



# **Health** PEI

**2023-2024  
Business Plan**

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## Message from the Chief Executive Officer

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On behalf of Health PEI, I am pleased to present the 2023-2024 Health PEI Business Plan. This plan is aligned with our strategic goals of *People, Quality and Safety, Access and Coordination and Innovation and Efficiency*. The 2023-2024 Business Plan outlines where we focused our efforts over the year.

To move forward and make progress towards our vision of *Healthy Teams, Healthy People, Healthy Island Communities*, we will use our lessons from the past and continue to work with and support our health care team and Islanders.

Respectfully submitted,  
Melanie Fraser  
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.

**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.

## GOALS

## ENABLERS

GOVERNANCE AND ACCOUNTABILITY • EVIDENCE-BASED • COMMUNICATION • TECHNOLOGY

# Introduction

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The 2023-2024 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 2023-2024 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*<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

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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. 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.

## 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 2023-2024 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

# Strategic Goal #1: 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 People Strategy

- ▶ Organizational Culture and Engagement
- ▶ Equity, Diversity and Inclusion (EDI)
- ▶ Human Resources (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 2023-2024 include:

### Just Culture

- ▶ Implementation of the Health PEI Just Culture Training Program to equip leaders with the foundational skills and knowledge needed to understand and create a sustainable Just Culture defined as: continuous learning and psychological safety, robust system design, management of behavioural choices, and consistency in application of justice and accountability.

### Talent Management and HR Operational Supports

- ▶ Continue to create and support a Talent Management department and HR operational supports focusing on leadership development, succession planning, performance management, talent acquisition and compensation. New positions to support this include talent acquisition manager, talent acquisition specialists/consultants and organizational design lead positions.
- ▶ Addition of the following positions to support HR operations: financial data and payroll auditor, positions to support the Job Guarantee Program and HR Help Desk.
- ▶ Develop Request for Proposals for staff scheduling software.

## HR Strategy and Leadership Development Programs

- ▶ Addition of new manager positions to support leaders and Learning Management System (LMS) administrators to support the upcoming implementation of the system.

## Employee Safety and Wellness

- ▶ Addition of employee health nurses, organizational safety and compliance officers and return to work staff members.

## HR and Labour Relations

- ▶ Negotiate new collective agreements with PEI Nurses' Union (PEINU), Union of Public Sector Employees (UPSE), International Union of Operating Engineers (IUOE), and Canadian Union of Public Employees (CUPE).
- ▶ Negotiate a new Master Agreement with the Medical Society of PEI (MSPEI).
- ▶ Continue to 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.
- ▶ Addition of employee service assistants.

## *Professional Development and Supports*

### Medical Affairs

- ▶ To support Medical Affairs operations and physicians, addition of a medical affairs coordinator, HR manager and physician complaints resolution consultant.
- ▶ Development of the manager, administrative and the physician leadership positions for medical education team.
- ▶ Continue recruitment of physician leaders including provincial department heads, division leads and medical directors.
- ▶ Continue development of the Health PEI Medical Staff Bylaws.

### Mental Health and Addictions (MHA)

- ▶ Implementation of an allied health educator for MHA.

### Nursing and Professional Practice

- ▶ Director of Professional Practice and Supports to support nursing staff including new graduates and internationally educated nurses.
- ▶ New director of nurse practitioner clinical support and education role.





## Strategic Goal #2: 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 2023-2024 include:

### Accreditation

- ▶ Continue follow-up from Health PEI's 2022 accreditation survey.
  - As part of maintaining accreditation status, prepare and submit evidence as requested by Accreditation Canada (July 2023 and January 2024).
  - Continue with work plan and action plan development from survey results and review of standards.
- ▶ In collaboration with the Health PEI Emergency Management and Business Continuity Consultant conduct organizational self-assessment on new Accreditation Canada Emergency and Disaster Management standards (June 2023). The newly formed Health PEI Emergency Management Steering Committee will review results and develop a work plan.
- ▶ 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.
- ▶ Work with Accreditation Canada on their evolving survey model/process and their new information and evidence portals.

### Quality Improvement

- ▶ Continue to review QIT structure and opportunities for ongoing collaboration and communication.
- ▶ Host the Health PEI Quality and Patient Safety Learning Exchange in October 2023. 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.

## Risk Management and Patient Safety

- ▶ Continue to offer in-person and virtual education to all health care leaders (Summer and Fall 2023). Education will focus on retraining/informing leaders of the updated *Health PEI Patient Safety and Environmental Incident Reporting and Management Policy*, with a focus on their roles and responsibilities in incident management.
- ▶ Continue having Quality Patient Safety (QPS) 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.
- ▶ Develop and launch a staff education module on managing disclosure of patient safety incidents.
- ▶ 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.

## Just Culture

- ▶ Partner with HR to launch Just Culture training and education for all Health PEI staff.
- ▶ QPS staff to complete Just Culture Champion training to continue to adopt, practice and promote a Just Culture approach.

## Ethics

- ▶ Host annual ethics workshop during Ethics Week (November 2023) 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, discuss ethics and hold tabletop exercises.
- ▶ Launch a new electronic research ethics portal/software system (e-vision).
- ▶ PEI Research Ethics Board (REB) to join the Atlantic Clinical Trials Network (ACTN) REB working group.
- ▶ REB to continue reviews of research ethics proposals.

## 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.
- ▶ Continue expansion of the Crede Hand Hygiene Auditing Program into public health, home care and primary care.
- ▶ Continue to standardize IPAC educational materials i.e., cleaning/disinfecting of shared equipment in long-term care (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 and surveillance.
- ▶ Continue to implement new IPAC QIT structure, set up LTC IPAC QIT including regular meetings. Plan future implementation for community programs and acute care.
- ▶ Collaborate with LTC in the implementation of an electronic health record 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.
- ▶ Implement standardized electronic tracking tools (Hand Hygiene Audit follow-up forms, outbreak spreadsheets and communications resources, etc.) for use by IPAC professionals.

## Patient and Family Centered Care (PFCC)

### Navigation

- ▶ As navigation services expand, it is important for Health PEI staff and the public to know who the navigators are and how to get in touch with them. The patient experience team will revise documents on how to engage with patient navigation services and place them on both the Health PEI Staff Resource Centre and the Health PEI website.

## Patient and Family Partners (PFP) Program

- ▶ To enhance the PFP Program, the patient experience team will continue to focus on providing documentation and education for PFP such as:
  - ▶ Update the PFP orientation manual and orientation slides.
  - ▶ Revise information and educational material for staff.
  - ▶ Revise the “Apply to be a Patient and Family Partner” webpage.
  - ▶ Addition of a “Definitions Document” to the Staff Resource Centre webpage.

## Patient Experience

- ▶ Work with Communications regarding Patient Stories and the Vital Insight Newsletter.
- ▶ Distribute and highlight the updated *Health PEI Patient Rights and Responsibilities Policy* and distribute new posters throughout Health PEI.

## Patient Relations

- ▶ Plan for addition of patient relations in-take coordinator for the program and patient relations coaches, including competency training and education.

## Strategic Goal #3: 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.

#### *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 2023-2024 include:

### Primary Care

- ▶ Continue implementation of the Primary Care Roadmap focusing on the provision of team-based care through the establishment of patient medical homes (PMH) and neighbourhoods. To support this collaborative, team-based model, continue establishment of new positions within PMHs including physicians, nurse practitioners (NPs), registered nurses (RNs), licensed practical nurses (LPNs), medical secretaries, dietitians, social workers (SWs), physiotherapists (PTs) and pharmacists.
- ▶ Expansion of virtual care to increase access to care across the province through new access points including provincial libraries and platforms.
- ▶ Plan expansion of Primary Care Access Clinics for unaffiliated patients receiving a referral from a virtual care provider.

### MHA

- ▶ Continue development of the MHA Campus to construct new facilities supporting diverse programs and services.
- ▶ Establish the MHA Emergency Department and Short Stay Unit to provide individuals experiencing a mental health, addiction or substance use crisis with access to a multidisciplinary team of trained staff. Staff to support this new unit include nursing, social workers, clerks and service workers.
- ▶ Addition of NPs to support unaffiliated mental health clients.
- ▶ Through investments, support stabilization, expansion and staffing at Brackley Stables and small options homes to continue delivery of evidence-based programming to clients.
- ▶ Introduce FACT teams, which are Flexible Assertive Community Treatment Teams, that will provide support to clients with complex mental health needs in the community. Care will be provided by a multi-disciplinary team of health care providers.

### Seniors

- ▶ Continuation of dental coverage for seniors and low-income Islanders through the Provincial Dental Program.
- ▶ Establish a Care in Place Program.
- ▶ Increase provincial home care services supports for the following programs: COACH (Caring for Older Adults in the Community and at Home Program), Restorative and Respite care for seniors to receive care close to home.
- ▶ Extend evening and weekend coverage for LTC pharmacists.
- ▶ Implement NPs in home care for unaffiliated clients.

- ▶ Expand NPs into private LTC homes.
- ▶ Increase Seniors Comfort Allowance for residents in public and private LTC homes.
- ▶ Establish new manager positions to support the implementation of the Senior Health Services Plan in home care.
- ▶ Enhance equipment supply access to support home care nursing.

## Specialist Care and Community Programs

- ▶ Finalize implementation plans for midwifery services through continued engagement and planning sessions with multidisciplinary participants from across the province. To support implementation, hire the first Health PEI midwife to lead program administration balanced with clinical practice.
- ▶ Addition of service manager and administrative assistant to oversee portfolio of community-based services.
- ▶ Addition of clinical and administrative resources to the Gender Affirming Clinic, Specialist and Telemedicine Clinic, Diabetes Foot Care Program, Chronic Pain Management Clinic, Cardiopulmonary Rehabilitation Program and Rheumatology Clinic.
- ▶ Continue expansion of provincial drug programs (catastrophic drugs and high-cost drugs) and implementation of the Improving Affordable Access for Prescription Drugs Program.

## Clinical Supports

- ▶ To support care across the province, investments will also be made for hospital settings including:
  - ▶ Rehabilitation providers including PTs and occupational therapists.
  - ▶ Support staff for CT coverage and wait times management.
  - ▶ Investments to support Diagnostic Imaging and Laboratory staffing pressures.
  - ▶ Addition of clinical and support staff for Kings County Memorial Hospital (e.g. patient safety manager and Emergency Department (ED)), Prince County Hospital (PCH) (e.g. additional ED physician hours, Medical/Palliative Unit support staff, pediatrics equipment) and Queen Elizabeth Hospital (e.g. Pediatrics Department and additional ED physician hours).
  - ▶ Addition of specialist physicians including obstetrician/gynecologist, pediatrics, dermatology, renal and hospitalists and support staff for gastroenterology, ophthalmology, pediatrics and general surgery.

# Strategic Goal #4: 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 to take place in 2023-2024 include:

### System Utilization and Efficient Patient Flow

- ▶ Additional investments to support expansion of the patient flow team including provincial bed flow RN and engineering positions.
- ▶ Continue changes and updates to occupancy reports (Hospital, LTC, MHA).
- ▶ Support changes in critical care model at PCH to support stabilization of unit and staff.
- ▶ ICU and COVID admission tracking.
- ▶ Continue daily Provincial Bed Huddles to review system pressures and capacity.
- ▶ Ongoing work on Provincial Bed Management Standards and Provincial Patient Flow Guidelines.
- ▶ Ongoing work on Provincial Overcapacity Policy review.
- ▶ Administration of Discharge Barriers Fund to facilitate discharge from acute care facilities.
- ▶ Provide updates of Available Resources at Community Hospitals document to facilitate patient flow throughout the system.
- ▶ Early-stage implementation of a Wait List Management system to improve wait time reporting and operation room (OR) scheduling efficiency.
- ▶ Implement Cancer Treatment Center project aimed at optimization of the physician and nursing resources available to improve patient flow and increase the number of available appointments.
- ▶ Conduct ophthalmology project to study workflows to help increase the efficiency of the eye suite with respect to the total volume; thus helping to reduce total wait times.
- ▶ Provide support for unaffiliated patient workflow for patients with potential malignancy. Develop process flows and help define workflow for patients accessing Primacy Care Access Clinics.
- ▶ Develop reporting tools for assessing appropriate staffing levels in LTC and acute care allowing for evidence-based decision making with regards to bed closures and openings.
- ▶ Endoscopy Project Review – complete study to assess the resources available to the department and recommendations implemented to safely increase the average volume of procedures completed per month effectively reducing wait times.

### System Sustainability and Accountability

- ▶ Continued fiscal management.
- ▶ Application of strategic management framework including regular status updates on key initiatives and performance measurement and reporting.
- ▶ Addition of system supports for health analytics, policy coordination, access to information and privacy, finance and materials management.

## Innovative Technology and Practices

- ▶ Addition of positions to support implementation of the EMR, Home Care Solution, Health Portal and Clinical Data Repository projects.
- ▶ Implementation of enterprise Dragon Speech Recognition Software to eliminate the need for manual transcription.
- ▶ Launch of Virtual Hallway for NPs, physicians and specialists. Virtual Hallway is a web-based scheduling platform that connects clinicians with specialists through phone-based consults.
- ▶ Plan for implementation of the LTC InterRAI Information Management System.
- ▶ Plan for implementation of the Women's Health Module in the Clinical Information System.
- ▶ Establishment of physician assistants and associate physicians and application process for interested parties.

# Budget and Resource Summary

	2023-24 Budget Estimate	2022-23 Forecast	2022-23 Budget
	\$	\$	\$
<b>EXPENDITURE*</b>			
CORPORATE SERVICES .....	27,594,500	21,091,900	21,193,300
FINANCIAL SERVICES .....	10,667,200	9,849,000	9,484,500
MEDICAL AFFAIRS .....	232,230,500	198,385,500	214,953,100
HOSPITAL SERVICES .....	365,538,000	335,676,300	320,943,900
COMMUNITY HEALTH AND SENIORS CARE .....	245,511,600	211,585,800	206,095,000
MENTAL HEALTH AND ADDICTIONS .....	71,329,900	60,081,000	61,329,100
PROFESSIONAL PRACTICE AND CHIEF NURSING OFFICE .....	4,819,400	3,438,500	3,764,500
<b>GROSS EXPENDITURE.....</b>	<b>957,691,100</b>	<b>840,108,000</b>	<b>837,763,400</b>
<b>REVENUE</b>			
TOTAL OPERATING .....	31,831,400	37,795,200	31,209,200
TOTAL CAPITAL PROJECTS - External Organizations .....	5,909,500	7,749,600	6,334,200
<b>GROSS REVENUE.....</b>	<b>37,740,900</b>	<b>45,544,800</b>	<b>37,543,400</b>
<b>NET HEALTH PEI EXPENDITURE.....</b>	<b>919,950,200</b>	<b>794,563,200</b>	<b>800,220,000</b>
<b>CAPITAL PLAN</b>			
CAPITAL IMPROVEMENTS AND REPAIRS	37,432,600	23,472,700	33,329,800
CAPITAL EQUIPMENT	14,178,700	22,651,800	20,824,800
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>51,611,300</b>	<b>46,124,500</b>	<b>54,154,600</b>
<b>FULL-TIME PERMANENT EQUIVALENTS (Three Year Comparison) (DIRECT FTES)</b>			
	<b>2023-24</b>	<b>2022-23</b>	<b>2021-22</b>
CORPORATE SERVICES	130.37	107.21	102.47
FINANCIAL SERVICES	89.65	86.74	86.55
MEDICAL AFFAIRS	163.22	152.94	144.22
HOSPITAL SERVICES	2,145.42	2,101.12	2,071.78
COMMUNITY HEALTH AND SENIORS CARE	1,529.27	1,452.22	1,381.18
MENTAL HEALTH AND ADDICTIONS	543.28	519.11	478.21
PROFESSIONAL PRACTICE AND CHIEF NURSING OFFICE	29.40	27.90	26.96
<b>TOTAL FTES</b>	<b>4,630.61</b>	<b>4,447.24</b>	<b>4,291.37</b>

\*PEI Estimates of Revenue and Expenditures 2023/24

2023-24 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., QEII Roof Replacement, Electrical Switchgear and Panel Upgrades, Nurse Call Replacement, KCMH Building System Upgrades and Master Planning & Redevelopment), Primary Care Collaborative Care Centers (East Prince, Queens County and Summerside) Long Term Care facilities (Ventilation Upgrades to SH, WWM, BGH & QEII and Long Term Care Cooling Project) and facilities supporting mental health (Upgrades to Brackley Stables).

Capital investments are also made in technology and medical equipment including the replacement of the QEII Linear Accelerator and the Radiology Information System, CIS Millennium Upgrade, Medication Cart Replacement Project, IT solutions for Long Term Care and phase 2 of the Wireless for Point of Care Devices Network. A significant portion of Health PEI's medical equipment purchases are the result of efforts from various foundations. 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 2023-24 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

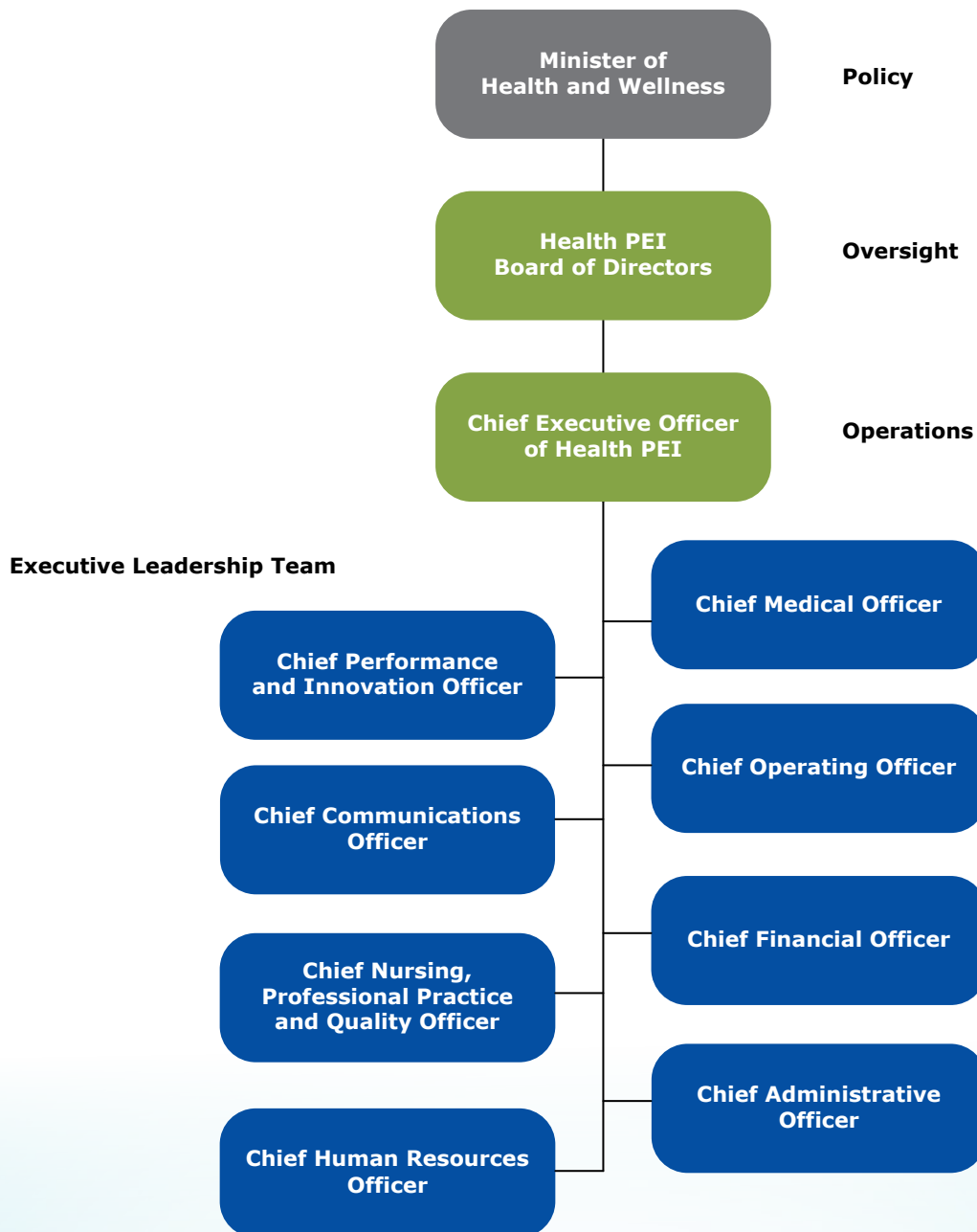
Strategic Goal	Priorities	System Performance Indicators <sup>1</sup>
People	<ul style="list-style-type: none"> <li>▶ Talent Management</li> <li>▶ Staff Wellness Safety</li> <li>▶ HR Planning and Processes</li> </ul>	<ul style="list-style-type: none"> <li>▶ Vacancy Rate</li> <li>▶ Turnover Rate</li> <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>
Quality & Safety	<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>
Access & Coordination	<ul style="list-style-type: none"> <li>▶ Primary Care</li> <li>▶ Mental Health and Addictions</li> <li>▶ Seniors Care</li> </ul>	<ul style="list-style-type: none"> <li>▶ Percent of Low Acuity Emergency Department 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 Mental Health and Addictions – Psychiatry)</li> <li>▶ Rate of Home Care Client Utilization of Inpatient and Emergency Department Services</li> <li>▶ Rate of Long-Term Care Resident Utilization of Inpatient and Emergency Department Services</li> <li>▶ Average Length of Stay (ALOS) in the Frail Senior Program for Discharged Clients (in years)</li> </ul>
Innovation & Efficiency	<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 Emergency Department Time Waiting for Inpatient Bed (TWIB)</li> <li>▶ Acute Care Emergency Department Time to Physician Initial Assessment (TPIA) for CTAS<sup>2</sup> 1-3</li> <li>▶ Percentage of Variance from Budget</li> </ul>

## Notes:

- <sup>1</sup>System Performance Indicators: evaluate overall system performance and the effectiveness of strategies. Indicators reflect the organization’s strategic direction.
- <sup>2</sup>Canadian Triage and Acuity Scale (CTAS)

# Appendix B: Organizational Structure

## Health PEI Organizational Structure



# References

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- <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*.



# Health PEI

## 2023-2024 Business Plan