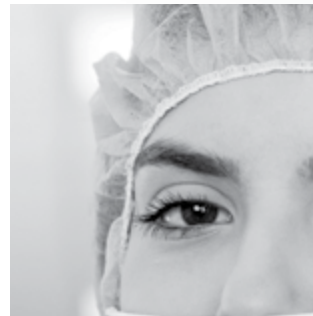
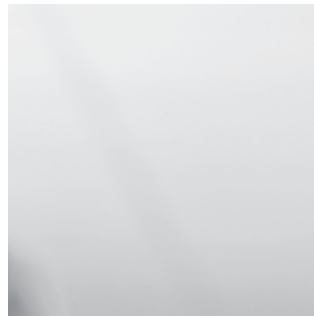


# Health PEI



**2024-2025**  
BUSINESS PLAN

# Health PEI

**Prepared by:**

Policy, Planning and Evaluation

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# HEALTH PEI 2024-2025 BUSINESS PLAN

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## MESSAGE FROM **THE CEO**

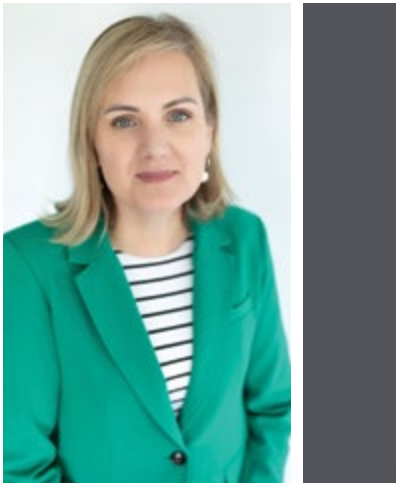
On behalf of Health PEI, I am pleased to present the 2024-2025 Health PEI Business Plan. This plan is aligned with Health PEI's strategic goals and will help us focus on stabilizing health care delivery, improving access and moving towards health equity for Islanders. Over the next year, Health PEI will have many new opportunities to continue improvements and enhancements to our health care system. We have an excellent team at Health PEI, working 24 hours a day to ensure our patients and clients receive the care they need.

Since arriving at Health PEI, it has been evident that as an organization we have done so much to enhance the operations of our health system, but it is clear that frontline providers and staff need support and tools to enable us to keep pace with change and achieve our goals of improving access and stabilization of services such as primary care, acute care and long-term care (LTC) .

Looking ahead to the upcoming year, I am excited to work with our Board of Directors, Health PEI team, government and community partners to bring us closer towards excellence in the delivery of health care by focusing on our priorities and advancing health system transformation.

Respectfully Submitted,

**Melanie Fraser,**  
Chief Executive Officer



# HEALTH PEI STRATEGIC PLAN AT A GLANCE

## Strategic Plan 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.

### GOALS



#### 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.



#### 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 2024-2025 Business Plan outlines how resources allocated in Health PEI's budget will support progress on priorities defined in the organization's three-year strategic plan.<sup>1</sup> This document provides information on key actions for 2024-2025 for each of Health PEI's strategic goals. The *2021-2024 Health PEI Strategic Plan* was approved for a 12-month extension to support continued work on health care delivery. 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*<sup>2</sup> and the *Financial Administration Act*.<sup>3</sup> The business plan is also developed and communicated pursuant to Accreditation Canada's QMentum Governance and Leadership Standards.<sup>4,5</sup>

## 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 health care in PEI. The business plan strengthens Health PEI's accountability, risk management, guides effective management of resources and enhances its ability in developing, monitoring and reporting system performance.

### 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*,<sup>2</sup> 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*<sup>6</sup> 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: development of the Health PEI Business Plan (start of fiscal year) and Health PEI Annual Report (end of 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 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 2024-2025 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.

# 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.<sup>7</sup> Linkages to the goals of the quality and safety framework are denoted throughout this document by the following areas:

- People-Centered Care
- Safe Care
- Accessible Care
- Appropriate Care
- Integrated Care

# SYSTEM TRANSFORMATION

To support Health PEI in keeping pace with change and bringing the organization closer to excellence in the delivery of health care, Health PEI will be launching a Transformation Office (TO) early 2024-2025.

Additional capacity will help Health PEI to accelerate and deliver the changes needed to improve access to quality health care for every Islander. The new TO will provide focus and support for key system priorities. By aligning the work of the TO with Health PEI's strategic direction and government priorities for health care, Health PEI is well positioned to provide care to Islanders and support those providing care.

The TO will function as a central unit that supports prioritization, management, and decision-making for large-scale system priorities and projects.

The TO will play a critical role in ensuring the successful implementation of key initiatives by:

- Accelerating progress toward key objectives and ensuring initiatives move forward at pace.
- Building momentum, ensuring sustainability and capability building are fully integrated.
- Managing the priorities and coordinating across the system.
- Monitoring and tracking progress, aligning priorities and reporting on key indicators.

Beginning in 2024-2025, the TO will initially focus on supporting multiple priorities over two phases of work:

## Phase 1:

- **Workforce Recruitment:** Streamlining and redesigning recruitment processes with the goals of focusing on the highest need areas, attracting and retaining top talent, and reducing inefficiencies and delays in the current processes.
- **Patient Medical Homes (PMHs):** Developing methods to guide the planning and commissioning of new PMHs and Medical Neighbourhoods across PEI to rapidly increase the number of Islanders attached to a PMH.
- **Patient Registry:** Reviewing and improving the existing Patient Registry for unattached patients in the province with the goals of improving data quality, better understanding patient needs, providing access to care and ultimately ensuring a clear path to attachment.
- **Learning Health System:** Preparing for the establishment of the new medical school and fully incorporating learners and a learning health system philosophy into the health system.
- **Organizational Capacity:** Strengthening the ability to deliver on the priorities of Health PEI through investments in the right skills and supports to help the organization thrive.

## Phase 2:

- **Patient Medical Home Operating Model:** Focused effort to optimize current PMHs and ensure a coordinated buildout for future sites, in line with our new operating model.
- **Workforce Integration and Planning:** Actively building a centralized recruitment team to be more successful in building a health workforce on the Island.
- **Patient Access and Flow:** Reduce emergency department (ED) wait times by improving inpatient bed availability through optimized transition times and streamlined discharge processes.
- **Surgical Backlog:** Reduce surgical wait times by optimizing perioperative processes, staffing, and resources, with a focus on improving pre-surgical preparation and expanding anesthesia capacity.
- **Diagnostic Imaging Backlog:** Reduce diagnostic imaging wait times in PEI through process optimization, workforce management, and standardized referral guidelines.
- **Operational Excellence:** Develop an operational excellence roadmap, and establish foundational elements of a management system, engaging executive leadership to drive sustainable performance improvement.
- **Transformation Enablement:** Drive change and accelerate health system transformation through strategic advisory support, risk identification and mitigation, project management, and capacity building.
- **Data and Analytics:** Enhance capacity and accelerate development of management analytics to support transformation efforts.

# STRATEGIC GOAL: PEOPLE

## PEOPLE

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

### **Linkage to Canadian Quality and Patient Safety Framework for Health Services**

- Accessible Care
- Appropriate Care
- Safe Care

### **Priority Areas to Achieve Strategic Goals: Implementation of the multi-year Human Resources (HR) People Strategy**

- Organizational Culture and Engagement
- Equity, Diversity and Inclusion (EDI)
- HR Governance
- Occupational Health, Safety & Wellness
- Talent Management
- Classification and Compensation
- Talent Acquisition
- Workforce Planning and Modernization
- Employee and Labour Relations
- Communication and Recognition

Key actions for 2024-2025 supported by new investments and continued implementation of initiatives from the previous fiscal year include:

### **Workforce Recruitment**

- As a priority within the TO, a PMH recruitment plan will be developed based on current and future state discussions on the recruitment processes for positions such as physicians, nurse practitioners (NPs), allied health and support staff. The recruitment plan will support and align with existing and the implementation of new PMHs.
- Leverage the new Physician Services Agreement to assist with the recruitment of new physicians.

# STRATEGIC GOAL: PEOPLE

## Medical School Learning Support

- The TO learning health system workstream will focus on preparing for the establishment of the medical school and incorporating learners into PEI's health system. Key activities will include stakeholder engagement to develop a shared vision for a learning health system and conduct a current state assessment of system capacity and infrastructure to support learners and residency.

## Leadership and Employee Development Programs

- Continue implementation of Just Culture Certification training, in addition to training for managers, as well as the Harvard Manage Mentor Leadership Training courses.
- Advance the Learning and Development Strategy, including the Health PEI Leadership Development Program, to focus on functional and foundational managerial skills while supporting the strengthening of leadership capabilities.

## Talent Management and Operations Recommendations

- **Nursing Workforce Strategy:** In collaboration with the DHW, Health PEI is establishing a nursing workforce strategy that will focus on projected future needs, pipeline management (i.e., Internationally Educated Nurses [IENs], students, internal moves, francophone commitments, etc.). This strategy will also consider factors such as Transition to Registered Nursing in Canada (TRNC) seats available for IENs, the organizational capacity to effectively on-board IENs and students.
- **Recruitment Processes:** In collaboration with KPMG, the DHW, Public Service Commission and Health PEI are working to establish recruitment best practices that will position PEI as a center of excellence for health care recruitment.
- **Grad Matching/Campus Program Expansion:** The current focus is on establishing a process to ensure effective and appropriate placement of students within Health PEI operations. The focus on students will be expanded to include allied health and other health care professions with a goal to create and nurture pipelines.

## STRATEGIC GOAL: PEOPLE

- **Applicant Tracking System (ATS) Management:** The ATS workflows will need to enable new processes and conversations are currently underway. We are identifying project success measures as well as key performance indicators (KPIs) after implementation. By implementing these recommendations, the ATS becomes a valuable resource to create a best-in-class experience for all stakeholders and significantly improve our talent management processes.
- Creation of a fund to pay for compliance fees required by the International Mobility Program and to provide ongoing EDI training supports to Health PEI leaders.
- Creation of a central fund to be used to support relocation costs for IENs. This fund provides an allowance to each IEN to help assist with relocation and temporary living expenses.
- To support increased international recruitment efforts, establish a settlement and immigration coordinator position and an immigration assistant position.
- In response to significant demands on the Health PEI recruitment team, establish new recruitment assistant positions to support the recruitment process around onboarding, booking interviews, reference/background checks, candidate engagement and related administrative work.
- Ongoing work continues to stabilize staffing for the Talent Management Team and the HR and Labour Relations Team.

### Employee Safety and Wellness

- Continue staffing of the Employee Health Nursing Program to support all Health PEI staff and facilities.
- Action funding to secure contract for provincial uniformed security services at sites across Health PEI.
- Continue to implement resources and support for all Health PEI staff through MindBeacon iCBT and the Critical Incident Support Policy and Program.
- Standardized approach to Provincial Occupational Health, Safety & Wellness Training Programs to address high employee incidents of violence and strains/sprains.
- Continue implementation and promotion of the Ask HR Help Desk to help address HR issues and improve the staff experience at Health PEI.

# STRATEGIC GOAL: PEOPLE

## Professional Development and Supports

- Nursing and Professional Practice: Addition of a professional practice leader position as well as realigning the work to strengthen the support from clinical resource nurses and educators across programs and service areas.
- Expansion of the Nursing Transition to Practice Program to include a new nurse practitioner mentorship.
- Supporting full scope of practice for nurses in the areas of registered nurse (RN) prescribing, inclusion of registered psychiatric nurses and NP authorization for admitting, treating and discharging patients in hospitals.

## Employee and Labour Relations

- Improving Standard Operating Procedures (SOPs) to enhance consistency and efficiency in operations.
- Updating interpretation bulletins to provide clear, actionable guidance on collective agreements.
- Continuing negotiations with Union of Public Sector Employees (UPSE) and Canadian Union of Public Employees (CUPE) and preparing for upcoming PEI Nurses Union (PEINU) bargaining.
- Proactively managing grievances, arbitrations, workplace and human rights complaints to ensure timely and effective resolution.
- Ensuring policies meet Accreditation standards and comply with evolving legislation.
- Equipping leaders and staff with the tools to effectively manage conflict and workplace challenges.

# STRATEGIC GOAL: QUALITY AND SAFETY

## QUALITY AND SAFETY

Integrate quality and patient safety into the culture of the organization

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

- People-Centered Care
- Safe Care
- Appropriate Care

### Priority Areas to Achieve 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.

Key actions for 2024-2025 supported by new investments and continued implementation of initiatives from the previous fiscal year include:

### Accreditation:

- Continue follow up from Health PEI's 2022 Accreditation survey.
  - o Continue with work plan and action plan development from survey results and review of standards.
  - o Continue to work with Leadership Quality Improvement Team (QIT) and Health PEI Board of Directors to review Leadership and Governance Standards and work plan development.
  - o Work with Accreditation Canada on their evolving survey model/processes, evidence portals, review and communicate new Accreditation Canada standards and Required Organizational Practices (ROPs).

# STRATEGIC GOAL: QUALITY AND SAFETY

## Quality Improvement

- Continue to review QIT structure and opportunities for ongoing collaboration and communication.
- Educate and coach health care leaders on roles and responsibilities in quality improvement processes and work planning.
- Host the Health PEI Quality and Patient Safety Learning Exchange in October 2024 and May 2025. The Learning Exchange is a half-day event which brings together staff, leadership, Board members and community partners to network and learn about quality improvement and patient safety initiatives at Health PEI.
- Work in partnership with Health PEI programs and services to identify opportunities for system improvement with recommendations to support quality care and patient safety.

## Risk Management and Patient Safety

- Continue to offer in-person and virtual education to all health care leaders on the updated *Health PEI Patient Safety and Environmental Incident Reporting and Management Policy*, with a focus on their roles and responsibilities in incident management.
- Develop and launch a staff education module on managing disclosure of patient safety incidents.
- Continue having Quality Patient Safety staff meet regularly with unit/department managers to coach/support incident management, disclosure and promote a Just Culture.
- Continue to provide risk and patient safety lens on various programs' policy reviews and development, active complex patient cases and organizational system issues.
- Continue to manage numerous patient safety incidents, human rights claims, statement of claims, investigations by Child and Youth Advocate and Ombudsperson Office.
- Continue to evaluate and complete changes to Health PEI's Provincial Safety Management System (PSMS) software to improve alignment with organizational structure, programs and improve end-user experience.

# STRATEGIC GOAL: QUALITY AND SAFETY

## Just Culture

- Continue to promote Just Culture training and education for all Health PEI staff. Just Culture is a key part of a safety culture where people can speak up – question existing practices, share concerns and admit mistakes without ridicule or punishment.
- Quality Patient Safety staff to complete Just Culture Champions' and Managers' training to continue to adopt, practice and promote a Just Culture approach.

## Ethics

- Host annual ethics workshop during Ethics Week in November 2024 with virtual sessions facilitated by a bioethicist from the Nova Scotia Health Ethics Network.
- Revise tools and key documents including SOPs 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, discuss ethics and hold tabletop exercises.
- Research Ethics Board (REB) to continue reviews of research ethics proposals.
- REB to deliver presentations on research ethics within Health PEI (May and October 2024 Learning Exchanges).
- Continue to support the growth of research ethics at Health PEI as additional opportunities for research come forward.

## Infection Prevention and Control (IPAC)

- Continue to provide infection prevention control surveillance, outbreak management, guidance and education on disease transmission, point of care risk assessments, protocols and use of appropriate personal protective equipment for all Health PEI programs, services and facilities.
- Continue to collaborate with Communications on public notifications regarding outbreaks.
- Continue to collaborate with the Employee Health and Wellness team and Patient Flow team during outbreaks to ensure patients and staff are safe.
- Implementation of an enhanced annual standardized approach to hand hygiene education by utilizing the e-learning module through Discovery Campus, which provides compliance reports for tracking of this mandatory annual education.

# STRATEGIC GOAL: QUALITY AND SAFETY

- Continue to standardize IPAC educational materials i.e., cleaning/disinfecting shared equipment in LTC, signage and fact sheets.
- Continue to collaborate with other Health PEI departments to evaluate current practices to ensure best practices are utilized to decrease infection rates.
- Standardization of isolation order sets, ambulation care plans for those on isolation precautions, protocol for removal of MRSA alerts on patient electronic health records (EHRs) and surveillance.
- Continue to implement new IPAC QIT structure, set up LTC IPAC QIT and community IPAC QIT. Plan future implementation for acute care IPAC QIT (fall 2024).
- Collaborate with LTC in the implementation of an EHR to ensure standardized IPAC order sets, documentation and assessment forms are included in the building of the system.
- Collaborate with the division of Facility and Capital Planning to provide IPAC support during the planning and construction/renovation phases of projects being led by this division.
- In collaboration with the DHW, determine the needs for an electronic software program for infection control surveillance.
- Continue expansion of the Crede Hand Hygiene Auditing Program into public health, home care and primary care.

## Patient Experience

- Promote the role of Health PEI Patient and Family Partners to recruit new members to this role throughout Health PEI. A full-day orientation session for new and existing Patient and Family Partners will be held in October 2024.
- Continue to host bi-monthly meetings for each of the two committees - Patient and Family Centered Care Steering Committee and the Patient and Family Advisory Council to advance patient experience initiatives.
- Host regular Patient Navigator Community of Practice meetings to discuss trends, initiatives and shared metrics.
- Establish the Patient Relations team to streamline and encourage public, as well as patient and family feedback on Health PEI programs and services.
- Continue with provincial policy development and reviews to provide patient and family perspectives on Health PEI policies and procedures.

# STRATEGIC GOAL: ACCESS AND COORDINATION

## ACCESS AND COORDINATION

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

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

- Accessible Care
- Appropriate Care
- Integrated Care

### Priority Areas to Achieve 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 LTC residents: improvement of organizational practices and processes to better support residents and staff.

Key actions for 2024-2025 supported by new investments and continued implementation of initiatives from the previous fiscal year include:

#### Primary Care

- As a priority workstream within the TO, continue implementation of the provision of team-based care through the establishment of additional PMHs and Medical Neighbourhoods to improve patient health outcomes and support the well-being of staff and providers. Actions to support this workstream include:
  - o Drafting operational models for PMHs.
  - o Drafting playbook for establishing PMHs.

# STRATEGIC GOAL: ACCESS AND COORDINATION

- To support this collaborative, team-based model, continue establishment of new positions to support new and existing PMHs including physicians, NPs, RNs, licensed practical nurses (LPNs), medical secretaries, dietitians, social workers (SWs), physiotherapists (PTs) and pharmacists.
- Through the Patient Registry workstream conduct a preliminary analysis of registry data and develop a current state assessment. Using these findings, develop future state recommendations to enhance management of the registry and triage of patients.

## **Mental Health and Addictions**

- To support the development of the MHA campus and focus on community first, continue recruitment of multidisciplinary staff including psychologist, tradespeople, utility worker, resident care worker, social service workers, occupational therapists, RN, LPN, and addiction workers. The campus will improve access to care and provide staff and providers with a modern workspace to work in and deliver the best care for clients and patients.
- Establish NP position for the Operational Stress Injury Clinic.

## **Seniors**

- Continue work on previous multi-year investments for frail seniors and Caring for Older Adults in the Community and at Home (COACH) Program clients served by home care to support seniors returning from hospital sooner and/or stay home longer.
- In collaboration with the DHW and the Department of Transportation and Infrastructure, work to implement a mobile x-ray service to support LTC residents by reducing patient transfers to and from hospitals for diagnostic imaging.
- Continue to implement multi-year investments for NPs and to increase allied health support in LTC.

## **Chronic Disease**

- Utilizing support first established in 2023-24, continue to hire new clinical and administrative staff for the Diabetes Foot Care Program.
- In addition to funding provided in 2023-24, establish new allied health and administrative staff positions for the Cardiac and Pulmonary Rehabilitation Program.

# STRATEGIC GOAL: ACCESS AND COORDINATION

## Gender Affirming Care

- Building on previous years' investments:
  - Continue to stabilize the multi-disciplinary Gender Affirming Care Clinic by establishing clinical and administrative positions.

## Rehabilitative Services

- Continue development of the RENEW (Rehabilitative Educate Nurture Empower toward Wellness) Program. This program will be a comprehensive, interdisciplinary program for all Health PEI physical rehabilitative services and processes. Recruitment for clinical and administrative staff is ongoing.

## Public Health and Early Childhood Services

- Continue to implement staffing resources for the Program for Elementary Eye Care.
- Provide additional nursing and administrative resources to Public Health Nursing in support of increased clinical workloads and new programming for Islanders.
- Establish dedicated patient navigators to assist children with complex needs and their families to organize and access health care services.

## Clinical Supports

- Addition of physician assistants and associate physicians as care providers within Health PEI.
- Establish new clinical pharmacist positions to support areas including ambulatory care, ED, intensive care, oncology, surgery and, inpatient units to provide additional expertise in medication management, interprofessional and patient/family collaboration to improve patient health outcomes.
- Increase respiratory therapy staffing to support critical care services and intra/inter-provincial ground transfers of mechanically ventilated patients.
- To support the provision of critical care at Prince County Hospital establish positions including an acute care paramedic, NPs, physiotherapist and rehabilitation assistant. In addition to these resources, increase respiratory therapy and personal care worker positions.

# STRATEGIC GOAL: ACCESS AND COORDINATION

- Addition of new specialist physicians and their related staffing resources to support provincial medical services including allergist/immunologist, general surgeon, hospitalists, medical oncologist, obstetrician/gynecologist, otolaryngologist (ENT), pathologists, pediatrician, radiation oncologist and urologist.
- Increase Family Medicine Residency Program positions at the PEI site and provide additional administrator support to the program.
- Addition of clinical resources to the provincial oncology service including nursing, clerk and family physician.

## **Surgical Services**

- Currently, there is not a standard centralized intake process for surgical services. Physicians refer their practices' patients to surgical specialists by provider, rather than referring them to a centralized intake system. As a result, patients and primary care providers are not aware of the wait times for each surgical specialist and thus are not able to refer based on shortest wait time. Wait Times for surgical services can be found at [HealthPEI.ca/SurgeryWaitTimes](https://www.healthpei.ca/SurgeryWaitTimes). To improve access to surgical services:
  - o Work continues with Health PEI and IT Shared Services to understand the surgical patient journey and the corresponding IT solution needed to support the workflow from patient referral in the community through to surgery complete. This analysis remains ongoing given the complex nature associated with an end-to-end IT roadmap.
  - o Continue to improve the manual process in the operating room booking office from time referral is received from surgeon's office to surgery complete in order to improve data reporting for hips, knees and cataracts.
  - o Implement national definition for "Ready to Treat" ( the date the patient is medically, socially and functionally ready for surgery) to bring Health PEI in alignment with CIHI data reporting.
- Continue with recruitment strategies to support the ongoing workforce challenges across the multi-disciplinary team including anesthesia.

## **Access and Flow to Acute Care Services**

- Continue to scale system transformation by focusing on improving ED access through enhancing inpatient bed flow and optimizing transition times.
- Work to improve access to diagnostic imaging wait times through collaborations with Health PEI teams on process optimization, workforce supports and review of referral guidelines.

# STRATEGIC GOAL: INNOVATION AND EFFICIENCY

## INNOVATION AND EFFICIENCY

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

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

- People-Centered Care
- Integrated Care
- Appropriate Care
- Safe Care

### Priority Areas to Achieve 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, IT Shared Services and Canada Health Infoway.
- Adoption of other innovative technologies and practices to support the continuity of care (including transition points), accessibility and efficiency.

Key actions for 2024-2025 supported by new investments and continued implementation of initiatives from the previous fiscal year include:

#### System Utilization and Efficient Patient Flow

- To support system utilization initiatives, patient flow in hospital and in the community and bed coordination, expand the patient flow team with a manager, administrative support, system optimization analyst, process improvement engineers and community and MHA coordinators.
- Provide additional funding to the Out-of-Province for Medical Travel Program to further support Islanders needing to travel for medical care.

# STRATEGIC GOAL: INNOVATION AND EFFICIENCY

- Ongoing development of the Provincial Bed Management Standards including review and stakeholder feedback.
- Review of *Health PEI Hospital Service Sites Provincial Overcapacity Policy* to support the Health PEI hospital sites in having a system-wide mitigation and response during overcapacity situations.
- Work with different stakeholders to establish the Health PEI Critical Care Task Force to advance critical care services in the province.
- Continue staffing process for second RN bed coordinator position.
- Create a standardized format that is automated and streamlined for the daily bed call to allow for more thorough/concise reporting from sites and communication out to stakeholders.
- Review different technological options for improving communication pathways and ensuring multiple phone calls are not needed for a patient transfer.
- Continue improvement to Occupancy reports for acute care, LTC and MHA.
- Continue the ED Flow project at the Queen Elizabeth Hospital to address left without being seen patients and time waiting for an inpatient bed.
- Continued implementation of a waitlist management system for surgical wait time reporting and scheduling.
- Ongoing implementation of the Cancer Treatment Centre project aimed at optimizing the utilization of nursing resources and workspaces.
- Continue study of endoscopy schedule optimization to assess resources available within the department.

## **System Sustainability and Accountability**

- Utilizing a strategic management framework, continue to provide regular status updates on key initiatives aligned with the Health PEI Strategic Plan and Management Plan to leadership and the public. Regular monitoring and reporting are supported by KPIs.
- Addition of system supports to meet operational and business needs for change management, project management, legal services and planning coordination for community-based facilities.

# STRATEGIC GOAL: INNOVATION AND EFFICIENCY

## Innovative Technology and Practices

### Digital Health/e-Health

- In collaboration with the DHW and IT Shared Services start planning and implementation of actions from the 2024-2029 Digital Health Strategy.
- Continue implementation of the six-year Elimination of the Hybrid Record RoadMap (five years remaining).
- Continued implementation of the Modernizing Healthcare Connectivity project to enable and implement the integration of the Internet of Things (IoT) and non-traditional IT medical wireless devices throughout Health PEI facilities. IoT is a system of wireless, interrelated, and connected digital devices that can collect, send, and store data over a network without requiring human-to-human or human-to-computer interaction.
- In collaboration with the DHW and IT Shared Services, begin implementation of the Health Portal for citizens and health care providers. The Health Portal is a secure, online solution that gives citizens and providers 24-hour digital access to components of patient health information, like laboratory test results, from anywhere. The Health Portal is part of a larger provincial initiative called MyPEI that supports the *PEI Digital Health Strategy* goal of quick and easy online access to information, which helps citizens engage and participate more in the management and planning of their health.
- The Clinical Data Repository (CDR) is a patient-centric health data repository that is aggregated from multiple health information sources and contains different clinical datasets. MyPEI and the Health Portal will connect to and use the aggregated data in the CDR for display to patients and health care providers. The initial implementation of the CDR will contain patient immunization records and, in the future, provide access to other clinical data like diagnostic imaging, pharmacy information and patient demographics.
- Implementation of a Long-Term Care Information Management System (LTC-IMS) that is InterRAI compliant. The LTC-IMS will support improved transitions in care from both hospitals and homes, ensuring the person's care needs are understood and an appropriate care plan is in place prior to them moving into the LTC home. Work in this fiscal year includes training and vendor selection.
- Establish data integrity analyst position to support improvements in data quality in the EMR, Clinical Information System (CIS) and Home Care Solution.

# STRATEGIC GOAL: INNOVATION AND EFFICIENCY

- Implement an EHR Audit Service Standard that establishes guidelines for conducting private, secure and compliant EHR audits, ensuring transparency and confidentiality in the process.
- Draft SOPs outlining profile picture and avatar standards for staff and patients in EHR systems, ensuring consistency and appropriateness for accurate identification and professionalism.

## Clinical Information System

- Complete system-wide upgrade to newest code level bringing numerous enhancements and corrections across entire suite of CIS applications.
- The Oracle Health Millennium CIS is the foundational health information system within PEI's EHR. Oracle Health announced in early 2024, the migration of all its Canadian clients, including Health PEI, to their new Oracle Cloud Infrastructure (OCI) data centers. There is a myriad of benefits to this migration including improved security and reliability, measurable performance improvements, scalability, and an increased ability to observe and monitor infrastructure. This project, which will be completed in December 2024, is a wide-ranging, large-scale project, spanning six months of phased delivery, with direct impacts to all CIS projects.
- Complete implementation of Women's Health Module (PowerChart Maternity and Fetalink) with go-live planned for fall 2024.
- Complete CIS documentation inside endoscopy service, further reducing paper charting.
- Support development and planning for the replacement of the radiology information system.
- Complete CIS implementation within MHA' ED Short Stay and Mental Health Emergency units.
- Begin implementation of Behavioral Health module for acute MHA patient population.
- Implement CareAware iBus for laboratory devices, a new, more robust solution for connecting medical devices to CIS.
- Implement Dynamic Documentation pilot in Pediatric Clinic using front-end dictation and improved documentation workflow for physicians.
- Implement Multi-Disciplinary Rounding (MDR). MDR is a dynamic worklist which enables health care providers from different disciplines to efficiently support a rounding process (i.e. daily rounds, bedside rounds, or team huddle) by providing necessary patient information in real time.

# STRATEGIC GOAL: INNOVATION AND EFFICIENCY

## **Provincial Electronic Medical Record**

- Continue enrollment of health care providers across primary care, specialty services and MHA.
- Completed General Lab integration with CIS.
- Implementation of enhanced Patient Portal including virtual care and e-booking options.
- Develop SOPs for all provincial EMR users for topics such as patient status updates, locking encounters, preventive care updates and other strategic initiative and Accreditation Canada requirements.
- Complete provincial data extract with provincial EMR vendor to provide advanced health system analytics in partnership with Health PEI Health Analytics.
- Provide operational support for MHA sites as they transition from project planning and implementation phases to operational sites using the provincial EMR.
- Implement PrescribeIT Phase 2 to enable receiving and responding to pharmacy e-renewal requests, sending and receiving secure communications with pharmacies, and receiving dispense and dispense cancel notifications.
- Configuration updates, merges and other supports for PMH developments.
- Establishment and further development of dashboards to support MHA and Primary Care Renewal indicator and evaluation needs.
- Complete and secure formal approval for an Information Management Framework for the provincial EMR.

## **Home Care Solution**

- Develop a training program for new employees on an electronic platform.
- Develop a downtime policy for users.
- Review and revise any documentation for home care's use of the solution.
- Continue to work with AlayaCare on enhancement of the solution, in particular integrations with other health systems and the initiation of the Family Portal and other virtual components of the solution.

# STRATEGIC GOAL: INNOVATION AND EFFICIENCY

- Explore introduction of the interRAI Palliative assessment.
- Pilot virtual care for the Francophone population in Prince County, PEI.
- Implementation of interRAI CA (contact assessment) to replace intake assessment.

## Virtual Care

- Launch the CHR Connect App for Islanders, enabling patients to access virtual care, secure messaging, and e-booking seamlessly integrated with the provincial EMR system.
- Continue planning to reduce barriers and provide free access to virtual care apps/platforms for Islanders.
- Virtual Care Guidance Document: create a comprehensive virtual care guidance document on implementing virtual care into clinical workflows. The document will include essential resources such as checklists, templates, and IT Shared Services-approved hardware and software.
- Enhancing Data Management: employ the health information specialist and data integrity analyst to examine operational virtual care and eHealth metrics to ensure effective management and integrity of health data.



# BUDGET AND RESOURCE SUMMARY

	2024-25 BUDGET ESTIMATE • \$	2023-24 FORECAST • \$	2023-24 BUDGET • \$
<b>EXPENDITURE*</b>			
CORPORATE SERVICES	35,196,800	27,753,600	27,869,300
FINANCIAL SERVICES	11,963,400	11,233,700	10,812,200
MEDICAL AFFAIRS	243,735,000	230,060,500	231,653,600
HOSPITAL SERVICES	318,608,700	313,011,600	303,876,400
COMMUNITY HEALTH AND SENIORS CARE	271,393,500	245,353,900	243,161,400
MENTAL HEALTH AND ADDICTIONS	77,494,200	66,059,100	70,954,000
PROFESSIONAL PRACTICE AND CHIEF NURSING OFFICE	5,420,300	4,387,900	4,818,700
<b>GROSS EXPENDITURE</b>	<b>963,811,900</b>	<b>897,860,300</b>	<b>893,145,600</b>
<b>REVENUE</b>			
TOTAL OPERATING	32,329,100	34,955,900	31,831,400
TOTAL CAPITAL PROJECTS - External Organizations	6,314,300	5,919,000	5,909,500
<b>GROSS REVENUE</b>	<b>38,643,400</b>	<b>40,874,900</b>	<b>37,740,900</b>
<b>NET HEALTH PEI EXPENDITURE</b>	<b>925,168,500</b>	<b>856,985,400</b>	<b>855,404,700</b>
<b>CAPITAL PLAN</b>			
CAPITAL IMPROVEMENTS AND REPAIRS	49,027,400	29,863,500	7,432,600
CAPITAL EQUIPMENT	17,637,300	21,043,300	14,178,700
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>66,664,700</b>	<b>50,906,800</b>	<b>21,611,300</b>
<b>FULL-TIME PERMANENT EQUIVALENTS (Three Year Comparison) (DIRECT FTES)</b>			
	<b>2024-25</b>	<b>2023-24</b>	<b>2022-23</b>
CORPORATE SERVICES	159.78	130.37	107.21
FINANCIAL SERVICES	95.65	89.65	86.74
MEDICAL AFFAIRS	175.02	163.22	152.94
HOSPITAL SERVICES	2,236.51	2,145.42	2,101.12
COMMUNITY HEALTH AND SENIORS CARE	1,650.35	1,529.27	1,452.22
MENTAL HEALTH AND ADDICTIONS	582.14	543.28	519.11
PROFESSIONAL PRACTICE AND CHIEF NURSING OFFICE	30.90	29.40	27.90
<b>TOTAL FTES</b>	<b>4,930.35</b>	<b>4,630.61</b>	<b>4,447.24</b>

\*PEI Estimates of Revenue and Expenditures 2024/25

2024-25 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, Panel Upgrades, Resident Accommodations, Nurse Call Replacement, and Laundry Facility Upgrades, KCMH - Building System Upgrades and Master Planning & Redevelopment, and Souris Roof Replacement), Primacy Care Collaborative Care Centers (East Prince, Queens County and Summerside), Ventilation Upgrades to SH, WWM, BGH & QEH, Long Term Care Cooling Project, Paving - Health PEI Facilities, Beach Grove Home Fire Exits and Lease Fit Up for Sexual Health Options and Reproductive Services (SHORs). Capital investments are also made in technology and medical equipment including Radiology Information System, Hospital EHR, Long Term Care IT Solution, Mental Health and Addictions IT Solution and Medication Cart Replacement Project. 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.

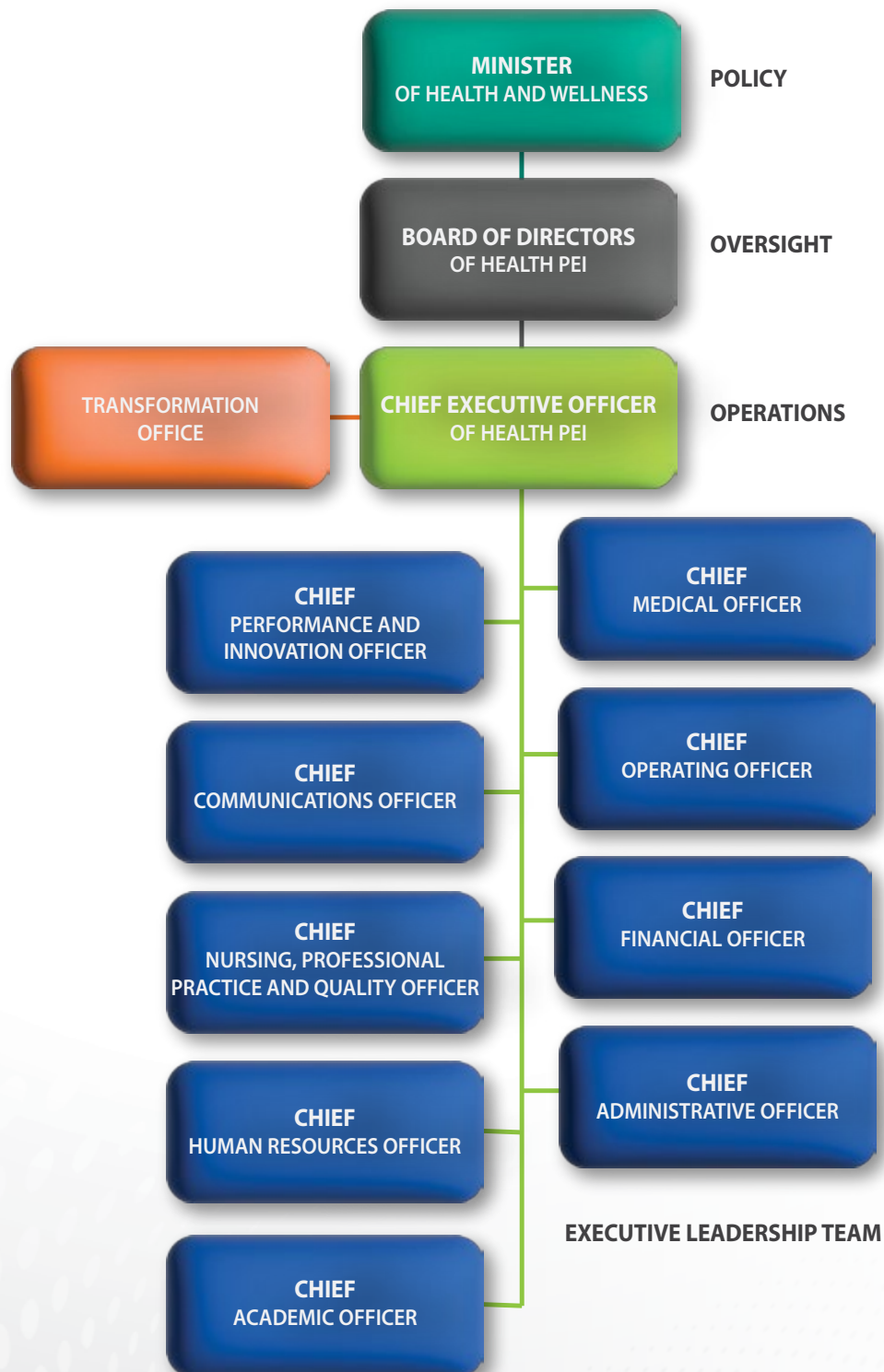
Full-time equivalency information for 2024-25 was derived from Health PEI salary budget documents. Permanent FTEs, including permanent vacancies are included.

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

# APPENDIX A – PERFORMANCE MEASUREMENT

STRATEGIC GOAL	PRIORITIES	SYSTEM PERFORMANCE INDICATORS
<b>People</b>	<ul style="list-style-type: none"> <li>Talent Management</li> <li>Staff Wellness Safety</li> <li>HR Planning and Processes</li> </ul>	<ul style="list-style-type: none"> <li>Vacancy Rate</li> <li>Turnover Rate</li> <li>Sick Rate (% of sick time pensionable hours)</li> <li>Overtime – Average Overtime Days by Full-Time Equivalent (FTE)</li> <li>Overtime Rate (% of overtime hours to pensionable hours)</li> <li>Employee Incidents (violence and injuries)</li> </ul>
<b>Quality &amp; Safety</b>	<ul style="list-style-type: none"> <li>Understanding and prioritization of quality and impacts on patient care</li> <li>Person-centered environment</li> </ul>	<ul style="list-style-type: none"> <li>Rate of Patient Safety Events – Acute Care (falls, medication and fluid incidents)</li> <li>Hospital Deaths: Hospital Standardized Mortality Ratio (HSMR)</li> <li>Patient Experience</li> </ul>
<b>Access &amp; Coordination</b>	<ul style="list-style-type: none"> <li>Primary Care</li> <li>MHA</li> <li>Seniors Care</li> </ul>	<ul style="list-style-type: none"> <li>Percent of Low Acuity ED Visits</li> <li>Number of Patients with Ambulatory Care Sensitive Conditions (ACSC) Admitted to Hospital</li> <li>Percentage of Alternative Level of Care (ALC) Days</li> <li>Wait Times (Community Programs, Community MHA – Psychiatry)</li> <li>Rate of Home Care Client Utilization of Inpatient and ED Services</li> <li>Rate of LTC Resident Utilization of Inpatient and ED Services</li> <li>Average Length of Stay (ALOS) in the Frail Senior Program for Discharged Clients (in years)</li> </ul>
<b>Innovation &amp; Efficiency</b>	<ul style="list-style-type: none"> <li>System Utilization &amp; Patient Flow</li> <li>Health System Sustainability</li> <li>Innovative Technology/Practices</li> </ul>	<ul style="list-style-type: none"> <li>Acute Care Expected Length of Stay (ELOS) Variance</li> <li>Acute Care ED Time Waiting for Inpatient Bed (TWIB)</li> <li>Acute Care ED Time to Physician Initial Assessment (TPIA) for CTAS2 1-3</li> <li>Percentage of Variance from Budget</li> </ul>

## APPENDIX B - ORGANIZATIONAL STRUCTURE



## REFERENCES

<sup>1</sup> Health PEI. *Health PEI 2021-2024 Strategic Plan*.

<sup>2</sup> Health Services Act, R.S.P.E.I. 1988, Cap. H-16.

<sup>3</sup> *Financial Administration Act*, R.S.P.E.I. 1988, c F-9.

<sup>4</sup> Accreditation Canada QMentum Governance Standards.

<sup>5</sup> Accreditation Canada QMentum Leadership Standards.

<sup>6</sup> Department of Health and Wellness and Health PEI. *Department of Health and Wellness and Health PEI Accountability Framework*.

<sup>7</sup> Health Standards Organization and Canadian Patient Safety Institute. *The Canadian Quality and Patient Safety Framework for Health Services*.

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