Chapter 26 Sunrise Regional Health Authority—Scheduling Nursing Staff Follow Up

1.0 MAIN POINTS

Sunrise Regional Health Authority (Sunrise) has implemented the three recommendations that we made in 2010 relating to scheduling nursing staff. In our 2010 *Report – Volume 1*, we reported that Sunrise needed to follow its established policies for the approval of payroll, identify and report on the causes of overtime, implement strategies for reducing overtime usage, and report progress to the Board.

2.0 INTRODUCTION

Under *The Regional Health Services Act*, Sunrise is responsible for the planning, organization, delivery, and evaluation of health services it provides within its health region. To provide safe, quality health services, a sufficient number of nursing staff must be on duty to provide proper patient care.

In 2010, we assessed Sunrise's processes to schedule required nursing staff for patient care. Our 2010 Report – Volume 1, Chapter 12, concluded that Sunrise had adequate processes for scheduling required nursing staff for patient care in its healthcare facilities including managing labour costs related to overtime, except for the following matters.

It needed to:

- Follow established policies to review and approve nursing staff timesheets
- Identify and regularly report to the Board the causes of nursing staff overtime costs
- Implement established strategies for addressing causes of nursing staff overtime costs and provide regular progress reports to the Board

We made three recommendations.

This chapter describes our follow-up of management's actions on the recommendations we made in 2010.

To conduct this review, we followed the *Standards for Assurance Engagements* published in the *CICA Handbook – Assurance*. To evaluate Sunrise's progress towards meeting our recommendations, we used the relevant criteria from the original audit. Sunrise's management agreed with the criteria in the original audit.

3.0 STATUS OF RECOMMENDATIONS

This section sets out the recommendations and Sunrise's actions up to March 23, 2013. We found that Sunrise has implemented all of our recommendations.

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3.1 Timesheets Approved

We recommended that Sunrise Regional Health Authority ensure its nursing managers or other authorized staff follow established policies to review and approve nursing staff timesheets. (2010 Report – Volume 1; Public Accounts Committee agreement January 19, 2011)

Status - Implemented

Individual work units within Sunrise's health care facilities (e.g., Yorkton Hospital's Intensive Care Unit) have daily timesheets recording the hours worked by individual staff. Sunrise's policy requires staff to initial these timesheets to verify that they worked the time as indicated and supervisors are required to approve the timesheets. Under the established policies, payroll staff do not process payroll if the timesheets are not approved. We found that all of the timesheets that we examined were properly initialed by staff and approved by their supervisors prior to payroll processing.

3.2 Overtime Causes Identified and Reported

We recommended that Sunrise Regional Health Authority identify and regularly report to the Board the causes of nursing staff overtime costs. (2010 Report – Volume 1; Public Accounts Committee agreement January 19, 2011)

Status - Implemented

As part of its efforts to address overtime costs, Sunrise now generates reports that identify reasons for overtime, including sick time relief, vacation relief, and workload relief. This information is tracked regionally and by facility.

Sunrise's senior management reviews this information at monthly meetings. Sunrise now provides these reports to its Board on a quarterly basis.

3.3 Strategies Being Implemented

We recommended that Sunrise Regional Health Authority implement established strategies for addressing causes of nursing staff overtime costs and provide regular progress reports to the board. (2010 Report – Volume 1; Public Accounts Committee agreement January 19, 2011)

Status - Implemented



Sunrise has approved a number of strategies to address concerns about its overtime costs. It implemented the strategies it had established at the time of our audit. It has also devised and implemented other strategies to address causes of high overtime. For example, it has implemented the Strategies Toward Enhanced Performance. Under this strategy, Sunrise requires staff to report absences due to illness and other health issues. This allows Sunrise to accommodate health concerns that prevent staff from carrying out their normal duties. Additionally, Sunrise is actively recruiting new nurses to reduce workload pressures and address overtime costs.

As described above, the Sunrise Board is regularly receiving reports on overtime costs. These reports include the progress of initiatives and an assessment of whether Sunrise is meeting its target for reducing its overtime costs.

