

# **BACKGROUNDER**

## **HealthLine 811 Update**

SHA's HealthLine 811 experienced a four-fold increase in call volumes in a 24-hour period the week of March 9-13, severely straining staffing resources and the technological infrastructure 811 relies on.

## **Action Plan**

There are three areas of focus in the SHA's action plan to ensure 811 remains an essential tool for the health system's strategy for managing COVID-19:

#### 1. IT Infrastructure:

The current infrastructure technology that 811 relies on has struggled to handle the unprecedented call volumes created by COVID-19. The following are the immediate actions being taken and further follow up actions in the coming weeks and months to address the problem:

#### Immediate action:

 Sasktel and eHealth were engaged on Thursday March 12<sup>th</sup>, 2020 to identify quick fixes that would immediately expand the capacity of the IT infrastructure 811 relies on. As a result of their quick work, the infrastructure can now handle double the call volume.

## Action in the coming weeks:

SHA will be working with eHealth and Sasktel to augment the IT infrastructure 811 health line
relies on, allowing 811 to have the technological capacity to scale up to handle any increase in call
volume.

## Medium term action:

• Ensure an infrastructure replacement plan is in place that better accounts for surges during any potential future pandemic event.

## 2. Staffing:

Staffing levels at 811 are based on an evaluation of call volumes over long periods of time to ensure high quality service as well as effective and efficient use of public funding. The call volume spike that occurred the week of March 9-13 was unprecedented and signalled the need for more effective surge capacity staffing at 811.

The following are the immediate actions being taken and further follow up actions in the coming weeks to address the problem:

#### Immediate actions:

- SHA has doubled the number of staff supporting 811 as of Friday, March 13.
- Staff numbers will continue to grow in the next few days to manage growing volumes.

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## Action in the coming weeks:

• Add LPN "Call Navigators". These Call Takers will ensure that calls to HealthLine 811 are directed to the appropriate resource, leaving the Registered Nurses more time to deal with calls related to medical issues rather than calls seeking information such as asking "What time a physicians' s clinic is open?" or "Where can I get a flu shot?".

## Medium/Long Term Actions:

Permanently implement a staffing model with RN 811 Call Takers and LPN Navigators. This will allow
us to be responsive with the use of SHA staff. When a pandemic hits, we can slow down on the RN
program side and divert those resources to address the pandemic. This proposed change in staffing
will allow for a flexible, sustainable staffing model that will serve Saskatchewan residents better
going forward.

## 3. Improving Processes:

Total manageable call volume is affected not just by IT infrastructure and staffing levels, but the time spent on each call. There are best practice processes to ensure each call is conducted efficiently and effectively for both the patient and the staff member.

Pandemics like COVID-19 require the development of new algorithms and scripts/key questions for staff to follow. Inevitably the introduction of these creates inefficiencies that the SHA will focus on reducing and eliminating in the days ahead. This should yield an increase in efficiency that will help the SHA better manage sustained increase in call volumes related to COVID-19.

## Monitoring & Adjusting in Real Time

The SHA will be continuously monitoring this action plan, making adjustments to IT infrastructure, staffing levels and processes as needed to adapt in real-time to the changing demands related to COVID-19.