NWT Health and Social

Services System



Status Report

October - March 2003



Message From the Minister



I am pleased to report on implementation of the Health and Social Services System Action Plan since its release in February 2002. This report highlights activities of the Department and Authorities for each of the 45 action items during October 2002 to March 2003.

I welcome comments on these activities and look forward to providing the next status report in six months time. I would be pleased to answer questions on our activities at any time.

J. Michael Miltenberger

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Introduction

In February 2002, the Minister of Health and Social Services released an action plan to reform and improve the NWT health and social services (HSS) system. This plan identifies 45 action items with specific deliverables and timelines for improvements in the following areas:

- services to people actions to support people in taking care of themselves and improve support they receive from the HSS system;
- support to staff actions to attract and retain the wide range of HSS professionals that are essential to the delivery of high quality services;
- system-wide management actions to improve the organizational structure and management of the HSS system;
- **support to trustees** actions to fully develop the leadership role and capacities of the Boards of Trustees for HSS Authorities; and
- system-wide accountability actions to clarify and increase accountability of the HSS system to the public, and the Department and HSS Authorities to the Minister and with each other.

This status report highlights activities during the first seven months of implementing the action plan. Similar reports will be prepared at six-month intervals to document our progress. Reports are posted to the Department's public website at www.hlthss.gov.nt.ca (see "Initiatives") to ensure public access to this information. Hard copies are also distributed to key stakeholders and available to interested members of the public.

For more information on the *HSS System Action Plan* or to request a copy of this report, contact:

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Action	Deliverables	Timel Original		Status
5.1.1 Publish a core services document and distribute it to all households in the NWT.	A published core services document Complete	Sep 2002	Mar 2003	The core services document describes the set of publicly funded services provided by the HSS system. The document has been distributed to all NWT households with the self-care handbook (Action Item 5.1.2). The French version will be ready for distribution with the French self-care handbook in April. The cover letter in the mail-out of the English resources will be in English (one side) and French (other side), and the French letter will reference the availability of the French versions to Francophone households upon request.
5.1.2 All households in the NWT will receive a self-care handbook.	A self-care handbook published and distributed to all households in the NWT. Complete	Nov 2002	Mar 2003	Copies have been distributed to all NWT households at the same time as the core services brochure (Action Item 5.1.1) The French version will be ready for distribution in April along with the French core services document. The feasibility of producing this resource in other Official Languages is being assessed. Considerations include ability to translate certain medical terminology, availability of translators and cost.
5.1.3 Establish a 1-800 family health and social supports call centre.	Call centre operational	Dec 2002	Oct 2003	The Department and Authorities have identified operational requirements for a toll-free call centre. A request for proposals was issued and bids were received on the proposed project. Responses were beyond the scope of the approved budget, and the decision to proceed has been postponed. Other alternatives are currently being pursued, including using funds provided by the Federal Government out of the Territorial Health Care Fund or undertaking this initiative with the other territories.

Action	Deliverables	Timel Original		Status
5.1.4 Evaluate our consumer's satisfaction with the health and social services system.	Annual consumer satisfaction report completed and reported to the public.	Jun 2003	Jun 2003	The Canadian Community Health Survey provides client satisfaction and service quality ratings in four areas: overall health services; hospital services; physician services; and community based services. Data for the NWT were first published in September 2002 in the <i>Report to Residents of the Northwest Territories on Comparable Health and Health System Indicators</i> . Due to the limited NWT sample size of the Canadian Community Health Survey, these data are only available at the territorial level, not regional or community level. The Joint Senior Management Committee would prefer to obtain client satisfaction measures at the Authority level. A client satisfaction form has been approved by the Joint Senior Management Committee.
5.2.1 Formalize an integrated Health and Social Services Delivery Model for the NWT	Service Delivery Model that details: Primary, secondary and tertiary services, Referral patterns, Speciality services, Access to services, Location of services, Services providers, Staffing mode, Clarify role of NGOs in the system.	Sep 2002	Jun 2003	The draft model has been approved by the Joint Leadership Council. The full model will include sections on specific areas of service delivery: * Continuing Care Services; * Mental Health and Addictions Services; * Protection Services; * Promotion, Prevention and Screening; * Diagnostic and Curative Services; * Rehabilitation Services. The draft model, including the two sections on continuing care and addictions/mental health, was reviewed by the Standing Committee on Social Programs in November 2002. The direction from Standing Committee was to return to the Committee with a final draft of the model in the spring of 2003. The draft model was tabled in the Legislative Assembly during the March session. An important component of this work is an assessment of the staffing requirements (type and number of professionals) for this model. A list of existing service providers and a draft of needed services will be completed.

Action	Deliverables	Timel Original		Status
5.2.2 Establish integration demonstration projects based on the Primary Health Care model	At least three operational projects. Lessons learned from the projects incorporated into the service delivery and program integration models. Complete	Oct 2002	Apr 2003	The NWT submitted a proposal to the federal Primary Health Care Transition Fund in order to advance work on primary health care reform in the NWT. Eleven projects were submitted by the Department and HSS Authorities, including: NWT Primary Community Care Coordination (Department), NWT Multi-disciplinary Forum (Department), Public Education Plan for the NWT Health Care System (Department), Beaufort Delta Wellness Teams Project (Inuvik Regional HSS Authority), Integrated Wellness Centre Project (Dogrib Community Services Board), Yellowknife Community Clinic Project (Yellowknife HSS Authority) – under review, Introduction of Midwifery Services (Fort Smith HSS Authority), Northern Women's Health Program (Stanton Territorial Health Authority) – under review, Nurse Practitioner Clinical Teaching Project (Dogrib Community Services Board), Community Health Dental Program (Inuvik Regional HSS Authority), and Aboriginal Community Health Worker Training Program (Deh Cho HSS Authority). Health Canada approved the NWT submission in March 2003, with 10 projects approved and one currently being finalized.
5.2.3 Implement coordinated discharge planning throughout the system.	Coordinated discharge planning protocol implemented throughout the system. Complete	Sep 2002	Apr 2003	A proposal for a Discharge Planning Model has been completed. Implementation will occur with no new resources.

Action	Deliverables	Timel Original		Status
5.2.4 Establish Collaborative Service Networks	Collaborative Service Networks that support delivery and innovation in identified service delivery areas. Complete	Sep 2002	Apr 2003	A framework for collaborative service networks will establish a common approach to sharing expertise and specialized services within the HSS system. The framework was reviewed by the Joint Senior Management Committee in November and subsequently approved by the Action Plan Steering Committee. In April, an operational policy and process for developing the network will be presented to the steering committee for the work being done on the integrated service delivery model.
5.2.5 Work with affected communities and industry to define and respond to the health and social impacts of development	A five-year plan that supports and addresses health and social issues. This plan will identify potential project activities that will help alleviate targeted social issues.	Jun 2002	Jul 2003	The McLeod Institute has been contracted by the Department of Resources, Wildlife and Economic Development to develop a set of common assumptions that would allow the GNWT and the Government of Canada to anticipate projected impacts. Social Agenda — Community Demonstration Projects: A related initiative includes the implementation of seven community demonstration projects to assess the effectiveness of mitigation measures relating to current development activities. Five of the demonstration projects will involve working with impacted communities on preparing for development. Packages of information, including a template for developing proposals, have gone to all band and community councils. Communities have until May 23 to submit proposals. An RFP for contractors interested in providing support to communities to assist them in developing their proposals has also been issued.

Action	Deliverables	Timel Original		Status
6.1.1 Establish a comprehensive Human Resource Plan.	A comprehensive human resource plan resulting from a review of the current human resources practices.	Jun 2003	Aug 2003	A request for proposals to establish a Comprehensive Human Resource Plan for the HSS System was issued. A contractor has been hired and work has started on the project. Work will include current human resource initiatives, reviews and best practices, and will involve professional associations and other key stakeholders. The human resource plan will include the following elements: • a description of the main occupations that are (and will be) required to provide the services described in the integrated service delivery model (Action Item 5.2.1); • a career progression model to clearly demonstrate entry options for recruitment purposes, entry level requirements and skill development/experience required for career progression; • a standardized orientation program for new staff; • a staff recruitment plan to provide overall guidance for staff recruitment as well as specific approaches for recruiting key occupations; and • a staff development and retention plan to provide guidance in the areas of: (i) in-service competency-based programs for specialized occupations; (ii) an established approach for mentoring staff in all service occupations; (iii) succession planning; and (iv) early response planning for critical staffing shortages.
6.1.2 Implement a competency-based model for recruiting, training, and supporting staff	A competency based model to support the recruitment, development and evaluation of front-line staff will ensure a consistent level of service delivery across the north.	Jan 2004	Jan 2004	Corporate Human Resource Services (Department of the Executive) is developing competency modules for management and human resource positions. The Department will work with Corporate Human Resource Services to develop competencies specific to health and social services professions.

Action	Deliverables	Timel Original		Status
6.1.3 All new staff will receive a standardized orientation to the NWT Health and Social Service System and cross-cultural training that reflects the character of the NWT and the region in which they are employed.	All new staff will receive an orientation to their work and community. Complete	Sep 2002	Jan 2003	A standardized orientation package for HSS employees was approved by the Joint Senior Management Committee: • an Orientation Manual designed to permit the Department and each Authority the ability to add additional information specific to their organization; and • an online orientation site (accessible only by HSS employees). The final version of the manual and orientation site is online, and modifications to these resources will be made on an as-needed basis to reflect the information needs of employees. Hard copy distribution of the manual will occur when the Sahtu HSS Authority is created, as the manual will be updated to reflect this new authority. A related activity is the development of a standard orientation manual for NWT physicians to assist both full-time and locum physicians in their orientation to practice in the NWT. The draft physician manual was provided to medical directors in November for their review and feedback. The manual was revised in February and returned to this group for review. Medical Directors will be discussing this manual at a meeting in late April.
6.1.4 Establish coordinated Professional Development activities for all system staff.	An Integrated Employee Development Program that: Consolidates funding, Catalogues programs, Includes a human resource development plan for all employees.	Jun 2002	Jun 2003	A calendar of professional development opportunities has been prepared and provided to all Authorities. Enhanced professional development as per the <i>Retention and Recruitment Plan for Allied Health Care Professionals, Nurses and Social Workers</i> was approved in November 2002. The new initiative guarantees professional development for front line workers. Professional development under the new initiative has commenced.

Action	Deliverables	Timel Original		Status
6.1.5 Implement succession planning to ensure that all staff have access to career advancement opportunities in coordination with other Departments.	Succession planning model developed and implemented.	Mar 2003	Jun 2003	Corporate Human Resource Services (Department of the Executive) is responsible for establishing government-wide parameters and activities for succession planning. This initiative will ensure all GNWT staff have access to career advancement opportunities. Corporate Human Resource Services will be issuing a call for nominations for candidates for the newly established Succession Planning Initiative in early May. Corporate Human Resource Services has developed a template for succession planning for management positions. Corporate Human Resource Services will be issuing a call for nominations for candidates for this newly established GNWT initiative in early May. The Department and Authorities will use this template to develop succession plans specific to health and social services professionals.
6.1.6 Expand mentorship programs to include all health and social services system staff.	A mentorship program that includes all health and social services system employees. Complete/ongoing	Mar 2003	Mar 2003	The Department has had a nurse mentorship program in place since 1997. As of the end of November 2002, 35 individuals have been mentored under the nurse mentorship program. Eight new mentorships will begin in 2003. Two new mentorship programs – one for advanced nursing and one for social work – will be implemented in 2003. Mentorship allowances for nurses and social workers mentoring under approved programs have been negotiated with the Union of Northern Workers. Development of mentorship programs for allied health care professionals will be ongoing. A three-month social worker mentorship pilot project has commenced and a mentorship skill development workshop has been developed for new mentors.
6.1.7 Implement a relief pool of professional health and social services employees.	Staff relief pool for selected occupational categories. Complete/ongoing	Sep 2002	Sep 2002	A centralized relief pool (accessible by all Authorities) has been established to include nurses, social workers and other health and social services personnel. Individuals in the relief pool provide relief services when they are on vacation or not providing relief services elsewhere. A separate relief pool has also been arranged for physicians. The Department has a partnership with Alberta to access their Rural Physician Action Plan relief pool for locum work in the NWT.

Action	Deliverables	Timel Original		Status
6.1.8 A common human resource tracking and information system will be implemented.	GNWT – HRIS operational in all regions.	Apr 2003	Aug 2003	The Department and Authorities are examining the HSS system's requirements for human resource tracking and information management. The Department and Financial Management Board Secretariat have assessed implementation and financial considerations for converting all Authorities to the current GNWT human resource information system. The analysis will include consideration of tracking/information systems currently in place to ensure a more informed decision.
6.2.1 Unify all staff under a single employer.	All Hay River, Lutselk'e and Fort Resolution staff will be GNWT employees.	Mar 2003	Jun 2003	Staff of Lutselk'e and Fort Resolution are GNWT employees with the Yellowknife HSS Authority. A legislative amendment to the <i>Hospital Insurance and Health and Social Services Administration Act</i> and <i>Public Service Act</i> to exempt employees of the Hay River Community Health Board from the GNWT public service (but allow the organization to be a Board of Management) received first and second reading in the March 2003 session of the Legislative Assembly. Third reading is scheduled for the June 2003 session of the Legislative Assembly.
6.2.2 Implement a single credentialing process for physicians.	A single credentialing process in place and operational for physicians. ✓ Complete/ongoing	Jul 2002	Nov 2002	A single physician credentialing committee has been established. With this in place, all Authorities have access to a single committee to review credentials of all physicians who wish to practice in the NWT. Use of this joint credentialing committee has already begun; however, to fully implement this new approach, Authorities will need to change their bylaws to automatically recognize physician credentials that have been granted through this process. All Authorities indicate they will be completing this final task.

Action	Deliverables	Timel Original		Status
6.2.3 Establish an expedited transfer process within the health and social services system.	System-wide coordination and articulation of current GNWT guidelines and policy that allows for an expedited transfer process	Mar 2002	Jun 2003	 The Akaitcho and Hay River regions are where the greatest difficulties lie in the flexibility to transfer employees. The following is an update on progress: Akaitcho: Staff of Lutselk'e and Fort Resolution are GNWT employees with the Yellowknife Health and Social Services Authority and therefore have been included in the existing transfer policy maintained by the GNWT. Hay River: Legislative amendments to the Hospital Insurance and Health and Social Services Administration Act and Public Service Act to exempt employees of the Hay River Community Health Board from the GNWT public service received first and second reading in the March 2003 session of the Legislative Assembly. Third reading is scheduled for the June 2003 session. Once these legislative amendments have been passed, the Hay River Community Health Board will be established as a Board of Management under the Hospital Insurance and Health and Social Services Administration Act. In addition, the GNWT has requested a meeting with the two unions directly affected to determine options for expediting the transfer process.
6.2.4 Ensure a safe workplace and 6.2.5 Increase community acceptance and support of workers	Agreements in place with communities to ensure workplace safety for all workers Agreements in place with communities to assist the integration of new employees into the community	Jun 2002 Sep 2002	Jun 2003 Jun 2003	A sample agreement (between HSS Authorities and representative community organizations) was reviewed by the Joint Senior Management Committee in November 2002 and has gone out to all the Authorities. The sample agreement was supported as a reasonable starting point for discussions with community leadership. Authorities are to begin working with community leaders to sign off agreements. Authorities have received a small fund to support this activity. There is a plan to offer a course on workplace safety sponsored by the Workers Compensation Board.

Action	Deliverables	Timel Original		Status
6.2.6 Review and enhance the marketing strategy to include recruitment and retention of all health and social services staff.	Implement a revised and expanded marketing strategy that will include all health and social services staff. Complete/ongoing	Oct 2002	Oct 2002	Current recruitment efforts by the Department and Authorities include participation in job fairs, web marketing, ad placements, etc. These efforts are geared to finding individuals who are interested in full time and part time employment opportunities as well as relief work. The GNWT has approved funding for recruitment and retention through the <i>Recruitment and Retention Plan for Allied Health Care Professionals, Nurses, and Social Workers and the Interim Health Profession Fund.</i> The retention and recruitment plan and the fund support enhanced initiatives for recruitment incentives in nursing, allied health professions and social workers. A series of retention initiatives for existing staff were also approved as part of this fund. A direct appointment process and a coordinated approach to employment placement have been introduced for all nurse graduates of the recent Aurora College graduating class. A similar approach will be in place for upcoming graduates of the Social Work program. The Department is working with the Authorities on an analysis of human resource functions to improve recruitment and retention efforts of staff across the system. The final report from this exercise is due for completion in May.
7.1.1 Establish the Joint Leadership Council (JLC) as the stewards of the health and social services system.	Terms of reference ratified by the JLC ✓ Complete	Feb 2002	Feb 2002	Terms of Reference for the Joint Leadership Council were ratified. The Council has been meeting quarterly (in person) and monthly (by teleconference). Direction provided by the Joint Leadership Council for the HSS system will be consistent with that of the Government of the NWT, and will recognize self-government agreements.

Action	Deliverables	Timel Original		Status
7.1.2 Establish the Joint Senior Management Committee (JSMC) as a forum for the collaboration and direction setting for system-wide operations.	Terms of reference ratified by the JLC. ✓ Complete	Mar 2002	Mar 2002	Terms of Reference for the Joint Senior Management Committee were ratified. The Committee has been meeting quarterly (in person) and monthly (by teleconference) as required.
7.1.3 Clarify roles and responsibilities in the health and social services system and reflect these in revised Agreements between the Department and the Authorities.	Clarify roles and responsibilities, and reflect these clearly in the Memoranda of Understanding with Authorities.	Feb 2003	Jun 2003	The Joint Senior Management Committee has reviewed a draft document outlining roles and responsibilities of the Department and Authorities. This document will be finalized once other related work has been completed, including the core services document (Action Item 5.1.1), the integrated service delivery model (Action Item 5.2.1) and the framework for a collaborative services network (Action Item 5.2.4). Memoranda of Understanding (MOUs) between the Department and Authorities will then be revised to reflect these updated roles and responsibilities.
7.1.4 Realign the organizational structure and business operations of the Authorities and the Department in order to increase clarity of roles and responsibilities.	A system-wide detailed organizational structure that reflects roles and responsibilities. Department reorganization completed	Mar 2002 Sep 2002	Oct 2003 Sep 2002	Authorities will review their structures and business operations once work in the following areas has been completed: • roles and responsibilities (Action Item 7.1.3), • core services (Action Item 5.1.1), • integrated service delivery model (Action Item 5.2.1), and • the framework for a collaborative services network (Action Item 5.2.4). The Department's organizational structure has been changed to more closely align business operations with its mandated roles and responsibilities.

Action	Deliverables	Timel Original		Status
7.1.5 The organizational structures that deliver health and social services programs and services will be referred to as Authorities.	Change the names of the Boards to Authority to reflect the current organizational structure, role and responsibility.	Feb 2003	Jul 2003	Regulations changing the names of the Yellowknife and Fort Smith Authorities came into effect April 1, 2002, while regulations changing the names of the Deh Cho and Inuvik and Stanton Authorities came into effect June 1, 2002. Two boards have not yet changed their names: • the <u>Dogrib Community Services Board</u> will be changing its name to the Tli Cho Community Services Agency – this name change will occur once the new agency is established under self-government legislation; and • the <u>Hay River Community Health Board</u> will be changing its name once amendments to the <i>Hospital Insurance and Health and Social Services Administration Act</i> are made. The proposed change will occur after the amendment is passed. The Bill received first and second reading in March and is scheduled for the third reading in June.
7.1.6 Realign Authority boundaries	Establish Sahtu Authority Dissolve Deninu Kue and Lutselk'e Establish alternate arrangement for the participation of Deninu Kue and Lutselk'e communities in directing health and social services in their communities	Apr 2003	Jun 2003	There is an agreed upon Terms of Reference for the creation of a Sahtu HSS Authority. The Steering Committee for this initiative has met and has agreed to the work plan for this project. The Committee is targeting June 1, 2003, as the start date for the Sahtu Authority. This Authority will operate with the support of the Inuvik Authority (through an interim services agreement) until all administration functions are operational in the Sahtu. The communities of Lutselk'e and Fort Resolution are now provided services as part of the Yellowknife HSS Authority.

Action	Deliverables	Timel Original		Status
7.1.7 Establish forums for joint planning of interdepartmental initiatives.	Report on lessons learned with the intent of improving collaboration across departments Complete/ongoing	Mar 2003	Mar 2003	 Ministers and Deputy Ministers for Social Envelope Departments hold regular meetings to share information and improve inter-department coordination of programs and initiatives. In addition, there are numerous forums for joint planning on inter-departmental initiatives, including: the GNWT Seniors Action Plan 2002-2003 (Executive, HSS, ECE, MACA, NWT Housing Corporation, NWT Seniors Society); the GNWT's Response to the Social Agenda (Executive, Finance, FMBS, HSS, ECE, Justice, MACA, NWT Housing Corporation); the GNWT Action on Tobacco (Finance, HSS, ECE, MACA, Workers Compensation Board); and the GNWT Early Childhood Development Initiative (HSS, ECE). Committees for each of these initiatives have been established with representation from the noted departments and agencies. These committees also work with other stakeholders, including key non-government organizations and service providers. The Department will work with these committees to determine how inter-departmental collaboration can be improved for these initiatives specifically, and provide a general summary report on lessons learned.
7.1.8 All strategies and framework documents will demonstrate linkages and directly support the strategic plan.	Demonstrate linkage and finalize all outstanding strategy documents. Complete/ongoing	Feb 2002	Feb 2002	The Department and Authorities use the strategic plan, <i>Shaping Our Future</i> , in setting direction for all HSS initiatives. Linkages between HSS and GNWT initiatives are identified within the various planning documents prepared for these initiatives (eg., <i>Seniors Action Plan, Action on Tobacco, GNWT's Response to the Social Agenda</i>). Other work, including an integrated service delivery model (Action Item 5.2.1), human resource plan (Action Item 6.1.1) and information management plan (Action Item 7.2.5), will also be developed within the directions stated in the strategic plan.

Action	Deliverables	Timel Original		Status
7.2.1 Implement a system-wide planning and reporting model	Comprehensive, strategic, business, operational and capital planning model. Complete	May 2002	Mar 2003	The GNWT identifies specific tasks, timeframes and reporting requirements for all departments to prepare three-year business plans. Preparation of the business plan for the HSS system requires effective and meaningful consultation between the Department and all seven Authorities. An <i>Integrated Planning and Reporting Model</i> was approved by the Joint Leadership Council in December. The model describes annual activities that result in the production of business plans, and meet system-wide accountability and reporting requirements. The model is being implemented for planning activities occurring in the 2003-04 fiscal year. For example, the
722 D	A 1.5 1 6 1	A	Oct	Joint Leadership Council initiated planning for the 2004-07 business plan at their January meeting.
7.2.2 Design and implement a revised funding model.	A defined funding allocation model for all Authorities. Implement funding	Apr 2003	Oct 2003	The <i>Integrated Service Delivery Model</i> (Action Item 5.2.1) will define levels of service across the HSS system. This delivery model will then be used as the basis for determining how funds will be allocated to Authorities. A working group of Department and Authority staff has initiated work in light of work completed to date on the draft <i>Integrated Service Delivery Model</i> .
	allocation model.	2004	2004	
7.2.3 Implement a standard financial accounting system.	A standard financial system implemented across all HSS Authorities.	Apr 2003	Apr 2004	The Department, in consultation with Authorities, completed a needs assessment in October. The working group is preparing a draft options paper for the Joint Senior Management Committee meeting in April 2003.

Action	Deliverables	Timel		Status
		Original	Revised	
7.2.4 Implement a system-wide approach to fiscal accountability.	Fiscal accountability structure that will have the ability to take a system-wide approach to deficit reduction, forced growth and spending on service enhancements will enhance the sustainability of the system. Complete	Apr 2003	Apr 2003	The fiscal accountability structure has been incorporated into the performance measurement system process (Action Item 9.2).

Action	Deliverables	Timel Original		Status
7.2.5 Implement an information management plan.	Coordinated systems and quality management information.	Jul 2003	Jul 2003	A revised blueprint for HSS information management was presented to the Joint Senior Management Committee in January. This plan includes improvements to key information systems used throughout the HSS system: • Children and Family Information (awaiting user testing), • Public Health Information (April 2003 pilot startup), • Community Health Information (November 2003 startup), • Vital Statistics (April 2004 startup), • Northern Health Information Management (April 2004 startup), • Medical Travel (startup date to be determined), • Patient and Hospital Scheduling (Phase 1 – November 2003 startup), • Telehealth expansion (ongoing), • Electronic Patient and Medical Records (small pilot starting mid 2003), • Common Financials and Human Resources applications among the Authorities (to be added to capital plan), • Electronic Diagnostic Systems (under review), and • Electronic Document Management System (under review). It is anticipated that the Joint Senior Management Committee will approve the Informatics Blueprint at its April meeting. Work is underway on the first eight initiatives on the list above. New items will be submitted for consideration during the capital budget planning process.

Improving Support to Trustees

Action	Deliverables	Time Original	lines Revised	Status
7.3.1 Legislative amendments and new legislation required.	New and amended legislation: • Health and Social Services Disciplines Act • New Nursing Profession Act • Hospital Insurance and Medical Care Act • Hospital Insurance and Health and Social Services Administration Act • Child and Family Services Act • Agreement on Internal Trade Amendments Bill Discussion Paper • Public Health Act • Health Information Act	Jun 2003	Jun 2003 Deferred Jun 2003 Deferred Jun 2003 Oct 2003 Jun 2003 Oct 2003	Health and Social Services Disciplines Act: Deferred to 15th Assembly. A discussion paper on health disciplines legislation was completed July 1, 2002, and circulated for comment to Authorities and professional associations. The first step will be the development of a Midwifery Act (see below). Nursing Profession Act: The Bill received first and second reading in the Legislative Assembly. Third reading is scheduled for June. Hospital Insurance and Medical Care Act: Deferred to 15th Assembly. A discussion paper has been drafted and circulated to internal stakeholders, Following receipt of comments, the paper will circulated to a wider set of stakeholders, including the NWT Medical Association and the NWT Registered Nurses Association. A legislative proposal for this Act is planned for submission early in the term of the next government. Hospital Insurance and Health and Social Services Administration Act: This Bill received first and second reading in the Legislative Assembly in March. Third reading is scheduled for June. Child and Family Services Act: Bill 22 - An Act to Amend the Child and Family Services Act received Assent on October 30, 2002. During the approval process, two issues were identified as requiring further amendments: 1) court review of apprehensions, and; 2) services for youth who do not have the capacity to enter into voluntary service agreements. In the near future, discussion papers and a subsequent formal legislative proposal have been developed to address the two issues. Public Health Act: Preliminary research has begun. A discussion paper is targeted for release in June 2003. Health Information Act: Preliminary research has begun. A discussion paper is targeted for release in June 2003.

Improving Support to Trustees

Action	Deliverables	Timel Original	ines Revised	Status
8.1 Implement a NWT model of health and social services Authority leadership that reflects NWT priorities, roles and accountabilities.	Leadership model implemented and published. Complete/ongoing	Sep 2002	Mar 2003	The NWT Model of Trustee Leadership has been approved by the Joint Leadership Council for inclusion in the Memoranda of Understanding with HSS Authorities. A training module reflecting this model will be completed by May. This module will form part of the training that all Trustees receive.
8.2 Implement a standardized process to call for nominations and appoint trustees.	All new trustees appointed following guidelines. Complete/ongoing	Jun 2002	Mar 2003	A standardized process for nominations and appointments has been completed. Guidelines were distributed to all Authorities and implemented effective February 1, 2003.
8.3 Implement an orientation training program that will be provided to all new Trustees.	Orientation manual and materials published and training schedule approved.	Jun 2002	Jun 2003	A working group, comprised of representatives from the Authorities and Department, is reviewing both orientation and training requirements for HSS trustees, as these requirements are complementary activities for trustee development. Twelve (12) of the 13 modules in the orientation/training manual have been completed, and trustee training workshops for the completed modules are currently underway. An invitational RFP has been sent out for the work on module 13.
8.4 Implement a training program for all trustees as requested and on a regular basis.	Training Manual published and training delivered.	Jun 2002	Jun 2003	Training has been held in the following Authorities: • Dogrib – October 8-10, 2002 (23 participants), • Deh Cho – January 14-16, 2003 (22 participants), • Fort Smith – January 21-23, 2003 (28 participants), • Inuvik – January 28-30, 2003 (27 participants), • Hay River – February 8-9 & March 15 (10 participants), and • Yellowknife – April. Participants include band councilors, municipal employees and HSS board trustees.

Improving System-Wide Accountability

Action	Deliverables	Timel Original	lines Revised	Status
9.1 Design and implement an accountability framework that details the expectation for monitoring and reporting at all levels across the system.	A detailed accountability framework for all program components of the system focusing on outcomes. Complete	Sep 2002	Oct 2002	The Joint Leadership Council has approved the <i>Accountability Framework</i> for the NWT HSS system. The <i>Accountability Framework</i> was tabled in March 2003 in the Legislative Assembly.
9.2 Introduce a system-wide performance measurement and reporting system.	A comprehensive plan for monitoring and reporting on system performance that focuses on program performance and includes: • Publication of annual reports on health status of NWT residents, • Annual reporting on measures of broad health and wellbeing. Complete/ongoing	Jun 2002	Feb 2003	The <i>Performance Measurement System</i> was approved by the Joint Senior Management Committee in January. CEOs are currently reviewing the indicators to assess availability of some of the measures, and these will be reviewed at the Joint Senior Management Committee meeting in April.

Improving System-Wide Accountability

Action	Deliverables	Timel Original		Status
9.3 Develop and implement the capacity for program evaluation throughout our system with emphasis on collaborative practice.	Monitoring and evaluation frameworks in place for all new initiatives and programs Complete/ongoing	Apr 2003	Apr 2003	A discussion paper was presented to the Joint Senior Management Committee at their November meeting. Feedback from that meeting has been incorporated into a revised draft that was reviewed by the Joint Senior Management Committee in January.
9.4 Reporting on the implementation of the Action Plan	Published status reports. ✓ Complete/ongoing	Jul 2002	Oct 2002	Communications requirements were identified and approved. Communications activities include the preparation of status reports every six months, interim communications with key stakeholders on project-specific progress and public announcements signaling achievements. Highlights of public communications activities to date include: • poster display and community posters distributed in late spring 2002; • information flyer #1 (on Joint Leadership Committee) distributed in late spring 2002; • Feb-Sept 2002 Status Report completed in October 2002; • information flyer #2 (on action plan progress and highlights) distributed with mass mail-out of Feb-Sept Status Report; • Oct—Mar 2003 Status Report to be distributed in May; • information flyer #3 (on action plan progress and highlights) to be distributed in May with mass mail-out of Oct-Mar 2003 Status Report.

Appendix I TIMELINES AND PROGRESS



