

APPENDIX E:
YUKON HOSPITAL
CORPORATION



whitehorse
general hospital

January 23, 2004

Mr. Todd Hardy, MLA
Chair of the Standing Committee on Public Accounts
Yukon Territorial Government
Box 2703
Whitehorse, Y.T., Y1A 2C6

Dear Mr. Hardy:

In response to your letter of December 15, 2003 I am pleased to provide the information requested.

1. What is the mandate of the Yukon Hospital Corporation?

Whitehorse General Hospital is operated by Yukon Hospital Corporation and it is the Yukon Hospital Corporation that is named in the territory's Hospital Act. This Act states:

Objects of the Corporation –

The objects of the Corporation are to supply:

- a) hospital and medical care and services,*
 - b) supervised residential care and continuing care, and*
 - c) rehabilitative care and services,*
- so as to meet the needs of people in the Yukon.*

Powers of the Corporation –

1) For reaching its objects the Corporation shall

- a) establish and implement policies concerning the organization, administration, and operations of the Corporation;*
- b) establish and maintain one or more hospitals or other facilities for supplying medical services and programs;*
- c) provide insured services as defined in the Hospital Insurance Services Act and insured health services as defined in the Health Care Insurance Plan Act and other medical services or programs;*
- d) establish rules and procedures for
 - i. admitting, caring for, and discharging patients;**

- ii. *organizing and regulating the membership and work of the medical staff;*
 - iii. *appointing persons to the medical staff of the hospital;*
 - iv. *determining the qualifications for, and the privileges attached to, appointment to the medical staff;*
 - v. *determining specialities, or other categories of appointment, that are to be or may be recognized among the medical staff and the qualifications for, and privileges attached to each specialty or other category; and*
 - vi. *revoking, suspending, renewing, altering, and refusing appointments to, or privileges of, the medical staff;*
 - e) *establish committees of the board, delegate powers of the board to those committees, and establish procedures for meetings and work of the board and its committees;*
 - f) *control the powers and duties of officers, employees, and other agents of the Corporation; and*
 - g) *establish remuneration and traveling expenses to be paid to employees of the Corporation and establish their other conditions and benefits of employment.*
- 2) *For reaching its objects the Corporation may*
- a) *undertake research activities and preventive health programs;*
 - b) *subject to this and any other Act, set fees for services, materials, or facilities provided by the Corporation;*
 - c) *establish and administer programs for providing medical services to patients in their homes or in places other than a hospital or facility operated by the Corporation;*
 - d) *generally do such other things as are necessary to conduct its operations and its objects.*

Whitehorse General Hospital was transferred from Health Canada to Yukon Hospital Corporation on April 1, 1993. Following this transfer there was extensive planning carried out by Health Canada, Health and Social Services, First Nations and Yukon Hospital Corporation for transition to an integrated health delivery system. The Phase II Plan developed in August, 1995 was to repatriate nursing stations, cottage hospitals, community health centres, health units and the mental health program to the Hospital Corporation on April 1, 1996. There was also a plan to have the Hospital Corporation accept responsibility for Thomson Centre, Macaulay Lodge and certain home care services.

The expected benefits from this integration were:

- Separation of function between government (regulatory and monitoring) and service provider (provision of healthcare).
- Provision of a more seamless continuum of care for Yukoners.
- Cost effectiveness
- High level of care provided close to home

In November, 1995, the Minister informed the Board of Trustees of Yukon Hospital Corporation that it had been decided not to directly devolve any Phase II programs to Yukon Hospital Corporation. It was stated that after all the programs were repatriated to YTG the next step would be to consult with communities about how they should be governed. In January, 1996, the Yukon Hospital Corporation Board decided to write to the Minister requesting that political and operational issues between First Nations governments and Thomson Centre and Macaulay Lodge be resolved before the Hospital Corporation would accept responsibility for those two services.

Currently Yukon Hospital Corporation operates only Whitehorse General Hospital. It provides acute care services to Yukoners including:

- obstetrics,
- intensive care,
- surgery,
- general medical,
- pediatrics,
- short term mental health,
- day surgery and emergency department,
- physiotherapy and occupational therapy,
- laboratory and medical imaging diagnostic services
- and visiting specialist services such as orthopedics; ear, nose and throat; ophthalmology; oncology; dermatology; rheumatology; neurology; oral surgery; pediatric cardiology; and internal medicine.

The First Nations Health Program is also at Whitehorse General Hospital. It provides liaison services to First Nation people as well as traditional food, traditional medicine, child life support and community liaison services. The First Nations Health Program includes a healing centre and two elder suites and provides the only First Nations Dietitian Internship Program in Canada.

The hospital has non-acute patients occupying some of its 49 acute care beds. Since April 1, 2003 there has been an average of 7 patients per day who have been in hospital for more than 30 days and do not require acute care services. As of July 1, 2003, Whitehorse General Hospital accepted responsibility for long-term outpatient therapy services in addition to the acute outpatient therapy it has provided for many years. The Hospital operates the Diabetes Education Centre and is an active sponsor of the program Prevent Alcohol and Risk Related Trauma in Youth (PARTY).

The hospital also provides services and support to health facilities in communities including: drugs, narcotics, and vaccines as well as pharmacist professional liaison; medical, surgical and stationery supplies on a cost-recovery basis; hospital orientation and practicums for nurse practitioners; laboratory services; professional liaison services for medical imaging and

dietetics. The hospital also provides dangerous goods handling and laboratory services for Yukon Communicable Disease Control.

Whitehorse General Hospital puts very high priority on encouraging students to pursue and complete healthcare careers. We provide experience for family practice medical residents from the University of Calgary and clinical experience for student nurses. There are 12 student nurses currently at the hospital. Other students to whom the hospital provides experience include physiotherapy, pharmacy, pharmacy technicians, and health records.

2. How is this mandate being met?

Whitehorse General Hospital has reviewed the Yukon Health Status Report of 1998, the Health Summit 1999 Report and the Health Summit 2000 Report as well as the Report to Yukoners on Comparable Health and Health System Indicators of 2002. These reports have helped the hospital to determine the need for acute care services in Yukon.

The hospital carries out its own surveys including:

- Inpatient and Emergency Patient Satisfaction Surveys every 6 months. These surveys are used by hospitals in Ontario and provide comparative figures for similar hospitals. (Appendix 1)
- Each Day Surgery patient is called within 48 hours to be sure she/he is recovering well. This also provides feedback regarding patient satisfaction.
- All maternity patients are asked to complete an evaluation questionnaire.
- A survey of users of the First Nations Health Program was carried out a few years ago as part of an operational review of that service.
- The Diabetes Education Centre and the Therapies Department survey their patients on a regular basis.
- The Canadian Council on Health Services Accreditation offers a quality review service for the full range of health services. Whitehorse General Hospital participates in the acute care portion of their services. (Appendix 2)
- The hospital arranged for a review of its infection control practices by an expert 6 months ago, and its food service is inspected by Environmental Health Services Branch.
- The hospital's liability and property insurers carry out risk management inspections.

The hospital has 7 multi-disciplinary quality improvement teams. They are:

Surgery Patient Care Team
Maternity/Newborn Patient Care Team
Medical/Pediatric Patient Care Team
Mental Health Patient Care Team

Ambulatory Care Patient Care Team
Support Services Team
Quality Leadership and Partnerships Team

The appropriate health disciplines participate on these teams. These teams review information from the above sources and identify opportunities to improve our services to Yukoners.

The resident general surgeons and gynecologists are usually able to schedule patients for surgery within two weeks and sometimes within two days. There is not a waiting list for those types of surgical procedures. For surgical sub-specialists such as ophthalmology and orthopedics who come every 3 to 5 months, there are waiting lists. These are reviewed in conjunction with the Health Services Branch of Health and Social Services and additional clinic weeks are arranged as appropriate.

In addition to having comparable statistics for patient satisfaction, the hospital submits patient care statistics and financial information to the Canadian Institute for Health Information. The comparative patient care statistics from CIHI show that the average length of stay for the 5 most common admissions to our hospital is lower than for similar hospitals in Canada. (Appendix 3) CIHI is developing comparative indicators for financial information, however no reliable statistics are yet available. The Medical Staff also review all deaths in the hospital to be sure that optimum care was provided.

To be able to fulfil its mandate the hospital must have sufficient human resources to provide the services needed. The hospital has been successful in reducing its turnover rate for Registered Nurses to 4%. This compares favourably to other hospitals, which are usually in the range of 15-20%. Employee satisfaction surveys are carried out. (Appendix 4)

3. **How does the Yukon Hospital Corporation account to:**
- a. **The Legislative Assembly,**
 - b. **Individuals who use your service directly, and**
 - c. **Taxpayers generally?**

a) Accountability to the Legislative Assembly

The Hospital Act states:

Relationship to the Government of the Yukon

10 (1) The Corporation is not an institution of the Government of the Yukon and, except to the extent an agency relationship is created by a contract with the Government, the Corporation is not an agent of the Government.

(2) Despite subsection (1), the Languages Act applies to the Corporation.

Application of Human Rights Act and Financial Administration Act.

11 (1) Section 14 of the Human Rights Act applies to the Corporation.

(2) The Financial Administration Act does not apply to the Corporation

Audit of Corporation

12 The accounts and financial transactions of the Corporation shall be audited at least annually by an auditor appointed by the board of trustees.

Report to the Minister

13 (1) The financial year of the Corporation shall end on March 31.

(2) The Corporation shall, within six months after the end of each financial year, deliver to the Minister a report of the operations of the Corporation for that financial year, the report to include the financial statements of the Corporation and the auditor's report.

(3) The Minister shall table a copy of the report in the Legislature as soon as possible.

Whitehorse General Hospital is pleased to have this opportunity to voluntarily appear before the Public Accounts Committee. It is important that members of the Legislative Assembly and all Yukoners have pride and confidence in the services provided by Whitehorse General Hospital. The hospital regularly provides statistical and financial reports to the Department of Health and Social Services in addition to the audited financial statement. Senior Management of the hospital meet with the staff of the Health Services Branch on a monthly basis to discuss various issues. The hospital's annual Report to the Community is sent to each member of the Legislature.

b) Individuals who use your service directly

Whitehorse General Hospital accounts to individuals who use its services by ensuring that quality patient care is provided. This is accomplished by having well trained staff, good equipment and safe processes. Staff continually review the need for new services and opportunities to improve our processes through the work of the 7 quality improvement teams. All day surgery patients are contacted to be sure that they are recovering well, all maternity patients are

surveyed regarding their satisfaction and every 6 months a sample of inpatients and emergency patients are surveyed and compared to similar hospitals in Ontario regarding their satisfaction. Whitehorse General voluntarily participates in the Canadian Council on Health Services Accreditation quality survey. The Accreditation Quality Certificate is posted in the main lobby to assure patients that quality patient care is provided.

c) Taxpayers generally

1. The Hospital Act provides for a diverse representation of taxpayers on the Board of Trustees. The Act states:

Appointment of Board of Trustees

5(1) The board of trustees shall govern the activities and programs of the Corporation and shall consist of the Chief Executive officer appointed under section 5 and of the following members who shall be appointed by the Commissioner in Executive Council so as to achieve on the board gender parity and of whom

- a) three must be chosen from persons nominated by Yukon First Nations;*
- b) two must be chosen from persons nominated by the councils of municipalities other than the City of Whitehorse;*
- c) one must be chosen from persons nominated by the Council for Yukon First Nations, or its successor as the coordinating body for Yukon's First Nations;*
- d) one must be chosen from persons nominated by the council of the City of Whitehorse;*
- e) one must be chosen from persons nominated by the medical staff of the Corporation;*
- f) one must be chosen from persons nominated by the non-medical staff of the Corporation;*
- g) three must be chosen from the public at large; and*
- h) two must be chosen from the public service of the Yukon.*

The Hospital Act also states:

Public accountability of the Board

- 14. The board of trustees shall hold at least one of their meetings in public each year so as to allow members of the public to obtain information about and make recommendations about the programs and services the Corporation offers and the budget, facilities, and operation of the Corporation.*

In addition to this direct accountability to taxpayers on the Board of Trustees and at the annual Public Meeting, Whitehorse General Hospital accounts to taxpayers generally by being careful about the

use of taxpayer's dollars. Operational reviews have been carried out as follows:

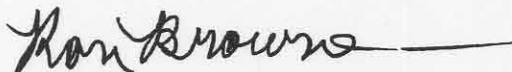
- for the entire hospital in 1997,
- for the First Nations Health Program in 1999,
- of the Dietetic Internship Program in 2003,
- and of various individual departments.

Managers contact other similar hospitals for statistics to use as benchmarks in preparing budgets.

The hospital has a Community Liaison Nurse who works with many community organizations. The public is kept informed of new services at the hospital and other issues through media releases. A summary of the year's activities is provided in the annual 4-page Report to the Community that is published as a newspaper supplement.

Thank you for this opportunity to provide more information about the mandate, operations, and accountability of Yukon Hospital Corporation. I look forward to answering the Committee's questions at its meeting on February 5.

Yours truly,



Ron Browne
Chief Executive Officer

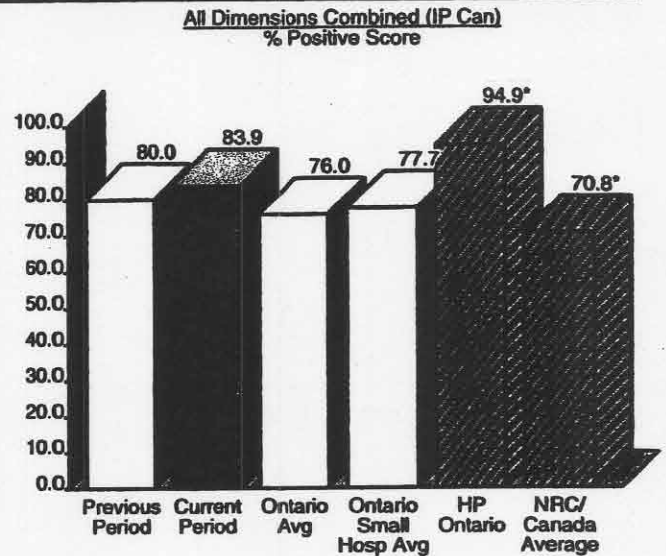
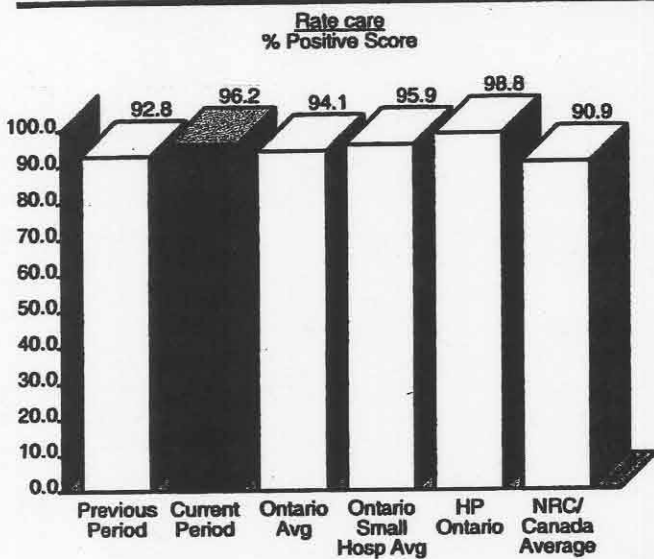
APPENDIX 1

November 22, 2003

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Acute Care Patient Experience-All Dimensions and Overall Ratings Whitehorse General Hospital Corporate Apr 1, 2003 - Jun 30, 2003 (n=54, Response Rate= 50.9%)



* Significantly Different from Your Current Score

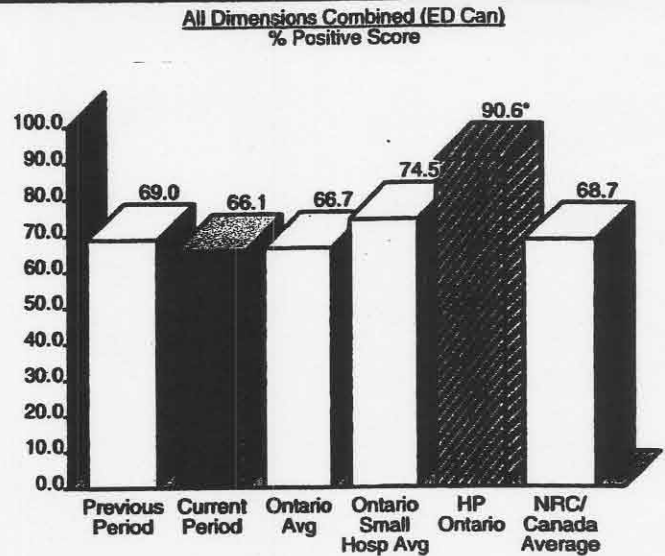
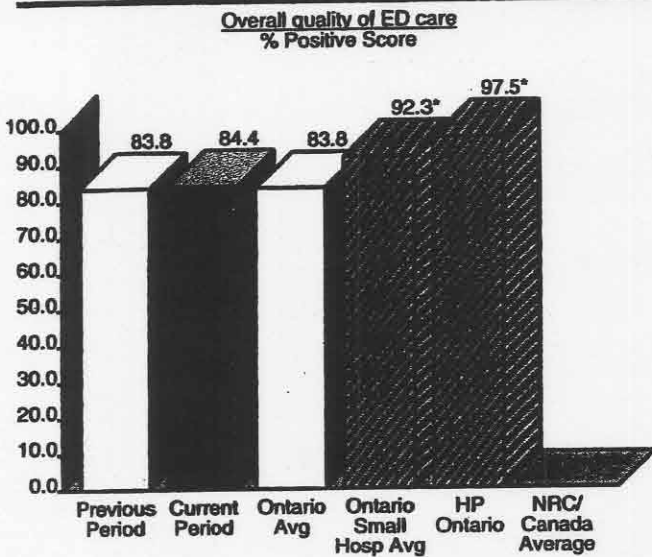
		<i>Detail</i>				
Previous Period	Highest correlation with "Rate care"	Ontario Avg	Ontario Small Hosp Avg	HP Ontario	NRC/Canada Average	
82.8%	Access (IP Can)	89.2%	82.9%	84.4%	96.1%↓	
79.4%	Respect for Patient Preferences (IP Can)	84.4%	78.1%	78.4%	93.3%↓ 74.2%	
75.6%	Emotional Support (IP Can)	79.6%	70.1%	72.7%	90.9%↓ 62.5%↑	
86.4%	Physical Comfort (IP Can)	86.9%	80.8%	79.1%	97.0%↓ 85.5%	
81.3%	Coordination of Care (IP Can)	87.6%	79.8%	83.9%	94.6%↓ 76.1%↑	
81.5%	Information and Education (IP Can)	87.1%	74.9%↑	77.2%	94.4%↓ 64.8%↑	
75.7%	Involvement of Family (IP Can)	86.3%	69.6%↑	72.8%↑	90.2%	
76.7%	Continuity and Transition (IP Can)	74.0%	71.6%	72.7%	89.9%↓ 69.4%	

Arrow represents statistically significant differences, at the 95 % confidence level, from your current score.
Your current score is: higher ↑ or lower ↓.



Emergency Department Patient Experience-All Dimensions and Overall Ratings

Whitehorse General Hospital Corporate
Apr 1, 2003 - Jun 30, 2003 (n=46, Response Rate= 32.4%)



* Significantly Different from Your Current Score

Detail		Ontario Avg	Ontario Small Hosp Avg	HP Ontario	NRC/Canada Average
Previous Period	Highest correlation with "Overall quality of ED care"				
	<i>% Positive Score</i>				
61.1%	Physical Comfort (ED Can) 47.5%	61.3%	70.7%↓	92.7%↓	86.4%↓
56.5%	Emotional Support (ED Can) 59.5%	62.1%	69.7%	85.4%↓	62.5%
63.7%	Information and Education (ED Can) 60.2%	60.3%	68.6%	82.5%↓	66.0%
75.4%	Access and Coordination (ED Can) 72.8%	69.0%	80.0%	95.3%↓	59.3%
77.9%	Respect for Patient Preferences (ED Can) 71.4%	74.8%	80.4%	92.9%↓	77.9%
65.8%	Continuity and Transition (ED Can) 64.1%	65.9%	69.3%	84.1%↓	71.4%

Arrow represents statistically significant differences, at the 95 % confidence level, from your current score.
Your current score is: higher ↑ or lower ↓.

APPENDIX 2

For immediate release: Wednesday, July 25, 2001

HOSPITAL RECEIVES 3 YEAR ACCREDITATION

Whitehorse General Hospital has received the highest level of accreditation award, a full 3 years. "This is wonderful news," said Chief Executive Officer, Ron Browne. He commended the hospital staff. "They have all worked very hard to receive this award and are proud of the accomplishment," he said.

The Whitehorse General Hospital had an accreditation survey completed this past March, which included a visit by 2 surveyors from the Canadian Council on Health Services Accreditation (CCHSA). This review by an external organization assesses how well the hospital is doing in meeting a number of national health care standards. Most health care organizations in Canada participate in this voluntary review as an important way to provide the public, other health care professionals and organizations with an assurance that the hospital provides safe, high quality care that meets national standards. The surveyors reviewed the facility, hospital documents, and a self-assessment review. They also met with a number of multidisciplinary teams, patients, employees and community partners to get their perspective on the care and services provided at the hospital. The surveyors stated that Whitehorse General Hospital is "first rate from top to bottom".

Joe Muff, Chair of the Board of Trustees also gave congratulations to the staff and the Board of Trustees. Muff is extremely pleased with the results stating "the surveyors were very impressed with the strong caring culture in the hospital as well as the skill and knowledge at every level of the organization". "Employee commitment and progress with on going improvement initiatives is an indication of the dedication of our employees", says Muff. Over 1/3 of the hospital's staff are involved in quality improvement initiatives.

For further information, contact Ron Browne at 393 -8732.

**Canadian Council on Health
Services Accreditation**



**Conseil canadien d'agrément
des services de santé**

Whitehorse General Hospital

Whitehorse (Yukon Territory)

Accreditation Survey Report

March 11 - 14, 2001

Confidential

Summary

Progress Since Previous Accreditation Survey

There has been significant progress since the last accreditation survey. The CEO, who was new at the time of the last survey, has impacted the organization greatly by supporting quality and new program initiatives. All recommendations from the last survey have been addressed satisfactorily.

Overall Strengths of the Organization

- Strong sense of teamwork.
- Good understanding of quality improvement concepts.
- Willingness to include and work with other health-related organizations.
- Excellent leadership.
- First-Nations Health Program.

Community Integration

The organization has generally been very successful in developing partnerships and linkages with other organizations. There is an excellent working relationship with First-Nations Health and with Yukon Government Services in the area of maternal/newborn care. However, although there is representation from community mental health (Yukon Government Program) on the Mental Health Team, there is evidence that the organizations do not always work in tandem to provide continuity of care (the Hospital is making efforts to work collaboratively, but are meeting resistance from Community Mental Health).

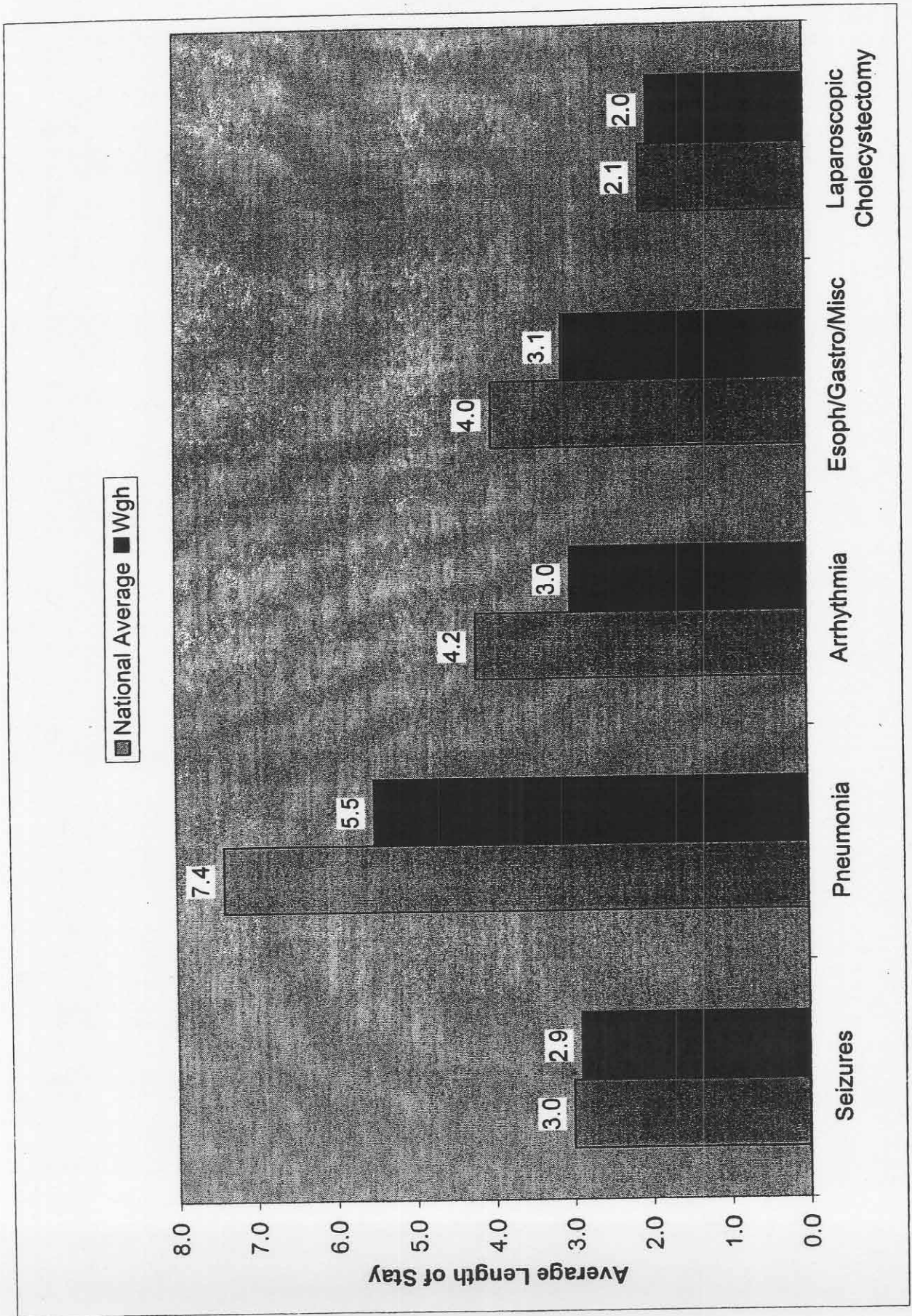
Team Functioning

Functioning within and between teams is highly developed. There is strong evidence that team members are used to and comfortable working together in the best interest of clients. This was particularly noticeable among the care teams.

Quality Monitoring and Improvement

Overall, there has been impressive progress in the area of quality improvement since the last survey. The leadership of the Director of Quality Improvement/Risk Management (who was recruited since the last survey) is probably the main reason for this progress. There is evidence of a strong understanding of QI concepts throughout the organization and many QI activities have been established. Performance indicators have been identified for all teams that are tracked and reported with varying frequency. However, a process for the regular tracking and reporting of all key indicators needs to be developed.

APPENDIX 3





WGH 2002 Employee Study Results

In the Spring of 2000, the Whitehorse General Hospital first contracted DataPath Systems to conduct a survey of hospital employees. DataPath Systems is a full service professional market research company located in Marsh Lake Yukon. All work upholds the strict codes of standards as set out by the Professional Market Research Society. This hospital survey included all staff levels, but did not include Doctors working at the hospital. In Fall of 2002, this contract was repeated. In both studies, a two-stage survey methodology was used to ensure employees had appropriate time to respond to the questions with the highest level of confidentiality. This resulted in a total of 196 completed surveys (60% of the total originally mailed). This generates a margin of error of 4.4% at 95% confidence (19 times out of 20).

1.1 Overall Comparisons

- ◆ Overall ratings showed that 44% of employees feel WGH is a better place to work than it was two years ago, and this is up from 34% in the 2000 survey.
- ◆ 48% rated working conditions and benefits as better than 2 years ago and that is up dramatically from the 2000 survey, where only 34% rated WGH better than it was in 1998

In general, employees at WGH are extremely satisfied with their careers

- ◆ 92% somewhat or strongly agree that they are very interested in health care.
- ◆ For the three questions on career satisfaction, (feel teamwork is a positive aspect of their job, they are motivated and interested in work, and they have a clear understanding of what their supervisor expects of them), positive responses ranged between 77% and 88%.
- ◆ Only 43% felt they have a clear understanding of their department's plans and budgets, with 42% feeling they do not understand the departmental information.
- ◆ The most negative component of their career issues continues to be opportunities

to advance, although this has improved since 2000.

1.2 Employee Benefits

- ◆ WGH is doing well on providing benefits like dental and disability, followed by EAP – in that they are both important to the employees and WGH is seen as delivering them well.
- ◆ The most important items which need immediate attention is to fix the workspace, and deliver better safety training, although both have improved since 2000.

1.3 Compensation/Scheduling

- ◆ Priorities stayed in the approximately same order as in 2000. While pay and salary continued to be to the most important item, it also maintained a high level of satisfaction. In fact, satisfaction increased from 41% rating it as satisfactory up to 49% in 2002.
- ◆ The items with lowest satisfaction and high importance continued to be Job Rotation and Variety of Shifts. Since 2000, the satisfaction with Job Sharing has stayed about the same, while satisfaction with variety of shifts has improved from 30% to 41%.

1.4 Internal Communication

- ◆ Communication from Senior management is the most critical item to improve (high importance, lowest satisfaction). This has not improved since the last survey.
- ◆ While clear policy is still very important and in need of improvement, satisfaction has increased from 14% in 2000 from to 24%.

1.5 Environmental Issues

- ◆ Delivery on dangerous chemical related issues is seen as slightly better than other areas, and had improved over delivery rates in 2000.
- ◆ Dealing with patients under the influence has the most low rating delivery scores.

This is followed by dealing with environmental issues.

- ◆ Comments in this area were similar to those 2000, dealing with nighttime patient and visitor issues.

1.6 Items most wanted implemented

Respondents were asked to select from a list of 15 items the three items they would most like the hospital to implement.

- ◆ The single item most desired out of the tangible items they could choose from, was *Job sharing* (38% selected this item). IN 2000, staff education (58%) was the top item selected.
- ◆ A close second is *employee recognition* (but not based on years of service) (same as in 2000)
- ◆ Items of next most importance are:
- ◆ More funding for gym/exercise memberships
- ◆ Yoga/relaxation classes
- ◆ Child care
- ◆ Conflict management classes
- ◆ On-site exercise

1.7 Behaviour:

- ◆ Smoking is down to 14%, from 18% in 2000.
- ◆ Drinking levels have stayed the same at 7%
- ◆ Eating junk food is the negative behaviour most abused, with one-third feeling they each too much of it. This is the slightly lower than in 2000 (33% vs. 36%)
- ◆ The majority (74%) are not involved in relaxation exercises.
- ◆ Exercise has increased slightly since 2000. In 2000 27% did not exercise regularly

Many thanks to all the staff who took the time to complete the survey.