

HAY RIVER HEALTH AND SOCIAL SERVICES AUTHORITY

ANNUAL REPORT

2019-2020

BEST HEALTH. BEST CARE. BETTER FUTURE.



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A MESSAGE FROM PUBLIC ADMINISTRATOR

Brian Willows



The past year, 2019/20 can best be described as a year of transition, challenges and opportunities for the Hay River Health and Social Services Authority. I would be remiss if I did not first recognize the 250+ employees of the HRHSSA for their dedication and commitment to the clients of HRHSSA. The staff of the HRHSSA; who are your family, friends and neighbours truly represents the vision of the HRHSSA.

Best Health, Best Care, Best Future

The year began with the strategic goal of transitioning the HRHSSA with a focus on leadership and our desire to improve our relationship with the community of Hay River, our partners and stakeholders. We heard the concerns of the community and staff of HRHSSA as they related to being more open and transparent in our communications both internally and externally.

The transitioning process also includes moving forward with our partner, the Northwest Territories Health and Social Services Authority. Initiatives such as Cultural Competency Training, Primary Health Care Reform, and our Accreditation in 2019 are just a few examples of the transitioning strategy for HRHSSA.

2019/20 ended with the unexpected reality of Covid-19. This pandemic tested the HRHSSA in real time in operating in unknown circumstances and outcomes. The employees of HRHSSA stepped up to the challenges and brought their knowledge and commitment to serving and protecting us all. As Public Administrator I am grateful beyond words for the service of the few for so many of us.

Pour l'Administration des services de santé et des services sociaux de Hay River (ASSSSHR), l'exercice 2019-2020 peut être décrit comme une année de transition, faite de défis et d'occasions. Je m'en voudrais de ne pas insister sur le dévouement et l'engagement des quelque 250 employés de l'ASSSSHR à l'égard de nos patients. Le personnel de l'ASSSSHR, c'est-à-dire les membres de votre famille, vos amis et vos voisins, incarne véritablement notre idéal:

Une santé optimale, des soins optimaux, un avenir en santé

Nous avons commencé l'année avec l'objectif stratégique de repenser l'ASSSSHR pour mettre l'accent sur le leadership et améliorer nos relations avec la collectivité de Hay River, nos partenaires et les parties prenantes. Nous avons écouté les préoccupations de la collectivité et de nos employés sur l'ouverture et la transparence dans nos communications, tant internes qu'externes.

Dans la même optique, l'ASSSSHR a intensifié sa collaboration avec son partenaire, l'Administration des services de santé et des services sociaux des TNO (ASTNO). La formation sur les compétences culturelles, la réforme des soins de santé primaires et l'obtention de notre agrément en 2019 ne sont que quelques exemples des initiatives entreprises dans le cadre de cet objectif stratégique.

L'exercice s'est terminé sous le signe de la COVID-19. Cette pandémie a mis l'ASSSSHR à l'épreuve en l'obligeant à continuer ses opérations dans des circonstances inconnues et en ne sachant pas l'effet qu'elle aurait sur ses opérations. Les employés de l'Administration ont relevé le défi et ont mis leurs connaissances et leur dévouement au service de tous. En tant qu'administrateur public, je les remercie à nouveau pour leur travail au service de notre collectivité et je leur en suis extrêmement reconnaissant.

A MESSAGE FROM CHIEF EXECUTIVE OFFICER

Erin Griffiths



In 2019-20 the HRHSSA took the initial steps on a leadership journey that will encourage and support our Senior Leadership Team and our Management Team to be innovators, coaches and quality improvement leaders. HRHSSA will continue to be a learning organization as we move forward by encouraging our frontline staff and community stakeholders to participate in our learning and development. Staff and community engagement is key to any successful organization.

Our leadership and resiliency has been challenged over the past four months with the onset of the COVID-19 pandemic. Our team embraced the work that was required to prepare our organization and our community. Our priority is the health and safety of our employees, patients, clients and our community. This will be a marathon and not a sprint. As this situation continues to develop we will need to be resilient, flexible and responsive to our rapidly changing environment.

In November 2019 HRHSSA successfully obtained Accreditation status from Accreditation Canada. With a Territorial team approach, our staff worked incredibly hard to ensure that HRHSSA continues to provide services focused on safety, efficiency and the highest of quality. The Accreditation award is a testament to the fact that our staff consistently achieve these goals.

In closing, I would like to thank the dedicated staff of the Hay River Health and Social Services Authority, who continue to provide and support safe, high-quality patient care each and every day. The accomplishments highlighted in this annual report could not be possible without them.

Stay well, take care of yourselves and each other.

Au cours de l'exercice 2019-2020, l'Administration des services de santé et des services sociaux de Hay River (ASSSSHR) a entamé un processus d'amélioration de son leadership qui encourage les membres des équipes de direction et de gestion à être des innovateurs, des mentors et des leaders pour l'amélioration de la qualité. L'ASSSSHR continuera d'être une organisation intelligente encourageant son personnel de première ligne et les intervenants de la collectivité à participer à son processus d'apprentissage et de développement. L'engagement de tous les membres du personnel et de la collectivité est la clé du succès de toute organisation.

Au cours des quatre derniers mois, la pandémie de COVID-19 a mis la ténacité de notre leadership à rude épreuve. Notre équipe a entrepris le travail nécessaire pour protéger notre organisation et notre collectivité. Nous avons continué à nous concentrer sur notre priorité, la santé et la sécurité de nos employés, de nos patients et de notre collectivité. Nous entamons un marathon et non un sprint. Au fur et à mesure que la situation évoluera, nous devons faire preuve — encore une fois — de ténacité, de souplesse et de sensibilité en ces temps de bouleversements rapides.

En novembre 2019, l'ASSSSHR a réussi à obtenir son accréditation d'Agrément Canada. Dans un esprit d'équipe territorial, notre personnel n'a ménagé aucun effort pour assurer que l'ASSSSHR continue à fournir des services sûrs, efficaces et de la plus haute qualité. L'obtention de notre accréditation en est le témoignage convaincant.

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.

Portez-vous bien, et prenez soin les uns des autres.

A LITTLE ABOUT US

The Hay River Health and Social Services Authority (HRHSSA) is an accredited, integrated health authority that provides the following services: 19 acute inpatient beds, Emergency and Ambulatory Care, including dialysis and endoscopy; Midwifery Care and Delivery; 25 Long Term Care beds; Supportive Living Campus, a Territorial campus providing 11 permanent residences; Diagnostic Services (Diagnostic Imaging, Ultrasound, Mammography); Laboratory; Medical and Specialty Clinics including Diabetes programming; Social Programs (Community Counselling, Healthy Families and Child and Family Services) Community Health and Home Care, Rehabilitation which include Physiotherapy, Occupational Therapy and Speech Language Pathology; and a full range of Support Services.

OUR MISSION

To provide equitable quality care and service and encourage individuals, families and communities to make healthy choices.

OUR VISION

Best Health

Support the health and wellness of the population

Best Care

Care and services are responsive to children, individuals, families and communities

Better Future

Contribute to a sustainable health and social services system



OUR VALUES

Caring - with integrity, we treat everyone with compassion, respect, equity, dignity and we value diversity.

Accountable - we are responsible to utilize our resources efficiently and effectively and report the impact of our work to the community.

Relationships - we work in collaboration with all residents including individuals, families, communities, staff, other health authorities, and Indigenous Governments.

Excellence - we pursue continuous quality improvement through innovation, integration and evidence based practice.

Safety - we place safety at the center of all of our decisions.



INDEPENDENT AUDITORS' REPORT



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INDEPENDENT AUDITORS' REPORT

To the Minister of Health and Social Services and
the Chief Executive Officer:

Unqualified Opinion

We have audited the accompanying financial statements of Hay River Health and Social Services Authority (the Authority) which comprise the statement of financial position as at March 31, 2020, the statements of operations, changes in net assets and cash flows for the year then ended and notes to the financial statements, including a summary of significant accounting policies and other explanatory information.

In our opinion, these financial statements present fairly, in all material respects, the financial position of Hay River Health and Social Services Authority as at March 31, 2020 and the results of its operations and cash flows for the year then ended in accordance with Canadian public sector accounting standards. Furthermore, in our opinion, these statements present fairly, in all material respects, the revenues and expenditures of all programs funded through contribution agreements with the Department of Health and Social Services which total \$250,000 or more in Schedule A and A-1 for the year ended March 31, 2020, in accordance with the provisions established by the individual contribution agreements.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Authority in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with those requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Authority's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless management either intends to liquidate the Authority or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Authority's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements. As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

INDEPENDENT AUDITORS' REPORT (CONT.)

Independent Auditor's Report to the Hay River Health & Social Services Authority (continued)

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.

- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Authority's ability to continue as a going concern. If we conclude that a material uncertainty exists we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Authority to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

The logo for Ashton Chartered Professional Accountants, featuring the word "Ashton" in a stylized, handwritten-style font.

ASHTON
Chartered Professional Accountants

Hay River, NT
July 2 2020

STATEMENT OF FINANCIAL POSITION

HAY RIVER HEALTH & SOCIAL SERVICES AUTHORITY

Statement of Financial Position

Statement I

March 31, 2020

	2020	*2019
Financial Assets		
Cash and cash equivalents, Note 4	\$ 602,391	\$ 392,891
Accounts receivable, Note 7	1,081,430	1,284,947
Due from Government of Canada, Note 10	3,434	53,457
Trust assets, Note 14	74,027	84,486
Pensions asset, Note 12	16,783,000	15,127,000
Total Financial Assets	\$ 18,544,282	\$ 16,942,781
Liabilities		
Accounts payable and accrued liabilities, Note 9	697,356	1,159,884
Employee and payroll-related liabilities, Note 9	2,694,836	1,900,861
Due to Government of Canada, Note 10	-	-
Contributions repayable, Note 27	2,582,320	2,603,904
Employee future benefits and compensated absences, Note 13	1,633,970	1,723,136
Accountable capital advance, GNWT, Note 28	5,829	5,829
Deferred revenue, Note 26	56,633	56,633
Trust liabilities, Note 14	73,258	83,690
Total Liabilities	7,744,202	7,533,937
Net Financial Assets (Debt)	\$ 10,800,080	\$ 9,408,844
Non-Financial Assets		
Inventory held for use, Note 8	\$ 205,459	\$ 217,260
Prepaid expenses and deposits, Note 25	208,500	200,562
Total Non-Financial Assets	\$ 413,959	\$ 417,822
Accumulated Surplus (Deficit), Note 29	\$ 11,214,039	\$ 9,826,666

* Reclassified for comparative purposes

Contractual obligations, Note 16

Contingent liabilities, Note 17

Approved on behalf of the Authority:



Public Administrator



Chief Executive Officer



Director of Finance

STATEMENT OF OPERATIONS

HAY RIVER HEALTH & SOCIAL SERVICES AUTHORITY

Statement of Operations

Statement II

For the year ended March 31, 2020

	2020 Budget	2020 Actual	2019 Actual
Revenue			
Contributions from GNWT, Schedule A	\$ 31,124,928	\$ 32,743,712	\$ 31,540,581
Recoveries	519,720	829,233	880,545
Sales - Patient Revenues	885,408	833,087	825,923
Contributions from Other Sources	-	-	-
Other Income	-	-	2,559
Interest	60,000	77,593	65,145
Total Revenue	32,590,056	34,483,625	33,314,753
Expenses			
Administrative and Support Services	8,059,536	9,546,636	9,045,585
Nursing Inpatients Services	5,194,692	4,675,923	4,883,897
Ambulatory Care Services	5,299,152	4,877,923	5,349,141
Diagnostic and Therapeutic Services	2,786,520	2,954,722	2,680,434
Community Health Programs	2,022,672	2,178,429	2,189,701
Community Social Programs	9,253,938	9,843,619	8,363,931
Supplementary Health Programs	-	-	-
Undistributed	770,004	(981,000)	(1,719,709)
Total Expenses, Note 24	33,386,514	33,096,252	30,792,980
Operating Surplus (Deficit)	(796,458)	1,387,373	2,521,773
Unfunded items			
(Increase) Decrease in post-employment benefits, Note 12	-	(1,656,000)	(2,663,000)
(Increase) Decrease in employee future benefits and compensated absences, Note 13	-	89,166	79,632
Adjusted operating surplus (deficit) before the undernoted	(796,458)	(179,461)	(61,595)
Tangible Capital Assets - Rent Expense, Note 15	-	(2,119,933)	(2,027,428)
Grant-In-Kind - GNWT assets provided at no cost, Note 15	-	2,119,933	2,027,428
Adjusted operating surplus (deficit) for the year	\$ (796,458)	\$ (179,461)	\$ (61,595)
Opening Accumulated Surplus (Deficit)		\$ 9,826,666	\$ 7,304,893
Prior year restricted physician funds allocated		-	-
Operating Surplus (Deficit)		1,387,373	2,521,773
Closing Accumulated Surplus (Deficit)		\$ 11,214,039	\$ 9,826,666

ACUTE AND AMBULATORY CARE SERVICES

Acute Care Services provides inpatient acute care (Community Support Beds – CSB), palliative care and alternate levels of care.

Ambulatory Care Services 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.

HIGHLIGHTS



GOALS ACHIEVED

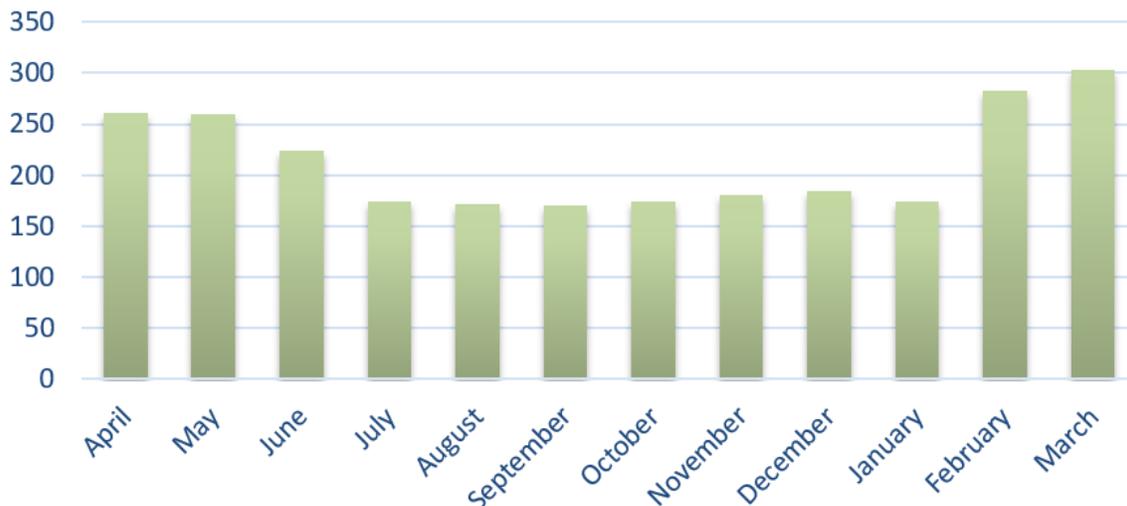
Onsite training of registered nurses in advanced emergency courses such as Advanced Cardiac Life Support, Pediatric Advanced Life Support, Trauma Nursing Core Course and Emergency Nursing Pediatric Course has continued to maintain the high standard of care provided to our clients.

PERFORMANCE INDICATORS

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



CSB BED OCCUPANCY RATE - 2019/2020 MONTHLY



CLINIC SERVICES

Hay River Medical Clinic serves as an entry point for the citizens of Hay River and catchment area to access services provided by: Physicians; Nurse Practitioners; Diabetes Educators; Specialists' Services; Telehealth Medicine and Medical Travel assistants.

During 2019-2020 there were over 15,000 patient care encounters and appointments booked through the Medical Clinic. Prevention of 'no-show,' appointments continues to be a challenge for all care areas offered by the Medical Clinic.

HIGHLIGHTS

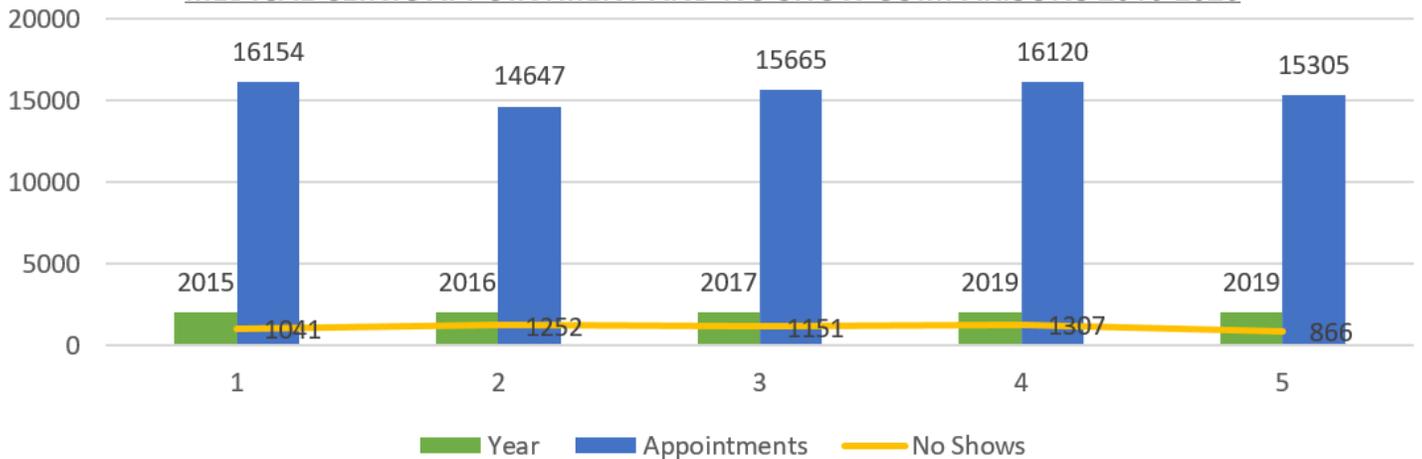
August 2019, an Outpatients/Ambulatory Care/Emergency department was established to meet the demand for same day appointments and to utilize the staff of the Emergency Department and physician on-call in a more efficient and effective way.

The Medical Clinic staff hosted several prescription renewal clinics over the past fiscal year to offset patients' needs for medical refills. This was done with one or two locum NP's and with the cooperation of Ring's Pharmacy.

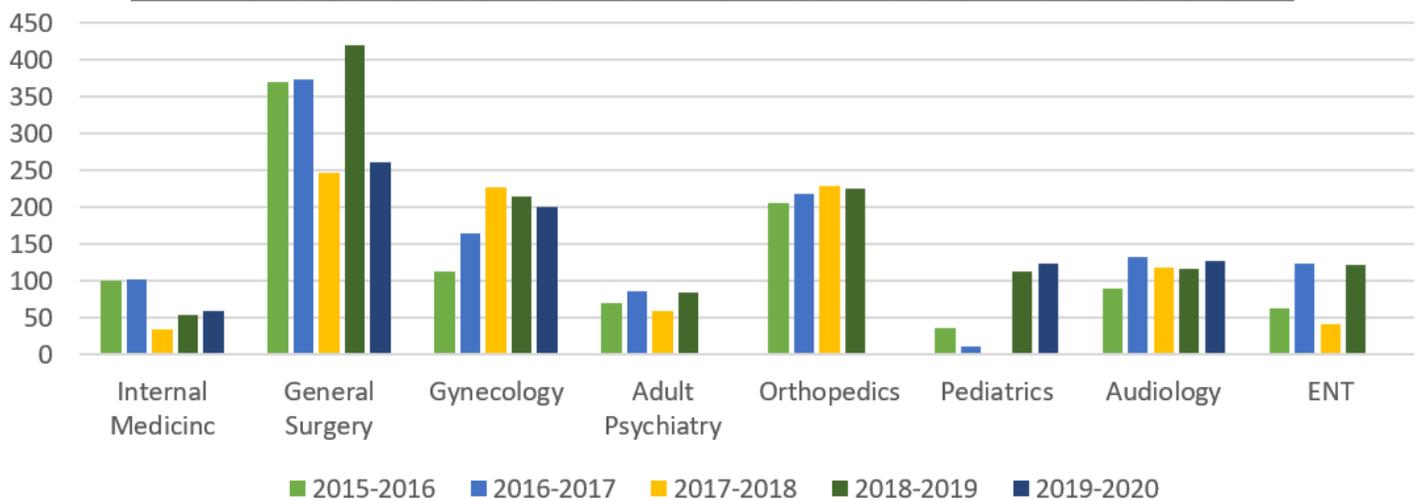


PERFORMANCE INDICATORS

MEDICAL CLINIC APPOINTMENT AND NO SHOW COMPARISONS 2016-2020



HAY RIVER SPECIALIST CLINIC APPOINTMENT COUNTS OVER PAST 5 FISCAL YEARS



COMMUNITY HEALTH SERVICES

The Public Health department in Hay River services over 8,000 people across the South Slave region of the Northwest Territories including Ka'a'gee First Nations, K'at'l'odeeche First Nations, Deninu First Nations, Deh Gah Got'ie First Nations, the Hamlet of Enterprise and the town of Hay River, NT.

HIGHLIGHTS

Annual Health Fair November 2019

Creating Partnerships for Wellbeing:

The Hay River Health Authority and community partners came together to share learning through presentations, information booths and discussions.

510 community members were vaccinated with the influenza vaccine. A varied twenty-five informational health booths were involved; those from the GNWT, Enterprise, HRHSSA, Town of Hay River and K'at'l'odeeche First Nations were present during the fair. The health fair:

- Showcased HRHSSA's team of health professionals
- Engaged in reflective learning on what well being could look like
- Saw people come together and built respectful relationships and partnerships
- Community outreach prevention, education, demonstration

Healthy Growth and Development

The Early Years:

The early years parenting booklet provides important information for parents and caregivers during the first years of a child's life.

Each booklet contains age appropriate information on healthy growth and development as well as links to reputable websites for additional resources. The Early years distributed to 35 families by paper copy.



Best Health. Best Care. Better Future.

Infectious Diseases

Case management:

Public Health nurses managed 875 individual cases of reportable diseases. Including Tuberculosis, sexually transmitted infections, COVID-19, MRSA, vector borne diseases and influenza. The largest portion of the reportable diseases was chlamydia accounting for 41 (56%) of 73 cases. Respiratory contact diseases were the second largest proportion of reportable diseases with influenza A and B making up 28 cases in total. COVID testing was estimated at 221 total swab collections with no positive results.

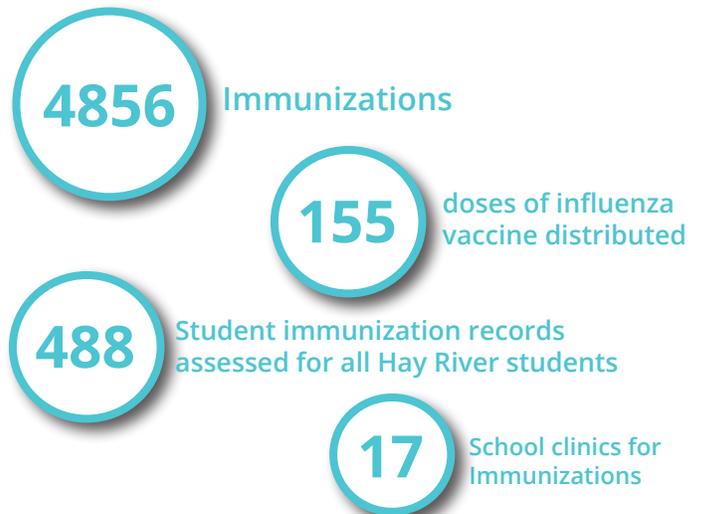
Numerous suspect cases were also reviewed but did not meet case definition. Public Health responded to 1,500 infection disease inquiries from health care providers, hospitals, childcare facilities, labs, schools and the public.

Outbreaks:

Public health followed up on three confirmed outbreaks, pertussis, syphilis and COVID-19.

Immunization:

High vaccine coverage rates protect those most vulnerable from disease by creating, "Community Immunity".



COMMUNITY HEALTH SERVICES (CONT.)

Pertussis:

All children under the age of three and grade 7 students, pregnant women between 27-32 weeks were monitored and notified for pertussis coverage and follow-up.

COVID-19:

pandemic planning, implementation committee, territorial working groups, increase in touch point meetings with Northwest Territories Health and Social Services Authority, Chief Public Health Officer, Yellowknife Public Health managers, Fort Smith Public Health manager continued as a maintenance responsibility of the Public Health unit.

Public Health began home visiting swab collections for COVID and developed a drive thru swab clinic with adapting the Tli Cho Community Services Agency's operating procedures to meet the needs of Hay River as one of the COVID isolation centers.

Sexual Health:

In August 2019: A syphilis outbreak announced in August 2019: increase in STI rates remain one of the highest in the NWT. Antimicrobial resistance is becoming more prevalent.

The sexual health program ensures that priority populations have access to sexual health services and support that prevent exposure to sexually transmitted infections. Medications are available free of charge to local providers to treat positive cases.



Public health is on the move:

On June 2020, Public Health moved to the upper building location of HH Williams. Public health now has two designated exam rooms, separate from the office space to complete clinical assessments.

The Public health staff will continue to maintain established and new partnerships with private, non-profit, community working groups, and councils including Inuit, Metis and Dene people of the Northwest Territories. Increase cultural competencies, multicultural and inclusive methods to communicate.



DIABETES PROGRAM

The Hay River Diabetes Program provides comprehensive education and support to clients, families and broader community for the prevention and self-management of diabetes.

HIGHLIGHTS

- Virtual Care was utilized to provide temporary dietitian services, consistent diabetes clinics with Nurse Practitioner (NP), and safely sustain diabetes RN services during Covid-19 pandemic
- Continued to offer monthly travel clinics to the Anne Buggins Wellness Center
- Attended annual Hay River Health Fair

Projects

Policy development: Lab ordering standard operating procedure and In-hospital management of diabetes guidelines.

The Diabetes Nurse collaborated with Acute Care to begin implementing Basal Bolus Insulin Therapy (BBIT). Guidelines, order sets and education is set to roll out early next fiscal year.

The diabetes team is working on enhancing data collection. We are now tracking in-coming and outgoing referrals, total clients in specific databases, and no show rates.

PERFORMANCE INDICATORS

Education

Staff attended Dietitians of Canada Conference

Staff attended 2019 Hypertension Canada Congress and completed Instructional Skills Workshop

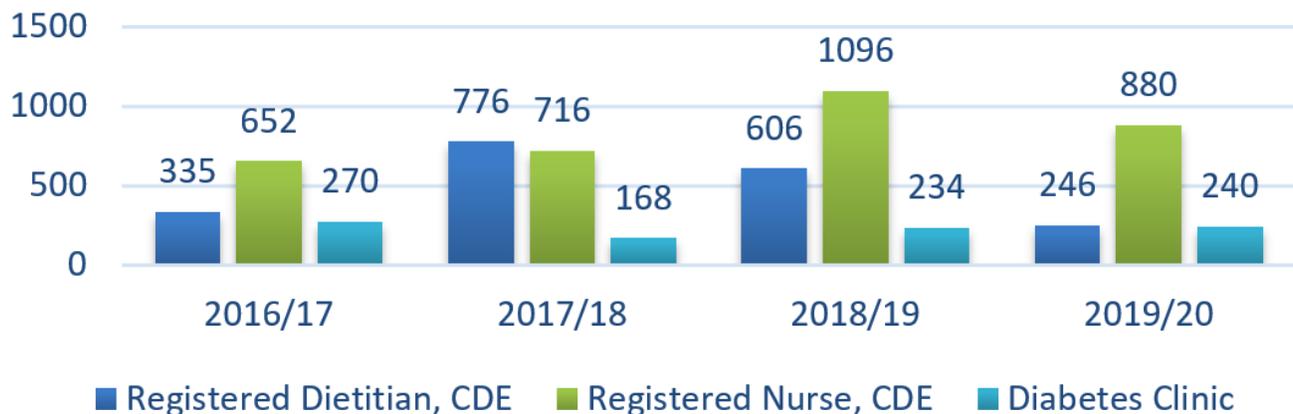
Sponsored 10 staff from HRHSSA in completing Diabetes 101 online training

Staffing

Having consistent Nurse Practitioner services has enhanced accessibility and continuity of care for clients in the diabetes program.



ANNUAL APPOINTMENTS



*2017/18 Limited RN services

*2018/19 Regular services

*2019/20 Limited RD services

DIAGNOSTIC IMAGING

HIGHLIGHTS

- Successful collaboration with Northwest Territories Health and Social Services Authority on document consolidation
- Successful Accreditation.

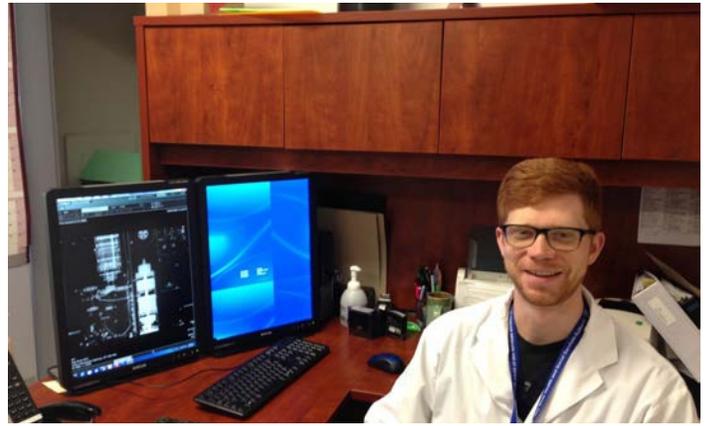
GOALS ACHIEVED

- Staff continuing education up to date.
- In-house Client Satisfaction Survey completed
- Practitioner Satisfaction Survey completed

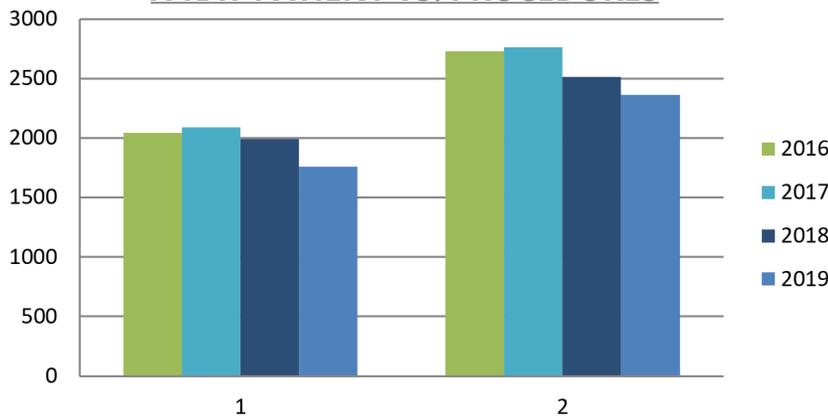
PARTNERSHIPS

- Continued partnership with HRHSSA Practitioners. Partnerships with NTHSSA have been maintained and in some instances, enhanced.

PERFORMANCE INDICATORS



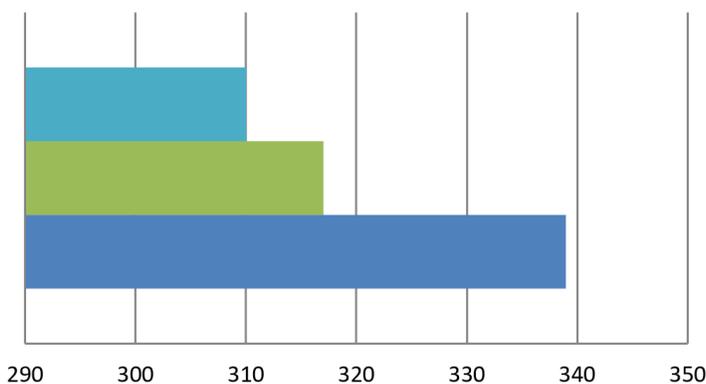
X-RAY PATIENT VS. PROCEDURES



Average Number of Procedures per visit:

- 2016 - 1.34
- 2017 - 1.32
- 2018 - 1.26
- 2019 - 1.35

DIAGNOSTIC IMAGING CALLBACKS



Call-back numbers have decreased each year. When averaged over the year, using 365 days as a guide, the average number of calls per day for each year is:

- 2017/18 - 0.93/day
- 2018/19 - 0.87/day
- 2019/20 - 0.85/day

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

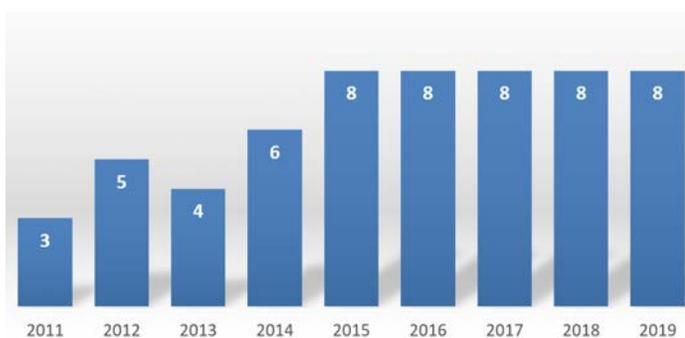
Assigning primary nurse roles for lead dialysis nurses.

- Medication Reviews
- Anemia Protocol
- Calcium, Phosphate PTH, and Vitamin D Protocol
- Case Reviews

Improvements in Territorial Renal Program roles and responsibilities.

PERFORMANCE INDICATORS

DIALYSIS GROWTH - HRHSSA NUMBER OF CLIENTS 2011 - 2020



HEALTH RECORDS / ELECTRONIC MEDICAL RECORDS

- Processing, Coding & Abstracting of inpatient / outpatient records
- Processing the release of information to Lawyers, RCMP, Insurance Claims and other Institutions where the patient is receiving care.
- Deals with the compilation of all reports and information generated in the health care of the client
- EMR puts 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.

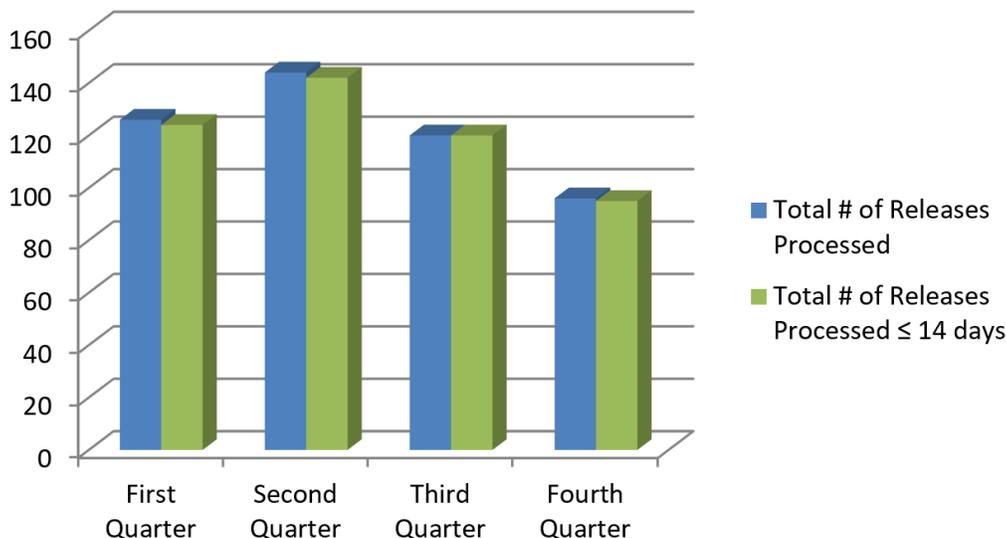
HIGHLIGHTS

- 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 Łutselk'e and Paulatuk, onto the Wolf system.
- All deadlines were met for CIHI submissions two months ahead of schedule.
- ROI requests were processed ahead of allotted 45 days.
- ICORE data entry was brought up to date.

PERFORMANCE INDICATOR

RELEASE OF INFORMATION PERFORMANCE INDICATOR

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER	TOTAL
TOTAL # OF RELEASES PROCESSED	126	144	120	96	486
TOTAL # OF RELEASES PROCESSED ≤ 14 DAYS	124	142	120	95	481



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 in this graph indicate how many requests are completed equal to and under 14 days after the completed request has been received in the Medical Records Department.

HOMECARE

HIGHLIGHTS

- Increase in acute post-op clients being discharged directly back to community. Program is growing very quickly with the increase in acute referrals that cannot be put on a waiting list

- More clients are choosing to palliate in their own homes for longer. Home Care is receiving more requests for assistance in this area

- Mckenna Funeral Home Services established in Hay River. Home Care services works closely with this service to assist families when making final plans for their loved ones

- Several different learning opportunities were made available to staff such as:

- **Dementia Care with Teepa Snow. She is considered the guru of dementia education and travels across North America and Europe doing presentations.**
- **Lower Leg Assessment training in Edmonton: (the prevention of amputations)**
- **NWT Parks and Recs. Conference for Elder Care: Held in Hay River. Foot Care nurse did a presentation at this conference.**
- **Alzheimer Conference Yellowknife: Hay River Community Alzheimer Ambassador attended.**
- **Diabetes 101 training modules: 3 staff registered**

- Student placements for Home Support programs as well as nursing

- Wound Care basics course organized and hosted by HHRSSA Home Care department. Educators from Yellowknife did the training. These are Nurses specializing in Wounds, Ostomies and Continence (NSWOCS) Home Care works closely with the NSWOCS in a virtual setting in our regular practice

- Medipatient support given to Fort Smith Home Care department

- KFN Health Fair and Enterprise Health Fair: Home Care sets up information tables at these fairs with Home Care information as well as Foot Care and Dementia support

- Meals on Wheels program: Very active program that relies on community volunteers to do the delivery part. They are a second set of eyes on community clients and work very closely with Home Care if they feel a M.O.W.s client is not doing well

- New build planning for Home Care, Public Health, Social Services and Environmental Health



HAY RIVER WAS RECOGNIZED AT THE NATIONAL ALZHEIMER'S CONFERENCE IN TORONTO AS HAVING THE ONLY SUCCESSFUL COMMUNITY AMBASSADOR PROGRAM IN CANADA!

PERFORMANCE INDICATORS

SERVICE REPORT

	2018 - 2019	2019 - 2020
NEW REFERRALS	32	54
DISCHARGES	23	40
ADMISSIONS	32	54
ACUTE POST - HOSPITAL	12	15
TOTAL # HOME CARE CLIENTS	113	121
TOTAL AMOUNT CLIENT SERVICE TIMES	4093.07	4814.57
FOOT CARE CLIENTS (NOT FACTORING IN THE FOCUS GROUPS WHICH ARE YEARLY ASSESSMENT CLIENTS)	320 (APPROX)	315 (APPROX)



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

- Expanding of Laboratory locum pool
- Standardization of policies/procedures with NTHSSA; Successful Accreditation

GOALS ACHIEVED

- Staff licensure up to date
- In-house Client Satisfaction survey completed
- Practitioner Satisfaction Survey completed
- Successful Validation of Gel Cross Matching procedure

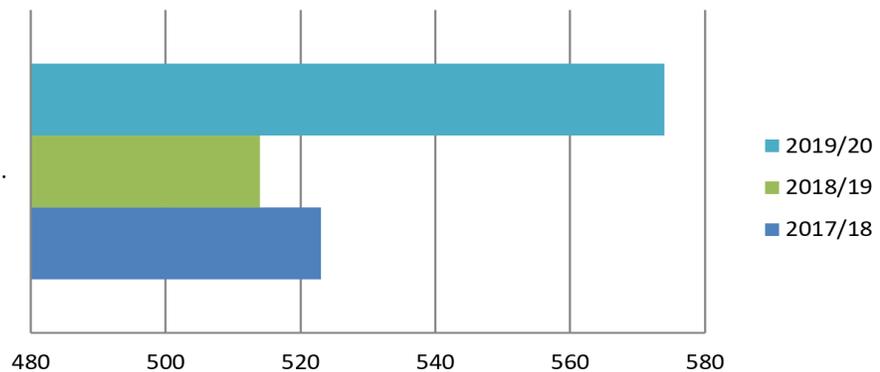
PARTNERSHIPS

- Continued partnership with HRHSSA Practitioners. Partnerships with NTHSSA have been maintained and enhanced.

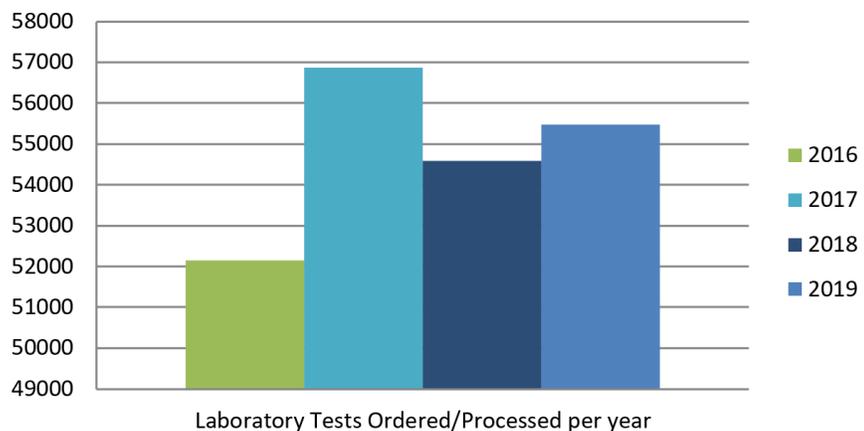


PERFORMANCE INDICATORS

LABORATORY CALLBACKS



NUMBER OF LABORATORY TESTS ANNUALLY



LONG TERM CARE

Long Term Care (LTC) services provide care to 23 Long Term Care Residents and 2 Respite clients at Woodland Manor. Long Term Care is a home based health care facility for adults who require access to 24 hour nursing care, for their safety and well-being. Services include professional nursing care, regular physician rounds, rehabilitation, home care services, dietary, pharmacy, pastoral care, foot care, personal support services, and recreational.

HIGHLIGHTS

- 99.2 % occupancy rate and 5 clients awaiting LTC placement with TAC committee for Hay River as of June 2020
- Two LTC beds dedicated to Respite Care
- Resident and Family Surveys completed
- Staff Surveys completed
- 48 Bed LTC Face to Face meeting with consultants developing the Operational Plan, as well Staffing meeting teleconferences for 48 bed LTC facility. Plans drawn up and reviewed with staff and residents
- Accreditation- planning/ working groups and accreditation held
- Legion financial donation for resident Christmas gifts
- Activities/ Outings: to the beach, falls, track and field, Kakisa day trip, Hay River Museum, NTCL Boat trip, Vintage Car- Show and Shine brought to WLM, Enterprise Jamboree, Mother's day tea and Photo Booth, Father's day barbeque, Fishing, Ice Cream Shop over summer months, Street Fair, Potlucks, Gardener in Bloom award, Parks and recreation grants- Walk to Tuk
- InterRAI and CIS working groups with DHSS- continuing care services
- Quarterly Resident and Family Council Meeting's
- Implementation of Communication Board- Leadership Training



PERFORMANCE INDICATOR

INDICATOR	NO. DURING REPORTING PERIOD (APR. 2018 - MAR. 2019)	% BASED ON TOTAL RESIDENTS IN CARE OVER 12 MONTHS
NOSOCOMIAL INFECTIONS		
UTI (URINARY TRACT INFECTIONS)	6	2.8%
PNEUMONIA/CHEST	4	1.92%
SKIN-CELLULITIS, CYST, TOE	6	2.8%
EYE/EAR (OTHER)	3	1.44%
PRESSURE ULCERS	5	2.4%
PHYSICAL RESTRAINTS - REVERSE SEATBELT	1	0.48%
FALLS		
SEVERITY 0-1, NEAR MISS / NO HARM	24	11.52%
SEVERITY 2, TEMPORARY/ MINOR HARM	1	0.48%
SEVERITY 3, PERMANENT HARM DAMAGE	1	0.48%



LONG TERM CARE (CONT.)



GOALS ACHIEVED

Increased Resident and Family Involvement

- Increased family involvement in planning care
- Regular emails with updates to residents' families
- Case conferences
- Family meetings as required or requested
- Communication Board at front entrance with current public communications, rec calendar, photos and Chief Public Health Officer notifications
- Quarterly Resident and family Council Meetings
- Individual phone calls from Activity coordinators with pictures sent at family and resident approval
- Virtual Visits
- Follow up phone calls by Resident Care Coordinator, LPN to update families/ guardian when seen at rounds, health decline or when resident is sent to Emergency

Increase Communication Between Resident Care Coordinator, Manager and Staff to Build Moral and Promote a Positive Working Relationship

- Continued with Communication Binder at request of staff (previous communication method)
- Added email communication as primary communication method- getting staff used to electronic use

TRAINING

- Pallium Leap Core training - 11 LTC staff attending
- NVCI- nonviolent crisis intervention - 7 staff attended
- Mental Health First Aid class - 7 staff attending
- CPR recertifications - ongoing
- Pallium Leap Core- 1 staff attended
- Food Handling Course - 2 staff attended
- Wound Care Course - 4 staff attended
- Oral Health training - 18 staff attended
- Back Injury Prevention Program (BIPP) recertification and training (continuously offered) - 31 attended
- BIPP Facilitator training - 1 staff

- Open approach with staff, drop in as needed
- Daily huddles
- RL6 reporting- acknowledge report when received and follow up as necessary with staff when relevant
- Communication Board
 - **Added Day to Day resident information and assignment of roles**
 - **Safety**
 - **Maintenance**
 - **Project work**
 - **Do you need help**
 - **Suggestion Parking Lot**
 - **Injuries/ Falls/ Quality Indicators**
 - **Team training**
 - **What does a good day look like to you/ Purpose statement**



MAMMOGRAPHY

The Mammography department provides Breast Screening Imaging to women, 40 and over. The program provides services to the women within the 13 communities of the South Slave Region. The digital mammography images are reported by offsite radiologists at the Mayfair Radiology group in Calgary.

HIGHLIGHTS

- Successful Accreditation of the Mammography Program
- Bra Art competition was held
- Recruit replacement for the Mammography Facilitator Position

GOALS ACHIEVED

- We were able to have an information table at a few of the Adult Health Fairs; many of the other Community Health Fair dates conflicted with Mammography Clinics and we were unable to attend.
- Expand pool of locum mammographers.
- Practitioner Satisfaction Survey Completed
- In-house Client Satisfaction Survey Completed



PARTNERSHIPS

- Partnerships with NTHSSA have been maintained and in some instances, enhanced.
- 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 Region.

Our average Turn-around Time for Mammography reports remains at 2 days. According to healthline.com; it is common for a screening report to take 2 – 4 days to get to a practitioner.

PERFORMANCE INDICATORS

	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
EXAMINATIONS COMPLETED	573	678	594	585	548	680	624
PATIENT EDUCATION	10125	10170	8790	9015	8175	10425	9210
EXAM UNITS (NATIONAL STANDARDIZED MEASUREMENT OF WORK LOAD)	53035	62870	59340	58955	55475	66065	62495

MEDICAL DEVICE REPROCESSING

The Medical Device Reprocessing department identifies, inspects and reprocess' (decontaminate/sterilize) reusable medical and patient care equipment in accordance with recognized standards as well as the philosophy and objectives of the Hay River Health and Social Services Authority (HRHSSA) to ensure that medical professionals have equipment necessary to diagnose, treat and manage disease in a condition that ensures efficient use and patient safety. The unit provides services to all in-patient units, the Operating Room, the Medical Clinic, Diagnostic units, Rehab services and offsite clinics including Public Health and Home Care. As well, the unit distributes a wide variety of instruments and supplies to various users.

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



	2016/17	2017/18	2018/19	2019/20
WASHER LOADS	654	327	472	416
STERILIZER LOADS	517	556	309	776
COLONOSCOPY EQUIPMENT	57	33	97	93
GASTROSCOPY EQUIPMENT	10	6	30	39
DENTAL EQUIPMENT	51	116	111	4

MIDWIFERY

Hay River Midwifery Services provides primary maternal and newborn care to women who are currently pregnant or planning a pregnancy. Services include preconception counselling, prenatal care and education, counselling for unplanned pregnancy, facilitation of access to abortion services, labour and birth in Hay River, postpartum care for up to a year after birth, 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. Clients 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.

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In the Midwifery Client Questionnaire 16/19 reported, "Strongly agree" to "Overall, I am satisfied with the midwifery services" and 3/19 reported, "Agree". Overall, midwifery clients are very content with the midwifery services provided at HRHSSA and provided very positive comments.

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GOALS ACHIEVED

1. Regular monthly clinic at Anne Buggins Wellness Centre at KFN
2. Training for midwives completed – Emergency Skills Workshop, Neonatal Resuscitation Program instructor
3. Midwives attended professional development at Stanton.
4. Regular Maternity Care Committee meetings with obstetrician Dr. Bing Guthrie ongoing
5. DHSS Advisory Committee on Midwifery updated Continuing Competence Program and Code of Ethics for Midwives submitted to DHSS for approval
6. Birth story sharing evening well received (article written by HRHSSA)

GOALS ACHIEVED

- Birth story sharing evening hosted by midwifery with sessions in June, July, October and February, well received by community and clients.
- NWT Advisory Committee on Midwifery at DHSS has submitted updated Continuing Competence Program and Code of Ethics for Midwives for approval by the Minister
- Locum coverage helped midwives take annual leave in March-May, August and October/November, and to attend training in April/May, to attend the Breastfeeding Committee for Canada Symposium and professional development at Stanton in November and February.
- Midwifery continued offering a monthly clinic at the Anne Buggins Wellness Centre at the KFN
- Work towards BFI status began in the form of an interdepartmental working group with Midwifery, Healthy Families, and Public Health and Heather sitting on the Territorial Infant Feeding Working Group
- Midwives continue to provide NRP and second attendant training to CSB/emergency nurses
- Community engagement project planned for Fort Simpson, Fort Resolution and KFN had to be canceled due to COVID restrictions.



PHARMACY

HIGHLIGHTS

- Pharmacist represents HRHSSA on all local and territorial pharmacy related committees including NWT Pharmacy and Therapeutics Committee and NTHSSA Medication Management Accreditation. There is an increased cooperation between our pharmacy department and the other territorial pharmacy areas to ensure that we have best practice policies and guidelines for medication concerns. These committees are also actively working with the NWT Department of Health to ensure that we keep up to date with the increased scope of practice that pharmacists across Canada are acquiring to ensure the continued best use of their pharmaceutical role in the team approach to patient care.

- 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.

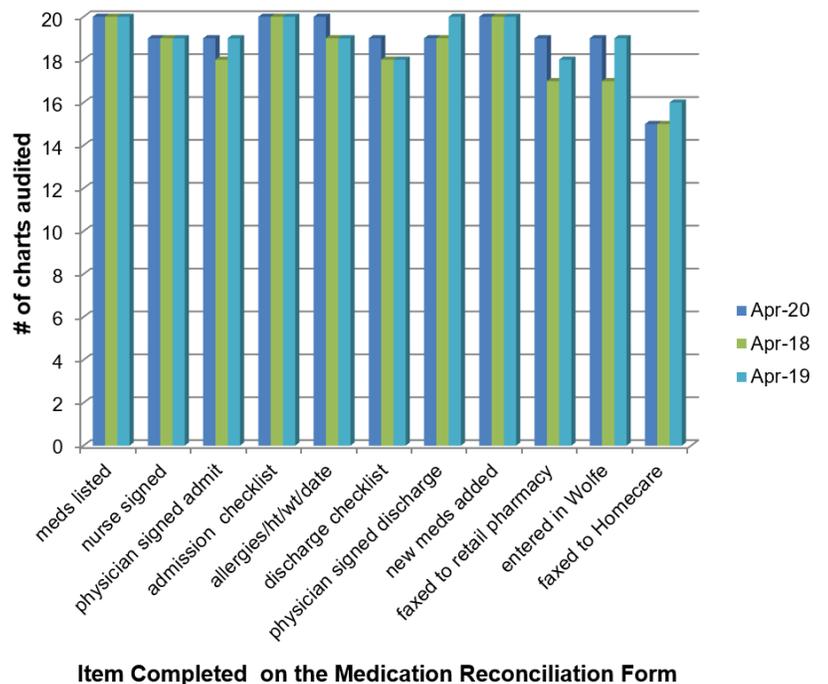
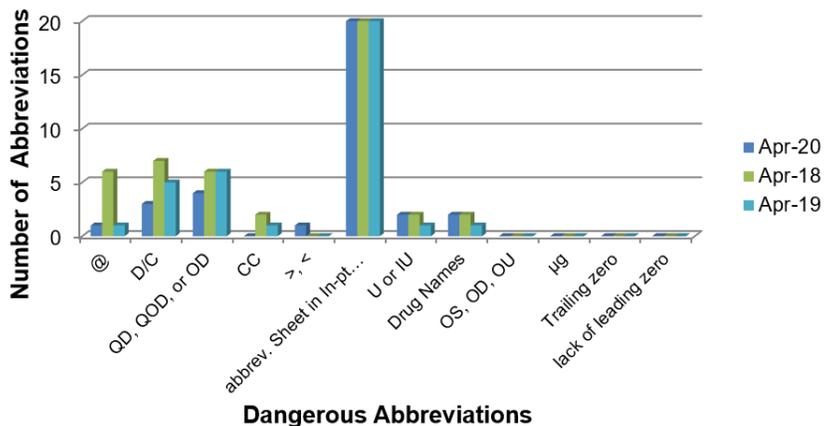
- Pharmacist continues to lead the team on various accreditation required operational practices such as Antimicrobial Stewardship, Medication Reconciliation and VTE prophylaxis protocols that are an integral part of each acute care admission. Each of these has proven to increase the quality and safety of our patient care.

- Hospital pharmacist has a very active role, along with 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.



PERFORMANCE INDICATORS

Annual audits are done on various ROP (required operational practices) to insure that we are maintaining accreditation standards. The first audit reflects our adherence to refraining from the use of Dangerous Abbreviations as set out by ISMP Canada (Institute for Safe Medication Practices). The second audit checks that we are properly completing our Medication Reconciliation Forms to insure accurate and safe medication documentation at all levels of care.



GOALS ACHIEVED

Medication Management Standards were 100% achieved during Accreditation Survey

Pharmacist is actively involved in all NWT and HRHSSA Pharmacy committees

Pharmacist actively involved with all patient admission and discharge medications

REHABILITATION SERVICES

HRHSSA Rehabilitation Services provides Occupational Therapy (OT), Physiotherapy(OT), and Speech-Language Pathology(SLP) services to persons of all ages in Hay River and surrounding communities of Katlo' Deche First Nation, Enterprise and Kakisa. Additionally, PT/OT provides services to the community of Fort Resolution.

Occupational Therapy (OT)

OTs work with people of all ages to promote health, prevent disability, and develop or maintain abilities. The OT's education, skills and expertise assist people in a wide spectrum of health promoting modalities. E.g. an OT can assess those with concerns for Autism Spectrum Disorder or Attention Deficit Hyperactivity Disorder, designing and create adaptive equipment or mobility-assist devices for persons with disabilities and assist people with neurological disorders such as brain injury or stroke.

Physiotherapy (PT)

PTs help to manage and prevent a number of physical problems due to 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)

An SLP is a communication specialist, 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 and alternative communication.

Pediatric Rehabilitation Aide (PRA)

The majority of the PRA's duties are to carry out SLP/OT therapy plans for children in the schools. The PRA, when not directly working with children in their care, carries out other duties such as maintenance of rehabilitation records and material preparation.

Rehabilitation Assistant (RA)

The RA works with both OT/PT to implement and support the assigned interventions set out by them. Additional RA duties can include maintaining treatment areas, equipment and supplies; assisting with the completion of funding applications, and billing for client equipment.

HIGHLIGHTS

This past fiscal year has seen the Rehabilitation Services Department challenged with delivering full rehabilitation services without the full complement of OT/PT rehabilitation staff. On a positive note, this fiscal year, PT has remained fully staffed and functioning at capacity.

Highlights of the past year include, continued PT participation and support of the Orthopedic specialist clinic in Hay River, and provision of PT/OT travel clinics to Fort Resolution. With the onset of Covid 19 Pandemic, the Rehabilitation department, especially PT/OT have had to consider alternative options for the provision of its services, especially to areas outside of Hay River. Future planning will include exploring virtual care options to deliver OT/PT services in order to provide timely quality rehabilitation services care despite the ongoing Covid-19 pandemic.

HRHSSA's rehabilitation department participates in the NTHSSA Rehabilitation Leadership Team and Rehabilitation Services Advisory Committee. These committees work to ensure rehabilitation services and processes are consistent across the Northwest Territories, and provides a forum for HRHSSA rehabilitation services staff to network with other rehabilitation professionals through out NTHSSA.



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. There are 11 permanent residents at the Campus and one respite bed is available. The residents range in age from 29 to 57 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 91.25 days during the past fiscal year (25% occupancy). Day program accessed by 1 Community Client, 1 Extended Care Unit resident and 4 DJSS senior high school students (with their support workers)

- Care Bag project has donated over 500 bags of hygiene supplies to the Soup Kitchen, RCMP, and Family Support Center

- Get Active Grants received from NWT Parks and Recreation (\$1000)

- Fundraisers as follows:

Recycling Program (\$1258.40)
Candy Apple Sale (\$1000)
Town of Hay River (\$67.50)
Paper Hugs (\$18.90)

- Team Building exercises and events to promote positive workplace culture (Staff Appreciation Day, Training Sessions)

- In 2018/19, the "Community Skills Building Program" was designed and implemented. This initiative was developed by a staff member to assist the residents in developing the skills necessary to be as independent and included in community as possible. The program evaluation was completed. The evaluation concluded that the program goals were well achieved (from January to December 2019)

1345

Number of Successful Goals Met by Residents this year!



SUPPORTIVE LIVING SERVICES (CONT.)

GOALS ACHIEVED

Providing Education/Life Skills and Community Involvement for all Residents Thereby Enhancing their Quality of Health Holistically.

- Partnership formed with Aurora College with residents attending the "Toolbox for Life" life skills program
- Partnership formed with DJSS to introduce senior high school students with cognitive disabilities to a Supportive Living environment. 4 students attended day program weekly with their support workers from the school
- Cultural Awareness Learning Sessions (Inuvialuit Culture, Tales of the Dene, Metis Culture, Newfoundland Culture) to name a few
- Relationship Building Classes (Relationship Building, Healthy Relationships, Community Etiquette, Personal Space)
- Mental Health Focused Learning Sessions (Anger Management, Gratitude, Personal Growth, Art Lessons)
- Physical Health and Wellbeing Learning Sessions (Physical Fitness, Hunting and Trapping)
- Other learning sessions include, but were not limited to: Money Matters, Sign Language, Music Classes, What to do in an Emergency, Science Days, Baking and Cooking Classes)

To Strengthen Relationships Within Departments throughout HRHSSA, thereby improving Quality of Services Based on Access to Support, Training and Education.

- SLS representation on the following committees/task teams: Workplace Wellness Committee, OH&S Committee, Ethics Committee, Accreditation Committees, Falls Prevention Committee, and Pharmacy Committee.
- Interdepartmental training (through HR, Dietary, Rehab)
- Working with LTC to provide combined recreational services on special occasions
- Other learning sessions include, but were not limited to: Money Matters, Sign Language, Music Classes, What to do in an Emergency, Science Days, Baking and Cooking Classes)

Providing Access to Training, Support, and Development to the Workforce to Ensure and Excellent Standard of Care is Provided to All Residents

- 60% of eligible staff accessed training through the Professional Development Incentive Program (topics included Mental Health Rehabilitation Diploma, Anxiety Management, Social Work Degree Program, Social Service Worker Diploma program, Anxiety Practical Intervention Strategies, Depression, Mental Health and Addictions, FASD Workshop, Mental Health and Addictions Certificate, Collaborative Mental Health Care, Trauma Triggers)
- 2 staff members accessing the GNWT's Targeted Academic Support Program (TASP) for continuing education
- Staff meeting learning sessions for all staff: "Harassment Free and Respectful Workplace", "Enrichment and Community Inclusion", "Aging in Place", "SLS Annual Safety Meeting", and "Conflict Resolution".
- Also offered were a variety of online and in person training (Care Training, Canadian Falls Prevention Program, Hand Hygiene, Mental Health First Aid, OH&S Training, BIPP, Supportive Pathways, First Aid/CPR, Non-Violent Crisis Intervention, Positive Behaviour Supports, WH-MIS)
- 1 Staff member attended Palliative Care training in YK
- 1 Staff member attended the NWT Parks and Recreation Annual Conference
- 3 Staff members participated in the "Diabetes 101" online training course supported by the Diabetes team
- 16 Staff members attended "Oral Hygiene Training"
- 2 Staff members attended "Trying Differently Rather Than Harder: Understanding and Application of a Neurobehavioral Approach to FASD and other Brain-Based Conditions" training
- 2 SLS staff members are registered Non-Violent Crisis Intervention (NVCI) instructors. These instructors have provided training to 18 HRHSSA instructors in their first 2 courses
- 1 SLS staff member is a Mental Health First Aid Instructor (MHFA). Training for 27 HRHSSA employees has taken place over the year
- Annual Staff Appreciation Celebration

ULTRASOUND SERVICES

Ultrasound services include the provision of quality sonographic images. Images are reviewed and reported by off-site Radiologists at the Mayfair Radiology group in Calgary. The Ultrasound staff liaises with the practitioners to provide the best client care possible.

HIGHLIGHTS

- Recruit casual staff for vacant position
- Actively recruiting for vacant full-time position
- Successful Accreditation

GOALS ACHIEVED

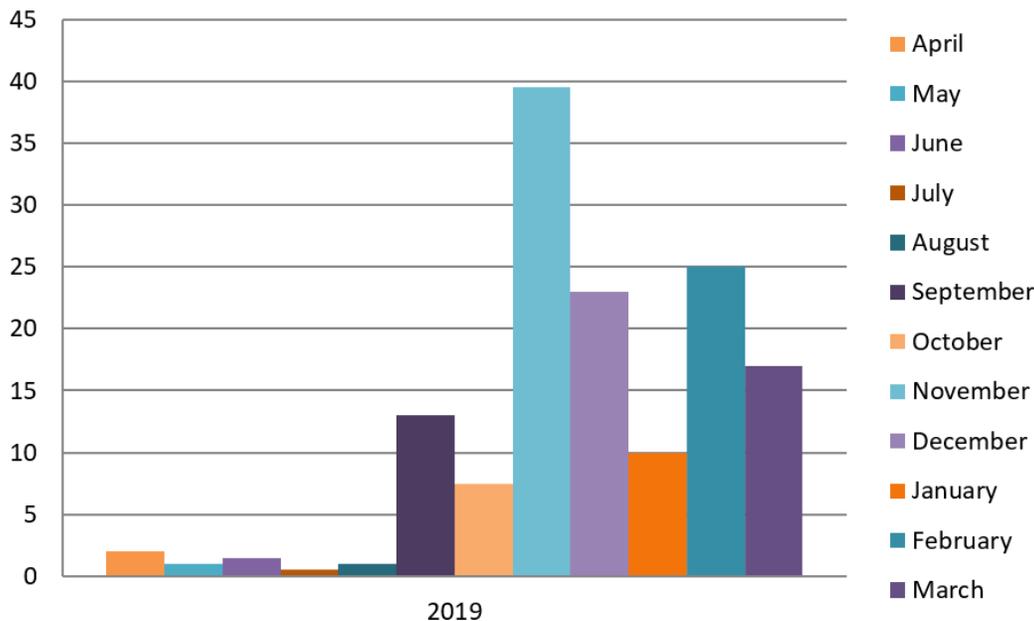
- Recruited 5 new locum sonographers
- Practitioner Satisfaction Survey Completed
- In-house Client Satisfaction Survey Completed

PARTNERSHIPS

Continued partnership with HRHSSA Practitioners. Partnerships with NTHSSA have been maintained and enhanced.



**APPROXIMATED ULTRASOUND WAIT-TIMES
2019-2020 BY MONTH**



The table indicates Wait-times for Non-Urgent Ultrasounds. Data based on monthly estimates. Average Wait-time over the fiscal year was 11.75 days. The average wait-time in Canada for an ultrasound is 3.4 weeks, or 23.8 days - according to a Fraser Institute study in 2019.

COMMUNITY COUNSELLING SERVICES

Community Counselling Services (CCS) provides mental health and addictions counselling for individuals, couples, families, groups and children 6+yrs from Hay River & Enterprise, as well as K'atlodeeche First Nation.

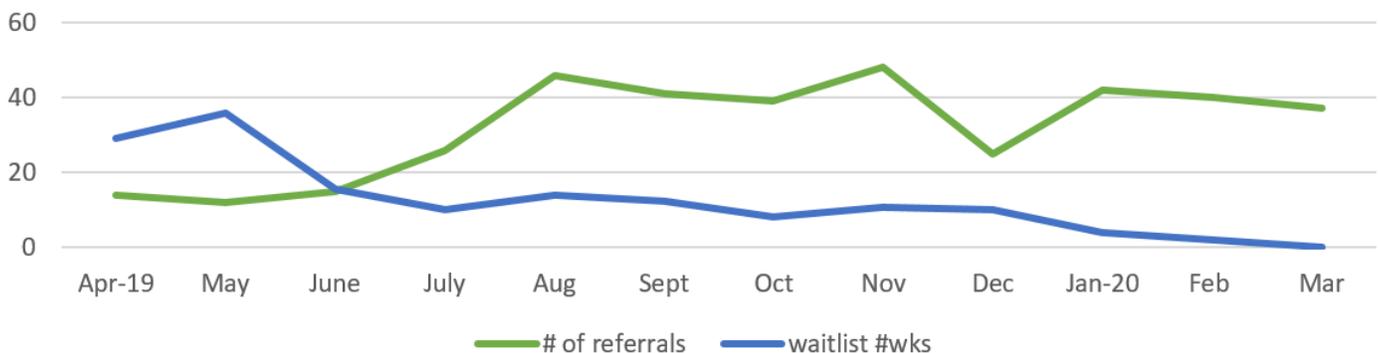
HIGHLIGHTS

- Helped 63 people apply for addictions treatment!
- Served 1,415 people with individual and/or counselling services this year!
- CCS team had a total of 2,543 counselling sessions over the year!
- Received a total of:
 - ✓ **301 adult request for services**
 - ✓ **30 Senior/Elder request for services**
 - ✓ **33 (13-18yrs) youth request for services**
 - ✓ **31 child (6-12yrs) request for services**
- Went from 29 week waitlist for access to counselling services in April 2019 to 0-48hrs wait time to see a counsellor by April 2020! Thanks to team planning and stepped care program framework for shifting approach to provide quicker access to services!



PERFORMANCE INDICATOR

NO. OF CLIENT REFERRALS RECEIVED & LENGTH OF TIME TO GET ACCESS TO COUNSELLING SESSION



COMMUNITY COUNSELLING SERVICES (CONT.)

PARTNERSHIPS

Internal

CCS supports all HRHSSA departments when requested in areas of staff and/or client mental health and/or addictions. Notable internal collaborations over the year are:

- Group & individual support and staff mental wellness room set-up as part of COVID-19 care being pro-active for prevention of burn-out, vicarious trauma and moral injury during pandemic situation.
- Working with nurse educator & Director Client Services for Suicide Risk Assessment implementation at points of care. This was part of NTHSSA framework for transformation into recovery-focussed practice. Also providing trauma-informed training and Q & A sessions with staff to meet mental health and addictions needs of northern clients. This also aligns with Truth and Reconciliation Commission Calls to Action.
- CCS & Public health provide “Purple Door” outreach services in the high school
- Works closely with speciality clinics for psychiatric care of clients
- Collaborate with social services on client cases for children, families, and/or adult services

External

- Work alongside NTHSSA CCP program Manager & GNWT DHSS Mental & Addictions Services for territorial initiatives in quality mental health and addictions services in NWT. Clinical Supervisor & 1 MHC on territorial mental health crisis response team.
- DJSS – 1.5 days/week to outreach on-site for youth to get “drop-in” as or when needed support
- Soaring Eagle Friendship Centre – outreach “drop-in” 2 afternoons per week & collaborate on community wellness initiatives
- Inter-agency committee for community wellness planning and events & updates
- Partnership Town of Hay River for community meditation once a week. PHAB (Physical literacy, Health, Art & Beauty) & RAD (Really Awesome Dudes) youth program activities
- Community Wellness Workers collaborate with local AA groups to provide remote access to meet during COVID-19
- Community Wellness Workers work with addictions treatment facilities for treatment applications & client after-care
- Partnership with GNWT Justice to provide 8 week Domestic Violence Treatment Option program for NWT mental health court diversion option.



HEALTHY FAMILIES PROGRAM

HIGHLIGHTS

Healthy Family Program Renewal: is a two-year project to review and renew the Healthy Family Program. The Healthy Family Program is run by the Government of the Northwest Territories. The curriculum itself focuses on:

- Renewal project is presently in Phase 2.
- Growing Great Kids will no longer be the core of the NWT Healthy Family Program but resources may be used.
- Hay River will be one of two NWT sites to pilot the new child development curriculum.
- Renewal project seeks to center Dene, Metis, and Inuvialuit parenting practices and to shift towards a culturally relevant and community centered program. The program also seeks to remain inviting and culturally relevant to all parents and families, including newcomer Canadians.

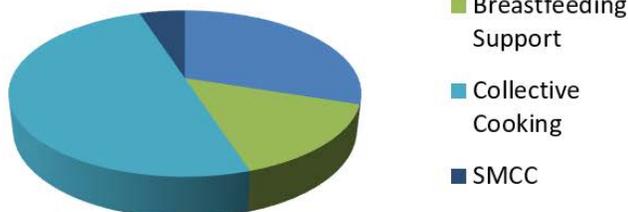
The Healthy Family Program Oversight Committee as well as an Indigenous Advisory Body have been providing guidance and oversight to the HFP Renewal project.

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.

Moms, Boobs and Babies is a program that originated in Yellowknife to help new mothers and mothers to be with breastfeeding support and skills. This year we hosted our 1st Breastfeeding Support Training in February with our Healthy Family Partners in Fort Smith! We had 10 families participate and 2 Fort Smith Healthy Family Program Staff for the week long training.

PERFORMANCE INDICATORS

**Participation in Programs
2019/2020**



PARTNERSHIPS

New Partnerships:

• Territorial Lead, Prevention and Preservation Services, NTHSSA: Larissa has been an amazing addition to the Department to the Healthy Family Programs Territorial Wide. Her experience as a HFP Home Visitor and also the experience of being with the program since its early stages has greatly assisted the HFP to where it is today. Since 2019, Larissa has brought back monthly and during Covid-19 even weekly HFP conference calls to keep us connected and to help prepare us for the upcoming HFP Renewal Process.

• Healthy Family Program Staff & Managers (NWT WIDE): the most valuable partnerships we have developed over the past year has been with our own Healthy Family Program NWT Wide Team of Workers, Managers and Supports. It has been an amazing experience to also be on the same page as all other HF Programs across the north, be able to meet in person at least three times this past year and to strengthen our bonds as a unit, especially going into our next phase of our project renewal.

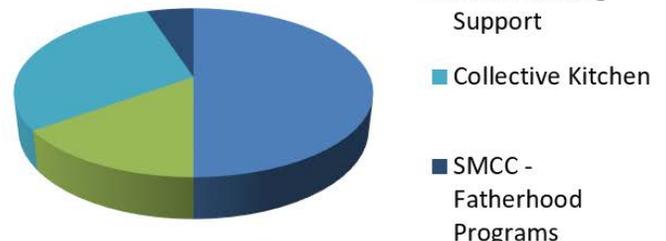
• Fort Smith Healthy Family Program: HRHSSA Healthy Families has a special relationship that goes way back with the Fort Smith Staff. We have been talking for years about collaborating and in February 2020, we finally were able to travel to Fort Smith to host our 1st Moms, Boobs and Babies: Breastfeeding & Peer Support Training Group to the community. It was so fun to meet the families of a neighboring HFP Community and collaborate with the staff and community as a whole. We plan (if safe) to host again this year! With Zoom being so popular, we also plan to host to families and staff across the north to other partnerships if possible.

Continued and Most Valuable Local Partnerships:

HRHSSA: Midwifery, Public Health, Social Services, Community Counselling, Medical Clinic

Hay River: Centennial Library, Tree House, SMCC, K'atl'odeeche First Nation, Friendship Centre, Hamlet of Enterprise, West Point 1st Nation

**Projected Participation
2020/2021 Fiscal Year**



SOCIAL SERVICES

In accordance with the GNWT Child and Family Services (CFS) Act of the NWT, Social Service provides Child Protection Services to an area including Hay River, West Point First Nation, Katlodeeche 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.

Child Protection Workers (CPW) 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

- Newly hired Community Social Service Worker started her job on April 1, 2019, attended her CPW appointment training at the NTHSSA in June, and completed her job shadow with different workers as that was part of her CPW pre-core training module.
- All Social Services staff attended and participated at the NTHSSA-CFS training on the clinical supervision model that NTHSSA has implemented since November 2019 to improve the quality of CFS work and to support CFS staff.

- Since NTHSSA have been conducting quarterly review of the CFS, there have been a significant improvement in all sections of the CFS practices. NTHSSA also praised the work completed by the Hay River office.

- Social Services nominated two young adults for the Scotia Capital Stay in School Awards on the Foster Family Coalition of the NWT website. The Stay in School Program came about through a financial donation by the Scotia Capital Fund to the Children's Aid Foundation in Toronto. It is meant to recognize perseverance and tenacity of students in school despite social challenges, risk or disadvantages. Both students received a Certificate of positivity and "staying in school" as well \$300 to recognize their hard work and determination.

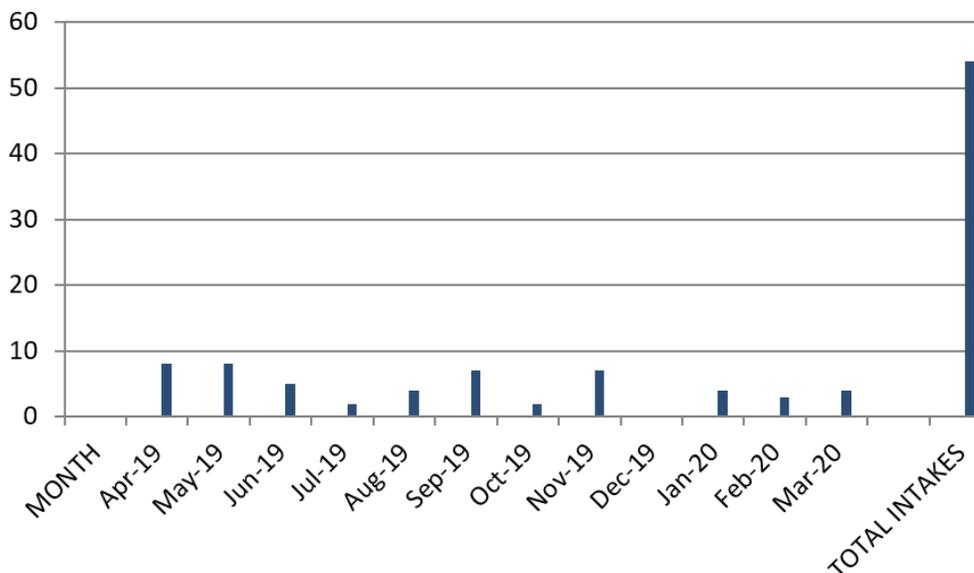
- October 12-18 of this year was the annual "Foster Parent Appreciation Week" for the Northwest Territories. On October 18, HR Social Services hosted a movie day at the theatre, filled with pizza, cake and some other yummy treats. This annual event not only allowed for us to formally share with our foster parents how grateful we are for them, but community members that we work with were also invited to share in the fun and appreciation.

- Social Services team staff explored about the importance of visualization management, and how we can achieve it in the Kanban way! The VMB has been created with the clear short, long term and HRHSSA strategic goal and now it is on the wall for the staff and public view.

PERFORMANCE INDICATORS

SUMMARY OF ADULT INTAKES

54 ADULT INTAKES



- 5** Extended Family Foster Home Placements
- 5** Regular Foster Care Placements
- 10** Total Active Placements

ENGINEERING SERVICES

HIGHLIGHTS

July / August, 2019 – Relocate and consolidate various departmental inactive files from HH Williams to new location at old Medical Clinic. This project entailed the enhancement of internal security, construction and installation of appropriate shelving and physical relocation of files.

August, 2019 – Reconstruction of Emergency Entrance at HRHC: Due to undue congestion of the Emergency Entrance and respective parking lot, a need was identified to redesign with better traffic flow in mind. An additional 1-way ambulance approach was added intended to eliminate the need for ambulances to make hard 180 degree left turn to enter Ambulance Bay. Upon departure, ambulances exit via existing 2-way emerg. access. Island shrubbery bed was eliminated as this was not practical given size of parking lot.

May / June, 2020 – Relocation of Public Health, Social Services, and Home Care Departments from lower floor in old section of HH Williams to former Acute and Extended Care wings on main floor. Due to the age and inefficiency of the mechanical infrastructure of the previous location, it was determined that this would be a more feasible location for these services while we await completion of new Offsite Services Facility to be located downtown.

PARTNERSHIPS

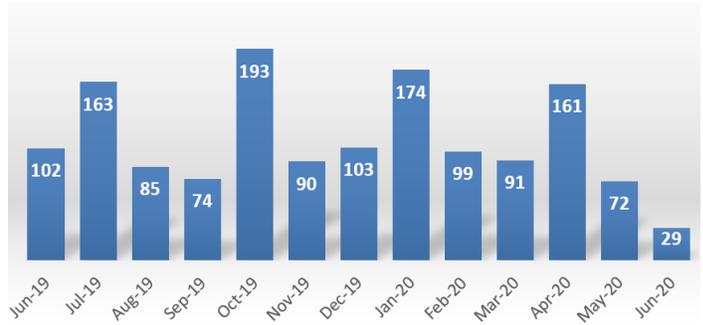
Currently the HRHSSA operates a fleet of 26 vehicles which has grown from 16, when the Authority came into existence in 2003. The timely maintenance of these vehicles is essential to ensuring the safety of the staff that operate them, as well as the reliability of services delivered to the public.

In maintaining this fleet, the Engineering Services Department, over the years, has forged some sound relationships with local businesses that have shown that they are able to meet our regular bi-annual service needs in a timely and efficient manner, as well as provide us insight into constructing a comprehensive preventative maintenance regime.

These types of rapport are established over long periods of time, and are essential in maintaining solid and mutually respectful business relationships within the community.

PERFORMANCE INDICATORS

MEX-OPS WORK REQUESTS COMPLETED



INFORMATION SERVICES & TECHNOLOGY

Medipatient upgrade

- NTHSSA has assigned a Senior Project Manager to coordinate the upgrades across all 4 locations (Inuvik, Fort Smith, Hay River and Stanton)
- Have built 2 new servers with Operating System only. Need Sequel Server software and license to proceed. Ticket to Technology Service Centre (TSC) requesting same.
- Testing new bug fixes. Planning for a March upgrade
- On hold pending COVID resolution

SLS phone system migration to Woodland Manor Mitel

- Starting planning for RFP to install fiber line between Pod data room and old Woodland Manor mechanical room to allow for phone traffic
- Preliminary planning in the works.
- Attempting to tie this in with the HHW office move project.

Regional Health Centre Building network.

- Continuing to segment traffic (vlan's) in order to provide better management and increased network traffic flow. (Staff and Guest WiFi completed)
- Looking to segment off the Closed Circuit Television and security systems next as time allows

NTHSSA

- Working in partnership with new Director of Informatics and Healthcare Technologies re:Territorial projects

ASCOM/Telligence Middleware upgrade project

- Needing to replace middleware software as it is out of

date/end of vendor support

- Preliminary work by vendor to prep hardware has started.
- 2 New Virtual servers have been built
- Reconfigure 6 ports on Datacentre switch stack to segment Ascom data

Upgrade VMWare infrastructure to version 6.5

- Stage one – upgrade of controlling server completed.
- Stage two – rolling upgrade of host servers – end of May/June
- Pending TSC Microsoft License process.
- Working with TSC to setup access to the Volume Licensing Centre

French Language

- A new program is being developed and will be rolled out within the next couple of months. This is driven by the GNWT leads on the project.

Exploring utilizing a digital signage system for the Foyer and Medical Clinic waiting areas. This may also tie into a request from Community Counselling to have a screen system as well.

GOALS ACHIEVED

Relocation of programs at H.H. Williams Memorial Hospital and switched to new phone system.

Ascom Upgrade project

MATERIALS MANAGEMENT

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

This year we starting booking our travel online instead of using the quick tickets.

The new process has been great for both the client traveling and our department it is speedy to use and user friendly.



PARTNERSHIPS

Working together with the NTHSSA Shared Services on tenders to be posted and awarded for the Authority.

We have also been working together with our territorial partners for the supply and demand of the PPE products.

DIETARY

HIGHLIGHTS

Education and Training - Infection Prevention and Control core competencies

Dietary Catered the Long Service Awards "Appetizer evening" The Staff put on a beautiful spread and the night was a huge success.

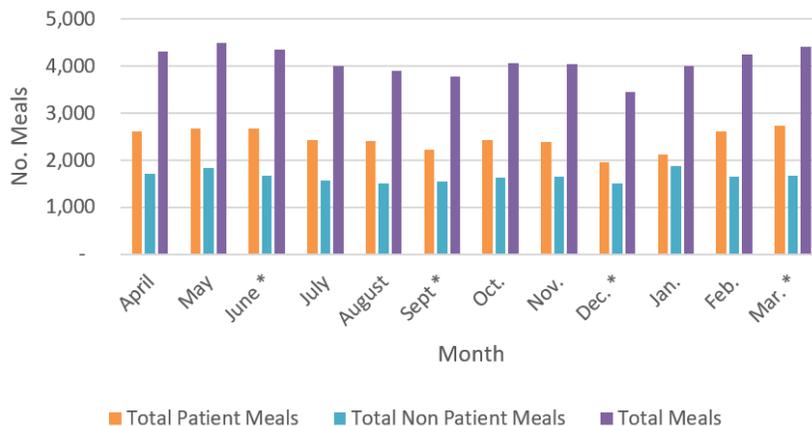
Dietary prepared Donations from the community and made treats for Front Line Staff Workers within the Authority. Healthy Snacks we distributed at every Facility.

Traditional foods program is being developed and we will be able to provide at least one meal a week in the Long Term Care facility from donations of locally caught game.



PERFORMANCE INDICATOR

MEALS PREPARED



HOUSEKEEPING

HIGHLIGHTS

Education and Training - IPAC Infection prevention and Control core competencies

Prepared for operational changes throughout facility, for example Dialysis expansion and Pandemic Planning

Laundry Department has worked above and beyond to keep up with the demand working extra shifts over the weekend to accommodate high patient loads.

PERFORMANCE INDICATOR

LAUNDRY LOADS



HUMAN RESOURCES

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

HIGHLIGHTS

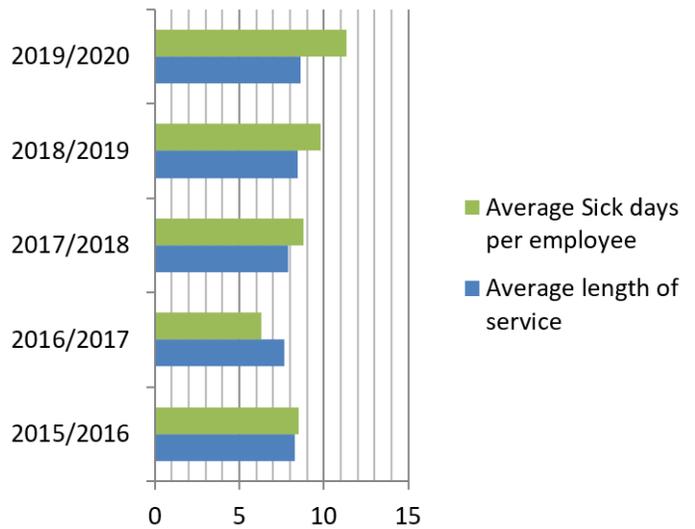
- Ratification of the Collective Agreement
- Addition of a new Physician Administration position within the department
- Kudos received from the Accreditation Surveyors on the department focus on strengthening overall engagement in the HRHSSA

PARTNERSHIPS

- Participation on the Nursing Recruitment and Retention Committee with our Territorial Partners
- Participation on the Long Term Care Planning Committee with our Territorial Partners
- Participation on the new Mental Health in the Workplace Sub Committee in partnership with the Union and the OH&S Committee
- Participation with the Worklife Pulse Committee for Accreditation
- Continual partnership building with the PracticeNWT team in the GNWT



PERFORMANCE INDICATORS



QUALITY 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.

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.

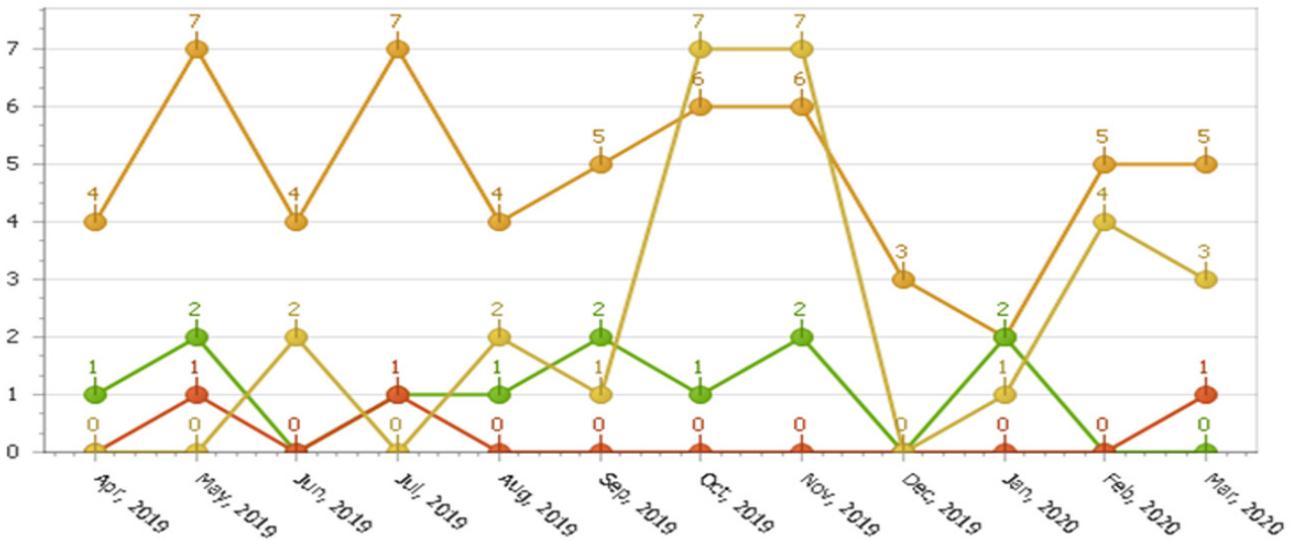
HIGHLIGHTS

- Successful Accreditation survey
- Rolled out the electronic incident management system RL6

PERFORMANCE INDICATORS

SAFETY SECURITY INCIDENTS

Client safety is continuously monitored through the reporting process. It is done to improve client safety, reduce risks and increase quality of service to the clients.



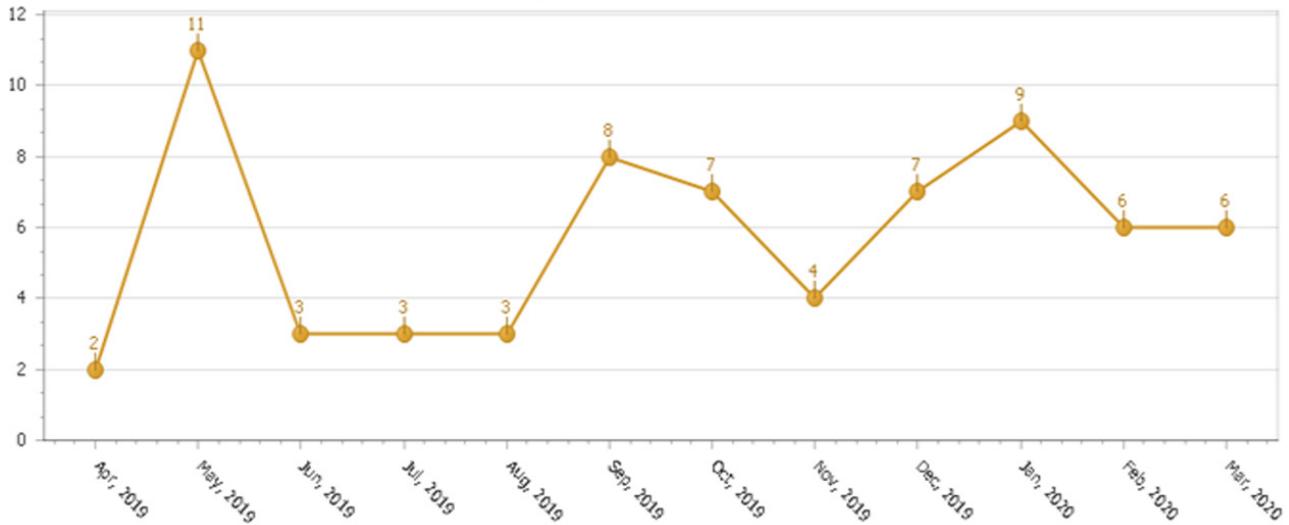
98 safety and security incidents

TRENDING: 75% of the safety & security incidents were from various areas such as: client smoking in their room, a friend tried to lift a client, to medication room left open.

- 7.3% Client Care
- 8.3% Elopement/Against Medical Advice (AMA)
- 8.6% Resident to Resident disagreement

EMPLOYEE INCIDENTS

Employee incidents directly relate to the HRHSSA staff. These incidents fall under the OH&S policies & procedures, Harassment Free & Respectful Workplace etc. and can be things like back injuries from lifting someone in their bed, slipping on ice coming into work.



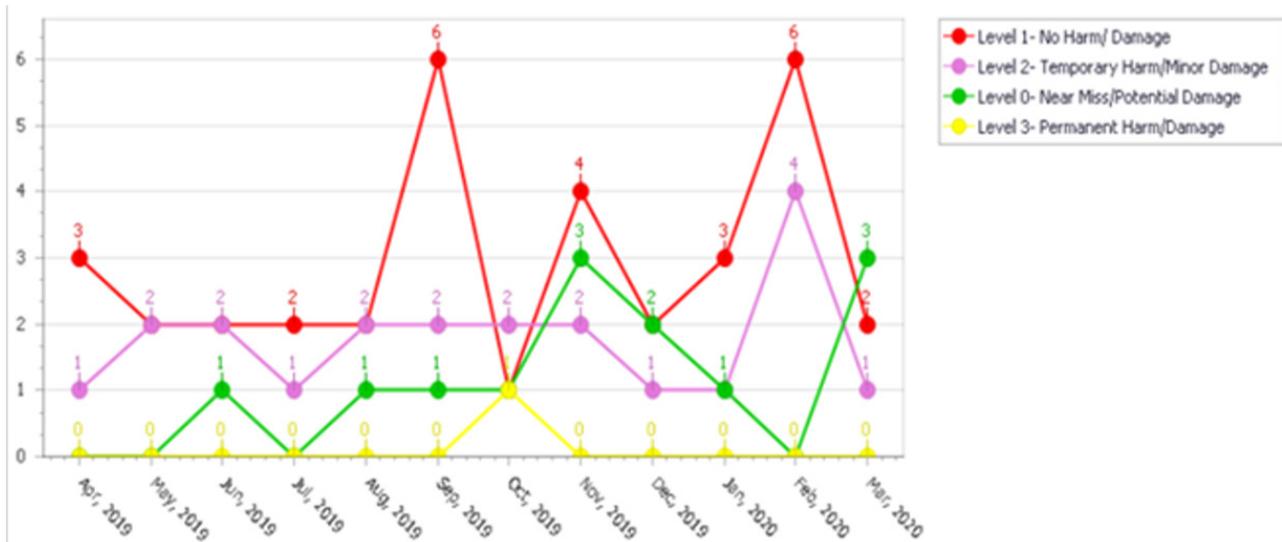
96 safety and security incidents

TRENDING: Client/patient violence/inappropriate actions made up the largest number of employee incidents at 53.1%.

QUALITY INITIATIVES: A working group was tasked to work on violence/aggression against staff, 37.5% of the trending incidents.

FALLS

Fall incidents are documented when a client, patient or resident has a fall. HRHSSA has a Falls Prevention Injury Reduction policy and this data is collected and managed to ensure we are meeting the objectives of this policy.



Falls were the cause of 60.6% of all injury-related hospitalizations, and more than three quarters of all in-hospital death in those admitted for injury, according to the Canadian Institute of Health Information. Research suggests that falls are the direct causes of 95% of all hip fractures, leading to death in 20% of the cases. Between 20%-30% of seniors fall every year. The majority of falls related to hospitalizations amongst seniors were associated with hip fracture.

70 fall incidents in the 2019/20 fiscal year.

TRENDING: 76% of the falls in the last quarter were in Continuing Care.



**For more information about our programs and services,
please visit www.hrhssa.org or call (867) 874-8100.**