Health PEI BUSINESS PLAN

2022-2023



Health PEI

Prepared by:

Policy, Planning and Evaluation

Published by:

Health PEI PO Box 2000 Charlottetown, PE Canada C1A 7N8

April 2024

Printing:

Document Publishing Centre

Available online at:

www.healthpei.ca

Printed in Prince Edward Island



Photo: Big Pond, Prince Edward Island

Table of Contents

Message from the Interim Chief Executive Officer	I
2021-2024 Strategic Direction – At a Glance	2
Introduction	4
Accountability Framework Legislative Responsibilities Leadership Accountability Performance Measurement and Reporting	4 5 5 5
Canadian Quality and Patient Safety Framework for Health Services	6
Strategic Goals Strategic Goal #1: People Strategic Goal #2: Quality and Safety Strategic Goal #3: Access and Coordination Strategic Goal #4: Innovation and Efficiency	7 7 10 13 16
Budget and Resource Summary	19
Appendices Appendix A: Performance Management Appendix B: Organizational Structure	20 21 22
References	23
Acronyms	23

Message from the Interim Chief Executive Officer



Corinne Rowswell
Interim Chief Executive Officer

On behalf of Health PEI, I am pleased to present the 2022-2023 Health PEI Business Plan. This plan aligned with our strategic goals of *People*, *Quality and Safety*, *Access and Coordination*, and *Innovation and Efficiency*.

The 2022-2023 Business Plan outlines where we focused our efforts over the year to support the wellness and safety of staff, develop a culture of quality in Health PEI, implement innovative ways to deliver care leading to increased access and support our staff to provide person-centered care across the province.

In 2022-2023 we shifted from our primary focus of COVID-19 and back to our regular operations in the midst of our continued challenges including staff shortages, complex patient needs and increased wait times. To move forward and make progress towards our vision of *Healthy Teams*, *Healthy People*, *Healthy Island Communities*, we will continue to work with and support our health care team and Islanders.

Respectfully submitted,

Corinne Rowswell
Interim Chief Executive Officer

Strategic Plan 2021-2024 At a Glance

VISION

HEALTHY TEAMS, HEALTHY PEOPLE, HEALTHY ISLAND COMMUNITIES



MISSION

OUR VALUED HEALTH TEAM
WORKING WITH ISLAND COMMUNITIES
TO DELIVER INCLUSIVE, INNOVATIVE AND
PERSON-CENTERED HEALTH CARE TO ALL

VALUES



CARING

WE TREAT EVERYONE WITH COMPASSION, RESPECT, FAIRNESS AND DIGNITY.



INTEGRITY

WE COLLABORATE IN AN ENVIRONMENT OF TRUST, COMMUNICATE WITH OPENNESS AND HONESTY, AND ARE ACCOUNTABLE THROUGH RESPONSIBLE DECISION MAKING



EXCELLENCE

WE PURSUE CONTINUOUS QUALITY IMPROVEMENT THROUGH INNOVATION, INTEGRATION AND THE ADOPTION OF EVIDENCE-BASED PRACTICE.



DIVERSITY

WE RECOGNIZE AND VALUE
THE DIFFERENCES OUR TEAM
AND OUR LOCAL COMMUNITY
BRINGS TO THE ORGANIZATION
THROUGH THEIR DIVERSITY IN
BACKGROUNDS, EXPERIENCES,
CULTURES AND BELIEFS.

929

PEOPLE

ESTABLISH A HEALTHY, SAFE AND HIGH-PERFORMING WORKPLACE THAT SUPPORTS AND DEVELOPS OUR PEOPLE.



QUALITY & SAFETY

INTEGRATE QUALITY AND PATIENT SAFETY INTO THE CULTURE OF THE ORGANIZATION.



ACCESS & COORDINATION

PROVIDE QUALITY, EQUITABLE AND PATIENT-FOCUSED CARE ACROSS THE PROVINCE.



-<u>`</u>(<u>`</u>}

INNOVATION & EFFICIENCY

DEVELOP NEW AND
INNOVATIVE APPROACHES TO
IMPROVE EFFICIENCY
AND UTILIZATION OF HEALTH
CARE RESOURCES.

ENABLERS

GOVERNANCE AND ACCOUNTABILITY • EVIDENCE-BASED • COMMUNICATION • TECHNOLOGY



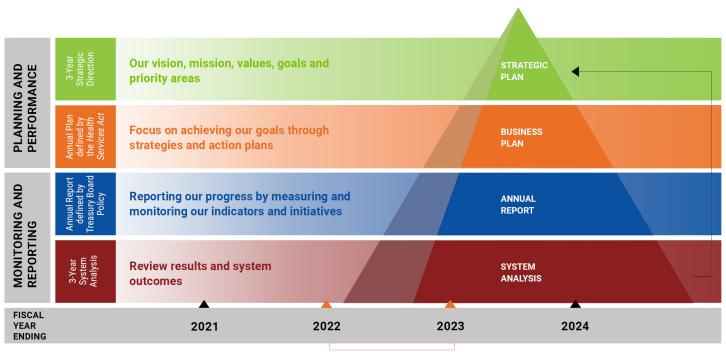
Introduction

The 2022-2023 Business Plan outlines how resources allocated in Health PEI's current budget will support progress on priorities defined in the organization's three-year strategic plan.¹ This document provides information on key actions for 2022-2023 for each of Health PEI's strategic goals. The business plan supports Health PEI's legislative reporting and accountability requirements to the Prince Edward Island (PEI) Legislative Assembly, the Minister of Health and Wellness and the public.

The submission of this report to the Minister of Health and Wellness satisfies legislative requirements outlined in the *Health Services Act*² and the *Financial Administration Act*.³ The business plan is also developed and communicated pursuant to Accreditation Canada's QMentum Governance and Leadership Standards.^{4,5}

Accountability Framework

The business plan is developed to align with the Government of PEI's financial commitments to Health PEI in support of key priorities to enhance care in PEI and support staff and physicians. To support risk management, the business plan strengthens Health PEI's accountability, guides effective management of resources and enhances its ability in developing, monitoring and reporting system performance.



Current Business Plan Year

Accountability Framework

Legislative Responsibilities

Health PEI is a crown corporation responsible for the operation and delivery of publicly funded health care services in PEI.

In accordance with the *Health Services Act*,² the Health PEI Board of Directors sets the strategic direction for Health PEI within the parameters of the Act and subject to direction from the Minister of Health and Wellness. The *Accountability Framework*⁶ between the Department of Health and Wellness (DHW) and Health PEI supports maximizing the potential of the PEI health care system by outlining the accountability relationship, roles and responsibilities and performance objectives of each organization in the delivery of care in PEI.

Health PEI works closely with the DHW to align planning and funding for service delivery. The new investments and initiatives highlighted within this business plan reflect strategic actions to support the accomplishment of health system priorities.

Through the Board Chair, the Board is accountable to the Minister for the management and control of Health PEI as established in the Act. The Board is connected to the operational organization, its achievements and conduct through the Chief Executive Officer of Health PEI. Health PEI operates programs and services throughout PEI in both acute care and community settings.

Leadership Accountability

The following processes are in place to monitor progress on the implementation of new investments intended to support the advancement of Health PEI's strategic priorities: the development of the Health PEI Business Plan (start of fiscal year); and Health PEI Annual Report (end fiscal year); review of the organization's Audited Financial Statements; and the submission of regular status updates to the Health PEI Executive Leadership Team (ELT), Health PEI Board of Directors and the DHW. Public reporting is directed by both legislation and Treasury Board policies.

Performance Measurement and Reporting

Members of Health PEI's ELT are responsible for the investments described throughout this business plan. To maintain accountability, a detailed planning, monitoring and reporting process is used to provide regular detailed updates to leadership. This allows Health PEI to identify where the issues and delays are, what is working well, what can be improved, and where efforts and resources need to be refocused.

Health PEI utilizes financial and non-financial data to provide a comprehensive overview of performance measurement. Regularly reviewed and analyzed system performance indicators linked to the 2022-2023 Business Plan are provided in Appendix A. These indicators provide an overview of Health PEI's performance in relation to its mandate as the provincial health authority and its three-year strategic plan.

System performance indicators linked to the 2022-2023 Business Plan are provided in Appendix A.



Canadian Quality and Patient Safety Framework for Health Services

Health PEI has aligned its work with the *Canadian Quality and Patient Safety Framework for Health Services* to embed and recognize the importance of quality and safety in all aspects of the organization's work.⁷ Linkages to the goals of the quality and safety framework are denoted throughout this document by the following areas:



The following pages include a section for each strategic goal outlining a goal statement, linkage to the *Canadian Quality and Patient Safety Framework for Health Services*, priority areas and potential actions for 2022-2023.

Strategic Goal #1

People

Priority Areas

Health PEI needs to focus on these areas to achieve its strategic goals:

Strategic Direction

- Establish a multi-year People Strategy to attract and retain a highly skilled, high performing and engaged workforce for Health PEI.
- Ten priority areas have been identified through the People Strategy:
 - 1. Organizational Culture and Engagement
 - 2. Equity, Diversity and Inclusion
 - 3. Human Resources (HR) Service Excellence
 - 4. Occupational Health, Safety and Wellness
 - 5. Talent Management
 - 6. Classification and Compensation
 - 7. Talent Acquisition
 - 8. Workforce Planning and Modernization
 - 9. Employee and Labour Relations
 - 10. Communication and Recognition

Talent Management

- Attract and retain a skilled and high-performing workforce for Health PEI.
- Support professional development to enable leadership and staff to experience career growth, satisfactory professional practice, success in the workplace and overall satisfaction.

Improve staff wellness and safety

- Create a safe workplace where staff are supported by the appropriate resources, equipment, training and tools.
- Develop a healthy and respectful workplace where staff are supported by opportunities for collaboration, regular staff recognition, engagement and communication between all levels of the organization.

Establish a healthy, safe and high-performing workplace that supports and develops our people.

Linkage to the Canadian Quality and Patient Safety Framework for Health Services



Accessible Care



Appropriate Care



Safe Care

Effective and efficient HR planning and processes

- Provincial approach to HR planning
- Needs-based and data-driven HR planning
- Streamline and standardize HR processes

Key Actions to take place in 2022-2023 include:

Organizational Cuture and Engagement

 Launch an organizational employee engagement survey program with a full survey and pulse survey in alternate years. Create and execute on action planning in response to survey results and utilize pulse survey to ensure action planning efforts are obtaining desired results.

Equity, Diversity and Inclusion

- Work with government and equity seeking groups across PEI to understand the current landscape of equity, diversity and inclusion at Health PEI.
- Plan equity, diversity and inclusion survey.

HR Service Excellence

 Review and revise HR structure to ensure effective leadership and oversight. Move from geographically based approach to functional approach.

Occupational Health, Safety and Wellness

- Establish a wellness committee to focus on wellness across the organization. Initiatives include: distribution of Healthcare Guardian Kits, massage chairs/relaxation space for health care workers and the Before Operational Stress Program.
- Creation and implementation of two Occupational Health and Safety Provincial Programs: Musculoskeletal Injury Prevention and Employee Health.
- Development of a Respiratory Protection Program for the organization, including guidance for all types of respirators and medical consideration for use.
- Continuation of the Safety Talks Program for the organization sharing knowledge, preventing incidents and enhancing the safety culture.
- Establish a team to develop a Return to Work Program supporting health care workers with the aim of prevention.

Talent Management

- Continue to create and support a Talent
 Management department within HR providing
 focus on leadership development, succession
 planning, performance management, talent
 acquisition and compensation. Positions to
 support this work will include a director of talent
 management, a compensation lead, a student
 coordinator, project managers, employee
 experience lead and administrative support.
- Support of leadership development through leveraging internal subject matter experts to present key and relevant course content and facilitated leadership discussions to encourage peer-to-peer learning and exchange of ideas and best practices.

Compensation and Classification

 Continue to work with the Public Service Commission to improve the classification process.

Workforce Planning

- Establish a Workforce Stabilization Committee to focus on ways to stabilize the Health PEI workforce by considering hiring practices, full-time equivalent (FTE), full-time/part-time ratios, and so forth.
- Automation of HR workforce related metrics and reporting with RStudio to promote use of metrics and analytics in people-related decisions.
- Participation in national surveys regarding health HR data (Canadian Institute for Health Information and HealthCareCAN, Statistics Canada and others).
- Provide regular reporting to the ELT, the Board, and Government.
- Work with the DHW and Health Intelligence to create a Provincial Clinical and Preventative Services Plan for Health PEI (Doing Things Differently and Better).
- Provide project management and support of Candidate Gateway and PeopleSoft Self-Service rollout across Health PEI.

Employee and Labour Relations

- Support the timely negotiation of collective agreements taking a strategic lens that addresses the human capital needs of the organization. PEI Nurses Union in progress and planning underway for International Union of Operating Engineers and Union of Public Sector Employees.
- Support the resolution of all labour relations issues including, but not limited to, grievances, arbitrations, respectful workplace complaints and human rights complaints.
- Support leaders and health care workers to effectively deal with conflict, complaints and people-related issues.
- Provide training through Cox & Palmer to leadership on the interpretation of application of collective agreements and labour relations practices.

Talent Acquisition

- Work with strategic partners such as the Public Service Commission and the DHW to create a more efficient and effective hiring process while continuing to recruit to fill vacant positions.
- Develop and execute a program to recruit internationally educated nurses.

Communication and Recognition

- Establish regular Leadership Forums to provide updates and training to Health PEI leaders.
- Improve Recognition Program by implementing staff benefits and discount deals with local businesses.

Strategic Goal #2

Quality and Safety

Priority Areas

Health PEI needs to focus on these areas to achieve its strategic goals:

- Embed understanding and prioritization of quality and impacts on patient care throughout the organization.
- Prepare, host and participate in Accreditation Canada on-site surveyor visit.
- Create a person-centered environment that fosters respect and safety to improve patient experiences and outcomes.

Integrate quality and patient safety into the culture of the organization.

Linkage to the Canadian Quality and Patient Safety Framework for Health Services



People-Centered Care



Safe Care



Appropriate Care

Key Actions to take place in 2022-2023 include:

Accreditation

- Continue preparation for Health PEI's 2022 accreditation survey and site visit (June 12-17) including:
 - Development and distribution of resources and supporting documents for staff such as: Required Organizational Practices of the Week and Did You Know packages (one-page snapshots on various accreditation, quality improvement and patient safety topics), monthly updates for Quality Improvement Teams (QITs) on preparation and what to expect during the on-site survey week, Accreditation 101 presentations and toolkits, mock tracer templates and quarterly Quality and Patient Safety newsletters.
 - Conducting pre-survey work including gathering extensive lists of evidence and submitting to Accreditation Canada.
 - Holding mock survey meetings with Leadership QIT and the Health PEI Board of Directors.
 - Supporting leadership preparation on Leadership and Governance Standards and work plan development with Leadership QIT and the Health PEI Board of Directors.
 - Developing communication strategies to support accreditation preparation and share accreditation results.
 - During on-site survey week, surveyors to meet with staff, physicians, clients/patients/ residents, families, community partners, leadership and the Health PEI Board of Directors.
 - Organize two virtual debriefs at end of survey (one for all staff; one for leadership).
 - Following the survey and development of a draft report, provide feedback to Accreditation Canada on the draft report.

 Conduct follow up as part of maintaining accreditation status – evidence submission in December (2022), workplan and action plan development from results (September 2022).

Quality Improvement Team (QIT) Evaluation Survey

 Implement a survey with QIT members to review the QIT structure and identify approaches to strengthen quality improvement within Health PFI

Policy Development and Implementation

- Update key organizational Health PEI policies: Patient Safety Incident Quality Review and Quality Improvement Activity Policy; Patient and/or Family Experience Feedback Policy (replacing Compliments and Complaints Policy); Disclosure of Patient Safety Incidents Policy and Patient Safety and Environmental Incident Reporting and Management Policy.
- Patient Safety and Environmental Incident Reporting and Management Policy Education Strategy:
 - o In support of the knowledge acquisition necessary to be in compliance with these changes, the Quality and Patient Safety (QPS) Division will offer inperson and virtual education to all health care leaders (December 2022 May 2023). Education will focus on retraining/informing leaders of the new policy, with a focus on their roles and responsibilities in incident management.
 - Update and post learning modules on Health PEI's Staff Resource Centre. These two modules will be updated to support the use of Health PEI's Provincial Safety Management System (PSMS):
 - PSMS Part 1 intended for all staff; focuses on the basics of incident reporting.

- PSMS Part 2 intended for health care leaders; focuses on principles of incident management, expectations on follow up, etc.
- Develop other educational presentation videos for staff:
 - > Documentation Standards
 - Narcotic Safety (co-developed by provincial pharmacy)
- Continue having quality and patient safety staff meet regularly with unit/department managers to coach/support incident management and promote a Just Culture.
- Implementation of a new process as per Patient Safety and Environmental Incident Reporting and Management Policy to review all level 4 and 5 patient safety incidents by performing a complete chart review, gathering and sharing the chart review, concerns and potential recommendation with senior program leaders.

Risk Management/Patient Safety

- Management of numerous patient safety incidents, human rights claims, statement of claims, investigations by the Office of the Child and Youth Advocate and OmbudsPEI.
- Continue to provide risk and patient safety lens on various program's policy reviews/ development, active complex patient cases and organizational system issues.

Ethics

- Host annual ethics workshop during Ethics Week (November) with virtual sessions facilitated by bioethicist from the Nova Scotia Health Ethics Network.
- Revise tools and key documents including standard operating procedures for the Health PEI Clinical and Organizational Ethics committee and ethics framework poster.
- Hold education sessions with frontline staff, QITs and leadership to provide information and discuss ethics and hold tabletop exercises.

 Launch a new electronic research ethics portal/ software system.

Person and Family-Centered Care (PFCC)

- Develop staff education on how to engage and include patient and family partners on QITs and committees, including increasing staff awareness of PFCC principles and practices and providing education and tools that will encourage staff to engage patient and family partners as equal members of their teams.
- Develop a Staff Education and Engagement Framework to support leadership and staff orientation to principles of PFCC through education modules.
- Provide quarterly staff PFCC updates.
- Profile examples of PFCC in action at health sites across the system through approaching current patient and family partners to share their stories around why they became patient and family partners.
- Conduct ongoing recruitment of patient and family partners for participation on QITs.
- Continue to profile the work of patient and family partners through print, broadcast and social media channels.
- Engage nursing students in a project to support staff and their patient and families in creating an optimal patient experience. Working to select pilot sites for implementation over six months with ongoing engagement of nursing students and other key partners.
- Incorporate PFCC in service procedures by mapping out the patient experience in service flow maps.
- Work with Lennox Island First Nations and the Abegweit First Nations in the development of an Indigenous Health Navigation Program.

Strategic Goal #3

Access and Coordination

Priority Areas

Health PEI needs to focus on these areas to achieve its strategic goals:

Primary Care

- Increase access to primary care services and enhance delivery of care.
- Transition toward team-based care to provide integrated and coordinated care.
- Support patient transitions between different levels of care and programs: enhance and integrate community-based care.
- Embed innovation and virtual care to enhance access, team-based care, integration and collaboration.

Mental Health and Addictions (MHA)

- Integration of MHA within the health system to reflect evolving patient needs and approaches to care.
- Increase access to MHA services and manage transitions in care.
- Optimize community-based supports to provide care in the community and support the acute care system.
- Continued focus on Master Programming and replacement of Hillsborough Hospital with new MHA campus.

Seniors Care

- Provide care at home and closer to home: Support individuals to stay at home (e.g., increase access to community-based supports, home care, supplies, etc.) or receive care closer to home.
- Transitions of care Hospital to Home: Support individuals in their transition to home and re-integration into the community after care.
- Enhanced care capacity for long-term care (LTC) residents: improvement of organizational practices and processes to better support residents and staff.

Provide quality, equitable and patient-focused care across the province.

Linkage to the Canadian Quality and Patient Safety Framework for Health Services



Accessible Care



Appropriate Care



Integrated Care

Key Actions to take place in 2022-2023 include:

Primary Care

- Continue implementation of the Primary Care Roadmap focusing on the provision of teambased care through the establishment of patient medical homes (PMH) and neighbourhoods. To support this collaborative, team-based model, continue establishment of PMH with new positions including physicians, nurse practitioners (NPs), registered nurses (RNs), licensed practical nurses (LPNs), medical secretaries, dietitians, social workers, physiotherapists and pharmacists. PMH teams work with a collaborative practice facilitator by completing self-assessments, preparing for quality improvement initiatives, plan for team composition and patient panels. Teams also work with the Primary Care team to plan for space and staffing needs.
- Establishment of two unaffiliated patient primary care access clinics in Charlottetown and Summerside to support patients without a primary care provider requiring an inperson appointment. Patients will have access to physicians, NPs and other health care providers.

Mental Health and Addictions

- Introduce the Mental Health Intensive Day Program which is a four-week program supported by a multidisciplinary team that provides a transitional step between acute care and community services, or an alternative to inpatient care.
- Establish the Women's Addictions Extended Care Program with full day and evening programming and the Structured Program on the new MHA Campus.
- Continue construction of the new MHA Short Stay Unit.
- Continue the design development phase for the new acute care facility (replacing Hillsborough Hospital) and the new Wellness and Transition buildings.

- Ongoing design of the Community Health Centres (MHA, primary care, and public health services) continues.
- Plan for the implementation of the One-At-A-Time approach, a strengths-based and goal-driven approach, within community MHA practices.
- Community MHA service providers to participate in training in Family-based Treatment for Eating Disorders.
- To support chronic and complex clients, work to secure funding for creating multidisciplinary Flexible Assertive Community Treatment Teams to provide client outreach.

Seniors Care

- Planning for the Home Care French Language Project to better support the provision of home care services in French. This project aligns services provided by home care with the Health Standards Organization's official language standards.
- Ongoing preparation for the implementation of the Home Care Transformation Project which includes a new electronic case management system for all client charts, electronic scheduling and a mobile app for staff to access a live chart.
- Development of a proof of concept for a Self-Managed Care Program for home care clients.
- Planning and development of a home care Medication Assistance Program to promote client independence and provide medication support as needed.
- Continue to work closely on the introduction of new health professionals into the home care program. This includes NPs, pharmacists and respiratory therapists to support home care clients in remaining at home safely, and returning from hospital to home as soon as possible.

Specialist Care and Community Programs

- Establishment of a new portfolio to oversee community-based services. This program will provide oversight for different services including, but not limited to, women's wellness, rehabilitation, orthoptics, virtual specialist clinics and gender affirming health.
- Support establishment of a Specialist and Telemedicine Clinic to provide timely, flexible and quality care to Island residents through virtual and inperson care from out-of-province physicians.

Acute Care

- To support care across the province, investments will also be made for hospital settings including:
 - Rehabilitation providers including physiotherapists, rehabilitation assistants, occupational therapists, medical secretaries, certified prosthetist/orthotist and speech language pathologists to support timely and safe discharges to LTC facilities or to home.
 - Clinical chemist to support various testing programs across the province.
 - Specialist physicians, including: a general surgeon, chronic pain management specialist, anesthesiologist, pediatricians, hospitalist and an obstetrician/gynecologist.



Strategic Goal #4

Innovation and Efficiency

Priority Areas

Health PEI needs to focus on these areas to achieve its strategic goals:

System Utilization and Efficient Patient Flow

- Develop safe, effective and timely transitions from hospitals to community settings (community-based care and home).
- Support safe patient transitions between different levels of care and programs: enhance and integrate community-based care.

Support the sustainability of the health system by building efficiencies across Health PEI through:

- Continued fiscal management.
- Application of strategic management framework including performance measurement.
- Appropriate system utilization.

Innovative Technology/Practices

- Implementation and expansion of digital health:
 - Virtual Care: Continued implementation and adoption of virtual care to support the continuity of care, optimize current delivery/ practices, and provide supports for Islanders and clinicians.
 - Electronic Medical Record (EMR):
 Operationalize EMR across the health care system.
 - Continued collaboration with the DHW, Information Technology Shared Services (ITSS) and Canada Health Infoway.
- Adoption of other innovative technologies and practices to support the continuity of care (including transition points), accessibility and efficiency.

Develop new and innovative approaches to improve efficiency and utilization of health care resources.

Linkage to the Canadian Quality and Patient Safety Framework for Health Services



People-Centered Care



Integrated Care



Appropriate Care



Safe Care

Key Actions to take place in 2022-2023 include:

Patient Flow

- Continue planning and implementation of initiatives to support bed utilization and develop a process to review and expedite appropriate discharges:
 - Update provincial diversion policy
 - Development of provincial bed closure policy
 - Update provincial overcapacity policy
 - Development of occupancy reports for LTC and MHA.
- Continue regular communication of Intensive Care Unit and COVID-19 admissions.
- Continue daily provincial bed huddles to review system pressures and capacity with representatives from different acute care sites.
- Continue development of Provincial Bed Management Standards and Provincial Patient Flow Guidelines to support consistency in the utilization of bed resources across the province.

Electronic Medical Record (EMR)

- Continue onboarding of community-based providers (family practitioners, community-based specialists, NPs and support staff) to the EMR which is an innovative health digital solution for recording patient information for community-based providers, and further builds upon PEI's vision of an integrated electronic health record.
- Develop a Provincial Prescriber virtual site within the EMR system to support ongoing COVID-19 services and the provincial prescription of Paxlovid.

Virtual Care

- Supporting and expanding virtual health care capacity across PEI:
 - Permanent virtual care coordinator and eHealth program lead positions will be created and staffed.

- Health information specialist position with assigned responsibility for virtual care will be staffed.
- Based on the patient and provider surveys and community forums, web and print educational materials will be developed to support patients and providers in the use of virtual care (e.g., how-to documents, preparing for virtual care sessions, tip sheets, templates, accessing support, etc.).
- Virtual Care Policy and general guidance document will be completed.
- Appreciative inquiry sessions will be held to support the development of a digital health literacy strategy.
- Report on outcomes from digital health literacy consultation process will be completed.
- Advancing virtual care capabilities:
 - The Virtual Care Project Coordination Centre and the Virtual Care Steering Committee will continue to support virtual care adoption by funding projects. Highlights will include:
 - > Support for virtual hospital projects in West Prince.
 - > Staff training available on Moodle.
 - Expansion of virtual bike around and virtual goggles into more LTC facilities.
 - > Expansion of the eReferral process for the smoking cessation program in use at Queen Elizabeth Hospital.
 - > Optimization of virtual visits for Renal Clinic.
 - > Enabling virtual care at Emergency Department Short Stay Unit.
 - > Remote patient monitoring client base expansion across the province.
 - > Cancer Treatment Centre virtual orientation.

- > An awareness campaign highlighting virtual MHA resources
- Collaboration on initiatives to advance virtual care:
 - Collaboration between ITSS, the DHW and the Virtual Care Project Coordination Centre on initiatives including:
 - Complete an assessment of point of care wireless service needs across the province to improve wireless connectivity in health care.
 - > Develop an implementation approach for secure messaging.
 - > Initial pilot to enable islanders to see their own personal health information through the Clinical Data Repository.
- Enhancing patient and provider experience using virtual care:
 - The Virtual Care Project Coordination Centre will host four virtual community health forums in the summer of 2022 to understand patient experience with virtual care.
 - The Virtual Care Provider Advisory Team will provide input on requirements related to virtual care and feedback on documents and web-based materials.
 - Establish a Virtual Care Patient and Family Partners Advisory Group to inform patient needs and preferences around virtual care and obtain feedback on documents and webbased materials being developed.
 - A patient and provider virtual care survey will be implemented.
 - Reporting on patient and provider experience with virtual care to be completed and resulting feedback themes compiled and communicated.
 - Patient and provider feedback to be provided to vendors to improve experience with virtual care (e.g., Maple).

- Unaffiliated virtual care coordinator position to be created and staffed to support patients without a primary care provider (e.g., navigating use of Maple application).
- Staffing to be completed for virtual care service supports to serve both public and health care provider virtual care inquiries and to advance the digital literacy of virtual care users.
- Support for digital health literacy:
 - All virtual care information and education materials developed at the Virtual Care Project Coordination Centre will be reviewed for plain language usage, readability and usability.
 - Bits and Bytes monthly webinar series will continue to educate about digital initiatives at Health PEI.
 - Presenting on patient experience and digital health literacy at Digital Health Canada Atlantic Region Conference.



Budget and Resource Summary

HEALTH PEI

	2022-23 Budget Estimate	2021-22 Forecast	2021-22 Budget
	\$	\$	\$
EXPENDITURE*			
CORPORATE SERVICES	20,885,000	17,871,500	16,357,800
FINANCIAL SERVICES	9,228,000	9,400,800	8,840,400
MEDICAL AFFAIRS	215,383,200	199,596,300	198,992,800
HOSPITAL SERVICES	329,088,800	327,972,400	312,679,800
COMMUNITY HEALTH AND SENIORS CARE	197,276,100	200,178,400	184,289,500
MENTAL HEALTH AND ADDICTIONS	62,015,100	56,611,700	58,173,200
PROFESSIONAL PRACTICE AND CHIEF NURSING OFFICE	4,862,600	3,302,800	3,423,000
GROSS EXPENDITURE	838,738,800	814,933,900	782,756,500
REVENUE			
TOTAL OPERATING	31,209,200	35,202,800	30,709,200
TOTAL COVID RECOVERY	-	21,325,200	-
TOTAL CAPITAL PROJECTS - External Organizations	6,334,200	8,770,000	6,334,200
GROSS REVENUE	37,543,400	65,298,000	37,043,400
NET HE A TH DELENER DELENER DE	001 105 100	E40 (25 000	#4# #12 100
NET HEALTH PEI EXPENDITURE	801,195,400	749,635,900	745,713,100
CAPITAL PLAN			
CAPITAL IMPROVEMENTS AND REPAIRS	33,329,800	13,059,500	18,956,600
CAPITAL EQUIPMENT	20,824,800	16,399,000	9,587,500
TOTAL CAPITAL EXPENDITURES	54,154,600	29,458,500	28,544,100
FULL-TIME PERMANENT EQUIVALENTS	2022-23	2021-22	2020-21
(DIRECT FTES)			
CORPORATE SERVICES	107.21	102.47	98.30
FINANCIAL SERVICES	86.74	86.55	82.55
MEDICAL AFFAIRS	152.94	144.22	139.95
HOSPITAL SERVICES	2,101.12	2,071.78	2,055.67
COMMUNITY HEALTH AND SENIORS CARE	1,452.22	1,381.18	1,344.47
MENTAL HEALTH AND ADDICTIONS	519.11	478.21	474.51
PROFESSIONAL PRACTICE AND CHIEF NURSING OFFICE	27.90	26.96	28.60
TOTAL FTES	4,447.24	4,291.37	4,224.05

^{*}PEI Estimates of Revenue and Ependitures 2022/23

2022-2023 Capital Budget and Five-Year Capital Plan: Capital Investments ensure the province's health infrastructure is maintained and modified or expanded to meet health service needs of changing demographics. The health sector invests in health facilities, such as hospitals (e.g., QEH Roof Replacement, Electrical Switchgear and Panel Upgrades, QEH/PCH Emergency Power Generators, Nurse Call Replacement, KCMH Building System Upgrades and Master Planning & Redevelopment), Primary Care Collaborative Care Centres (East Prince, Queens County and Summerside) and Provincial Dental Program Outreach. Capital investments are also made in technology and medical equipment including the replacement of the QEH LinAc, Radiology Information System, Hospital EHR, and CIS Millennium Upgrade. Five-year capital plans are prepared annually to ensure that the significant costs associated with capital investments are strategic, cost effective and align with other health sector planning.

FTE information for 2022-2023 was derived from Health PEI salary budget documents. Permanent FTEs, including permanent vacancies are included.

FTEs for Medical Affairs include all staff, including salaried physicians. Fee-for-service, contract and sessional physicians are not included.



Appendices

Appendix A: Performance Management

Appendix B: Organizational Structure

Appendix A: Performance Management

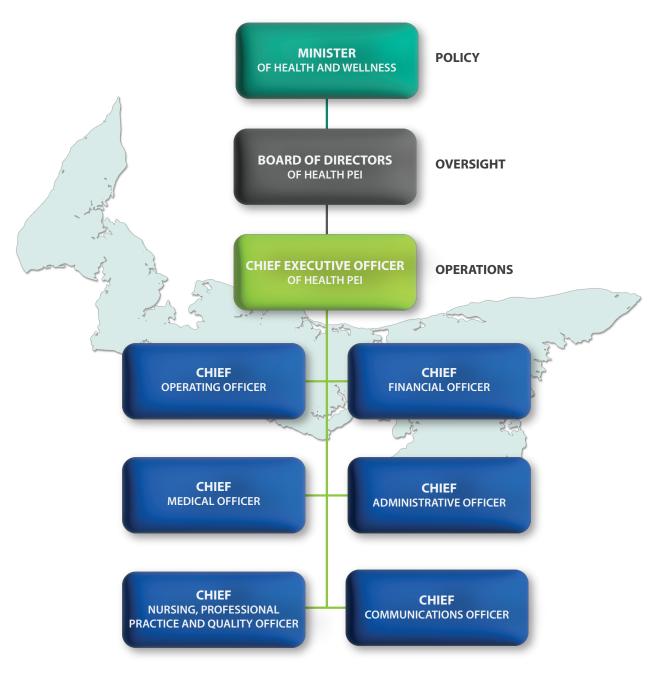
Strategic Goal	Priorities	System Performance Indicators ¹
People	 Talent management Staff wellness safety HR planning and processes 	 Vacancy rate Turnover rate Sick time (FTE) Sick rate (% of sick time pensionable hours) Overtime – Average overtime days by FTE Overtime rate (% of overtime hours to pensionable hours) Employee incidents (violence and injuries)
Quality and Safety	 Understanding and prioritization of quality and impacts on patient care Person-centered environment 	 Rate of patient safety events – Acute care (falls, medication and fluid incidents) Hospital deaths: Hospital standardized mortality ratio Patient experience
Access and Coordination	 Primary care Mental health and addictions Seniors care 	 Per cent of low acuity emergency department visits Number of patients with ambulatory care sensitive conditions admitted to hospital Percentage of alternate level of care days Wait times (community programs, community MHA – psychiatry) Rate of home care client utilization of inpatient and emergency department services Rate of LTC care resident utilization of inpatient and emergency department services Average length of stay in the frail senior program for discharged clients (in years)
Innovation and Efficiency	 System utilization and patient flow Health system sustainability Innovative technology/practices 	 Acute care expected length of stay variance Acute care emergency department time waiting for inpatient bed Acute care emergency department time to physician initial assessment for CTAS² 1-3 Percentage of variance from budget

Notes:

 $^{{}^{1}\}textit{System Performance Indicators: evaluate overall system performance and the effectiveness of strategies. Indicators reflect the organization's strategic direction.}$

²Canadian Triage and Acuity Scale (CTAS).

Appendix B: Organizational Structure



EXECUTIVE LEADERSHIP TEAM

References

- 1 Health PEI. Health PEI 2021-2024 Strategic Plan.
- 2 Health Services Act, R.S.P.E.I. 1988, Cap. H-1.6.
- 3 Financial Administration Act, R.S.P.E.I 1988, c F-9.
- 4 Accreditation Canada QMentum Governance Standards.
- 5 Accreditation Canada QMentum Leadership Standards.
- 6 Department of Health and Wellness and Health PEI. Department of Health and Wellness and Health PEI Accountability Framework.
- 7 Health Standards Organization and Canadian Patient Safety Institute. *The Canadian Quality and Patient Safety Framework for Health Services*.

Acronyms

COVID-19	Coronavirus Disease of 2019	NP	Nurse Practitioner
DHW	Department of Health and Wellness	PEI	Prince Edward Island
ELT	Executive Leadership Team	PFCC	Person and Family-centered Care
EMR	Electronic Medical Record	PMH	Patient Medical Home
FTE	Full-time Equivalent	PSMS	Provincial Safety Management System
HR	Human Resources	QEH	Queen Elizabeth Hospital
ITSS	Information Technology Shared Services	QIT	Quality Improvement Team
LPN	Licensed Practical Nurse	RN	Registered Nurse
LTC	Long-Term Care		
MHA	Mental Health and Addictions		

Health PEI

Telephone:

(902) 368-6130

Fax:

(902) 368-6136

Mail:

Health PEI 16 Garfield Street PO Box 2000 Charlottetown, PE CANADA C1A 7N8

Email:

healthpei@gov.pe.ca

Web:

www.healthpei.ca

Twitter:

@Health_PEI

