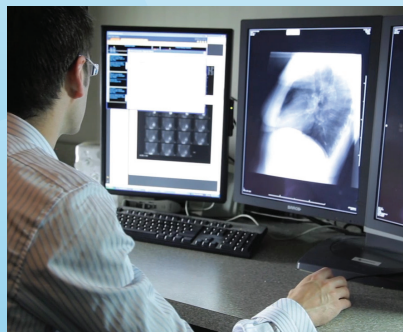


Annual Report 2013-14



**Empowering Patients,
Enabling Care**

Table of Contents

- Letters of Transmittal 3
- Message from the CEO 4
- Message from the Board Chair 5
- Introduction 6
- Board Members 7
- Mandate 8
- In Focus: Provincial IT/IM Strategy 9
- In Focus: Patient Engagement..... 10
- Progress in 2013-14 12
- Appendix I 22

Letter of Transmittal

Regina, Saskatchewan
July 31, 2014

Her Honour, the Honourable Vaughn Solomon Schofield,
Lieutenant Governor of Saskatchewan

May it Please Your Honour:

I respectfully submit the Annual Report of eHealth Saskatchewan for the fiscal year ending March 31, 2014, including the financial statements duly certified by auditors for the Corporation in accordance with The Crown Corporations Act, 1993.



Dustin Duncan
Minister of Health



Regina, Saskatchewan
July 31, 2014

The Honourable Dustin Duncan
Minister of Health

Honourable Dustin Duncan:

I have the honour of submitting the Annual Report of eHealth Saskatchewan for the fiscal year ending March 31, 2014. I take responsibility for public accountability seriously and, as CEO, I have made every effort to ensure the accuracy of this report.



Susan Antosh
Chief Executive Officer
eHealth Saskatchewan



Message from the CEO

This was an exciting year for eHealth as we continued to build on the progress made in the first year of our five-year strategic vision. During this second year of our broad plan, eHealth Saskatchewan (eHealth) continued to deliver on government's commitment to provide innovative ways of improving the way healthcare services are delivered.

eHealth's lens remains firmly focused on the patient and how our work benefits the timeliness and quality of their care. 2013-14 saw even more engagement with patients and citizens as we plan and prepare for a future state of empowering patients through access to their own health care information.

In 2013-14, we saw a maturity in the capacity of eHealth to support the work of advancing the electronic health record system. This is being done through strategic investment for the development and implementation of an Electronic Health Record (EHR) for all the residents of Saskatchewan.

This fiscal year also saw the addition to our portfolio of vital certificates, such as birth, death and marriage certificates. eHealth also took over management of the province's health services card.

Vital work continued to manage the data banks, and the connections for individual health care providers and to ensure privacy and security of all personal data entrusted to the health information management systems.

My thanks to all our partners and stakeholders for their great work in 2013-14. It's the dedicated people at eHealth and within our partner organizations who have helped make this another productive year. I look forward to even more progress toward our ultimate goal of supporting the highest quality patient care experience as we continue to empower patients and enable care.



Susan Antosh
Chief Executive Officer
eHealth Saskatchewan

Message from the Board Chair

EMPOWERING PATIENTS, ENABLING CARE

During the 2013-14 fiscal year eHealth Saskatchewan continued to build, both organizationally and operationally with big gains in establishing the Electronic Health Record (EHR) for the province of Saskatchewan. Within a few months the core elements of the EHR will be complete as defined by Canada Health Infoway. There are now more than 2,000 health care providers in over 500 locations using the eHR Viewer to access the EHR.

The eHealth Board of Directors endorsed overarching goals for the corporation that aligned with government direction:

- Improve access and connectivity in Primary Health Care innovation sites and use early learnings to build foundational components for spread across the province.
- Transform the patient experience through sooner, safer, smarter Surgical Care
- Safety Culture: Focus on Patient and Staff Safety

In addition to supporting these three government strategic priorities, eHealth also worked to support the goal of reducing emergency department wait times and maximizing patient flow plus outcomes for strengthening mental health and addictions services.

A new Chronic Disease Management - Quality Improvement Program (CDM-QIP) was implemented to support physicians caring for patients with Diabetes and/or Coronary Artery Disease.

A new vaccine tracking and immunization module (Panorama) will be implemented in 2014-15 that will be foundational in disease outbreak management across Canada.

A Value for Money Validation Audit completed in 2013 calculated the quantitative benefit from investment in eHealth. Programs were found to be contributing value in excess of \$74M/year. As these programs mature and adoption increases the quantitative benefits will grow substantially.

In reflecting on my first year on the Board as Chair, I am pleased to be part of an organization that directly contributes to improved patient care every day. I would like to thank staff and all of our partners for their hard work and dedication to moving eHealth forward in this province. I anticipate another exciting and productive year in 2014-15.



Gerald Fiske
Board Chair

Introduction

This annual report presents the corporation's activities and results for the fiscal year ending March 31, 2014. It reports on public commitments made and other key accomplishments of eHealth Saskatchewan.

ALIGNMENT WITH GOVERNMENT'S DIRECTION

eHealth's activities in 2013-14 align with Government's vision and four goals. Government's vision and four goals provide a directional framework for ministries, agencies and third parties to align with these priorities. This honours government's commitment to keep its promises and ensures greater transparency and accountability to the people of Saskatchewan. eHealth's work supports the achievement of Government's goals and a growing and prosperous Saskatchewan with improved quality of life and responsible government.

Our Government's Vision

A strong and growing Saskatchewan, the best place in Canada – to live, to work, to start a business, to get an education, to raise a family and to build a life.

Government's Goals

- **Sustaining growth and opportunities for Saskatchewan People**
- **Improve our quality of life**
- **Making life more affordable**
- **Delivering responsive and responsible government**

Board Members



**Gerald Fiske -
Chair**

Gerald Fiske was appointed to the eHealth Board in March 2013 for a three-year term. He has a rich history of experience in the Information Technology world, previously serving as Chief Information and Services Officer in the Information Technology Office.



Dr. Milo Fink

Dr. Fink has served several years on the Board of eHealth and was reappointed for a three-year term in March 2013. Dr. Fink is a Regina Physiatrist. Through his rehabilitation practise, he discovered an interest in the use of computers in medicine and has been a valuable contributor to the eHealth Board.



David Fan

David Fan is President and CEO of the Prairie North Health Region. He brings the valuable perspective and input from the Regional Health Authorities. He has served on the eHealth Board for several years.



Scott Livingstone

Scott Livingstone is CEO of the Saskatchewan Cancer Agency and has previously served as CEO of eHealth Saskatchewan. He also had several years with the Ministry of Health as Executive Director of the Health Information Solutions Branch which became the Treasury Board Crown Corporation, eHealth Saskatchewan. Mr. Livingstone has been on the board since those formative days.



Duane Mombourquette

Duane Mombourquette has served on the eHealth Board for several years and was reappointed for a three-year term in March 2013. Mr. Mombourquette is Executive Director of Access and Privacy with Saskatchewan Justice.



Jim Rhode

Jim Rhode is the Chair of the Saskatoon Regional Health Authority and is also currently serving on the Board of 3S Health. Along with involvement in several community organizations, Mr. Rhode is President of Davis Machine Company.



Tracey Smith

Tracey Smith was appointed to the eHealth Board in May 2014. Ms. Smith has served in a number of roles in the Government of Saskatchewan and is currently an Assistant Deputy Minister at the Ministry of Health.

KEY ROLES OF eHEALTH SASKATCHEWAN:

- To **lead** Saskatchewan electronic health record (EHR) planning and strategy
- To **procure, implement, own, operate and manage** the Saskatchewan EHR including the associated provincial components and infrastructure to facilitate improved health provider and patient access and use of electronic health information
- To **procure, implement, own, operate and manage** other health information systems
- To **deliver** an electronic health record for Saskatchewan citizens
- To **establish** the provincial eHealth information and technology standards necessary to access the Saskatchewan EHR and the associated provincial components and infrastructure
- To **provide data stewardship** for the EHR and, where appropriate, of health information systems including the following
 - To **administer the rules for EHR** data collection, use and disclosure; and
 - To establish and administer **provincial standards to protect** the quality, confidentiality and security of EHR data
 - To **protect** EHR data as a strategic resource
 - To **act as trustee** and information manager for Saskatchewan EHR databases and services
- To **facilitate** improved health provider, patient access and use of electronic health information thus enhancing the delivery of health care services in the province
- To **work and cooperate** with regional health authorities, other health care organizations, providers, other organizations providing related services as agents, contractors or partners in health information systems and the public in the development and delivery of the Saskatchewan EHR and other health information systems
- To **pursue** consistent funding for the Saskatchewan Electronic Health Record and other health information systems from all available sources, including Canada Health Infoway and to be accountable for the spending of such funds
- To **manage and operate** the Vital Statistics Registry, Change of Name Registry, Health Services Cards and all associated services

PROVINCIAL IT/IM STRATEGY

In the 2013-14 plan published by the Ministry of Health, direction was provided to eHealth Saskatchewan (eHS) and Health Shared Services Saskatchewan (3sHealth) to “work in partnership with key stakeholders to develop a strategy to integrate Information Technology (IT)/Information Management (IM) services throughout the health system” by March 31, 2014. The Plan further directed that “all key infrastructures (IT, capital, facility renewal) will be coordinated, integrated and delivered on a provincial basis” by March 31, 2017.

IT/IM services play a key role in the delivery of effective quality healthcare. The review of IT/IM services in Saskatchewan kicked off with a “Visioning” day in fall 2013 with a cross-section of patients and health care providers and administrators from every health region. The participants created the Vision statement below:

“Better health by empowering patients and enabling providers with the right information at the right time through a provincially standardized system that is sustainable and secure”.

A business plan was developed which recommended a phased approach over a three-year period to deliver IT/IM services on a provincial basis by 2017. Approval of the business plan was postponed in March 2014 and eHealth was asked to facilitate additional follow up in 2014-2015 including:

- An inventory of IT/IM services across the province
- An integrated multi-year provincial strategic plan for IT/IM
- Development and implementation of standards.

The development of an integrated provincial strategy will transform IT/IM services across the provincial healthcare system, resulting in improved quality of patient care.



Denise Junek, VP of Business Relations and eHealth talks about current IT services at IT/IM Visioning Day

- The vision for eHealth Saskatchewan is “Empowering Patients, Enabling Care”. The focus for core eHealth services is supporting electronic access to patient information to support decision making and improved patient care.
- The main elements of the Provincial Electronic Health Record are nearing completion and can be accessed through the electronic health record (eHR) Viewer. Continuing the vision, eHealth has now begun the process of developing a version of the eHR Viewer for patients. A citizen engagement was undertaken with people from around the province to provide feedback and recommendations for priorities in the development of a patient viewer/portal.
- Seventeen members of a citizen panel attended a two-day workshop where they learned about the Saskatchewan health care system, the electronic health record and what is currently available electronically, and what options exist for a patient portal. The next step was for the newly educated citizen representatives to reach out to friends, colleagues and neighbours in their community to solicit more feedback on what kind of information people would most like to access. Through this process more than 600 people from across the province had an opportunity to learn about eHealth and provide input on priorities for the design and development of the patient viewer. The engagement process and final report was done by Mary Smillie, a Saskatchewan facilitator and improvement advisor.

Some of the recommendations in the final report from the Citizen Engagement panel:

1. Access to data and information currently available through EHR Viewer.
2. Front Page – a template that patients populate with key health information.
3. Patient Journal – chronological list of service contacts – symptoms, diagnosis, treatment.
4. Online Prescription Renewal.
5. Third Party Access for Parents and Caregivers.
6. Scheduling Appointments through Secure Communication.
7. Standardized Patient Information that Auto Populates Assessment Forms.
8. Tracking and Monitoring Function through eReferral.
9. Ability to Audit who has viewed personal health information.
10. Communicate through Email with Providers.
11. Download Clinical Notes.

The Citizen Panel also created a set of guiding principles to support the design and function of a patient viewer:

- Empowered and Enabled Citizens take responsibility for their health.
- If information is available on EHR viewer, then should be available on patient portal.
- Ease of access – must be user friendly in design, accessible to people with disabilities, over multiple devices.
- Get it out there ASAP! Be prepared to enhance in the future.
- Balance to get it out there soon and drive for the most functions and the most access for the most people.
- Universality in deployment – don't select special groups or certain areas of the province to receive first.
- You have one chance to get it right – test, retest and retest.
- Free to use and no advertising.

- Since the completion of the first engagement, several panel members have acted as citizen/patient representatives on a number of eHealth activities like Rapid Process Improvement Workshops and Mistake Proofing projects. Citizen input and feedback is valued and crucial to the success of creating services that support improved patient care and empowerment. eHealth is always looking for individuals who are interested in having input into electronic health services. Anyone who is interested in being a citizen representative can email contactus@ehealthsask.ca



eHealth Citizen Advisory Panel

Progress in 2013-14

THE PROVINCIAL ELECTRONIC HEALTH RECORD (EHR)

Every time you visit the doctor, receive a vaccination or have a medical test, you are creating information which can be stored in your personal electronic health record. This collection of information is valuable because it can be used by your health care team to provide the best possible care. Patients benefit through faster diagnosis and treatment, less duplication of tests, fewer medication errors or allergic reactions and even potentially avoiding costly travel and lost time at work. Every year, eHealth adds new features to the provincial electronic health record and the core elements of the EHR, as defined by Canada Health Infoway, will be complete in the next fiscal year. This information is accessible through the eHR Viewer, a secure web-based system that is available on any device including iPads and laptops.

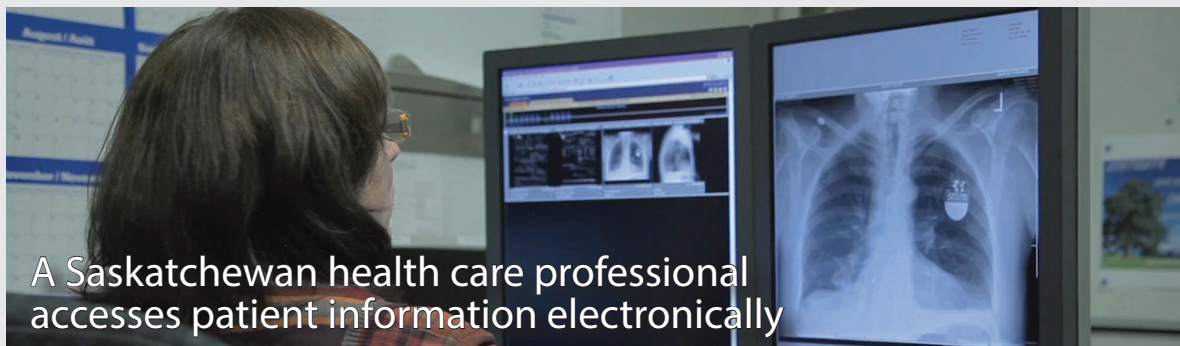
In 2013-14 these additional features were added to the EHR:

- Chronic Disease Management – Quality Improvement Program (currently includes Diabetes and Coronary Artery Disease)
- Clinical encounters (Physicians can now see if their patients have received care in a hospital)
- Hospital Discharge Summaries (Saskatoon Health Region)

These features are in addition to the existing elements including:

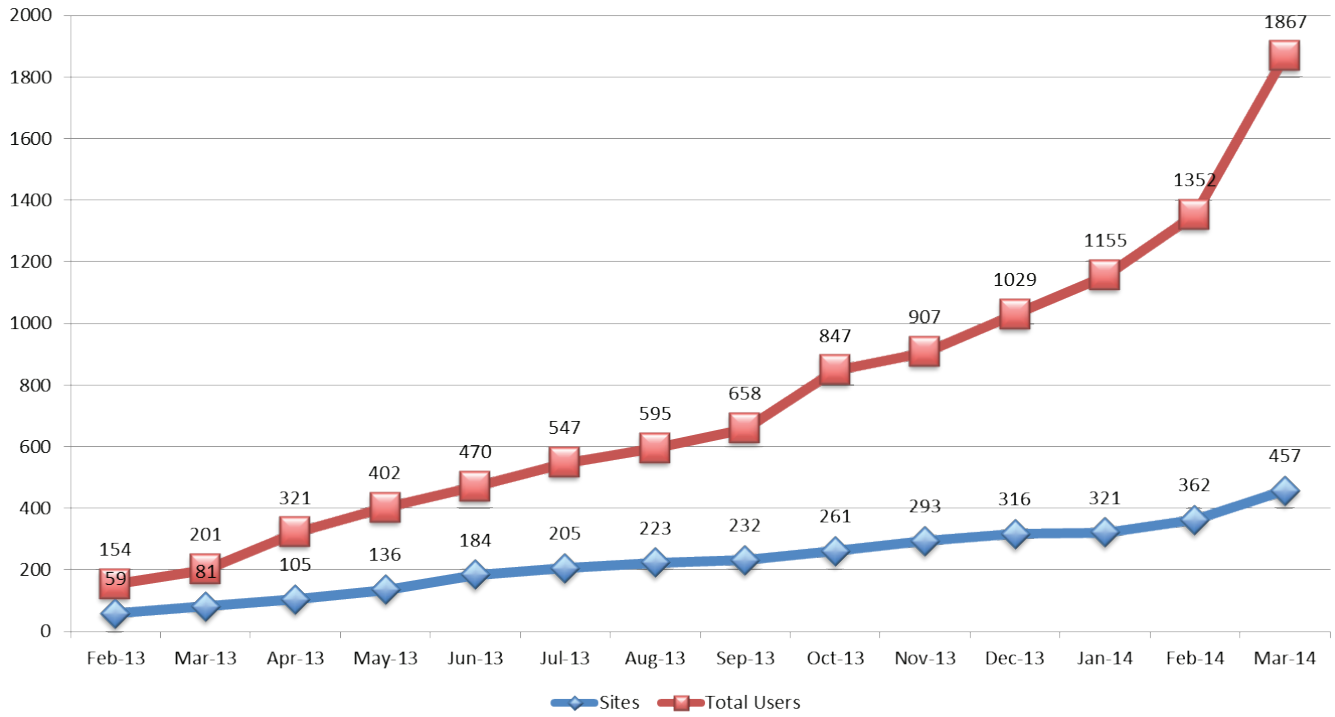
- Laboratory results (over 90% of lab results in the province)
- Prescribed medications (100% of community pharmacies)
- Immunization history

Coming next year – the addition of Medical Imaging information and the addition of congestive heart failure and chronic obstructive pulmonary diseases to the CDM-QI program.

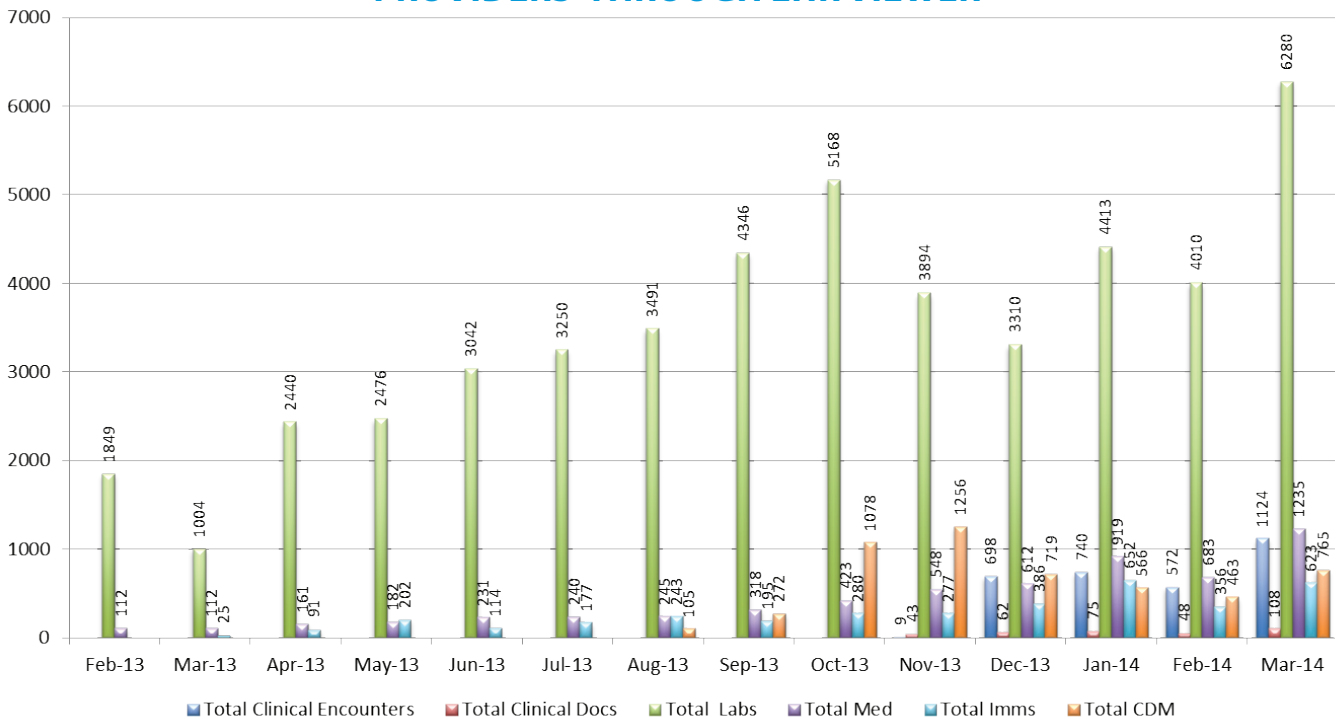


A Saskatchewan health care professional accesses patient information electronically

EHR VIEWER USERS AND SITES



INFORMATION ACCESSED BY HEALTH CARE PROVIDERS THROUGH EHR VIEWER



BRINGING MEDICAL CARE CLOSE TO HOME (TELEHEALTH)

- Telehealth Saskatchewan uses technology to link patients to both specialized and general health care from a distance using secure videoconferencing equipment. There are 241 active sites within the Telehealth Saskatchewan network.
- Recently completed sites that are active and on board include Esterhazy St. Anthony's Hospital, Onion Lake, Yorkton Home Care, Estevan, Flying Dust Health Center, Makwa Sahgaiehcan Health Center, Regina General Hospital, St. Pauls Transplant Conference Room and the College of Medicine E-Wing.

I wanted to express my sincere appreciation for setting up the Telehealth clinic for my mom regarding her cancer. This has been a very trying time for our family and it is reassuring to know that Saskatchewan is willing to leverage technology to make it possible for people in rural areas to access health care.

– Ryan, Saskatoon

CHRONIC DISEASE MANAGEMENT

Imagine if your physician and your entire health care team could monitor and track the important aspects of your chronic disease to ensure you get the best care and that your lab and other tests are done when necessary. Introduced in 2013-14, the Chronic Disease Management – Quality Improvement Program (CDM-QIP) focuses on improving continuity and quality of on-going care for people living with chronic conditions by encouraging and supporting physicians and other health care providers to use best medical practices.

Benefits to Patients

People living with chronic conditions such as diabetes and heart disease benefit from improved medical care if their health care providers can access up-to-date information and tools that optimally manage chronic conditions.

The CDM-QIP provides tools to enable enhanced follow-up and quality care for patients living with chronic diseases. Ultimately, it will advance efforts to transform primary health care services and achieve more effective patient care in Saskatchewan.

Initially, the CDM-QIP focused on two chronic conditions: diabetes and coronary artery disease. In 2014, the program will be expanded to further include heart failure and chronic obstructive pulmonary disease. Specific health indicators related to the chronic conditions will be collected and submitted to a web-based program within the Saskatchewan eHR Viewer by participating health care providers.

By March 2015, it is expected that 80% of providers caring for patients living with diabetes, coronary artery disease, heart failure and/or chronic obstructive pulmonary disease will be using the program to support the goal of improving the quality of care for those living with a chronic condition.

MEDICAL IMAGING

Treatment for patients is more effective and efficient when all imaging and reporting of images within the province is available through a single source such as the Radiology Information System and the Picture Archiving and Communications System (RIS/PACS).

X-rays, CT scans, Ultrasounds or Medical Resonance Imaging (MRI) in most Saskatchewan hospitals is now available on PACS and can be interpreted by physicians and specialists in different locations throughout the province.

Consultation between physicians and regions, to optimize treatment, can take place once imaging has been sent to PACS. When a patient needs to travel for treatment, imaging can be reviewed and preparation for treatment can begin prior to arrival without arranging for transport of imaging records. Patients pursuing treatment outside of Saskatchewan can easily have available a single DVD with imaging files.

eHealth implements and supports RIS/PACS for Saskatchewan. The RIS is a computer system for tracking patients and medical imaging procedures that include exam scheduling, result reporting and billing. PACS links images and the interpreted results, making the full exam available to the people who need them. PACS is a computerized system that enables the storage and distribution of medical images in a digital format. A key advantage of the PACS is that it eliminates the use of traditional film.

What this means for patients and the healthcare team is:

- Better access
- Reduced waits
- Reduced medical imaging costs
- Improved efficiency and consistency

Through a collaborative effort with our partners in the RHAs, some of the highlights for 2013/14 include:

- Spiritwood in Prince Albert Parkland implemented RIS and PACS in May
- Gravelbourg in Five Hills implemented RIS and PACS in May
- Shellbrook in Prince Albert Parkland implemented RIS and PACS in June
- Wascana Rehab and Fetal Assessment Clinic in Regina Qu'Appelle implemented PACS in Fall 2013
- There was significant preparation for the RQHR RIS scheduled for May 2014
- Significant preparation occurred related to the PACS Upgrade scheduled for July 2014

Lean improvement efforts within Medical Imaging Program occurred throughout 2013/14 including

- Improving transition from Operations to support through Go-Live
- Reducing turn-around time of Requests & Incidents

PRESCRIPTION INFORMATION



BY THE NUMBERS

- 1,250 users added
- 1.49 seconds to complete a prescription, dispense, or pick-up transaction
- 99.63% of all transactions are done in less than 10 seconds
- 16,361,639 dispenses created
- 138.8 million dispenses since 2005

TRACKING DISEASE

Most Canadians remember the anxiety of the Influenza Pandemic of 2008 and the massive public health efforts to immunize the public for the pandemic flu. The ability to track disease and vaccines is crucial for public health officials to keep our residents safe.

Panorama is an integrated, electronic pan-Canadian Public Health Surveillance System developed to improve and support communicable disease investigations, outbreak management, immunization management, and inventory management.

eHealth Saskatchewan (eHS) has completed the implementation of the Panorama Inventory module. The functionality will be expanded to include the Panorama Immunization module.

Enabling Care

In some regions, home care nurses are now able to do assessments in the home using technology in part provided by eHealth, saving valuable nursing time. Forms are no longer filled out manually.

LABORATORY RESULTS

As a patient, when you aren't feeling well, or perhaps as part of a routine physical checkup – your doctor may send you for blood tests or a urine test. Laboratory test results from both the Saskatchewan Disease Control Laboratory and most regional laboratory information systems are available in the eHR Viewer the second they are entered online no matter where the test was conducted. This enables your doctor to make faster clinical decisions about your follow-up care and treatment.

All lab results from the Regional and Saskatchewan Disease Control Labs are stored in the Saskatchewan Laboratory Results Repository (SLRR). Results are also sent to physician office computer systems and other secure locations. The SLRR stores approximately 45,000 - 60,000 results daily.

In 2013-14 results from Prince Albert and Cypress Health Regions were added to the SLRR and are now being distributed electronically. This is in addition to Saskatoon, Regina Qu'Appelle and Sunrise Health Regions, Five Hills, Kelsey Trail, Sun Country,

Mamawetan, Prairie North and results from the Saskatchewan Disease Control Laboratory (SDCL). This now represents more than 90% of all lab results in the province.

LINKING HEALTH INFORMATION FOR REGIONS

Patient Registration or Admission, Discharge and Transfer (ADT) makes health care information available to care providers where they need it – so they can provide prompt, accurate care for improved health outcomes. In 2013-14, the following were completed:

- Added new ADT sites including:
 - Canora and Kamsack
 - Radville
- Completed Admission, Discharge and Transfer (ADT) enhancements:
 - To increase the performance of the ADT system
 - To assist in the improvement of patient flow within our Health Regions

BY THE NUMBERS

- 60.3% of results sent to SLRR are routed to an Electronic Medical Record (EMR).
- Provided electronic laboratory test results to 240 clinics and over 1077 physicians.
- 493 sites with 2094 users have access to a web based eHR Viewer for laboratory results and future clinical data from other repositories.





BY THE NUMBERS - RECEIVING RESULTS DIRECTLY INTO THE ELECTRONIC MEDICAL RECORD (EMR)

- 803 EMR/SMA (Saskatchewan Medical Association) Program (Providers)
- 274 PHC (Regional Health Authority Primary Health Care) (Providers)
- 1,077 Total Providers
- 227 EMR/SMA (Sites)
- 13 PHC (Sites)
- 240 Total Sites

THE LABORATORY INFORMATION SYSTEM (LIS)

The Laboratory Information System (LIS) facilitates the ordering of lab tests for patients, manages lab test data and generates and distributes results to clinicians, wards and other agencies.

New Implementations:

- Pathology module in Victoria Hospital

- Bloodbank; and Total Quality Control (TQC) modules in Assiniboia Hospital
- Microbiology and TQC modules in St. Joseph's Hospital – Estevan
- Microbiology module in Cypress Regional Hospital – Swift Current
- BloodBank module in Battlefords Union Hospital and the Lloydminster Hospital

SURGICAL INFORMATION SYSTEM (SIS)

If you are a patient waiting to hear when you are scheduled for surgery, you may not give much thought to the system that handles scheduling. eHealth supports the government commitment to reducing surgical waitlist times by replacing outdated computer systems and manual paper-based systems with a new modernized surgical information system. The new system will facilitate the surgical process through booking including waitlist management, electronic charting and even tracking patients on their day of surgery, and supplies. The replacement is underway in seven regional health authorities.

New Implementations

The Provincial Surgical Patient Registry helps streamline the waitlist process and complies with new wait time guidelines that came into effect April 1, 2014

- Implemented a variety of enhancements for the four production regions
- Continued the surgical information system implementation at the Royal University, Saskatoon City and St. Paul's Hospitals and the Prairieview Surgical Centre in Saskatoon

HEALTH INFORMATION INTELLIGENCE

Your doctor needs good information in order to make the best decisions for your care. The same is true for people who make policy and program decisions. eHealth has an expanding role in providing data analysis and informatics to health providers, business and policy makers to support evidence-based decision making on things like appropriate care. Data analysis and informatics will be a major focus in the next fiscal year.

SERVICE DESK

Health care providers, administrators, office staff and others across the Saskatchewan health care system frequently rely on the expertise of the eHealth Service Desk for assistance in solving problems with systems supported by eHealth.

BY THE NUMBERS

- **Customers who have access to Service Desk:**
55,518 – Increase of 8,087
- **Number of incidents/requests logged:**
151,443 – increase of 7,178 (15%)
- **% of incidents resolved by Service Desk:**
55% (83,294), 26% (39,375) by Regional Personnel



HEALTH CARDS AND VITAL CERTIFICATES

Saskatchewan's population continues to grow, and when you move to a new province or country there are lots of personal details to take care of. One of the most important is applying for a Saskatchewan Health Card to ensure health coverage. Health Card services moved from the Ministry of Health to eHealth Saskatchewan in January of 2014. They joined Vital Statistics services which moved to eHealth from Information Services Corporation in June of 2013. Counter service is now available for both health cards and vital certificates.



BY THE NUMBERS

HEALTH CARDS

- Number of people who moved to Saskatchewan in fiscal 2013-14 – 28,702

CUSTOMER SERVICE

- Average number of calls handled per day – 637
- Record number of calls received in one day – over 1600

CERTIFICATES ISSUED

- Births – 60,657
- Deaths – 5,688
- Marriages – 7, 225
- TOTAL = 73,570

EVENTS REGISTERED

- Births – 14,855
- Deaths – 8,784
- Marriages – 4,949
- TOTAL = 28,588



Privacy and Security

eHealth Saskatchewan protects personal and personal health information in compliance with The Health Information Protection Act (HIPA) and The Freedom of Information and Protection of Privacy Act (FOIP).

eHealth Saskatchewan is committed to ensuring the security of the private health information entrusted to it by the people of this province. eHealth made a number of significant strides in the maturation of our enterprise security practices.

The direct care of patients and the trust citizens have in the confidentiality, integrity and availability of systems and information they count on has meant an increased reliance on our provincial information systems.

eHealth incorporated a number of physical security controls to ensure the protection and safety of both our employees and the electronic and paper based information processed within our space. Special attention was needed in response to the reintroduction of public counter services for vital certificates and health card services to ensure the protection and privacy of our clients.

A key priority in 2013-14 was the further integration of the various risk and assurance functions within eHealth. This was accomplished through the development of an Enterprise Incident Management process and a Shared Risk Assessment process. Both processes are designed to integrate the assurance functions of Privacy, Security and Patient Safety for efficiency and robust risk mitigation.

In Canada the healthcare sector is considered Critical Infrastructure (CI) along with other sectors such as utilities and law enforcement. In 2013-14 eHealth became an active member of the Saskatchewan Critical Infrastructure Advisory Network. This relationship with Public Safety Canada and other federal and provincial CI organizations has proven to be a valuable tool in the identification of new and emerging threats. eHealth anticipates this relationship and the services provided to the CI sectors by Public Safety Canada to be another valuable tool in the enterprise security within eHealth.

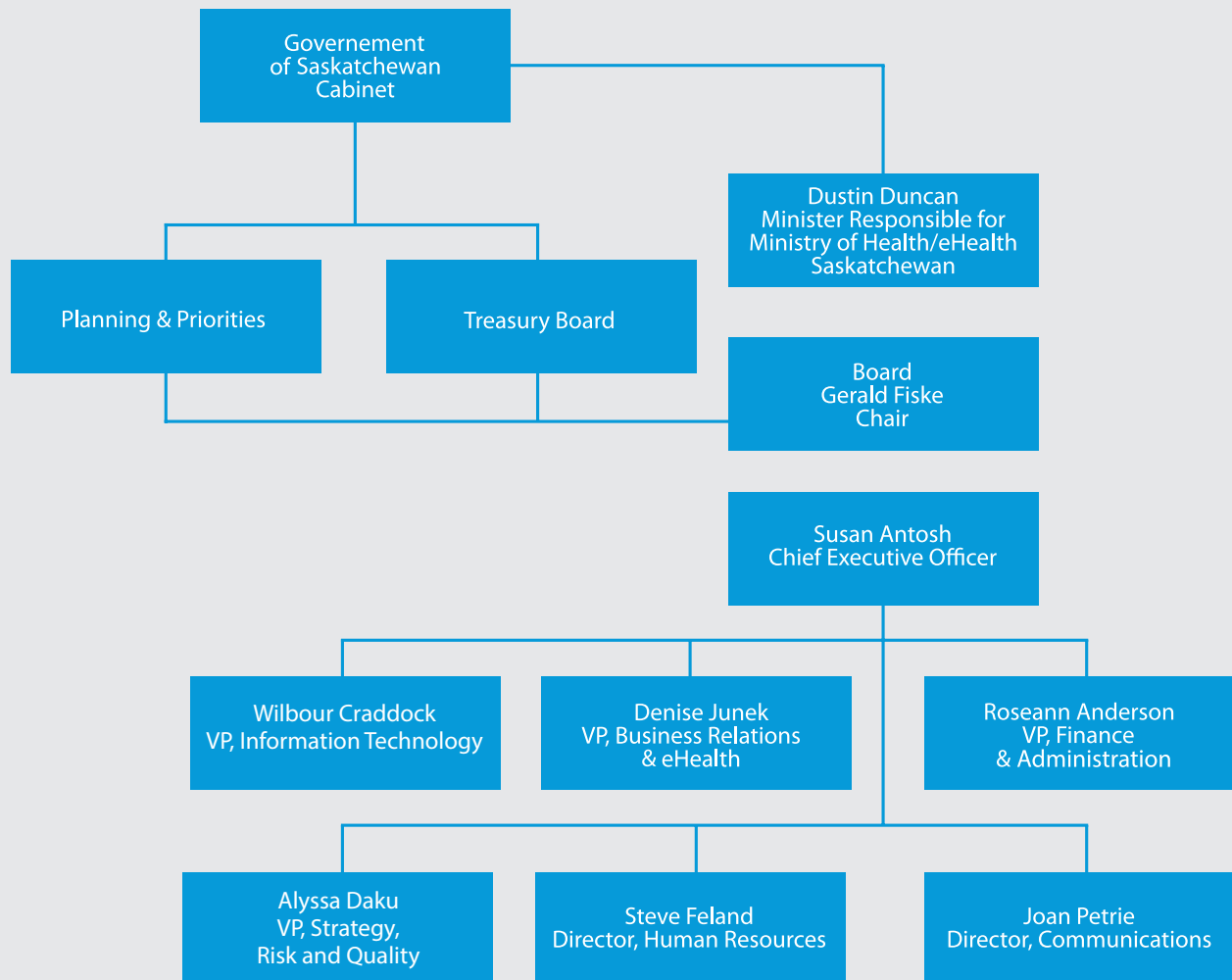
BY THE NUMBERS

There were a total of 246 privacy inquiries made to eHealth. By the end of the year, six requests for access to information were made, there were no patients that have full blocked profiles in the eHR Viewer, 36 patient profiles were masked in the PACS system, and 251 patient profiles were masked in the eHR Viewer.



Appendix I

eHealth Saskatchewan Organizational Chart





Providers and patients are experiencing benefits, even long after the implementation of a new system.



eHealth
Saskatchewan 