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Main points

Part A of this chapter sets out the results of our audits of the Department of Health (Health) and its Crown agencies. Health needs better reports from regional health authorities (RHAs) to monitor their progress in achieving Health's objectives and to hold them accountable for their annual spending of \$2.2 billion. It does not have a capital asset plan to manage its \$900 million in capital assets (e.g., land, buildings, and equipment). It needs a written, tested, and approved business continuity plan to help ensure that it can continue to provide critical services in the event of a disaster. Health also needs to focus activities of its internal audit where Health is at greatest risk of loss of public money or spending money for unintended purposes.

The Saskatchewan Cancer Foundation (Foundation) needs to complete the setting of the performance targets needed to monitor the Foundation's progress in achieving its objectives. The Foundation must strengthen the preparation, approval, and implementation of information technology processes to ensure the confidentiality, integrity, and availability of information systems and data. It also needs a written, tested, and approved business continuity plan to ensure that it can continue to deliver its programs and services if its facilities or people are unavailable in case of a disaster.

We also examined the progress made by the Regina Qu'Appelle and Saskatoon RHAs in implementing our 2003 recommendations to reduce work-related back and shoulder injuries to care staff. Saskatoon and Regina Qu'Appelle RHAs are taking action to reduce injuries; Regina Qu'Appelle is progressing more slowly.

Part B sets out six financial measures that help the Legislative Assembly and the public to assess the sustainability of health spending. A sound understanding of health spending is important for an informed debate about the health issues facing Saskatchewan. Those issues pertain to the affordability of programs and services and the maintenance of Saskatchewan's health care infrastructure of buildings and equipment.

Part C describes the results of the audits of the 12 RHAs. Boards of directors of the RHAs need to improve how they set direction, monitor

performance, safeguard public resources, comply with the law, and ensure adequate accountability to the Legislative Assembly.

In Part D, we note that the Prince Albert RHA needs to improve its processes to achieve recommended immunization rates (i.e., 95%) for two-year olds. Immunization is an essential primary health service that reduces the incidence of disease, severity of illness, and frequency of hospitalization. The RHA's processes to create opportunities to immunize children by working with others and to monitor immunization coverage need improvement. The RHA's reported immunization rate is 67% for two-year olds who have received at least one injection from the RHA.

Part E describes how the Saskatchewan Association of Health Care Organizations (SAHO) needs to strengthen its processes to ensure the security, integrity, and availability of its payroll system. SAHO provides payroll services to over 37,000 people in almost all health care agencies in the province including the employees of the 12 RHAs. We make four recommendations for improving the payroll system.