

Highlights:

Patient First Review Update

June 2015

The 2009 Patient First Review was based on consultations with thousands of patients, families and health care service providers and administrators. Thanks to health system partners from across the province, meaningful changes have been made to the role of patients and families, the

design of work processes, the way organizations work together and the use of alternative approaches. Progress made so far supports the principles of convenient, safe and timely care, and government's commitment to innovation and efficiencies that support our growing population.

Reduction in the number of patients waiting for surgery:

Patients waiting more than:

18 Months
↓ 100%

12 Months
↓ 98%

6 Months
↓ 96%

3 Months
↓ 89%

(March 31, 2010 compared to March 31, 2015)

The Journey So Far – Key Accomplishments

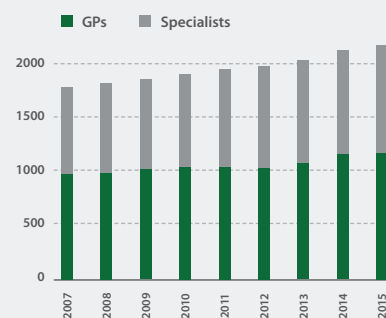
As a result of the **Saskatchewan Surgical Initiative**, surgical wait list numbers have fallen dramatically since March 2010. This was achieved through use of private clinics, an online Specialist Directory, pooled referrals, clinical pathways, and increases in training capacity for operating room nurses. The focus has now turned to the complex task of reducing emergency department waits.

Saskatchewan's team-based primary health care approach improves access to care. There are now 90 primary health care teams – 60 in rural areas, 22 in urban centres and eight in the north. These teams focus on better patient case management, better access to mental health



482 MORE PHYSICIANS IN SASKATCHEWAN

Saskatchewan Licensed Physicians 2007-2015



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and addictions services, and extended hours of service. Eight **primary health care innovation sites** are developing new approaches to managing patient care and improving access to basic services. **Collaborative Emergency Centres** in

Maidstone, Shaunavon and Canora are now providing basic and emergency care 24 hours a day, seven days a week.

Since March 2007, the number of **licensed physicians** in Saskatchewan has risen 27 per cent, improving access to physician services in rural and remote communities.

Patients and families need to be at the centre of all decisions and care processes. To date, more than **300 patient and family advisors** have been involved in quality improvement projects and provincial strategic initiatives.

Seniors care is being addressed through increased staff and more funding for **long term care facilities**. New approaches are enabling staff to regularly connect with residents, provide safer care for those with dementia and offer better support for seniors living in their own homes.

3sHealth (Shared Services Saskatchewan) has saved the health system more than \$110 million, largely through **group purchasing contracts**. A provincial linen service contract is also expected to save \$98 million over the next 10 years.

Since 2007, the Government has invested more than **\$1 billion in health facilities**, including 13 long term care facilities, the new Moose Jaw Hospital, the Children's Hospital of Saskatchewan and the Saskatchewan Hospital North Battleford. Lean (3P) processes are ensuring patients and staff have input into the design and functionality of these facilities.

STARS helicopter air ambulance has transported or treated over 1,000 patients since it was established in Saskatchewan in 2012.

The Path Forward – Options for the Future

The province will continue to search for efficiencies and innovations that support continued gains in service quality, patient empowerment, safety and value for money in our health system, including the following options.

Option to Pay Private Providers for MRIs

Building on the successful introduction of private delivery of surgical and medical imaging services, the provincial government is giving citizens

the option of private payment for magnetic resonance imaging (MRI) services. Legislative barriers will be removed to allow patients the option to pay private service providers for MRIs in the province.

Patient Choice

An innovative approach could give patients and clients greater choice in accessing select medically-necessary procedures that are not available in Saskatchewan. A credit system could allow patients more choice for a treatment option they feel would best address their health care concern. Eligible service providers would receive a pre-determined reimbursement by the province.

Improving the Quality of our Facilities

Saskatchewan must continue the process of infrastructure renewal, replacing outdated buildings and identifying new and pressing priorities. Innovative approaches such as public-private partnerships (P3s) will be considered.

View the complete Patient First Review Update report and the original 2009 Patient First Review Commissioner's Report (For Patients' Sake) at **www.saskatchewan.ca**.

