



# Health Human Resource Innovations in Saskatchewan

2010 CHSPR Health Policy Conference

**Critical HHR-related success factors  
underlying effective system change II**

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# Presentation Overview

- Highlights of three province-wide HHR initiatives
- Context/evolution and status for each initiative
  - Leadership
  - Engagement
  - Resources
- Factors underlying successful system change
  - Consolidating early results into longer term change
  - Factors contributing to positive early results
  - Challenges



## Key Provincial HHR Initiatives

- Provincial Mentorship and Graduate Nurse Job Program
- Saskatchewan Union of Nurses/  
Government Partnership
- Releasing Time To Care™ Program

*Creativity is thinking up new things.*

*Innovation is doing new things.*

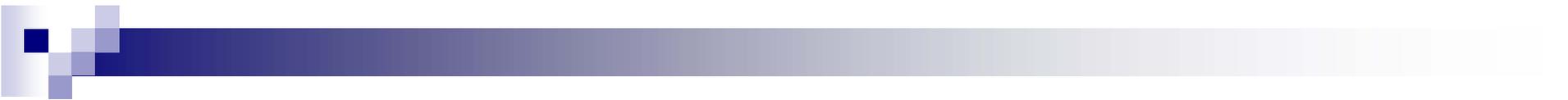
*~ Theodore Levitt*



## Context –

# Saskatchewan's Health System

- 2001 - Action Plan for Saskatchewan Health Care released in response to the Fyke Commission on Medicare
- 2002 - 12 Health Regions created from 32 health districts
- 2003 - First Minister's Accord on Health Care Renewal
- 2004 - Accelerate HHR planning
- 2005 - Saskatchewan Workforce Action Plan released
  - A number of recruitment and retention initiatives evolved from the Workforce Action Plan



# Mentorship and New Graduate Job Program

- Based on the Workskills Initiative pilot program (2006) with Health Canada funding, in partnership with the CFNU (Canadian Federation of Nurses Union), RQHR (Regina Qu'Appelle Health Region), SUN (Saskatchewan Union of Nurses)
- Introduced province-wide on recommendation of Provincial Nursing Committee (April '08)
- Goal – improve retention of new graduates
- Central mentorship coordination provincially
- New graduate and mentor attend a standardized workshop. Over 1500 nurses reached with the workshop



# Program Uptake

- April 1, 2008 to Feb 25, 2010
  - Total 609 Graduate nurses with mentors
- Less than 7% are known to have left their original region
- Less than 4% are known to have left the province
- Length of supernumerary periods vary based on unit and patient populations as well as the needs of graduate nurses



# Underlying Success Factors - Mentorship

- Leadership –
  - Credible, respected co-chairs of Provincial Nursing Committee
- Engagement –
  - RHA's & regulatory body support for concept & implementation strategy
  - Union support for concept, pilot & ultimately provincial roll-out
- Resources & Implementation Strategy
  - Resources provided at launch and augmented with funds for supernumerary positions for new graduates
  - Very receptive workplace, very structured, consistent training and support
  - Built on the people and processes that were seen to be successful in the pilot



# SUN/Government Partnership

- The shared common interest:
  - Need to stabilize and rebuild the Registered Nurse (RN) and Registered Psychiatric Nurse (RPN) workforce
  - Ensure the health care system will deliver high quality, timely, and accessible health services to meet Saskatchewan residents need
  - Improve workplace conditions



# SUN/Government Partnership

- Signed February 28, 2008
- Joint Partnership work/action plan to address the shared common interest
- Included commitment for:
  - Recruitment of 800 full time equivalent (FTE) RNs and RPNs in four years
  - Innovations under the Joint SUN/Health Region Retention and Recruitment Committees



# Regional Health Authority Engagement

- Originally, the Ministry and SUN were at the table. Membership expanded to include RHAs and employer representation (SAHO)
- A combination of staffing targets and funding provides a direct incentive
- Regions showing a sustained success in achieving targets see this funding become part of their baseline funding



# Results

- Health regions now employ 602 more FTE
- **Achieved 75% of target set by the Partnership**
- Agreed on a new method to collect data on vacancies
- Reduced vacancies to 351.9 (Dec./09)
- Recruitment and retention committees in every RHA (employer/union)
- Better positioned to forecast retirements and undertake proactive recruitment



# Underlying Success Factors

## – Partnership Agreement (R & R)

- Leadership
  - Public commitment to partnership – Minister of Health & President of SUN
  - Credible respected chair
  - Committed RHA leadership at the Table
  - Ongoing Ministry leadership & support
- Engagement
  - Time was required to build a broader partnership table that was inclusive of employers
  - Time was required to build a common understanding of the “Partnership Agreement” and how it would be applied



## Underlying Success Factors – Partnership Agreement (R&R)

### ■ Resources & Implementation

- Significant resources committed to initiative (60M fund created)
- All key decisions required to support implementation jointly agreed to by SUN, Ministry and RHA's
- Establishment of joint employer/employee recruitment & retention committees key to local implementation
- Both SUN & Ministry staffed positions (2 each) to support R&R committee work (North/South)
- Participation in the initiative and achievement of targets incorporated into agreed upon Strategic & Operational Directions (for Ministry/RHAs)



# Releasing Time to Care™: The Productive Ward

- Health Quality Council (HQC) initiative based on National Health Service: Institute for Innovation and Improvement – Productive Series
- Program to increase efficiencies and nursing time spent on direct patient care
- Announced March, 2008
- Initial \$5M over 4 years to HQC to invest in Accelerating Excellence – Productive Series
- Support from the Ministry of Health, health regions, SUN, and nursing regulatory bodies



## Releasing Time to Care <sup>TM</sup>: The Productive Ward

- Concept testing of 4 ‘modules’ in 2 RHAs (1 Unit/Ward each) – June 2009
- 12 sites began ‘context testing’ in Sept 2009
- 3 Year strategic plan identifies roll out to all wards in acute care by 2011
- Teams include unit lead, project lead, improvement facilitator, executive lead; 3-8 champions; staff



## Early Results

- Amount of time in providing direct care increased consistent with results seen in UK
- Positive feedback following engagement of front-line staff
- Safer/standardized care for patients; improving patient experience (measures: specific to each unit: falls/rates of infection/medication errors)



## Underlying Success Factors – Releasing Time to Care

### ■ Leadership

- Deputy Minister of Health – champion & initiator
- Health Quality Council Board & staff – champions, implementation support
- RHAs

### ■ Engagement

- Early engagement of broad group of stakeholders including nursing unions & regulators



## Underlying Success Factors – Releasing Time to Care

### ■ Resources & Implementation Strategy

- Resources provided at launch to HQC and subsequently to RHAs
- Grounded in successful experience in NHS
- HQC identified as Agency to work with RHAs test and adapt materials & tools and provide training & support
- Participation in the initiative and achievement of targets incorporated into agreed upon Strategic & Operation Directions (for Ministry/RHAs)



# Critical HHR-Related Success Factors Underlying Effective System Change

## Factors Contributing to Positive Early Results

1. A 'mature' delivery system/structure to implement province-wide changes effectively
2. Build on or build collaborative relationships.  
(Labour relations environment needs to be taken into consideration)
3. A resource and leadership commitment over an extended time period
4. Prioritizing and aligning initiatives across Ministry, RHAs, associations, unions and regulatory bodies



# Critical HHR-Related Success Factors Underlying Effective System Change

## Consolidating Results

- Initiatives will be seen to be a success if:
  - Can sustain the positive change and build on it.
  - Can demonstrate/measure a positive impact in the workplace.
  - Can demonstrate/measure a positive impact on patient care/patient experience.



# Critical HHR-Related Success Factors Underlying Effective System Change

## Challenges Ahead

- Number of change initiatives underway
- Ministry and RHA capacity
- Capturing Efficiencies
- Maintaining Relationships/Trust