of Naloxone Kits to staff and community took place
- Consistent locum pool providing services to the community
- Three resident Physicians on staff Dr. Erika Koop and Dr. Charlie Koop joined HRHSSA in September 2017 to work alongside Dr. Coralie Boudreau
- Dedicated physicians assigned to support HRHSSA programming
- Dr. Charlie Koop is the lead Physician for Anne Buggins Wellness Centre one day/bi-weekly service
- HRHSSA continues to host a large number of medical students and Residents completing academic placements at the Medical Clinic
- Electronic Medical Records HRHSSA continues to employee three Territorial positions located in Hay River, which has been a huge asset for onsite training and resources for Practitioners.
- In the Fall of 2017 a number of referral concerns were identified, which intern initiated both an internal and external audit
- New referral guidelines and process created, reviewed with staff and implemented in February 2018
- Arctic Winter Games polyclinic was a success in supporting the community in March 2018
- Identified increase in teleconsults and telehealth services

#### Goals Achieved

Goal: Review and evaluate Referral Process to ensure safe and effective client care

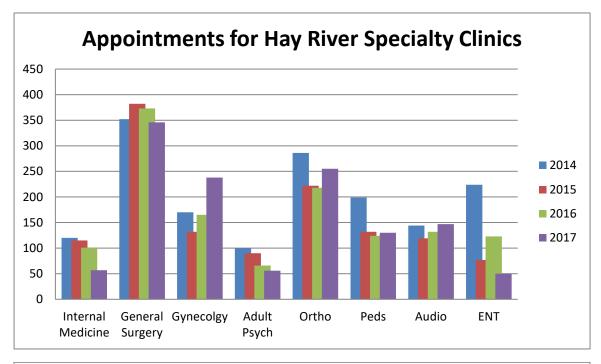
- Review and evaluation of the current referral system, guidelines and process.
- Referral Audit completed (internal and external).
- New referral guidelines received Territorially.
- Audits/reconciliation occurring weekly and continues to be ongoing.

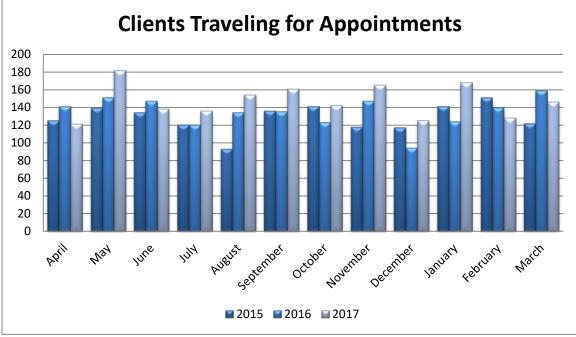
Goal: EMR training- to increase efficiency and understanding by staff as a user to provide consistency.

- Full EMR training offered to staff to ensure all staff is an efficient user of the system.
- Documentation, communication tools, referrals and messaging reviewed.
- New Rehabilitation forms and systems initiated through EMR Territorially reviewed with all staff.



### **Clinic Services Continued**

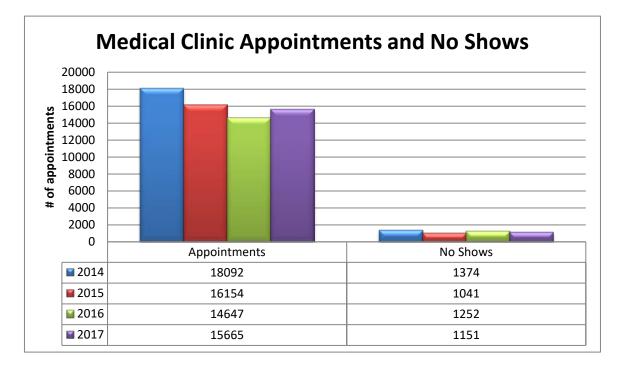




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### **Clinic Services Continued**



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### **Community Counselling Services**

Community Counselling Services (CCS) provides outpatient counselling for individuals, families, groups, couples, and children from the age of six, inpatient counselling at the Health Center, addictions counselling, awareness and prevention, community outreach and collaboration with other agencies. CCS facilitates the improved wellness and mental health of community members. Other services are treatment referrals, crisis prevention, case management, and psycho-educational programs and workshops.

#### <u>Highlights</u>

- New Mental Health & Addictions Counsellor and Administrative Assistant hired
- Booked 2,367 appointments
- Facilitation of 13 Critical Incident Stress Debriefings within the community
- All counsellors and Wellness Workers trained in Critical Incident Stress Management
- EMDR peer support and Managers/Supervisors peer support groups established for NWT
- Discussion on impact of Marijuana Legalization
- Staff attended the Community Counselling Program conferences

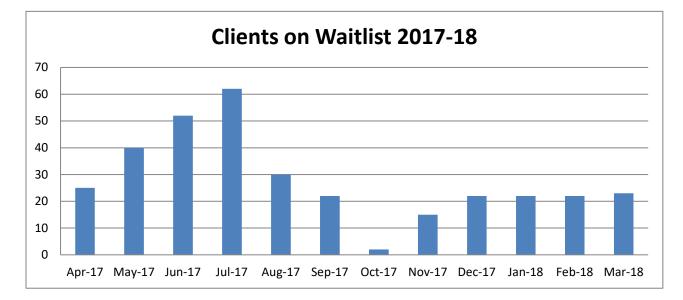
#### Goals Achieved

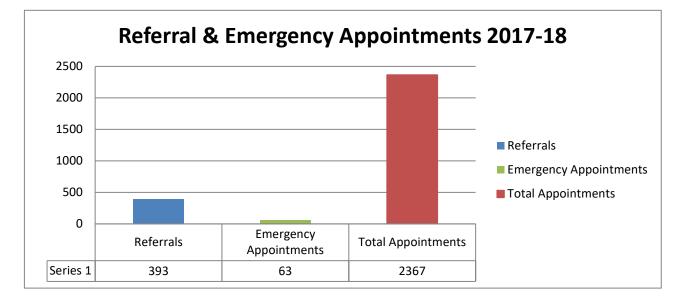
- Collaborative ventures with Public Health, K'atl'odeeche First Nation (National Suicide Prevention Day), Missing and Murdered Indigenous Women and Girls Inquiry (counselling and support), Fort Smith Community Counselling (support and ASIST), PHAB Girl's Club, Fort Simpson Counselling (crisis support), Fort Liard Counselling (MHFA), DJSS, Ecole Boreale, and Princess Alexandra schools.
- Facilitated several groups and presentations: Mindfulness-based Cognitive Therapy for Depression, Mindfulness sessions for HRHSSA departments, presentations on Addictions to Grades 8 and 9, ASIST and MHFA for Northern Peoples, Girls and the Media.
- Staff trainings: EMDR advance courses: The Embodied Self- Somatic Methods and When There are No Words-Treating Pre-Verbal Trauma, Collaborative Mental Health Care, LGBTQ Awareness, Mental Health in the Workplace, Mindfulness-based Cognitive Therapy, ODARA, Treating Trauma, Treating Shame, Substance Abuse, Privacy Breach training, HIA training, CISM.

#### Performance indicators

CCS gathers statistics on completed sessions, no shows, cancellations, wait list, and referrals. CCS is monitoring the continued trend of no shows and cancellations, and responding to the high rate of suicidal ideation.

### **Community Counselling Services Continued**





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### **Community Health**

Hay River Community Health provides core public health services for all ages and stages of the population mainly within the community of Hay River and nearby surrounding catchment areas. Community Health consistently provides its care through: well child clinics starting at birth; immunizations for 0-5 yr. olds; immunization and health monitoring and promotion of school children; opportunities for adults to update their immunizations and obtain health prevention and promotion information; TB surveillance, follow-up and treatment; infectious disease surveillance, follow up and treatment; employee health risk assessments; pregnancy testing; STI testing, treatment and contact tracing, and travel vaccinations and travel health advice

#### Highlights:

- DHSS Aboriginal Wellness Funding continued to make it possible for Public Health to offer a parenting program; a moms and tots swimming program; a first aid course for families; parents; and caregivers of young children; bags of materials to promote development in infants and preschool children aged 6 months, 18 months and 3 years; and punch passes for family swimming to those in need at Hay River Aquatic Center. These funds were also used to purchase resources for the midwifery program, infant and child car seats, and resources for public health programming.
- Hay River Community Health continues to partner with many government and non-government organizations to provide resources to our clientele especially to the 0 to 5 year old age group. They include: NT Literacy council for children's books; Hay River Literacy Society for infant books and 'Baby Bags;' and Hay River Fire Department and Hay River Home Hardware for the provision of bike helmets to all children attending preschool screening in Hay River Community Health.
- Community Health continues to collaborate with departments within HRHSSA. There is an informal group of departments whose main goal is the health of children in the 0-5 yrs group and their families. Midwifery, Healthy Families and Hay River Community Health meet on an ad hoc basis to discuss their programming and find ways in which to support each other's programs. As an example: Community Health assisted Healthy Families programming with childcare during their Collective Kitchens programs and Healthy Families provided childcare during the First Aid course organized by Community Health.
- In May 2018, the NTHSSA announced that a Breastfeeding Friendly Initiative would be launched for the entire Northwest Territories. Hay River midwife Heather Heinrichs sits on the Territorial Committee that will be overseeing this endeavor. Hay River Community Health and Healthy Families will be meeting on a regular basis to support the planning and ultimate implementation of this program. Prior to May 2018, Hay River Community Health participated in 2 research projects on breastfeeding to offer information to the researchers on rates of breastfeeding in Hay River and length of breastfeeding times.
- Community Health Nurses were very busy with additional school immunizations starting in Fall 2017 with the offer of HPV vaccination series to all students between the ages of 9 years and 26 years. Uptake of the HPV vaccination by boys in Hay River was very successful. Community Health Nurses were also additionally

### Community Health Continued

tasked with offering of Tetanus; diphtheria; and pertussis (Tdap) vaccination to all pregnant women between 27 and 32 weeks of pregnancy regardless of the last time they had Tdap vaccination. The purpose of this campaign is to provide newborn infants with passive immunity to pertussis from their mothers until they are old enough to start their childhood vaccinations.

- Community Health Nurses provided multiple education sessions to students and the public this year on: Naloxone Kits to treat Narcotic overdoses; Men's health or 'Movember,' Literacy Day; anti-smoking; handwashing; immunization week; STI information about testing and treatment.
- > Two Community Health nurses continue with their efforts to obtain their certification in Remote Nursing.
- Community Health participated in the committee to establish a Polyclinic at the Health Centre for athletes of Arctic Winter Games. Community Health distributed Easter baskets of condoms to each AWG 'village,' as an STI prevention strategy.
- Rates of Gonorrhea are on the rise in the NT and Hay River. Community Health has become more vigilant in their testing and treatment of STI's. Major concern by the DHSS that a resistant strain of Gonorrhea may start to emerge in the NT.

#### Goals:

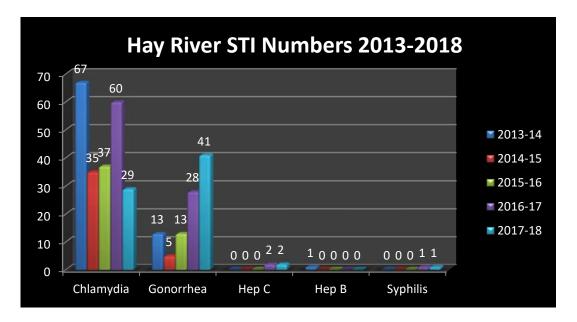
- Goal: To maintain core programming as mandated in the NWT Community Health Nursing Program Standards and Guidelines. Hay River Community Health Nurses continue to provide GNWT mandated community health services to the community. Priorities are identified and maintained.
- Goal: Support Community Health Nurses in their efforts to secure PDI funding for continuing education opportunities. Continue to support the two community health nurses enrolled at Aurora College in the
- Post-

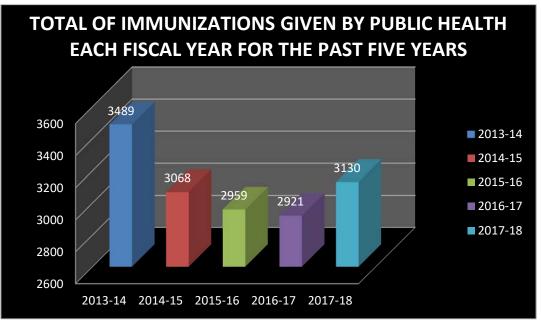
graduate Certificate in Remote/Rural Nursing.

- Goal: Continue to collaborate with other HRHSSA Early Childhood stakeholder groups such as Healthy Families and Midwifery program to enhance delivery of programming to parents of infants and preschool children and to participate in the planning and delivery of the Baby Friendly Initiative.
- Goal: Begin processes required for Accreditation in Fall 2019.

### **Community Health Continued**

Performance Indicators:





### **Diabetes Program**

The focus of the Diabetes Program under the Home Care & Community Enhancement (HC&CE) initiative has been to provide a comprehensive Diabetes Education and Support Program which follows the Territorial initiatives of Chronic Disease Management, as well as the 2013 Canadian Diabetes Association (CDA) recommendations in the organization of Diabetes Care. The Hay River Health and Social Services (HRHSSA) Diabetes Program supports the organization in delivery systems, decision support mechanisms and information systems. The key focus being: self-management and health services. All of which directly impact creating supportive environments and strengthening community action.

Within the population that the HRHSSA serves, approximately 15% of people have been diagnosed with diabetes, either type 1, type 2 or gestational diabetes. Of these the program regularly supports 215 clients, representing approximately one third of those diagnosed. Not including pre diabetics.

#### <u>Highlights:</u>

- Facilitated 4- Week Craving Change Program- Feb/March 2018
  - Program designed to help who struggle with emotional eating and develop tools & strategies to build a healthier relationship with food.
- Diabetes Education/ Group sessions
  - Monthly -1 hour group sessions/day hosted at Health Centre
  - 4 sessions per day x 6-8 clients
- Diabetes RN or RD appointments
  - >  $\frac{1}{2}$  hr. to 1 hr. appointments offered throughout the week
  - > Client and family centered care and support in chronic disease management
  - > Assess, plan, implement & evaluate treatment plan.
- School Education
- Diabetes Month- Anne Buggins Wellness Center, K'atl'odeeche First Nation (Nov 2017)
- Various health promotion activities throughout the year around diabetes and nutrition
- Participation in Health Fairs: Hay River (Nov 2017), Enterprise (Nov 2017), K'atl'lodeeche First Nation (Feb 2018)
- Foot Care Courses
  - May 2017: HRHSSA Basic Foot Care Course
  - > Dec. 4<sup>th</sup>- Dec. 8<sup>th</sup>, 2017: Tlicho HSSA Advanced Foot Care course.
  - March 12-16<sup>th</sup>, 2018: Deh Cho Region Advanced Foot Care course

### **Diabetes Program Continued**

- Education:
  - Obesity Summit (April 2017)
  - > DNE diabetes nurse educator certificate
  - Diabetes Update Edmonton (January 2018)
  - Parenteral Nutrition Workshop (March 2018)
- Northern Diabetes Networking Teleconferences with other communities around the North
- EMR: working on new diabetes rules
- CDA Standards and Recognition Application package completed & submitted
  - > Jan 2018- Assessment of outcome standards

#### Goals Achieved:

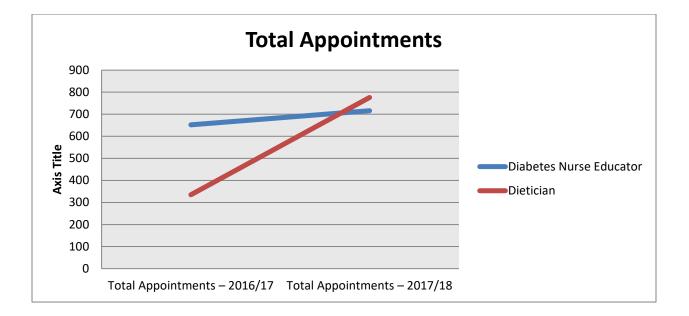
- 1. To develop stronger partnerships within and outside of our Authority.
  - Strengthening partnerships with Community Support Beds to offer regular follow ups to diabetes clients and attending multidisciplinary rounds regularly.
  - Working closely with the Renal Department to participate in monthly clinics to ensure follow ups review of renal labs, accessing malnutrition and diabetes related concerns
  - > Admin support worked to establish routines for patient reminder and bookings.
  - Partnership with Diabetes programs Territorially, Edmonton and High Level to enhance our program.
- 2. To provide education for clients diagnosed with pre-diabetes and clients at high risk for developing diabetes. Education is done through many different programs offered by the diabetes team. Cooking circles, weight loss programs, community presentations, grocery store tours, education booths as well as individual appointments and diabetes workshops.
- 3. Diabetic Nurse Educator (DNE) New staff member in role of DNE. Completed certification in March 2018.

### **Diabetes Program Continued**

#### Performance Indicators:

Clients seen and supported by the Diabetes Education Program:

- Through partnering with the HRHSSA Clinic for services of a practitioner on a weekly/bi-weekly basis, more clients have been medically reviewed. Issues such as medication refills, insulin starts, medication management, and timely adjustment to dosages and referrals to specialists are dealt with during these sessions. (Clients seen or reviewed initially, in Group appointments or at mini-clinics with the team).
- Clients supported at an initial or on-going appointments in the office or through Group appointments.
- Allocated Primary Physician- provides consistency and guidance for staff and clients as well as thorough reviews of client's charts.



### **Diagnostic Imaging**

The 24 hour Diagnostic Imaging Services include the provision of quality general radiology views performed in both a fixed radiology room, and portably when required. Images are reviewed and reported by offsite Radiologists at the Mayfair Radiology group in Calgary. The Diagnostic Imaging staff liaises with the physicians to provide the best client care possible.

#### Highlights:

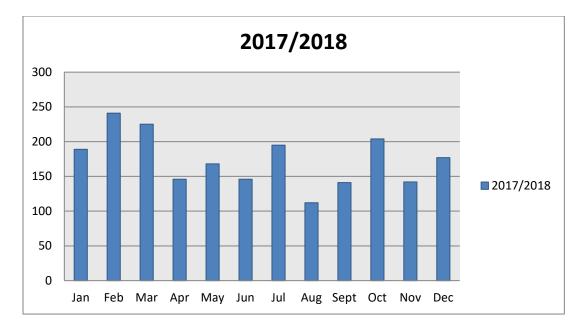
- Recruited Medical Radiologist Technician to fill vacancy
- We have a local technologist working casual and helping with on-call
- Proposal submitted to add Bone Density testing services to Hay River

#### Goals Achieved:

- Staff continuing education up to date.
- Successful coverage of Arctic Winter Games

#### Performance Indicators:

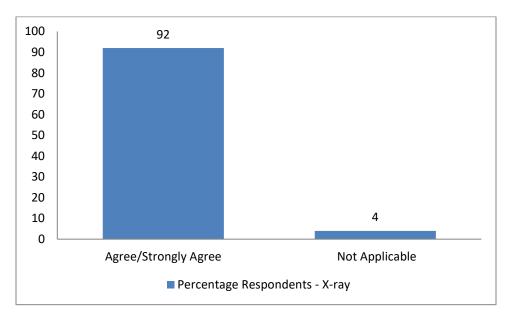
Number of General Radiology Clients Seen	2015/16	2016/17	2017/18
	2165	2042	2086





### **Diagnostic Imaging Continued**

When asked on our Client Satisfaction Survey if their questions were answered satisfactorily by the technologist:



### Dialysis Unit

The dialysis unit provides Hemodialysis services to Hay River and surrounding area.

#### **Highlights**

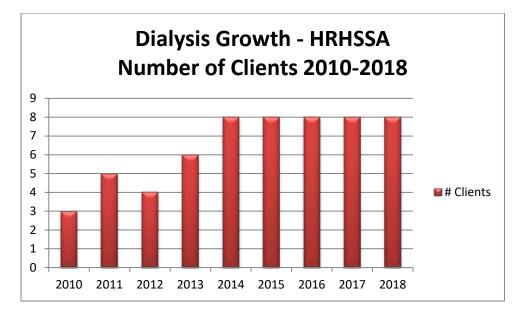
- > Hemodialysis population is currently at full capacity with eight clients
- > Nephrologist travel clinic every four months.
- Northern Alberta Renal Program contract ensures we have access to current policies and procedures, education and ensures best practices are maintained.
- > Monthly venous access monitoring within the hemodialysis program using a transonic device
- > Biomed is currently negotiating new dialysis machine contracts.

#### **Goals Achieved**

- Maintaining a highly trained complement of staff
- Assigning primary nurse roles for lead dialysis nurses such as:
  - Medication Reviews
  - Anemia Protocol
  - > Calcium, Phosphate PTH, and Vitamin D Protocol
  - Case Reviews
- Improvements in Territorial Renal Program roles and responsibilities

#### Performance Indicators

#### Growth in HRHSSA Hemodialysis Program Numbers



### Engineering & Physical Services

Tasked to provide a functionally appropriate, safe and comfortable environment for clients, visitors and staff of the HRHSSA.

#### Responsibilities:

- Provide maintenance services to all HRHSSA facilities (Hay River Regional Health Center, HH Williams Hospital, Woodland Manor, Supportive Living Houses and Day Building, Medical Clinic Building, and assets within the Gensen leased space)
- Perform scheduled & preventive maintenance
- Perform regular inspections
- Execute direct request maintenance
- Provide seasonal grounds maintenance & snow removal / ice control
- Develop, review, and implement functional plans for various emergencies
- Provide project management services
- Active HRHSSA representative on the 9 Bed Long Term Care Addition (Woodland Manor Expansion)
- Active HRHSSA representative on the 48 Bed Long Term Care Project

#### Highlights:

The Engineering Service Department has had a productive year maintaining our facilities. Although we expected the closure of HH Williams, ongoing delays in the construction of the Woodland Manor Pod, and the slow progress on finding a new home for our other off site services, have required us to continue operations and maintenance of the old HH Williams Hospital for the entire year. This extra work was accomplished by the extension of a term tradesperson.

Over this past year, several facility improvements have occurred: a Boiler upgrade for Woodland Manor, an additional Fume Hood for the HRRHC Laboratory, and a new Mammography unit.

Our department has continued to closely work with the Department of Health's Infrastructure Division on the Woodland Manor 9 bed Expansion and the development of a newly announced 48 bed Long Term Care facility.

It was exciting news that maintenance responsibilities for the new extension to Woodland Manor have been assigned to our department. The maintenance services we provide to the existing facility will now include the new addition.

#### Goals Achieved:

**New Health Center Deficiencies**: One of our main objectives over the past year has been to work with the Department of Infrastructure and various contractors to resolve many of the HRRHC deficiencies outstanding from original construction. Other than some exterior grounds work still required, most of the deficiencies have been completed.

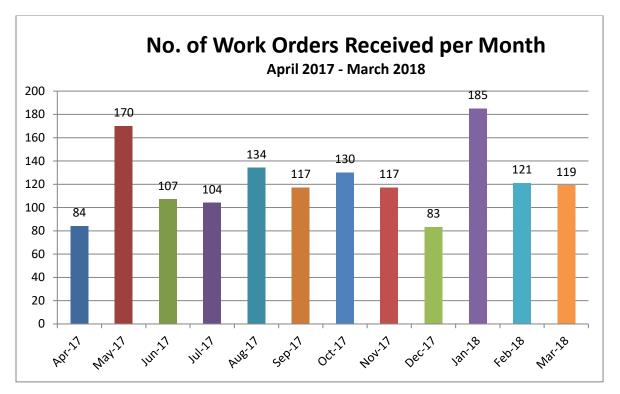
**Woodland Manor Smoking Room Reclamation**: Many years ago, a client room had been dedicated as a Client Smoking Room, and was rendered useless due to years of smoke contamination. This year, the room was completely stripped down to the bare exterior wood and renovated by our own in-house staff, and was reclaimed into service as a client room

### Engineering & Physical Services Continued

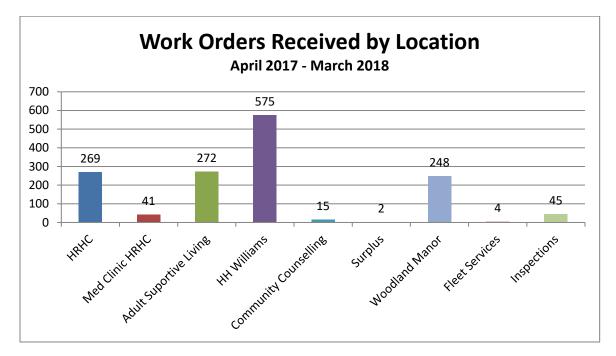
**Increased Territorial Involvement**: Engineering Services has been participating on a Working Group of a Territorial Regional Maintenance committee, trying to identify opportunities of efficiency from a Territorial perspective. With the experience gained during the recent moves of our own facilities, we were asked by DHSS Infrastructure to assist Fort Resolution Nursing Station with their Transitional Planning and relocation to their new facility.

#### Performance Indicators:

Much of our work is generated by end user requests and an automatic PM scheduling via our computerized work order system. The following charts represent approximately 60% of our total work. Work not tracked by our CMS includes regular day to day services such as portering, snow removal, lawn and grounds maintenance, daily mechanical room inspections etc., and requests received in the form of emails, telephone calls, and face to face conversation.



### **Engineering & Physical Services Continued**





### Health Records / Electronic Medical Records (EMR)

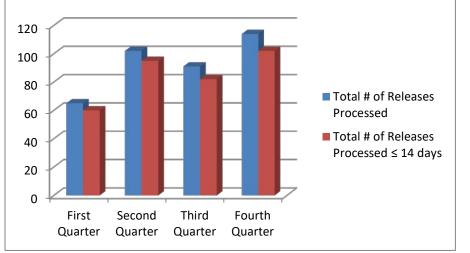
- Processing, Coding & Abstracting of inpatient \outpatient records
- Processing the release of information to Lawyers, RCMP, Insurance Claims and other Institution where the patient is receiving care.
- > Provides the compilation of all reports and information generated in the health care of the client
- EMR provides patient records at the physicians' fingertips one patient, one record, one complete and integrated history
- EMR team coordinates with Yellowknife office to facilitate training, data integrity and systems administration of the electronic medical record to new users across the entire territory.

#### Highlights:

- EMR Team established to start coordination of switching over to Electronic Medical Records. Territorial Data Integrity Coordinator, Territorial EMR Administrator and Territorial EMR Educator are all located in Hay River.
- EMR team has brought all communities in the Northwest Territories except for Lutselke and Paulatuk, onto the Wolf system.
- > There is an EMR Deployment and Implementation schedule for 2018 2019.

#### Performance Indicators:

Release of information Performance indicator						
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total	
Total # of Releases Processed	65	102	91	114	372	
Total # of Releases Processed ≤ 14 days	60	95	82	102	339	



Medical Records strives to ensure all clients receive quality care in a timely manner. Even though Medical Records Release of Information are allowed 45 days to process all information requests, staff attempt to complete the request sooner. The measures above indicate how many requests are completed equal to and under 14 days after the completed request has been received in the Medical Records Department.

### Release of Information Performance Indicator

### Healthy Family Program

The Hay River Health & Social Services Authority recognizes the importance of investing in children and families in our community and has delivered the Healthy Families Program since September of 2004. Our program strategies also compliment the mission, vision and goals set out by the Hay River Health & Social Services Authority.

Healthy Families provides **prevention**, **support and educational** programming that is free, accessible and ongoing. Our mission is to build stronger and healthier children for the next generation to come.

### Highlights:

#### Prevention Programming:

**Growing Great Kids (curriculum)** is a one to one program that is unique compared to Hay Rivers other early childhood programs as it focuses on working with parents and infants one to one as opposed to working in a social environment.

#### Supportive Programming:

**Breastfeeding Support** is important. (Especially if the mother is having difficulty and deciding not to breastfeed) A mother choosing to breastfeed impacts the environment in the following ways:

- **Babies & Children**: Decreases risk of SIDS, some diseases obesity and improved long term health and productivity
- **Mothers & Families**: Decreased risk of type 2 diabetes, breast and ovarian cancers, high blood pressure and saves families thousands of dollars on formula and equipment
- Business and Economy: Reduces millions of dollars in healthcare costs each year
- **The Environment**: Reduces global carbon footprint as it generally requires no packaging, fuel to prepare or transportation to deliver baby milk.

#### Educational Programming:

**Collective Cooking** is group program where parents and children learn about nutrition, baby food making and basic cooking skills. Each class, families prepare a healthy meal to take home. Each week, families are also provided with a food hamper that include cheese, milk, bread and fresh produce.

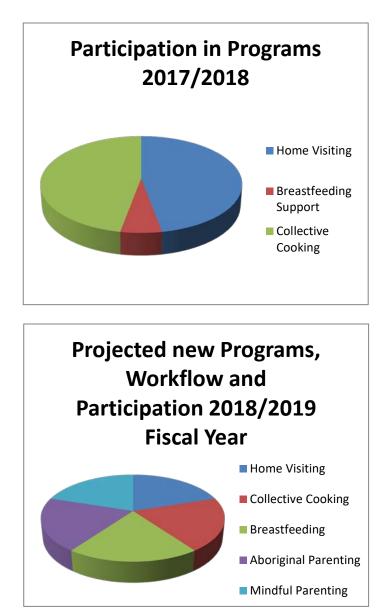
This year we worked with Community Health, our Midwives and a High School Student completing work experience during each class. In 2018/2019 we will include the support of the nutritionist and local health inspector to help us focus on the education portion of the program (i.e. safe food handling, reading labels etc.)

### Healthy Families Program Continued

#### Goals Achieved:

Record number of 60 families participated in the Healthy Family Program in 2017/2018 as opposed to the previous year of 39. We believe the increase was due to the support of Public Health & the Midwives and receiving referrals on almost a weekly basis from both departments. As a team, we have been working together a lot more this past year and look forward to the new working goals in the year to come.

#### Performance indicators:



### Home Care

HRHSSA Home Care works with people and communities to promote health, prevent illness and provides safe, quality health care services. Our services supplement but do not replace clients' efforts to care for themselves with the assistance of their family, friends and community.

Homecare not only works with the aging population, but also has a large wounds and postoperative client base. This program encompasses nurses, Home Support workers and a Foot Care nurse that deals with advanced lower leg assessments and care.

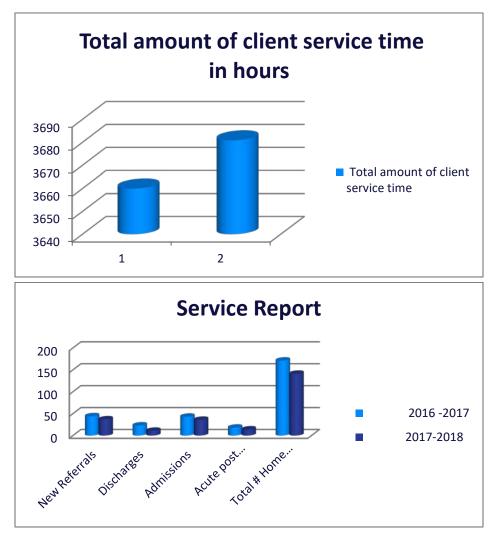
#### Highlights:

- Increase funding from Department of Health and Social Services (DHSS) to create another full time Home Support Worker position
- Sterilization operation and reorganization of services resulted in a disruption of services within our Foot Care/ Wound care/Ostomy practice. Authority was able to bring in some disposable tools to help us continue to offer our services
- Senior Society presented Home Care with 20 copies of "Confidence to Care" and DVD on dementia care. This was funding that they were able to secure from the Elks service club
- Alzheimer Community Ambassador: Mary Buckley has accepted to be in this position as a volunteer. Alzheimer Canada did education sessions for this pilot study. Mary is organizing an Alzheimer Walk for awareness June 16<sup>th</sup> in Hay River.
- Increase in Palliative clients in the community that are wishing to stay in their homes until they pass or they can no longer manage in their home environment. Home Care support this as best we can with limited staffing and hours available
- > Foot Care advanced courses taught in both Tlicho and Fort Simpson this past year
- Victoria Hospice Bereavement care and Pallium (palliative care) courses attended by several staff members
- Enterprise community meeting attended by staff to discuss community needs and where Home Care could fit in. They were mostly interested in emergency services and medical appointments being offered in the community.
- > Autism online course taken by several Home Care staff
- Continuing Care teleconferences have been re-established with the DHSS Continuing Care department and communities. DHSS has created a Territorial Continuing Care Coordinator and a Palliative Care Coordinator to assist with the establishment of a more stream lined and consistent program across the different Authorities.
- > K'atl'odeeche First Nation health fair was attended by Home Care staff

### Home Care Continued

#### Performance Indicators:

- Home Care Enhancement is continuing to support the Home Care/Foot Care program for equipment and education needs
- Staff continuing to engage in palliative care, dementia care and wounds/ostomy education on a regular basis
- Increase in Elders in Motion exercises being used with individual clients to help them stay independent in their own living environments
- Increase in number of complicated clients that are being managed in their own homes having staff with increased education and support for training



## Human Resources

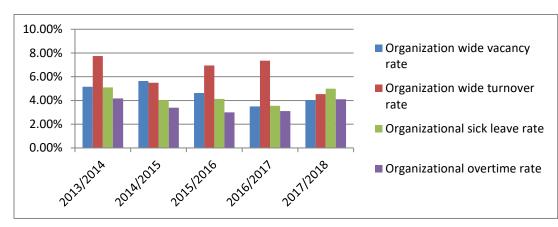
The Human Resources (HR) department's key areas of responsibility include recruitment, selection, position administration/job evaluation, HR planning, corporate training, orientation, labour relations, collective bargaining, pay, benefits, staff service recognition (longs service awards, staff appreciation), return to work/stay at work program, performance management, HR policies administration, employee wellness & attendance management.

#### Highlights:

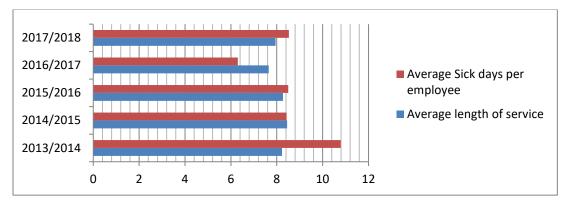
- > Negotiations occurring for a new Collective Agreement
- Extremely busy year with recruitment, selection and onboarding
- Pension Solvency continuing to improve

#### Goals achieved:

- Goal: Education for Managers/Supervisors on performance appraisal process
- Goal: Improved onboarding process for new staff
- Goal: Revamp of Respectful Workplace Training session for staff



## Performance Indicators:



## Information and Communications Technology

The Department provides Information and Communications Technology Services (computers, printers and some software support), telephone support and administration, French language services, and Telehealth coordination and administration.

#### Highlights:

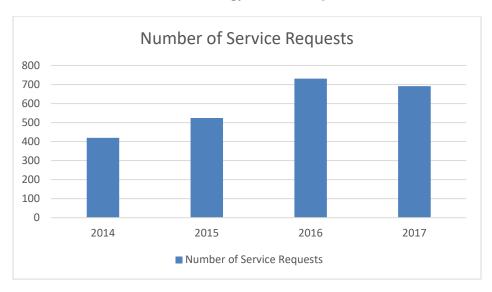
- Migrated all data to new storage device.
- Completed a MediPatient (Hospital Information System) upgrade
- Completed a Mitel Phone system upgrade
- Completed a Nurse Call system upgrade, which included new handhelds for staff.
- 99% of PC's migrated to Windows 7.
- Participation with Territorial Health Care transition to one Authority
- Continuing support for the French Language Active Offer program

#### Goals Achieved:

Maximize network IT systems availability - Average of 99.98% uptime for major systems

Maximize the telephone system availability - no major issues affected system availability.

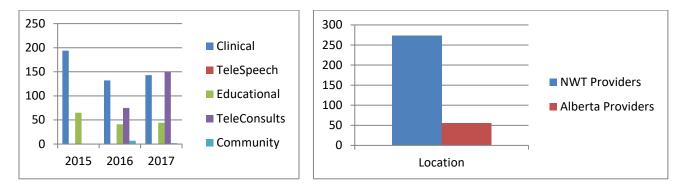
#### Performance Indicator;



## Information Technology Service Request Tickets

## Information and Communications Technology Continued

#### **Telehealth sessions**



#### **Provision of Language Services**

To ensure the provision of the Health and Social Services programs that are offered in compliance with Language Services provisions as required under the Official Languages Act of the Northwest Territories.

Highlights:

- Signs established at all points of entry
- Personal greetings by frontline staff
- Bilingual voice messages
- Bilingual forms
- French Language promotion done on a daily bases
- > Health promotion done thought the French Schools and the French Association
- > Implementation and continued support for the French Language Active Offer program

#### Goals Achieved:

HRHSSA has increased their capacity to deliver French Language services to the public in accordance with the NWT Official Language Act and related Official Languages Policies and Guidelines.

Our counselling program is now available to offer counselling in French via Telehealth for our French client requesting the service.

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## Laboratory

The 24 hour Laboratory Services include: specimen collections, referral and analysis of specimens collected as well as receipt and analysis of offsite collections. The Laboratory ensures the quality of results that are delivered efficiently to the practitioners. The Laboratory technicians liaise with practitioners to ensure the best client care.

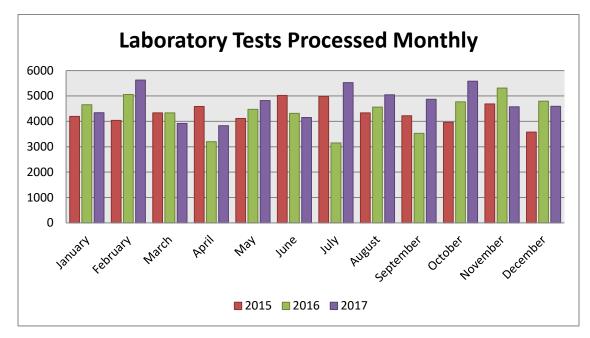
## Highlights:

- LIS upgrade enable document scanning decreased future need for paper storage
- Maintain operations despite critical staffing levels
- New Centrifuge and install of second Fume Hood

#### Goals Achieved:

- Staff licensure up to date
- In house client satisfaction survey completed

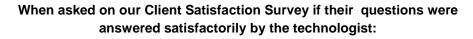
## Performance Indicators:

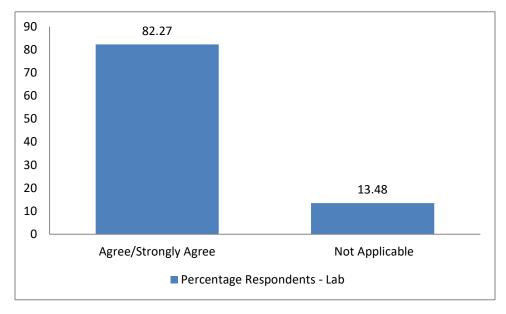


**Please note, the Laboratory was closed most of April 2017 due to staffing shortages.** 



## Laboratory Continued





## Long Term Care Services

Long Term Care (LTC) services are provided to 14 residents at Woodland Manor and 9 residents in the LTC Unit at the HH Williams Memorial Hospital and Respite services for up to 2 clients at Woodland Manor. Services include professional nursing care, physician, rehabilitation, dietary, recreation, pharmacy, pastoral care, foot care, housekeeping and laundry services. The LTC residents range in age from 41 to 95.

## Highlights:

- 96.5% occupancy rate over the past fiscal year, 11 admissions, 10 deceased, no waitlist as of April 2018
- Two LTC beds changed to Respite beds during fiscal year
- Training 85% of staff trained in Supportive Pathways, Resident Care Coordinator completed the Medical Intensive Palliative Care Program through the Victoria Hospice, Post Diploma Certification with Major in Gerontology, 2 staff attended Mental Health First Aide, 2 LPNs attended Advanced Foot Care training, 11 staff attended Non Violent Crisis Intervention, 1 LPN attended Non-Violent Crisis Intervention train the trainer program, 7 staff attended PIECES training, Mask fitting all staff, one LPN attended First Aid and CPR instructor training and Recreation staff attended Functional Fitness for Falls Prevention training, NWT Parks and Recreation Conference in Inuvik.
- 100% of staff attended Back Injury Prevention training
- Hosted one student practicum from Norquest College
- Completed Resident and family Surveys
- GNWT Relevant Experience student funding for nursing student was received
- Grants from NWT Parks and Recreation were received totaling \$1,400.00
- Hay River Elks Club and Seniors Society donated towards Christmas gifts for resident
- Resident outings to the beach, waterfalls, Hay River Museum, Enterprise Jamboree

## Goals Achieved:

- 1. Implementing PIECES approach to understanding and enhancing care for residents with complex physical and cognitive/mental health needs and behavior changes will be implemented in the department.
  - Decrease in responsive behaviors
  - Increased family involvement in planning care
  - Standardized approach to behavioral assessment
  - Increase front line staff comfort level addressing responsive behaviors
- 2. Improve quality of end of life care services
  - Death with dignity and respect
  - Pain management
  - Staff training in Palliative Care

## Long Term Care Continued

- 3. Continuing Care Standards Implementation
  - In House policy committee review and new policies/processes/procedures developed and policies updated

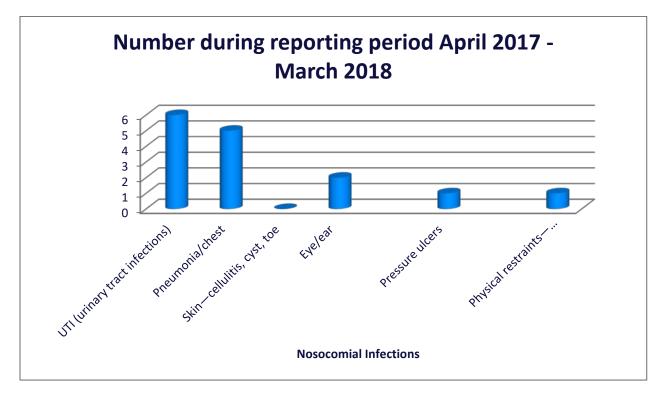
- Family representation on the Continuing Care Policy Committee
- Committee work to develop GNWT policies to meet Standard requirements

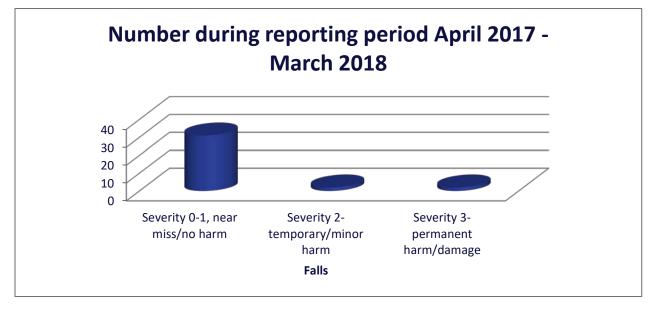
#### Performance Indicators:

Indicator	Percentage based on total residents in care
Nosocomial Infections	S
UTI (urinary tract infections)	2.4%
Pneumonia/chest	2%
Skin—cellulitis, cyst, toe	
Eye/ear	0.8%
Pressure ulcers	.5%
Falls	
Severity 0-1, near miss/no harm	12.4%
Severity 2-temporary/minor harm	0.8%
Severity 3-permanent harm/damage	0.8%



## Long Term Care Continued





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## Mammography

The Mammography department provides Breast Screening Services to the women, 40 and over. The program was expanded in June 2010 to include the women outside the Hay River catchment area, but within the South Slave region. The digital mammography images are reported by offsite radiologists at the Mayfair Radiology group in Calgary.

## Highlights:

- We have a local Technologist providing Mammography services, increasing our flexibility to provide clinics and reducing operating costs.
- We are in partnership with the Canadian Breast Cancer Foundation to provide information pamphlets and breast health guides to the women of the South Slave
- Successful Breast Health Awareness campaign which involved Bra Art submissions.

## Goals Achieved:

- New equipment installed
- We were able to have an information table at the Adult Health Fairs in Hay River, Hay River Reserve, Enterprise, Fort Resolution, Nahanni Butte, Samba Ke' and Fort Good Hope, to give information to clients about the program.

## Performance Indicators:

	10/11	11/12	12/13	13/14	14/15	15/16	16/17	17/18
Examinations Completed	644	569	522	573	678	594	585	548
Patient Education	8730	7170	7830	10125	10170	8790	9015	8175
Exam Units	45019	44705	46640	53035	62870	59340	58955	55475

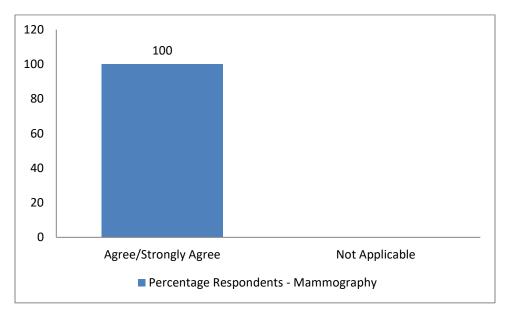
## **EXAMS COMPLETED**

• The numbers calculated above are based on the Workload Measurement System Manual for Diagnostic Imaging Services and confirmed with the Breast Screening Program in Yellowknife prior to use.



## Mammography Continued

# When asked on our Client Satisfaction Survey if their questions were answered satisfactorily by the technologist:



## Materials Management Services

The Materials Management Department provides supply chain management services to management and staff of the Authority. Services include: sourcing, purchasing, leasing, shipping and receiving, travel and accommodation arrangements, inventory management, contract management, assets management and many other related services.

## Highlights:

- > Successful completion of the Arctic Winter Games Polyclinic supplies.
- Reviewing and clean-up of duplicate or similar items/supplies in stock and in the Ormed/Virtuo system resulting in cost savings and space saving.
- Associated with the clean-up of items/supplies we are also reviewing and removing obsolete or unnecessary items/supplies from stock and from in the Ormed/Virtuo system.
- As a result of the clean-up we are able to review/maintain our usage quota for our required min/max quantity amounts, as well as identifying additional items/supplies that have expiry dates we need to be aware of that may have been previously missed.
- With the review and clean-up of supplies this has resulted in cost savings of approx. \$16,205.94 and a very successful yearend inventory audit.
- We have continued with the Recycling initiative that was put in place to reuse supplies and equipment that were not being used in other departments. This green initiative has provided huge savings to the HRHSSA over the past three years and has freed up storage space in various departments. This initiative has resulted in cost savings of approx. \$13,300.00 this past year.
- Implemented monthly review of the Contract Spreadsheet, Files and Contract PO's to ensure all contracts/agreements are valid and up to date.

#### Goals:

- > Woodland Manor nine bed expansion complete acceptance and delivery of equipment and furniture
- Complete departmental manual
- Reviewing/revising our department internal processes currently ongoing
- Continue to review supplies

## Materials Management Services Continued

## Performance Indicators:

	2016/2017	2017/2018	% Increase or Decrease
VISA Requisitions	244	211	-13.52%
Purchase Orders	1482	1575	6.28%
Travel Requisitions	274	373	36.13%



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## Medical Device Reprocessing

#### Highlights:

- Supporting other departments through efficient ordering, cleaning and sterilization of supplies and equipment.
- > Reorganization of stock within the departments to improve efficiency.
- > Developed new checklists for each department to improve ordering and reduce overstocking.

#### Goals Achieved:

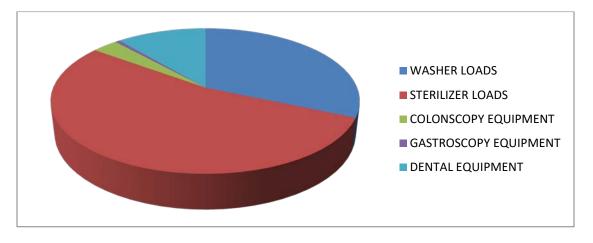
- Implemented new processes and workflows to ensure maintenance of cleaning and sterilization standards.
- > Implemented new ordering and stocking processes to maintain adequate stock and supplies.

#### Performance Indicators:

- Number of washer and sterilizer loads
- Number of Endoscopes sterilized
- Dental equipment sterilized
- Maintaining adequate stock and supplies

	2017/18	2016/17
WASHER LOADS	327	654
STERILIZER LOADS	556	517
COLONSCOPY EQUIPMENT	33	57
GASTROSCOPY EQUIPMENT	6	10
DENTAL EQUIPMENT	116	51

Note: Previous year washer loads included biological and DART testing. Starting this year, and going forward, we will only include actual washed loads of instruments.



## **Midwifery Services**

Hay River Midwifery Services provides primary maternity and newborn care to women who are currently pregnant or planning a pregnancy. Services include preconception counselling, prenatal care and education, referrals for unplanned pregnancy, labour and birth in Hay River for low risk women, postpartum care and care for newborns for the first 6 weeks of life. A decision to birth in Hay River is made collaboratively with the client, midwives and a consulting obstetrician and is based on informed choice and consideration of risk factors.

The midwives work collaboratively with the family physicians, nurse practitioners, acute care and public health nurses. Women with specific health concerns that are outside of the midwives' scope of practice may be cared for by the midwives in consultation with either an obstetrician or family physician or nurse practitioner in the community. Planned births in Hay River are managed by the midwives working with CSB/emergency department nurses acting as second birth attendants. Hay River Midwifery program staff includes two full time midwives and a part time administrative assistant.

## Highlights:

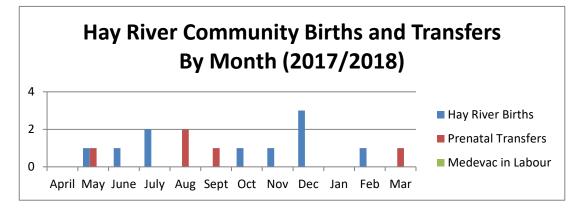
- Midwives continue to provide second attendant training to CSB/emergency nurses
- Prenatal Education sessions offered twice throughout the year
- NWT Midwifery Advisory Committee at DHSS has submitted updated Midwifery Practice Framework and Standard on Prescribing, Dispensing, and Administering for approval by the Minister
- New midwife hired into indeterminate position, started February 5, 2018
- Midwife from HRHSSA represented DHSS at the Canadian Midwifery Regulators Consortium meetings in October, 2017
- The midwifery department undertook a data collection project with UBC using a database that will help monitor perinatal outcomes for Hay River
- Midwife Team Lead began representing the HRHSSA at the Territorial Infant Feeding Working Group and a plan to attain BFI status will be implemented over the next few years
- The midwifery program hosted an International Day of the Midwife Celebration in May 2017, this event was well attended by the public, staff, past clients, and political figures

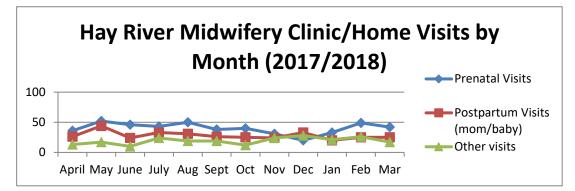
#### Goals Achieved:

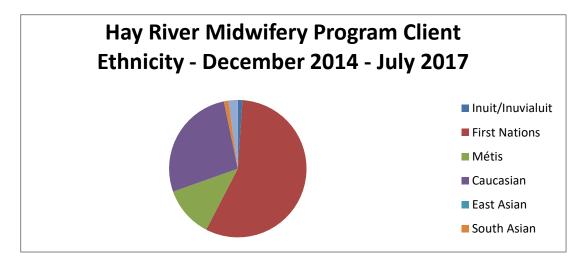
- 1. Filled vacant positions after admin assistant and one Midwife both retired this year
- 2. Training for midwives completed Access database, Contraceptive Management, Safe Prescribing, ALARM
- 3. Regular Maternity Care Committee meetings with obstetrician Dr. Bing Guthrie ongoing
- 4. Updated Midwifery Practice Framework submitted for approval

## Midwifery Services Continued

Performance indicators







## **Pharmacy**

The Pharmacy Department is responsible to implement and maintain policies and procedures that meet the national standards for medication management within HRHSSA as set out by Accreditation Canada; to ensure that there is an adequate supply of all medications available within HRHSSA and to monitor these medications for safety, expiry date and proper use; and to provide pharmaceutical clinical support to all areas of HRHSSA that will help insure enhanced client care and safety as an integral part of our health care team.

## Highlights:

- Pharmacist actively monitors and insures that the medication needs are met for all of the departments in HRHSSA including community support beds, emergency room, ambulatory care, dialysis, public health, homecare, long term care and medical clinic.
- Improvement continues with the cooperation between hospital Pharmacist and Acute Care, Home Care and retail pharmacy for patient medication discharge planning, which involves providing medication counseling and ensuring that the patient receives the correct prescriptions in a timely manner upon discharge from Acute Care. This has led to improved safe medication use and compliance from our clients.
- Pharmacist continues to lead the team on various accreditation required operational practices such as Antimicrobial Stewardship, Medication Reconciliation and VTE prophylaxis protocols that are an integral part of each Acute Care admission. Each of these have proven to increase the quality and safety of our patient care.
- Pharmacist represents HRHSSA on all local and territorial pharmacy related committees including NWT Pharmacy and Therapeutics Committee and NTHSSA Medication Management Accreditation.

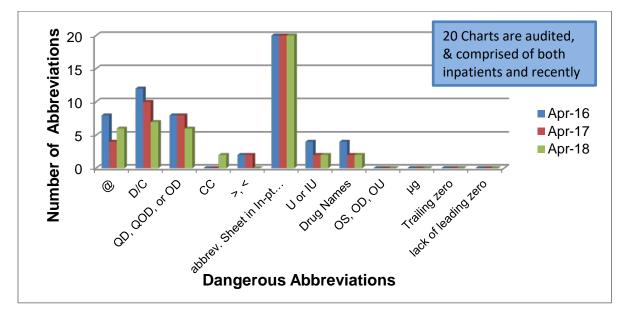
#### Goals achieved:

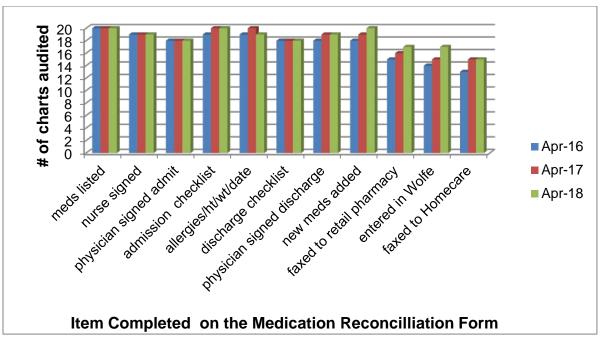
- Goal: Medication management standards met and accreditation granted for HRHSSA
- Goal: Antimicrobial Stewardship and Medication Reconciliation in all areas of HRHSSA
- Goal: Pharmacist actively involved with all patient admission and discharge medications
- Goal: Completed the fiscal year \$13,500 over budget which was attributed to the increased medication needs in dialysis and the replacement costs for TNKase

## Pharmacy Continued

Performance Indicators:

- Dangerous Abbreviation ROP audits
- Medication Reconciliation ROP audits





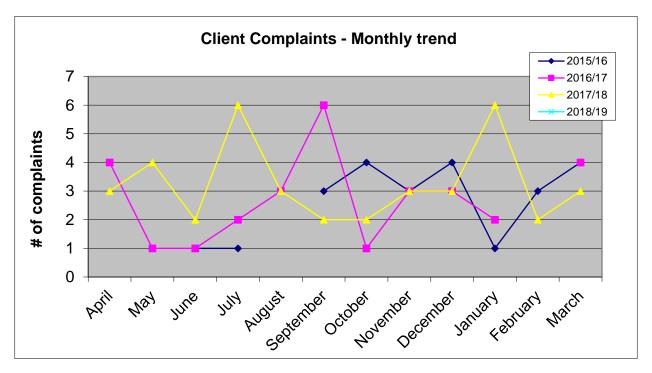
## **Quality Improvement and Risk Management**

This department is responsible for the overall planning, development and facilitating of an integrated quality management program for HRHSSA including integrating risk management, accreditation, complaint management, interdisciplinary program standards, organization wide quality improvement initiatives, and the measurement evaluation and assessment of quality initiatives. Territorially Quality, Risk Management has been involved in the implementation of an incident reporting system, active member of the patient safety working group and EMR privacy working group.

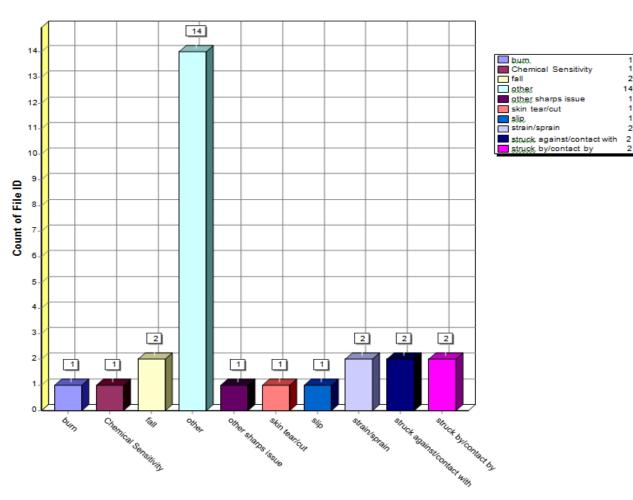
The Manager of Quality Improvement and Risk Management is responsible for ensuring the goals of the Risk Management Programs and Quality Improvement Framework are coordinated to support the mission, vision, values, and strategic priorities of the organization.

#### <u>Highlights:</u>

- Community Advisors were included as members of a quality initiative team to improve access to the medical clinic
- > Full participation in the territorial training, "Quality as a Business Strategy"
- > Departmental ethics orientation was carried out through 2017
- > High focus on getting the incident reporting system implemented Territorially
- > Territorial privacy policies and drafting the local policies to enact the direction from DHSS
- > Organizational risk matrix completed
- Risk assessment and register completed
- Established the Quality Risk Management Council



## **Quality Improvement and Risk Management Continued**



File Count Report

By Specific Incident Type With (incident Classification: EMPLOYEE GENERAL INCIDENT) And (incident Date: Saturday, April 01, 2017 - Sunday, April 01, 2018) 54

## **Rehabilitation Services**

The HRHSSA Rehabilitation Services provides Occupational Therapy, Physiotherapy, and Speech-Language Pathology Services to all ages in the Hay River area, which also includes the Hay River Reserve, Enterprise and Kakisa. In addition, PT and OT services are provided to the community of Fort Resolution.

**Occupational Therapy (OT):** Two full-time Occupational Therapists work in the authority. OTs work with people of any age to promote health, prevent disability, and develop or maintain abilities. Occupation refers to the activities and tasks of daily life that add value and meaning to a person's life. Occupations can include self-care (i.e. personal care, mobility), leisure (i.e. social activities, sports), and productivity (play, school, employment, home making).

**Physiotherapy (PT):** Two full-time Physiotherapists are employed in the authority. Physiotherapists help to manage and prevent a number of physical problems that may have been caused by illness, disease, sport or work-related injury, aging or long periods of inactivity (i.e. post-surgery). PTs are skilled in the assessment and management of conditions that affect musculoskeletal, circulatory, respiratory, and nervous systems.

**Speech-Language Pathology (SLP):** One full-time Speech-Language Pathologist is employed at HRHSSA. An SLP is a communication specialist, who is trained to prevent, diagnose, and treat speech, language, voice, fluency, and swallowing disorders. An SLP provides assessment, treatment, and consultation for children and adults, for the following areas of communication: receptive and expressive language, articulation, apraxia (motor programming), dysarthria (motor speech), stuttering, voice, swallowing, and augmentative & alternative communication.

The SLP program utilizes a half-time Pediatric Rehabilitation Aide (PRA). Majority of this position's duties are to carry out the therapy plans for children in the school. Therapy plans are set forth by the SLP. When not working with children, the PRA carries out duties such as preparation of materials and maintenance of records.

The Rehabilitation Department also has a full-time Rehabilitation Assistant (RA). This RA works with both the PTs and OTs: implementing and supporting the assigned interventions set out by the therapists, maintaining treatment areas, equipment and supplies, and also assisting in completing funding applications and billing procedures for client equipment.

## <u>Highlights:</u>

- Successful hiring of new Rehabilitation Assistant September 2017 due to staff resignation
- Current staff changes within the department include: resignation of OT in March 2018 resignation of PT upcoming in July 2018
- Reinstated SLP & OT school services to Kakisa
- Ongoing training of Pediatric Rehab Aide in delivery of speech therapy
- PT continues to provide BIPP training for LTC staff (WLM and ECU)
- OT continues to support ECE self-regulation in the schools by participating with the teachers to implement strategies into the classrooms
- OT involved in facility wide Falls Prevention program
- SLP providing facility wide education to dietary staff re: modified diet consistencies/preparation
- OT attended National Wound Care Conference in Kamloops, BC, and continues to provide services to client in our regions (in collaboration with Foot Care/Home Care) re: offloading devices & diabetic foot care
- SLP/OT participated in Kindergarten Screenings in May 2017 in collaboration with Public Health
- Staff continuing education

## **Rehabilitation Services Continued**

- PT/OT maintain travel clinics to Ft. Resolution every 3-4 months
- PT co-taught "Functional Fitness for Falls Prevention" in conjunction with Recreation and Parks November 2017Successful transition to utilization of EMR September 2017 for electronic charting and waitlist management
- Implemented informal waitlist management strategies PT wait times ranged from 1- 6 weeks as of the end of the fiscal year
- PT received PDI funding for course entitled "Psychology, Longevity & Aging" through St. Mary's University, NS

## Social Services

In accordance with the GNWT Child and Family Services Act of the NWT, Social Service provides Child Protection Services to an area including Hay River, West Point First Nation, K'atl'odeeche First Nation and Enterprise, NT. This Department is also responsible for providing community based Social Service programs which include: services to the elderly, disabled and advocacy.

This Department consists of (3) full time Child Protection Workers, (1) Coordinator Foster Care, Adult Services and Adoption oversees the Foster Care Program, support and coordination services to adult clients requiring specialized placement and the adoption services, (1) Supervisor and (1) Director of Social Programs. Child Protection Workers are responsible for providing a continuum of care for children in need of protection from abuse, harm and neglect. Workers are also responsible for providing other child & family service programs designed to provide support to families and youth. All programs operate using the principles that decisions are made in the "best interest of the child".

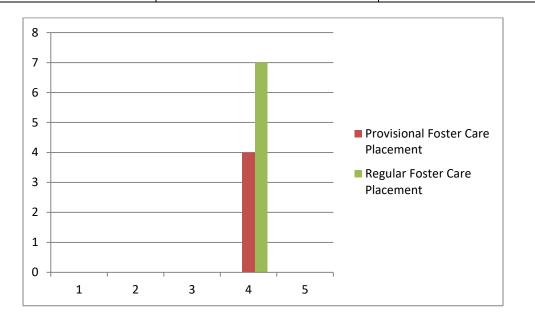
#### Highlights:

- Structured Decision Making (SDM) NTHSSA team visited the Social Services office to review several case readings and provided their feedback regarding the progress of the implemented tools with the recommendations for the ongoing improvements.
- > All the active Foster Home reviews were successfully completed by July 31<sup>st</sup>, 2017.
- Two of our permanent youth in care graduated from the high school and 3 children in care attended Camp Connections in Yellowknife and we received positive feedback from the children and staff there.
- DHSS audit team visited HRHSSA Social Services for three days and completed a Child and Family Services (CFS) file audit. Social Services staff were debriefed by the DHSS staff about the outcome of this audit and a detailed report was sent to the CEO with the recommendations and Social Services team
- With the assistance of DHSS, an action plan has been developed regarding how we would utilize Matrix NT, Information systems and processes track, accumulate and report CFS-related information in a consistent, efficient, effective and timely manner for decision making/to be in compliance purposes.
- We have a full time Foster Care Coordinator worker to support, train and recruit new Foster Families. Foster Care Coordinator will be working with the Foster Care Coalition in Yellowknife to run PRIDE training. PRIDE is a competency-based model and is based on the belief that foster families need to have special strengths, knowledge and skills, as well as a community of supports in order to be successful as foster care families.
- A Family Information Liaison from Community Justice and Policing Division from the Department of Justice provided an educational session to the Social Services staff regarding his work with families of Missing and Murdered Indigenous Women and Girls.
- Office of the Auditor General of Canada interviewed with the CEO, Director Social Programs and Social Services Staff via conference call to complete their ongoing audits of the CFS in NWT.
- To streamline the processes/improve communication between the (ECE) Income Support Programs and Social Services and to better serve our shared clients in the region, Income Support Program staff in Hay River with their manager have been meeting on a regular basis to ensure all individuals are treated with respect and dignity and are inspired to reach their full potential, with particular attention to the needs and experience of Indigenous peoples.

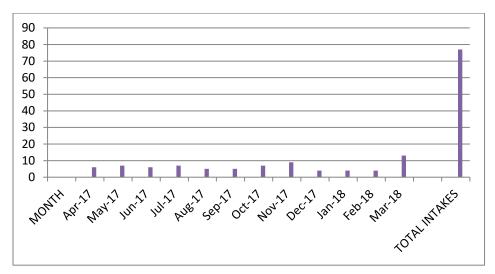
## **Social Services Continued**

## **Summary of Foster Home Placements**

Provisional Foster Care Placements	Regular Foster Care Placements	Total Active Placements
4	7	11



## Summary of Adult Intakes



**58** 

## Support Services

- Support Services Food Services, Housekeeping and Laundry
- Our main dietary purpose is to support and enhance the quality of care by providing healthy nutritious food in a safe, clean and comfortable environment
- Our main Laundry focus is to provide clean laundry on a daily basis to our residents and also to the nursing staff for resident care
- Our housekeeping focus is to maintain a clean, infection controlled facility that provides a safe environment for residents, patients, staff and the general public.

#### Highlights:

- Housekeeping has continued to maintain our facilities at a high standard. Currently our Housekeeping Department handles the following sites: HH Williams, Woodland Manor, Supportive Living Program, Harry Camsell School, the Gensen Building and Hay River Regional Health Center. Additional infection control training was provided for management in Yellowknife, to better understand and develop infection control standards for HRHSSA. This training is being passed down to staff to improve infection control knowledge and practices within the Health Authority.
- > Dietary has continued to provide seasonal menus to be more pleasing to patients and staff.
- Menus for long term care have been developed with input from the Residents and the staff Dietitian.
- The department successfully met operational requirements while providing additional services for the Arctic Winter Games. The majority of Support Services staff volunteered their time to support the Authority in hosting the polyclinic for the games.
- Worked with closely with our Speech Language Pathologist to develop a training module on modified texture diets. All dietary staff in the department completed the training.

## Support Services Continued

#### Performance Indicators:

Statistics are kept for all departments including cost per meal for Food Services, pounds of laundry per day and per month and extra workload stats for Housekeeping. See statistical tables below.

## Dietary Statistical Monitoring for 2017/2018

	April	May	June	July	Aug	Sept.	Oct	Nov	Dec	Jan	Feb	Mar
Patient	2963	2925	2828	2756	2552	2517	2580	2477	2497	2725	2498	2555
Meals												
Non	1323	1732	1628	1350	1601	1594	1491	1563	1390	1611	1743	1760
Patient												
Total	4286	4657	4456	4106	4153	4111	4071	4040	3887	4336	4241	4315
Meals												
Total	9877	11676	10765	10183	19800	9358	24448	10454	10172	17626	11459	13489
Expense	4	5	7	4	6	2	9	3	1	6	8	1
S												
Total	23.0	25.06	24.15	24.79	47.66	22.76	60.05	25.87	26.16	40.65	27.01	31.26
Cost Per	4											
Meal												

The average cost per meal for the fiscal year was \$29.59.

The increase in cost per meal from previous years is likely related to having an extra site operational with the opening of the Health Center. As such, supply and staffing expenses have increased substantially.

	April	Мау	June	July	Augus t	Sept.	Oct	Nov	Dec	Jan	Feb	Mar
Patient Meals	2590	2683	2589	2558	2459	2425	2602	2354	2356	2363	2158	2487
Non Patient	1389	1489	1365	1350	1298	1320	1358	1368	1642	1425	1356	1550
Total Meals	3979	4172	3954	3908	3757	3745	3960	3722	3998	3788	3414	4037
Total Expense s	9107 9	10421 6	10292 2	9949 7	98132	9961 7	9987 1	9826 0	10142 9	10011 6	9545 5	10427 5
Total Cost Per Meal	22.89	24.98	26.03	25.46	26.12	26.60	25.22	26.40	25.37	26.43	27.96	25.83

## Dietary Statistical Monitoring for 2016/2017

The average cost per meal for the fiscal year was \$25.77

## **Support Services Continued**

## Laundry Workload Statistics 2017-2018

17/18	April	May	June	July	August	Sept.	October	Nov.	Dec.	Jan.	Feb.	Mar	Total
Regular	7555	7270	8295	6410	6495	6215	6350	6615	6192	7310	7380	6805	82892
Client	485	515	605	365	270	315	240	265	315	275	230	305	4185
WLM	1185	1225	1410	1290	1165	1160	1275	1380	1348	1145	1130	800	14513
Rinsing	560	610	640	465	965	575	400	300	505	710	655	590	6975
Total	9785	9620	10950	8530	8895	8265	8265	8560	8360	9440	9395	8500	108565
Work Days	20	20	21	20	22	21	21	21	20	22	20	21	249

The average number of pounds of Laundry per workday in FY 17/18 was 436 pounds.

Laundry Workload Statistics 2016-2017
---------------------------------------

16/17	April	May	June	July	Augus t	Sept	Octobe r	Nov.	Dec.	Jan.	Feb.	Mar	Total
Regula r	7985	8460	8350	695 0	7830	7445	8065	712 0	8355	732 5	718 5	8725	93795
Client	460	510	520	590	480	540	475	560	650	570	440	540	6365
WLM	1110	1080	1065	106 0	1045	1055	1060	110 0	1080	119 0	940	1260	13045
Rinsing	510	480	740	680	670	765	690	645	695	740	410	680	7705
Total	1005	1053	1067	928	10025	9805	10290	942	1078	982	897	1120	12091
	5	0	5	0				5	0	5	5	5	0
Work Days	20	22	19	22	21	20	22	20	20	22	20	21	249

The average number of pounds of Laundry per workday in FY 16/17 was 486 pounds

## **Supportive Living Services**

The Supportive Living Services Program (SLS) provides residential services to improve the quality of life for persons with moderate to severe cognitive impairment through dignity, support, community inclusion, participation and choice. Day Programming is offered for up to two community clients. There are 11 permanent residents at the Campus and one respite bed is available. The residents range in age from 27 to 55 years of age. Residents at the Campus have a variety of diagnoses including: acquired brain injury, Autism Spectrum Disorder, Fetal Alcohol Syndrome, and Organic Brain Injury with co-morbidities including, but not limited to: Type II Diabetes, Chronic Renal Failure, Hypertension, Depression, Hyponatremia, PTSD, and Schizophrenia Spectrum Disorder.

## Highlights:

- 100% permanent resident occupancy, respite bed accessed for 37 days during the past fiscal year (10% occupancy). Day program accessed by two Community Clients, Judith Fabian Group Home Residents, and one long term care resident regularly.
- Care Bag project has donated over 450 bags of hygiene supplies to the Soup Kitchen, RCMP, and Family Support Center
- Get Active Grants received from NWT Parks and Recreation (\$1000)
- Donations received from the Hay River Thrift Store (\$500)
- "Paper Hugs" greeting cards work initiative started by staff members. Residents sold nearly 2,000 cards over the fiscal year, with total funds received being \$3,325
- 2017 Yards in Bloom winners (Therapeutic Gardening Program) \$100
- Fundraisers as follows:
  - ✓ Hot Dog Sale (\$450)
  - ✓ Candy Apple Sale (\$1070)
  - ✓ Recycling Program (\$725)
  - ✓ Christmas Bake Sale (\$1240)
- Participation by staff and residents in Advocacy and Awareness (Mental Health Awareness Week, Autism Awareness Week, Aboriginal Day, World Diabetes Day, Dialysis Information, NWT Disabilities Awareness Week)
- Team Building exercises and events to promote positive workplace culture (Staff Appreciation Day, Training Sessions)
- In 2017 saw a refocus on assessment and service planning in order to improve the quality of the services offered to each resident at SLS. Some of the strategies used to improve the services offered were:
  - ✓ Annual Assessments attended by the Residents' Primary POSW with Supervisor, Day Program Facilitator, and LPN to ensure quality, accuracy and consistency.
  - ✓ Polypharmacy reviews led by the medical staff
  - ✓ Decrease in wounds and skin breakdown reflective of increased preventative interventions.
  - ✓ Behavior support strategies reviewed and revised. Increased in positive behavior support strategies to increase positive outcomes.

## Supportive Living Services Continued

- ✓ Increasing skills, independence, and opportunities through various educational, recreational and therapeutic day program activities
- ✓ Streamlining of data collection, charting, and documentation processes revised to improve accuracy of data collection and increase time spent providing resident care.
- ✓ Participation in entrepreneurial endeavor "Paper Hugs" greeting card fundraiser.
- ✓ Pet Therapy program ongoing and hugely successful with the residents' pet, "Bugs Bunny".
- ✓ Introduction of revised Medication Administration Training Program

## Goals Achieved:

Goal #1- Healthy and positive workplace

- ✓ 100% of staff members surveyed responded that they are satisfied with their jobs at SLS
- ✓ 91.67% of staff members know that their work contributes to the achievement of the department goals
- ✓ 100% of staff members surveyed responded that they are able to participate in opportunities to strengthen their skills and knowledge
- ✓ 75% of staff members feel that there has been improvement with regard to positive workplace culture (16.67% neutral, 8.83% disagree)
- ✓ 100% of staff members surveyed feel that they have opportunities to provide input into decisions affecting their work, while 83.33% have taken advantage of opportunities for collaboration.

Goal #2- Increased focus on education/life skills and community involvement for all residents

- ✓ Anger Management Learning Session
- ✓ Social Skills education
- ✓ Relaxation yoga
- ✓ Cooking Classes
- ✓ Outdoor education
- ✓ Music Therapy
- ✓ Healthy Relationships Learning Series
- ✓ Literacy education
- ✓ Worry and Anxiety Learning Session
- ✓ Volunteering opportunities with Hay River Soup Kitchen, Hay River Animal Shelter, Hay River Senior's Society, Woodland Manor, Hay River Thrift Store, 2017 South Slave Arctic Winter Games

## Supportive Living Services Continued

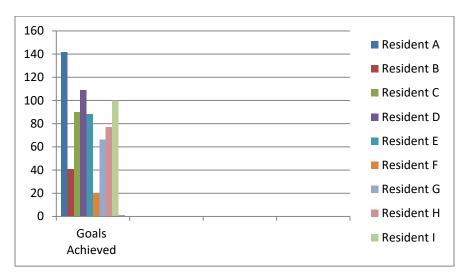
Goal #3- To strengthen relationships with departments and staff at other Authority locations

- ✓ SLS representation on the following committees/task teams: Workplace Wellness Committee, OH&S Committee, Ethics Committee, Workplace Contentment Task Teams, Falls Prevention Committee, and Polypharmacy Committee.
- ✓ Interdepartmental training (through HR, Dietary, Rehab)
- ✓ Working with long term care staff members to transport Dialysis patients to and from treatments
- ✓ Working with long term care to provide combined recreational services on special occasions

#### Performance Indicators:

#### Staff Training

- ✓ 100% of FT staff completed the Team Building Essentials (an online learning forum to improve selfreflective and mindful practices)
- ✓ 10 Personal Outcome Support Workers (POSW) attended a Pureed Food Preparation and Presentation
- ✓ 10 POSWs attended an FASD Learning Session
- ✓ 18 Staff Members (including 16 POSWs) attended a Schizophrenia Spectrum Disorder Learning Session
- ✓ 7 staff attended Mental Health First Aid
- ✓ 9 staff attended CPR/First Aid
- ✓ 91% of staff are up to date on WHMIS
- ✓ 95% of staff are up to date on Safe Handwashing
- ✓ 13 staff attended Non Violent Crisis Intervention
- ✓ 100% of staff have completed the Occupational Health and Safety Practices for Employees
- ✓ 68% of staff accessed PDI funds (Depression, Trauma, Cognitive Psychology, Mental Health Disorders, Nursing Skills, Phlebotomy, ASD, Social Worker, CMHA Annual Conference)



## <u>Ultrasound</u>

Ultrasound services include the provision of quality sonographic images for our clients. Images are reviewed and reported by offsite Radiologists at the Mayfair Radiology group in Calgary. The Ultrasound staff liaises with the physicians to provide the best client care possible.

Highlights:

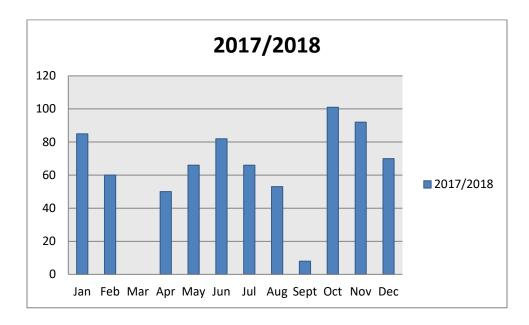
- Recruit casual staff for vacant position
- Maintain small core locum group

#### Goals Achieved:

• Provide ongoing access to Ultrasound services

#### Performance Indicators:

Number of Ultrasound Clients Seen	2015/16	2016/17	2017/18
	754	623	733





## Ultrasound Continued

# When asked on our Client Satisfaction Survey if their questions were answered satisfactorily by the technologist:

