

**NWT Health
and Social
Services System**

Action Plan

2002-2005

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Status Report

April-September 2003

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Message From the Minister



I am pleased to report on implementation of the Health and Social Services System Action Plan since its release in February 2002. This report highlights activities of the Department and Authorities for each of the 45 action items during April to September 2003.

To date, 36 of the action items have been completed or represent ongoing work of the Department. In the next six months, the remaining nine action items will have the developmental work completed or the entire project work done.

It has been my pleasure to provide these status reports on our progress, and I would be pleased to answer questions on our activities.

J. Michael Miltenberger

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Introduction

In February 2002, the Minister of Health and Social Services released an action plan to reform and improve the NWT health and social services (HSS) system. This plan identifies 45 action items with specific deliverables and timelines for improvements in the following areas:

- **services to people** - actions to support people in taking care of themselves and improve support they receive from the HSS system;
- **support to staff** - actions to attract and retain the wide range of HSS professionals that are essential to the delivery of high quality services;
- **system-wide management** - actions to improve the organizational structure and management of the HSS system;
- **support to trustees** - actions to fully develop the leadership role and capacities of the Boards of Trustees for HSS Authorities; and
- **system-wide accountability** - actions to clarify and increase accountability of the HSS system to the public, and the Department and HSS Authorities to the Minister and with each other.

This status report highlights progress made during the last 1.5 years since the release of the action plan. Reports are posted on the Department's public website at www.hltss.gov.nt.ca (see "Initiatives") to ensure public access to this information. Hard copies are also distributed to key stakeholders and are available to interested members of the public.

For more information on the *HSS System Action Plan* or to request a copy of this report, contact:

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1 Improving Services to People

Action	Deliverables	Timelines		Status
		Original	Revised	
5.1.1 Publish a core services document and distribute it to all households in the NWT.	A published core services document ✓ Complete	Sep 2002	Mar 2003	<p>The core services document describes the set of publicly funded services provided by the HSS system. The document has been distributed to all NWT households with the self-care handbook (Action Item 5.1.2).</p> <p>The French version will be ready for distribution with the French self-care handbook in April. The cover letter in the mail-out of the English resources will be in English (one side) and French (other side), and the letter referenced the availability of the French versions to Francophone households upon request.</p>
5.1.2 All households in the NWT will receive a self-care handbook.	A self-care handbook published and distributed to all households in the NWT. ✓ Complete	Nov 2002	Mar 2003	<p>Copies have been distributed to all NWT households at the same time as the core services brochure (Action Item 5.1.1).</p> <p>The French version will be ready for distribution in April along with the French core services document. The feasibility of producing this resource in other Official Languages is being assessed. Considerations include ability to translate certain medical terminology, availability of translators and cost.</p>
5.1.3 Establish a 1-800 family health and social supports call centre.	Call centre operational	Dec 2002	Feb 2004	<p>The Department and Authorities have identified operational requirements for a toll-free call centre. Discussions are underway on logistical considerations, including how the call centre will be accessed in smaller communities with limited telephone access.</p> <p>An RFP has been issued for implementation of a call centre will close in October 2003. Health care reform funding, as per the Health Accord resulting from the First Ministers meeting in 2003, will contribute to the development and implementation of the call centre.</p>

Improving Services to People

Action	Deliverables	Timelines		Status
		Original	Revised	
5.1.4 Evaluate our consumer's satisfaction with the health and social services system.	Annual consumer satisfaction report completed and reported to the public.	Jun 2003	Jan 2004	<p>A satisfaction survey for community health centre clients has been approved and will be implemented by January 2004.</p> <p>In addition to this NWT survey, the Canadian Community Health Survey provides client satisfaction and service quality ratings in four areas:</p> <ul style="list-style-type: none"> • overall health services; • hospital services; • physician services; and • community based services. <p>NWT data from this survey were first published in September 2002 in the <i>Report to Residents of the Northwest Territories on Comparable Health and Health System Indicators</i>. Due to the limited sample size of the Canadian Community Health Survey, these data are only available at the territorial level, not regional or community level.</p>
5.2.1 Formalize an integrated Health and Social Services Delivery Model for the NWT.	<p>Service Delivery Model that details:</p> <ul style="list-style-type: none"> • Primary, secondary and tertiary services, • Referral patterns, • Speciality services, • Access to services, • Location of services, • Services providers, • Staffing mode, • Clarify role of NGOs in the system. 	Sep 2002	Nov 2003	<p><i>The Integrated Service Delivery Model</i> has been approved by the Joint Leadership Council, and includes sections on specific areas of service delivery:</p> <ul style="list-style-type: none"> • Continuing Care Services; • Addictions and Mental Health Services; • Protection Services; • Promoting, Prevention and Screening; • Diagnostic and Curative Services; and • Rehabilitation Services. <p>An important component of this work is an assessment of the service and staffing requirements for this model. Service levels have been agreed to and a long term staffing model will be completed in early November 2003.</p>

Improving Services to People

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5.2.2 Establish integration demonstration projects based on the Primary Health Care model.	<p>At least three operational projects. Lessons learned from the projects incorporated into the service delivery and program integration models.</p> <p>✓ Complete/ongoing</p>	Oct 2002	Apr 2003	<p>The NWT submitted a proposal to the federal Primary Health Care Transition Fund in order to advance work on primary health care reform in the NWT. Eleven projects were submitted by the Department and HSS Authorities, including:</p> <ol style="list-style-type: none"> 1. NWT Primary Community Care Coordination (Department), 2. NWT Multi-disciplinary Forum (Department), 3. Public Education Plan for the NWT Health Care System (Department), 4. Beaufort Delta Wellness Teams Project (Inuvik Regional HSS Authority), 5. Integrated Wellness Centre Project (Dogrib Community Services Board), 6. Yellowknife Community Clinic Project (Yellowknife HSS Authority) – under review, 7. Introduction of Midwifery Services (Fort Smith HSS Authority), 8. Northern Women’s Health Program (Stanton Territorial Health Authority) – under review, 9. Nurse Practitioner Clinical Teaching Project (Dogrib Community Services Board), 10. Community Health Dental Program (Inuvik Regional HSS Authority), and 11. Aboriginal Community Health Worker Training Program (Deh Cho HSS Authority). <p>Health Canada approved the NWT submission in March 2003. Following a formal public announcement and signing of the contribution agreement with Health Canada in June 2003, individual project contribution agreements have been signed with the HSS Authorities enabling project coordinators to be hired and other early implementation steps to be taken.</p>
5.2.3 Implement coordinated discharge planning throughout the system.	<p>Coordinated discharge planning protocol implemented throughout the system.</p> <p>✓ Complete/ongoing</p>	Sep 2002	Mar 2003	<p><i>A Discharge Planning Model</i> has been developed and is being implemented.</p>

Improving Services to People

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		Original	Revised	
5.2.4 Establish Collaborative Service Networks.	<p>Collaborative Service Networks that support delivery and innovation in identified service delivery areas.</p> <p>✓ Complete</p>	Sep 2002	Apr 2003	<p>A Framework for Collaborative Service Networks has been developed to provide a common approach to sharing expertise and specialized services within the HSS system. The framework has been approved and the following pilot projects are now in place:</p> <ul style="list-style-type: none"> • nurse practitioner clinics in Yellowknife; and • single system of credentialing NWT physicians by Stanton Territorial Health Authority.
5.2.5 Work with affected communities and industry to define and respond to the health and social impacts of development.	<p>A five-year plan that supports and addresses health and social issues. This plan will identify potential project activities that will help alleviate targeted social issues.</p> <p>✓ Ongoing</p>	Jun 2002	<p>Jul 2003</p> <p>Mar 2006</p>	<p>The Department is working with other GNWT departments to develop a comprehensive approach to monitoring and mitigating health and social impacts of development, under the broad leadership and coordination of the Department of Resources, Wildlife and Economic Development.</p> <p>A related initiative includes the implementation of community demonstration projects – as part of the <i>Social Agenda</i> initiative – to assess the effectiveness of mitigation measures relating to current development activities. Some demonstration projects will involve working with impacted communities on preparing for development. Eight demonstration projects have been approved for funding, and will be located in the following communities: Norman Wells, Inuvik, Tsiigehtchic, Fort McPherson, Wha Ti, Fort Providence, Lutselk'e, and N'Dilo (Yellowknife). An advance of 50% of the annual funding is being provided to each project as soon as contracts are signed and budgets are submitted.</p>

2 Improving Supports to Staff

Action	Deliverables	Timelines		Status
		Original	Revised	
6.1.1 Establish a comprehensive Human Resource Plan.	<p>A comprehensive human resource plan resulting from a review of the current human resources practices.</p> <p>✓ Complete/ongoing</p>	Jun 2003	Nov 2003	<p>The <i>Comprehensive System-Wide Human Resource Plan</i> has been developed and consists of a number of strategies to assist in achieving the following goals:</p> <ol style="list-style-type: none"> 1. Building and developing a skilled workforce in the North that is representative of the people and communities that are served by the HSS system. This encompasses building a northern workforce and supporting those committed to living and working in the North. 2. Investing in employees, technology and the workplace to promote safety, excellence, collaboration and innovation, today and in the future. 3. Respecting and recognizing achievements of employees and the HSS system. <p>The Plan was reviewed by the Joint Senior Management Committee and will be forwarded to the Joint Leadership Council for their approval. Implementation will commence in November 2003.</p>
6.1.2 Implement a competency-based model for recruiting, training, and supporting staff.	<p>A competency based model to support the recruitment, development and evaluation of front-line staff will ensure a consistent level of service delivery across the north.</p>	Jan 2004	Jan 2004	<p>Corporate Human Resource Services (Department of the Executive) is developing competency modules for management and human resource positions. The Department will work with Corporate Human Resource Services to develop competencies specific to health and social services professions in front-line positions.</p>

Improving Supports to Staff

Action	Deliverables	Timelines		Status
		Original	Revised	
6.1.3 All new staff will receive a standardized orientation to the NWT Health and Social Service System and cross-cultural training that reflects the character of the NWT and the region in which they are employed.	<p>All new staff will receive an orientation to their work and community.</p> <p>✓ Complete</p>	Sep 2002	Jan 2003	<p>A standardized orientation package for HSS employees has been completed and includes:</p> <ul style="list-style-type: none"> • an Orientation Manual designed to permit the Department and each Authority the ability to add additional information specific to their organization; and • an online orientation site (accessible only by HSS employees). <p>The manual and orientation site is online, and modifications to these resources will be made on an as-needed basis to reflect the information needs of employees. Hard copy distribution of the manual will occur when the Sahtu HSS Authority is operational, as the manual will be updated to reflect this new Authority.</p> <p>A related activity is the development of a standard orientation manual for NWT physicians to assist both full-time and locum physicians in their orientation to practice in the NWT. This manual reflects input from the Medical Directors of the Authorities. It has been approved for printing and distribution.</p>
6.1.4 Establish coordinated Professional Development activities for all system staff.	<p>An Integrated Employee Development Program that:</p> <ul style="list-style-type: none"> • Consolidates funding, • Catalogues programs, • Includes a human resource development plan for all employees. <p>✓ Complete/ongoing</p>	Jun 2002	Jun 2003	<p>A calendar of professional development opportunities has been prepared and provided to all Authorities. Training opportunities will be updated and distributed annually, and placed online.</p> <p>Enhanced professional development as per the <i>Retention and Recruitment Plan for Allied Health Care Professionals, Nurses and Social Workers</i> was approved in November 2002. The new initiative replaces the previous Employee Development Program and guarantees professional development for front-line health and social services workers in 25 professions.</p>

Improving Supports to Staff

Action	Deliverables	Timelines		Status
		Original	Revised	
6.1.5 Implement succession planning to ensure that all staff have access to career advancement opportunities in coordination with other Departments.	<p>Succession planning model developed and implemented.</p> <p>✓ Ongoing</p>	Mar 2003	May 2003	<p>Corporate Human Resource Services (Department of the Executive) is responsible for establishing government-wide parameters and activities for succession planning. This initiative will ensure all GNWT staff have access to career advancement opportunities.</p> <p>Corporate Human Resource Services launched the Management Assignment Program in June 2003. The program is part of the GNWT's succession planning effort to increase management and leadership skills of individuals in the organization so they are better prepared for management jobs. The first phase of the program resulted in 101 employees, including employees of the HSS system, being nominated for the program. Of these nominees, approximately 20 employees will be chosen to participate in the program.</p>
6.1.6 Expand mentorship programs to include all health and social services system staff.	<p>A mentorship program that includes all health and social services system employees.</p> <p>✓ Ongoing</p>	Mar 2003	Mar 2003	<p>The Department has had a nurse mentorship program in place since 1997. As of September 2003, 55 individuals have been mentored under this program.</p> <p>Work on the advanced nurse mentorship program and social work mentorship program is in progress. Development of mentorship programs for allied health care professionals will be ongoing.</p> <p>A mentorship skill development workshop was delivered to 30 mentors in April 2003.</p>
6.1.7 Implement a relief pool of professional health and social services employees.	<p>Staff relief pool for selected occupational categories.</p> <p>✓ Complete/ongoing</p>	Sep 2002	Sep 2002	<p>A centralized relief pool (accessible by all Authorities) was established to include nurses, social workers and other health and social services personnel. Individuals in the relief pool provide relief services when they are on vacation or not providing relief services elsewhere.</p> <p>The Joint Leadership Council has also provided direction to the Department to establish a float pool consisting of full time nurse practitioners and nurses with the experience required to practice in remote locations. Work is currently underway to develop job descriptions. Once the job descriptions are finalized, a competition for several full-time float nurses will be held.</p> <p>A separate relief pool is also in place for physicians. The Department has a partnership with Alberta to access their Rural Physician Action Plan relief pool for locum work in the NWT.</p>

Improving Supports to Staff

Action	Deliverables	Timelines		Status
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6.1.8 A common human resource tracking and information system will be implemented.	GNWT – HRIS operational in all regions.	Apr 2003	Mar 2004	<p>The Department and Authorities are examining the HSS system's requirements for human resource tracking and information management. The Department and Financial Management Board Secretariat have assessed implementation and financial considerations for converting all Authorities to the current GNWT human resource information system.</p> <p>As a result of the human resource analysis, the Joint Leadership Council recommended that prior to March 1, 2004:</p> <ul style="list-style-type: none"> • Yellowknife HSS Authority develop a comprehensive plan to implement an integrated human resource and payroll system; and • Stanton Territorial Health Authority review and update their payroll process and reduce the number of verifications required. <p>In addition to these activities, a further review of options for other Authorities will continue over the next few months.</p>
6.2.1 Unify all staff under a single employer.	<p>All Hay River, Lutselk'e and Fort Resolution staff will be GNWT employees.</p> <p>✓ Complete/ongoing</p>	Mar 2003	Jun 2003	<p>Staff of Lutselk'e and Fort Resolution are GNWT employees with the Yellowknife HSS Authority.</p> <p>Legislative amendments to the <i>Hospital Insurance and Health and Social Services Administration Act and Public Service Act</i> were approved in June 2003 by the Legislative Assembly to exempt employees of the Hay River Community Health Board from the GNWT public service but allow the organization to be a Board of Management. These amendments are expected to come into force November 1, 2003.</p>
6.2.2 Implement a single credentialing process for physicians.	<p>A single credentialing process in place and operational for physicians.</p> <p>✓ Complete/ongoing</p>	Jul 2002	Nov 2002	<p>A single physician credentialing committee has been established. With this in place, all Authorities have access to a single committee to review credentials of all physicians who wish to practice in the NWT.</p> <p>Use of this joint credentialing committee has already begun; however, to fully implement this new approach, Authorities will need to change their bylaws to automatically recognize physician credentials that have been granted through this process. All Authorities indicate they will be completing this final task.</p>

Improving Supports to Staff

Action	Deliverables	Timelines		Status
		Original	Revised	
6.2.3 Establish an expedited transfer process within the health and social services system.	<p>System-wide coordination and articulation of current GNWT guidelines and policy that allows for an expedited transfer process</p> <p>✓ Complete</p>	Mar 2002	Apr 2003	<p>Lutselk'e and Fort Resolution employees are now GNWT employees with the Yellowknife HSS Authority, and therefore have been included in the existing transfer policy maintained by the GNWT.</p> <p>The GNWT has been unsuccessful in establishing a transfer process for employees of the Hay River Community Health Board due to different collective agreements and bargaining agents. Without the cooperation of the bargaining agents, a transfer process cannot be accomplished to the level desired.</p>
6.2.4 Ensure a safe workplace. and	<p>Agreements in place with communities to ensure workplace safety for all workers</p>	Jun 2002	Jun 2003	<p>A sample agreement (between HSS Authorities and representative community organizations) was approved by the Joint Senior Management Committee as a starting point for discussions with community leadership. Authorities are working with community leaders to sign off agreements. A small fund was contributed to each Authority to support this exercise.</p>
6.2.5 Increase community acceptance and support of workers.	<p>Agreements in place with communities to assist the integration of new employees into the community</p> <p>✓ Ongoing</p>	Sep 2002	Jun 2003	

Improving Supports to Staff

Action	Deliverables	Timelines		Status
		Original	Revised	
6.2.6 Review and enhance the marketing strategy to include recruitment and retention of all health and social services staff.	<p>Implement a revised and expanded marketing strategy that will include all health and social services staff.</p> <p>✓ Complete/ongoing</p>	Oct 2002	Oct 2002	<p>Recruitment and retention for our NWT workforce remains a top priority for the HSS system. Current recruitment efforts by the Department and Authorities include participation in job fairs, web marketing, ad placements, etc. In addition, the <i>Recruitment and Retention Plan for Allied Health Care Professionals, Nurses, and Social Workers</i> and the <i>Interim Health Profession Fund</i> provides additional funding for initiatives to retain and recruit nursing, allied health professions and social workers. Improvements have also been made to finding employment opportunities for nurse graduates from Aurora College. This includes a coordinated approach to employment placement as well as a direct appointment process. A similar program will be in place for upcoming graduates of the Social Work program.</p> <p>In May 2003, an analysis of human resource functions and services for the HSS system was completed. This review included a component on recruitment and retention activities. Based on this review, the Joint Leadership Council agreed to reallocate of some of the recruitment and retention functions from the Department to Authorities where economies of scale permit. Reallocation took place September 1, 2003, to the Stanton, Yellowknife, Hay River and Inuvik Authorities.</p> <p>In addition, the following approaches to alleviate difficulties in recruiting temporary nurses are being assessed:</p> <ul style="list-style-type: none"> • opening the Memorandum of Understanding with the Union of Northern Workers to define exceptional circumstances where agency nurses can be utilized; • entering into contracts with recruitment agencies where they provide temporary nurses that can be hired as casuals and, if the Union of Northern Workers agrees, where they provide temporary nurses on contract as a last resort in exceptional circumstances; • establishing a float pool that consists of full time nurse practitioners and nurses with the necessary experience and training to work as community health nurses; and • developing a list of nurses within the Department and Aurora College that have experience working as community health nurses and are interested in temporary assignments to provide coverage. <p>A report on <i>Physician Recruitment and Retention in the Northwest Territories</i> was completed in September 2003. This report contains a number of recommended actions with respect to the retention and recruitment of physicians in the NWT. A working group, consisting of representatives of the Medical Directors Forum, the Department and Authorities, has been assigned responsibility for implementing recommendations. An implementation plan will be prepared by November 2003.</p>

3 Improving System-Wide Management

Action	Deliverables	Timelines		Status
		Original	Revised	
7.1.1 Establish the Joint Leadership Council (JLC) as the stewards of the health and social services system.	Terms of reference ratified by the JLC ✓ Complete	Feb 2002	Feb 2002	Terms of Reference for the Joint Leadership Council were ratified in February 2003 and amended in September 2003 to include the role of the Council in providing advice and general guidance to the Public Administrator for Stanton Territorial Health Authority. The Council has been meeting quarterly (in person) and monthly (by teleconference). Direction provided by the Joint Leadership Council for the HSS system will be consistent with that of the Government of the NWT, and will recognize self-government agreements.
7.1.2 Establish the Joint Senior Management Committee (JSMC) as a forum for the collaboration and direction setting for system-wide operations.	Terms of reference ratified by the JLC. ✓ Complete	Mar 2002	Mar 2002	Terms of Reference for the Joint Senior Management Committee were ratified. The Committee has been meeting quarterly (in person) and monthly (by teleconference) as required.
7.1.3 Clarify roles and responsibilities in the health and social services system and reflect these in revised Agreements between the Department and the Authorities.	Clarify roles and responsibilities, and reflect these clearly in the Memoranda of Understanding with Authorities.	Feb 2003	Apr 2004	Memoranda of Understanding (MOUs) between the Department and Authorities will be revised to reflect work recently completed on the <i>Accountability Framework</i> (Action Item 9.1), the <i>NWT Model of Trustee Leadership</i> (Action Item 8.1), the <i>Integrated Service Delivery Model</i> (Action Item 5.2.1) and the <i>Framework for the Collaborative Services Network</i> (Action Item 5.2.4). Once the revised MOUs have been approved, they will be implemented for the 2004-05 fiscal year.
7.1.4 Realign the organizational structure and business operations of the Authorities and the Department in order to increase clarity of roles and responsibilities.	A system-wide detailed organizational structure that reflects roles and responsibilities. ✓ Complete (Department)	Sep 2003 Sep 2002	Apr 2004 Sep 2002	Authorities will review their structures and business operations once their roles and responsibilities have been described and set out in their MOU (see Action Item 7.1.3). The Department's organizational structure was changed to more closely align business operations with its mandated roles and responsibilities.

Improving System-Wide Management

Action	Deliverables	Timelines		Status
		Original	Revised	
7.1.5 The organizational structures that deliver health and social services programs and services will be referred to as Authorities.	<p>Change the names of the Boards to Authority to reflect the current organizational structure, role and responsibility.</p> <p>✓ Ongoing</p>	Feb 2003	Jul 2003	<p>Regulations changing the names of the Yellowknife and Fort Smith Authorities came into effect April 1, 2002, while regulations changing the names of the Deh Cho, Inuvik, Stanton Authorities came into effect June 1, 2002. Two boards have not yet changed their names:</p> <ul style="list-style-type: none"> the <u>Dogrib Community Services Board</u> will be changing its name to the Tli Cho Community Services Agency – this name change will occur once the new agency is established under self-government legislation; and the <u>Hay River Community Health Board</u> will be changing its name once amendments to the <i>Hospital Insurance and Health and Social Services Administration Act</i> come into force. In June 2003, the Legislative Assembly approved changes to this Act and the <i>Public Service Act</i> that would allow the existing Hay River Board to become an Authority with non-Public Service employees. These amendments are expected to come into force November 1, 2003.
7.1.6 Realign Authority boundaries.	<ul style="list-style-type: none"> Establish Sahtu Authority <p>✓ Ongoing</p> <ul style="list-style-type: none"> Dissolve Deninu Kue and Lutselk'e Establish alternate arrangement for the participation of Deninu Kue and Lutselk'e communities in directing health and social services in their communities <p>✓ Complete</p>	Apr 2003	Jun 2003	<p>Cabinet has approved a plan for the establishment of the Sahtu HSS Authority. Funding to support the incremental costs has been approved, a Public Administrator has been appointed and a Chief Executive Officer has been recruited. Both incumbents will take up duties in October 2003. The Authority staff will be hired over the next six-month period, with the goal of being fully staffed by April 1, 2004. The Inuvik Regional HSS Authority will continue to manage all functions in the Sahtu region up until April 1, 2004.</p> <p>The communities of Lutselk'e and Fort Resolution are now provided services as part of the Yellowknife HSS Authority.</p>

Improving System-Wide Management

Action	Deliverables	Timelines		Status
		Original	Revised	
7.1.7 Establish forums for joint planning of interdepartmental initiatives.	<p>Report on lessons learned with the intent of improving collaboration across departments</p> <p>✓ Complete/ongoing</p>	Mar 2003	Mar 2003	<p>Social Envelope Departments hold regular meetings to share information and improve inter-department coordination of programs and initiatives. In addition, there are numerous forums for joint planning on inter-departmental initiatives, including:</p> <ul style="list-style-type: none"> • the GNWT <i>Seniors Action Plan</i> 2002-2003 (Executive, HSS, ECE, MACA, NWT Housing Corporation, NWT Seniors Society); • the <i>GNWT's Response to the Social Agenda</i> (Executive, Finance, FMBS, HSS, ECE, Justice, MACA, NWT Housing Corporation); • the GNWT <i>Action on Tobacco</i> (Finance, HSS, ECE, MACA, Workers Compensation Board); and • the GNWT <i>Early Childhood Development Initiative</i> (HSS, ECE). <p>Committees for each of these initiatives have been established with representation from the noted departments and agencies. These committees also work with other stakeholders, including key non-government organizations and service providers. The Department will work with these committees to determine how inter-departmental collaboration can be improved for these initiatives specifically, and provide a general summary report on lessons learned.</p>
7.1.8 All strategies and framework documents will demonstrate linkages and directly support the strategic plan.	<p>Demonstrate linkage and finalize all outstanding strategy documents.</p> <p>✓ Complete/ongoing</p>	Feb 2002	Feb 2002	<p>The Department and Authorities use the strategic plan, <i>Shaping Our Future</i>, in setting direction for all HSS initiatives. Linkages between HSS and GNWT initiatives are identified within the various planning documents prepared for these initiatives (eg., <i>Seniors Action Plan</i>, <i>Action on Tobacco</i>, <i>GNWT Response to the Social Agenda</i>). Other work, including an <i>Integrated Service Delivery Model</i> (Action Item 5.2.1), human resource plan (Action Item 6.1.1) and information management plan (Action Item 7.2.5), are also being developed within the directions stated in the strategic plan.</p>

Improving System-Wide Management

Action	Deliverables	Timelines		Status
		Original	Revised	
7.2.1 Implement a system-wide planning and reporting model.	<p>Comprehensive, strategic, business, operational and capital planning model.</p> <p>✓ Complete</p>	May 2002	Mar 2003	<p>The GNWT identifies specific tasks, timeframes and reporting requirements for all departments to prepare three-year business plans. Preparation of the business plan for the HSS system requires effective and meaningful consultation between the Department and Authorities.</p> <p>An <i>Integrated Planning and Reporting Model</i> describes annual activities that result in the production of business plans, and meet system-wide accountability and reporting requirements. The model has been implemented for business planning activities currently underway.</p>
7.2.2 Design and implement a revised funding model.	<p>A defined funding allocation model for all Authorities.</p> <p>Implement funding allocation model.</p>	Apr 2003	Apr 2004	<p>The <i>Integrated Service Delivery Model</i> (Action Item 5.2.1) will define levels of service across the HSS system. This delivery model will then be used as the basis for determining how funds will be allocated to Authorities.</p>
		Apr 2004	Apr 2005	
7.2.3 Implement a standard financial accounting system.	A standard financial system implemented across all HSS Authorities.	Apr 2003	Apr 2004	<p>The Department, in consultation with Authorities, completed a needs assessment in 2002. The working group is preparing a draft options paper for the Joint Senior Management Committee meeting in early 2004 with a goal to implement a standard chart of accounts in the 2004-05 fiscal year.</p>

Improving System-Wide Management

Action	Deliverables	Timelines		Status
		Original	Revised	
7.2.4 Implement a system-wide approach to fiscal accountability.	<p>Fiscal accountability structure that will have the ability to take a system-wide approach to deficit reduction, forced growth and spending on service enhancements will enhance the sustainability of the system.</p> <p>✓ Complete</p>	Apr 2003	Apr 2003	The fiscal accountability structure has been incorporated into the <i>Performance Measurement System</i> (Action Item 9.2).

Improving System-Wide Management

Action	Deliverables	Timelines		Status
		Original	Revised	
7.2.5 Implement an information management plan.	Coordinated systems and quality management information. ✓ Ongoing	Jul 2003	Sep 2003	<p>The Joint Leadership Council endorsed the <i>Informatics Blueprint</i> in September 2003. This plan includes improvements to key information systems used throughout the HSS system. The following initiatives have made the following progress:</p> <ul style="list-style-type: none"> • A replacement system for the aging Northern Health Information Management, Professional Licensing, Vital Statistics, Medi Vital and Medical Travel information systems. This work has been contracted for startup in September 2004 and detailed implementation planning is underway. • Software modifications are being developed by the contractor for Phase 1 of the Patient and Hospital Scheduling System. The targeted startup date is March 2004 and planning for a necessary software upgrade is underway. • The pilot work on the Communicable Disease, Sexually Transmitted Disease and TB Registries of the Community and Public Health Information project will be completed in October. Work is underway to define the terms of reference for a common system-wide solution for immunization and home care information management. • Users of the Children and Family Information System will be testing version two of this system, with a projected completion date of March 2004. • A comprehensive RFP will be developed by late October 2003 to support the expansion of Telehealth. • A limited experimental pilot project for electronic patient and medical records will be started up in the near future for the Yellowknife HSS Authority. <p>New projects under consideration will be analyzed within the guidelines of the GNWT Systems Development Life Cycle and will be submitted for consideration during the capital budget planning process in future years.</p>

4 Improving Support to Trustees

Action	Deliverables	Timelines		Status	
		Original	Revised		
7.3.1 Legislative amendments and new legislation required.	New and amended legislation: <ul style="list-style-type: none"> • <i>Health and Social Services Disciplines Act</i> • <i>New Nursing Profession Act</i> • <i>Hospital Insurance and Medical Care Act</i> • <i>Hospital Insurance and Health and Social Services Administration Act</i> • <i>Child and Family Services Act</i> • <i>Agreement on Internal Trade Amendments Bill Discussion Paper</i> • <i>Public Health Act</i> • <i>Health Information Act</i> 	Jun 2003	Deferred	<p><i>Health and Social Services Disciplines Act:</i> Deferred to 15th Assembly. A discussion paper on health disciplines legislation was completed July 1, 2002, and circulated for comment to Authorities and professional associations. The first step will be the development of the <i>Midwifery Profession Act</i> (see below).</p>	
			Jun 2003		<p><i>Nursing Profession Act:</i> The Bill was approved by the Legislative Assembly in June 2003. The Act is expected to be implemented January 1, 2004.</p>
			Deferred		<p><i>Hospital Insurance and Medical Care Act:</i> Deferred to 15th Assembly. A discussion paper was circulated to internal stakeholders. A legislative proposal is being drafted for consultation purposes. Once reviewed by stakeholders, the legislative proposal is expected to be submitted early in the term of the next government.</p>
			Jun 2003		<p><i>Hospital Insurance and Health and Social Services Administration Act:</i> This Bill was approved by the Legislative Assembly in June 2003. It is expected to come into force November 2003. (See also Action Item 7.1.5).</p>
			Oct 2003		<p><i>Child and Family Services Act:</i> Amendments to this Act were approved by the Legislative Assembly in October 2002. During the approval process for the Bill, the need for further amendments to the Act was identified. A new legislative proposal has been drafted for internal consultation purposes. Once reviewed by stakeholders, the legislative proposal is expected to be submitted early in the term of the next government.</p>
			Jun 2003		<p><i>Public Health Act:</i> A discussion paper on revising this Act was released in June 2003. The deadline for public input on the discussion paper is September 30, 2003.</p>
			Jun 2003		<p><i>Health Information Act:</i> Based on research to date, the Department plans on incorporating provisions to protect health information in the legislative proposal for the <i>Hospital Insurance and Medical Care Act</i>. The Department, along with provincial and territorial jurisdictions, is also reviewing the impact of the federal <i>Personal Information Protection and Electronic Document Act</i> with respect to territorial health information systems.</p>
			Oct 2003		<p><i>Midwifery Profession Act:</i> The Bill for this Act is currently being reviewed by the Standing Committee for Social Programs. The Bill is expected to be considered for Third Reading by the Legislative Assembly in October 2003.</p>
	✓ Complete/ongoing				

Improving Support to Trustees

Action	Deliverables	Timelines		Status
		Original	Revised	
8.1 Implement a NWT model of health and social services Authority leadership that reflects NWT priorities, roles and accountabilities.	Leadership model implemented and published. ✓ Complete	Sep 2002	Mar 2003	The NWT Model of Trustee Leadership was approved by the Joint Leadership Council for inclusion in the Memoranda of Understanding with HSS Authorities. This module forms part of the training that all Trustees receive.
8.2 Implement a standardized process to call for nominations and appoint trustees.	All new trustees appointed following guidelines. ✓ Complete	Jun 2002	Mar 2003	A standardized process for nominations and appointments has been developed and implemented.
8.3 Implement an orientation training program that will be provided to all new Trustees.	Orientation manual and materials published and training schedule approved.	Jun 2002	Jun 2003	Thirteen (13) training modules have been developed as training tools for HSS trustees. Modules 1-12 include generic information that can be used by trustees of various agencies and sectors. Module 13 was developed by current trustees for use by trustees within the HSS system.
and				
8.4 Implement a training program for all trustees as requested and on a regular basis.	Training Manual published and training delivered. ✓ Complete/ongoing	Jun 2002	Jun 2003	<p>Training sessions on Modules 1-12 have included band councilors, municipal employees and HSS board trustees and have been held by the following Authorities:</p> <ul style="list-style-type: none"> • Dogrib – October 8-10, 2002 (23 participants) • Deh Cho – January 14-16, 2003 (22 participants) • Fort Smith – January 21-23, 2003 (28 participants) • Inuvik – January 28-30, 2003 (27 participants) • Hay River – February 8-9 & March 15, 2003 (10 participants) <p>Yellowknife will be holding training sessions on Modules 1-12 in November 2003, and all Authorities will start delivering Module 13 this fall.</p>

5 Improving System-Wide Accountability


Action	Deliverables	Timelines		Status
		Original	Revised	
9.1 Design and implement an accountability framework that details the expectation for monitoring and reporting at all levels across the system.	<p>A detailed accountability framework for all program components of the system focusing on outcomes.</p> <p>✓ Complete</p>	Sep 2002	Oct 2002	The <i>Accountability Framework</i> for the NWT HSS system was tabled in March 2003 in the Legislative Assembly.
9.2 Introduce a system-wide performance measurement and reporting system.	<p>A comprehensive plan for monitoring and reporting on system performance that focuses on program performance and includes:</p> <ul style="list-style-type: none"> • Publication of annual reports on health status of NWT residents, • Annual reporting on measures of broad health and wellbeing. <p>✓ Complete/ongoing</p>	Jun 2002	Feb 2003	The <i>Performance Measurement System</i> was approved by the Joint Senior Management Committee in January 2003.

Improving System-Wide Accountability

Action	Deliverables	Timelines		Status
		Original	Revised	
9.3 Develop and implement the capacity for program evaluation throughout our system with emphasis on collaborative practice.	Monitoring and evaluation frameworks in place for all new initiatives and programs ✓ Complete/ongoing	Apr 2003	Apr 2003	Based on feedback from the Joint Senior Management Committee, a draft evaluation booklet has been prepared for use in program monitoring and evaluation. This resource is being pilot tested with the Social Agenda community demonstration projects (see Action Item 5.2.5) prior to being used for other initiatives and programs.
9.4 Reporting on the implementation of the Action Plan.	Published status reports. ✓ Complete/ongoing	Jul 2002	Oct 2002	<p>Communications requirements were approved and implemented. Activities include the preparation of status reports every six months, interim communications with key stakeholders on project-specific progress and public announcements signaling achievements.</p> <p>Highlights of public communications activities to date include:</p> <ul style="list-style-type: none"> • <u>poster display and community posters</u> distributed in late spring 2002; • <u>information flyer #1</u> (on Joint Leadership Committee) distributed in late spring 2002; • <u>Feb-Sept 2002 Status Report</u> completed in October 2002; • <u>information flyer #2</u> (on action plan progress and highlights) distributed with <i>Feb-Sept Status Report</i>; • <u>Oct-Mar 2003 Status Report</u> completed in April 2003; • <u>information flyer #3</u> (on action plan progress and highlights) distributed with <i>Oct-Mar Status Report</i>; • <u>Apr-Sept 2003 Status Report</u> completed in September 2003.

Appendix I

TIMELINES AND PROGRESS


 original timeframe
 revised timeframe

	2002						2003						2004																
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Improved Services to People																													
Action 5.1.1																													
Action 5.1.1.1																													
Action 5.1.2																													
Action 5.1.3																													
Action 5.1.4																													
Action 5.2.1																													
Action 5.2.2																													
Action 5.2.3																													
Action 5.2.4																													
Action 5.2.5																													
Improved Supports to Staff																													
Action 6.1.1																													
Action 6.1.2																													
Action 6.1.3																													
Action 6.1.4																													
Action 6.1.5																													
Action 6.1.6																													
Action 6.1.7																													
Action 6.1.8																													
Action 6.2.1																													
Action 6.2.2																													
Action 6.2.3																													
Action 6.2.4																													
Action 6.2.5																													
Action 6.2.6																													
Improved System-Wide Management																													
Action 7.1.1																													
Action 7.1.2																													
Action 7.1.3																													
Action 7.1.4																													
Action 7.1.5																													
Action 7.1.6																													
Action 7.1.7																													
Action 7.1.8																													
Action 7.2.1																													
Action 7.2.2																													
Action 7.2.3																													
Action 7.2.4																													
Action 7.2.5																													
Action 7.3.1																													
Improved Support to Trustees																													
Action 8.1																													
Action 8.2																													
Action 8.3																													
Action 8.4																													
Improved System-Wide Accountability																													
Action 9.1																													
Action 9.2																													
Action 9.3																													
Action 9.4																													

