

HEARTLAND LINK.....
KEEPING US ALL WELL CONNECTED!!
January 10, 2017

CEO News



The News release below was issued earlier today from the Ministry of Health. We will continue to share information to you as it becomes available.

TRANSITION TO SINGLE PROVINCIAL HEALTH AUTHORITY UNDERWAY

Administrative Cost Savings Being Identified

Work is underway to consolidate the 12 existing Regional Health Authorities (RHAs) to a single Provincial Health Authority, anticipated to occur in fall 2017.

"As work begins on the transition, our goal is to ensure implementation occurs seamlessly and that the needs of patients are always our top priority," Health Minister Jim Reiter said. "This is a significant change and there is a lot of work to be done. Our government is taking a thoughtful and planned approach to ensure this is done right."

A transition team is being assembled that will include Ministry of Health, clinical and health system leaders. The team is tasked with developing a comprehensive plan to implement the new Provincial Health Authority. Along with a new governance and management structure, the team will be considering the consolidation of health system administration and clinical support services, and the potential savings associated with consolidation. The potential savings associated with consolidation are currently estimated in the range of \$10-20 million by 2018-19.

Examples of potential savings include:

- Moving from 12 Boards to a single Board will save approximately \$700,000 a year in Board governance costs.*
- Approximately \$160 million per year is spent on information technology across the health system (RHAs, Saskatchewan Cancer Agency, eHealth Saskatchewan and 3sHealth). Consolidation of information technology for RHAs provides the opportunity to save approximately \$9 million per year.*

A reduction in salary expenses for senior executive level positions across RHAs is also anticipated. An estimated dollar value will be determined as transition planning develops a new Provincial Health Authority structure.

"We are in the beginning stages of the transition process, so the potential cost savings range is a very early estimate," Reiter said. "There will be costs associated with implementation in the first year, including some severance, with savings anticipated to begin in 2018."

"While cost savings will be the product of improved co-ordination and integration of health care services, it is not the primary objective. The move to a single Provincial Health Authority is being driven by our government's continued commitment to improving front-line patient care for people across the province."

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Public Health Bulletin

Heartland Health Region

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Phone: (306) 882-4111 Fax: (306) 882-1389

Website: www.hrha.sk.ca

Squash that



January 10, 2017
For Immediate Release

To Regional Staff and Physicians, Heartland Health Region
From: Dr. David Torr, Consulting Medical Health Officer

Respiratory Illness in Heartland Health Region

A respiratory illness outbreak has been declared in the *Kyle Health Centre*, effective *January 10, 2017*. Currently the *Kyle Health Centre* is the only facility in the health region with outbreak precautions in place, and the staff are working diligently in applying optimal infection prevention and control precautions which include:

- Visitor restrictions are in place and visitor restriction notices have been posted at patient doorways.
- Patients or residents who are ill with respiratory symptoms have been placed on respiratory precautions and will be restricted to their rooms until free from symptoms.
- Appropriate medication treatment or prophylaxis has been initiated.
- Admissions, transfers and discharges are affected and will be triaged.

All staff need to remain vigilant in preventing infections in our facilities and communities, as well as the following:

- If you are ill, stay at home, contact your doctor if symptoms are severe.
- Cover your cough,
- Wash your hands thoroughly, properly and frequently, particularly before and after patient/client care, washroom use, blowing your nose, and after touching surfaces.
- It is not too late to get your flu shot. Call your local public health office to schedule a time to get one.

For more information, contact:

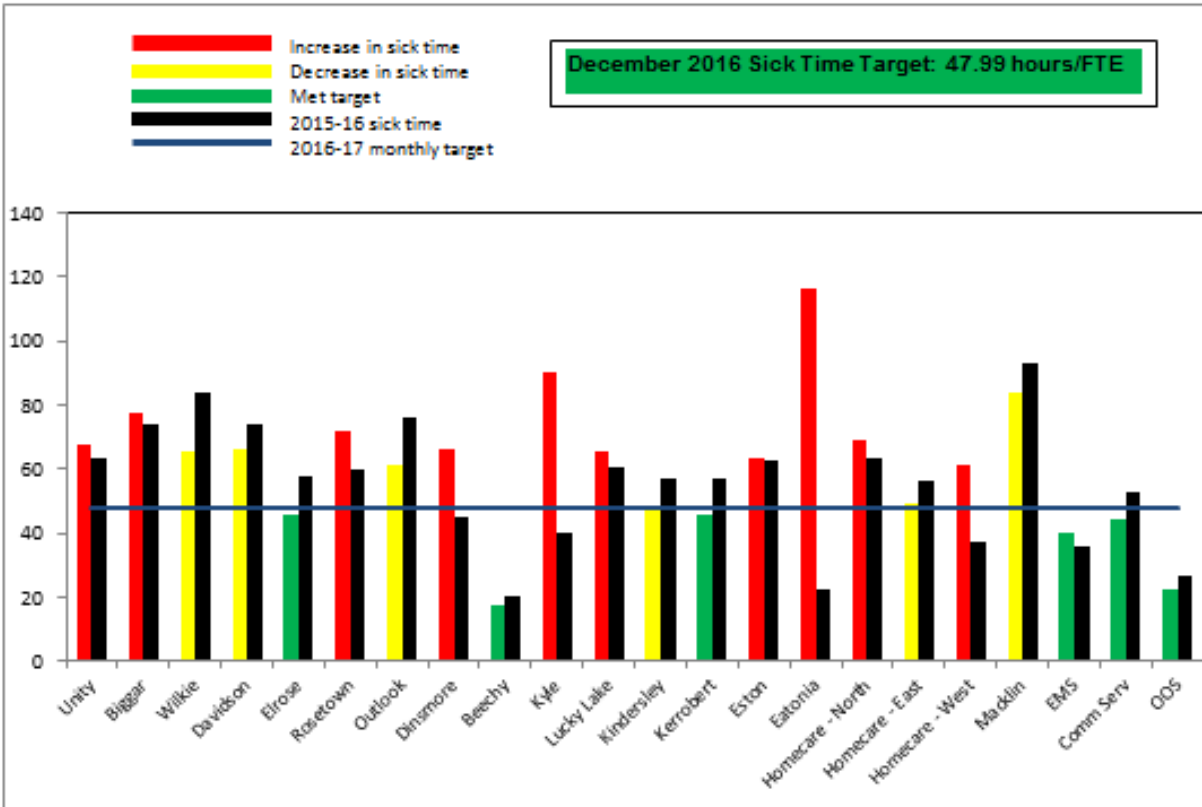
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2016-2017 Sick Time Comparisons by Facility/Service – December 2016



The Ministry of Health has indicated reductions are required in the areas of sick time and overtime. Heartland Health Region had its annual budget reduced by a targeted amount with the expectation that the Region will achieve savings in overtime and sick time. Compared to December 2015, overall paid sick time has decreased from 61.76 hours/FTE (81,258.70 reported hours; 68,972.39 paid hours) to 60.79 hours/FTE (85,123.36 reported hours; 68,106.24 paid hours) in December 2016. The Saskatchewan average is 60.05 hours/FTE.

Sites which have reduced their sick time since December of last year and met the target are **green** Elrose. Kindersley is displayed in **yellow** as they have shown an overall decrease in sick time from the comparable time last year and still have a ways to go to meet the target. Kyle is displayed in **red** as they have shown an overall increase in sick time.

The Region, along with our Employees and Physicians need to remain diligent in managing this challenge as the ongoing success of our Region, its facilities, and services are dependent on our collective efforts.

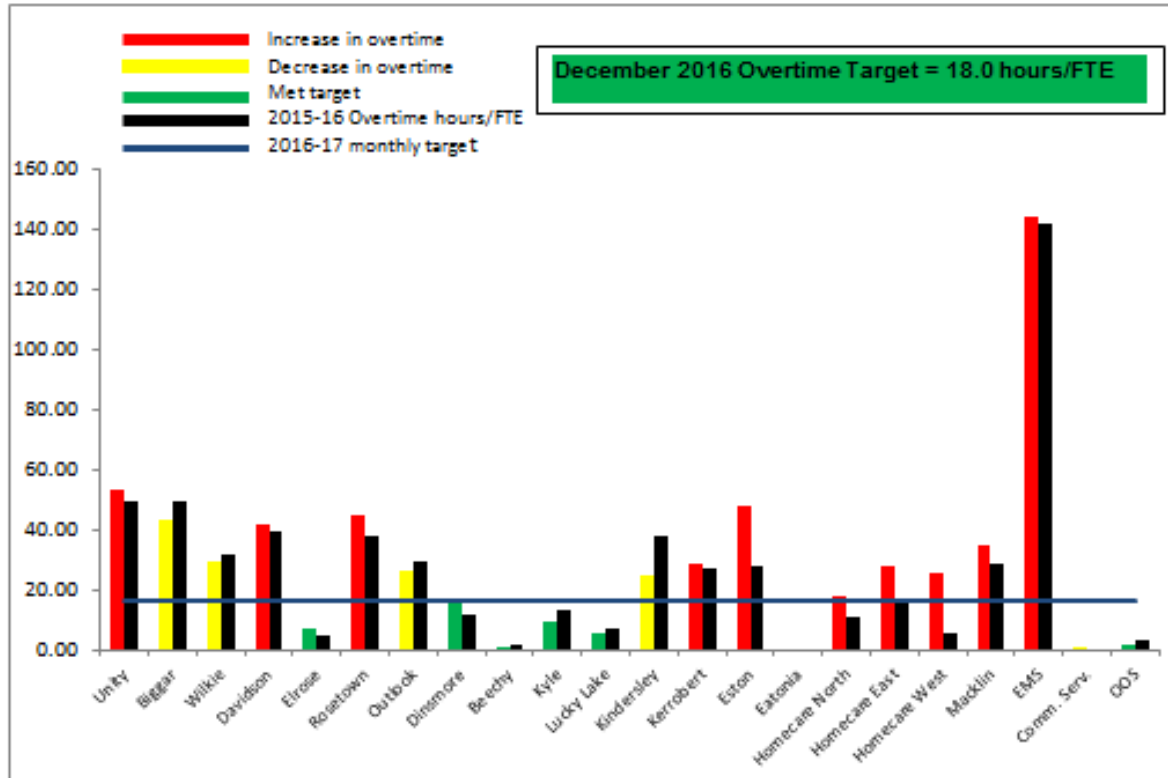
If you have a suggestion, comment or concern regarding these issues or believe there is anything Human Resources or others can do to support you in assisting to achieve this very important goal please do not hesitate to come forward.

Our target for the 2016-17 fiscal year is:

Measure	Annual Target
Sick Time	64.0 hrs/FTE

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2016-2017 Overtime Comparisons by Facility – December 2016



The Ministry of Health has indicated reductions are required in the areas of sick time and overtime. Heartland Health Region had its annual budget reduced by a targeted amount with the expectation that the Region will achieve savings in overtime and sick time. In December 2016 there has been a decrease in wage driven premiums (overtime, callback, etc.) from 32.88 hours/FTE (36,725.09 hours) in December 2015 to 32.69 hours/FTE (36,619.84 hours) in December 2016. The Saskatchewan average is 28.83 hours/FTE.

Sites which have reduced their overtime since the comparable quarters last year and met the target are green (Kyle). Kindersley is displayed in yellow – sites that are yellow have shown an overall decrease in overtime from the comparable time last year and still have a ways to go to meet the target. Eston is displayed in red as they have shown an overall increase in overtime.

The Region, along with our Employees, need to commit to addressing this challenge and examining the current way we provide care within our system as the ongoing success of our Region, its facilities, and services are dependent on our collective efforts.

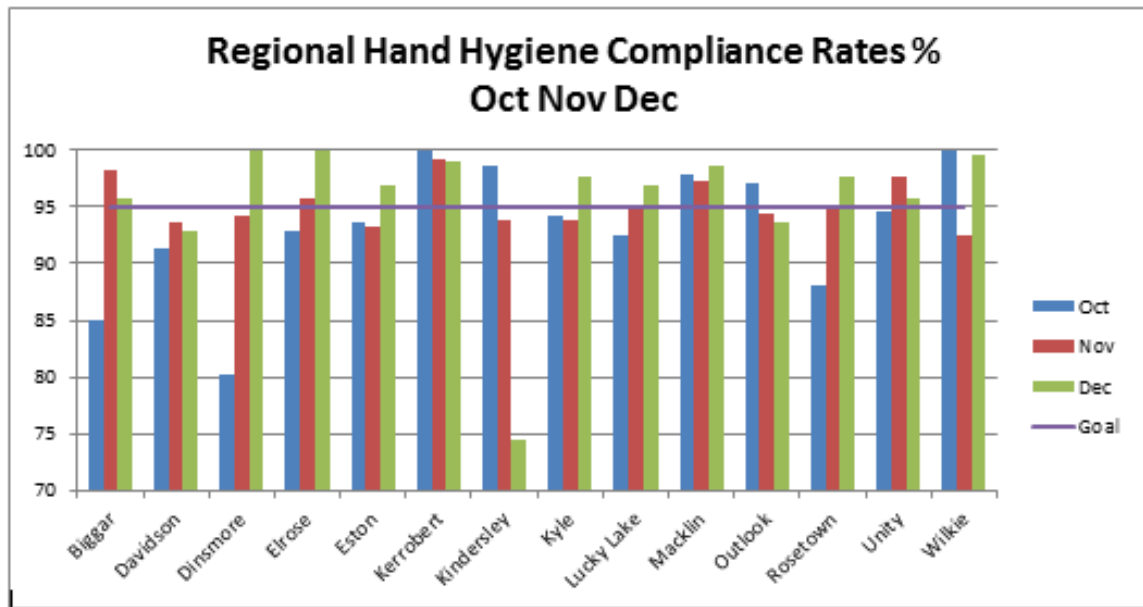
If you have a suggestion, comment or concern regarding these issues or believe there is anything Human Resources or others can do to support you in assisting to achieve this very important goal please do not hesitate to come forward.

Our target for the 2016-17 fiscal year is:

Measure	Annual Target
Overtime	24.0 hours/FTE

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Heartland Health Region Hand Hygiene Compliance Rates
 December 2016



Average Compliance Rates: October 93.29% November 95.33% December 95.64%

Variation in compliance rates can be attributed to internal vs external auditors, many different auditors and auditing practices, and the number of audits submitted. Sites with few audits are more affected by non-compliance. The Hawthorne Effect, where people do better when they know they are being watched, is evident in the sites where the auditor is consistent and known to staff.

Where we did well....

- ✓ The "after" moments of hand hygiene – after client care, after leaving the room, after removing gloves, etc.
- ✓ Less continuous glove use, and less unnecessary glove use
- ✓ More staff with short, clean nails without polish, gel nails or other enhancements

Where we need to improve....

- The "before" moments of hand hygiene – before taking a pair of gloves from the box, before entering a client's room, before taking a blood pressure, before assisting with a meal, etc.
- Wetting hands well with water before applying soap. This improves the soap's ability to lather and lift the microorganisms from your skin. It also helps protect your hands from excessive dryness and irritation
- Compliance with single smooth band only for jewelry. Best is no jewelry! Rings with gemstones, projections and grooves, as well as watches and bracelets can tear gloves, scratch clients, interfere with hand hygiene and are implicated in the spread of infection!

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SAFETY TALK

LEARN TO THINK S.A.F.E.

S.A.F.E.:

1. See the hazard
2. Assess the hazard
3. Fix the hazard
4. Evaluate the effectiveness of the fix

Taking a few moments to think through your task can save a lifetime of pain and regret.



What's at stake?

HHR has Standard Operating Procedures for each task you perform at your facility. Before you start work, if you don't remember these procedures, review them. Then use the S.A.F.E. thought process to assess possible hazards and prepare to work safely.

1. **See** the hazards. A hazard is anything that may cause damage, harm or adverse health effects to something or someone under certain conditions.
2. **Assess** the risk from the hazards.
 - "Risk" is a measure of how likely it is that an incident will occur and the expected severity of injuries.
 - HHR has a Risk Assessment Procedure that should be used to assess hazards. It can be found in the *OHS02-01.01 Hazard Identification and Assessment Policy* on SharePoint.
3. **Fix** the hazard. There's a specific order for controlling hazards, as listed below. Many controls are a combination of two or more control types:
4. **Evaluate** the effectiveness of the fix. If one control did not completely fix the hazard, use another control.



Final Word: After the appropriate control measures have been taken, monitor the situation and ensure that the actions taken are not creating additional risks. If further control measures are needed, inform your supervisor immediately.

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Speech and Language Pathologist Involved with Pictopages Launch

PICTOPAGES was designed and developed through a Research Grant given by the GEORGE REED FOUNDATION to the GEORGE REED CENTRE, UNIVERSITY OF REGINA with Dr. Brien Maguire as the lead researcher.

PICTOPAGES is a Saskatchewan, Canada, innovation.

On November 17, 2016 **PICTOPAGES** was launched at the American Speech-Language Association (ASHA) Convention in Philadelphia, PA. and the response exceeded expectations.

- **The App (PICTOPAGES LITE - for the iPad) is FREE and available through the App Store**
- **The Professional version retails for \$59.95 US with proceeds going to the GEORGE REED CENTRE**

PICTOPAGES is a versatile app with over 2000 symbols in 24 Categories in addition to 78 animated symbols.

Import images to customize your program

PICTOPAGES can be used for all ages:

- Vocabulary expansion for the preschool child
- Building language skills
- Articulation
- Teaching English or any Language to both the student & the parents
- For nonverbal communication (AAC)
- Low vision
- Support symbols for Deaf/hard of hearing



The process is – teach, add text; add voice (your voice - single words or sentences)

- Complete the session and e-mail to parents for immediate feedback
- E-mail the schedule for the day
- Maintain a record of the session.

With Adults the App can be used as a visual communication strategy for:

- Stroke patients
- Persons with Alzheimer's; Dementia; ABI.....

PICTOPAGES uses Pictogram Symbols – A Pictorial Language that is used Internationally

The format & design of Pictogram Symbols have been accepted by **the International Standards Organization (ISO) in 2016.**

Visit: www.pictoworld.com

Subhas C. Maharaj, M.S., L.T.C.L.

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GEORGE REED FOUNDATION

UNIVERSITY OF REGINA

Dementia: Understanding the Causes and Symptoms



When older adults begin forgetting things, they—and their families—often fear it's the onset of dementia. However, it's a myth that we lose significant intellectual function as we age. As people reach their 60s and 70s, learning new skills and remembering facts may take a little more time. However, most people never develop dementia, a term used to describe a group of diseases characterized by a progressive decline of mental functions.

Although the rate of dementia increases with age, many cases of memory loss are not permanent and can be attributed to depression, physical conditions such as vitamin deficiencies or infections, and just plain forgetfulness.

If you are concerned about your own or a loved one's memory problems, contact a doctor to ensure all possible causes are examined. In the meantime, here is some further information:

Common symptoms of dementia may include:

- Confusion—not where did I park the car, but how did I get here?
- Forgetting names of familiar people and places
- Problems walking and moving around
- Doing or saying things repeatedly
- Difficulty making the simplest decisions and/or finishing everyday tasks like housework or grocery shopping.
- Restlessness and agitation
- Sitting doing nothing for extended periods
- Being stubborn or uncooperative
- Talking to yourself or talking in a senseless manner

Other symptoms can include:

- Disturbed sleep patterns
- Seeing things that aren't there
- Being fearful or suspicious of people
- Exhibiting anti-social behaviour
- Threatening to hurt yourself



Causes of dementia

There are many diseases and conditions that can cause dementia. If you or a loved one are frustrated by more simple forgetfulness, do some research or talk to your doctor or other health care professional about what may be causing this. Sometimes something as simple as a change in diet or drinking more water can get your mind back in the flow of information. To determine if you or a loved one is suffering from any of the more serious causes of dementia—and the best course of treatment—talk to your doctor.

Dementia: Understanding the Causes and Symptoms

Causes of true dementia may include:

- Alzheimer's disease
- Vascular dementia
- Gerstmann-Straussler syndrome
- AIDS
- Parkinson's disease
- Alcoholis



If a loved one has dementia

Though living with dementia can be difficult, watching or caring for another with dementia has its own difficulties. If you're regularly caring for a loved one with dementia, be sure to make sure you, too, are getting the care you need. Here are a few things you may consider doing to help a loved one who may be suffering from dementia:

- Accompany your older relative to the doctor for a check-up
- If dementia is diagnosed, ask for referrals to find out whether your loved one is eligible for any in-home assistance
- If dementia is advanced, you may need to consider alternative living arrangements for your relative
- If memory loss is due to other causes or to just plain forgetfulness, problem solve with your relative on coping strategies
- Consider whether it would be helpful for your relative to have a list of names by the phone of people seen regularly, along with large print phone numbers
- A large calendar may be helpful, posted with regular events such as grocery shopping days—not just special days
- Keep a duplicate calendar in your own home, so that you can help your relative focus on upcoming needs or appointments
- Continue to do activities you enjoy together. Many people with dementia enjoy singing or familiar craft projects
- Keep your sense of humour!

Though we all forget things from time to time, people with dementia suffer from a marked, progressive decline of mental functions. Unfortunately, there is no known cure for most forms of dementia. However, by knowing the signs of the dementia, and working closely with your doctor, people with many forms of the condition can enjoy a fair quality of life for years to come.

January is Alzheimer's Awareness Month

Alzheimer's disease is a degenerative, progressive type of dementia that causes problems with memory, thinking and behaviour. Symptoms usually develop slowly and get worse over time, becoming severe enough to interfere with daily tasks. Discovering a loved one has Alzheimer's disease can be devastating.



Top Signs of Alzheimer's

Forgetting entire events, not just details.

It's not uncommon to forget or confuse smaller details of an event, but if the person doesn't remember ever meeting a friend for coffee or making the doctor's appointment in the first place, a flag should go up.

Putting objects in odd spots.

If you're mystified as to why the keys are in the toaster oven or why the remote is in the fridge, you're right to be concerned.

Trouble with simple directions or problems.

Being unable to follow a recipe is a classic sign of Alzheimer's as is trouble balancing a chequebook.

Forgetting common names of people and objects as well as everyday routines.

A father forgetting his daughter's name or replacing the word "friend" with an unrelated word like "shoe" are common signs of trouble. Getting lost going to a familiar place like the grocery store or the doctor's office is also an indicator.

Personality, behaviour and mood changes.

Someone with Alzheimer's may experience emotional mood swings—laughing one minute and weeping the next. Withdrawing socially—cancelling appointments or remaining silent during family conversations—is another important warning sign to look out for.

Hearing loss.

Recent studies show a link between moderate to serious hearing loss and Alzheimer's. In fact, for every 10 decibels of hearing ability lost, the risk for Alzheimer's increased by 20 per cent. There are a number of theories about why this is, but it's definitely something to watch for and a challenge that can delay diagnosis.

Remember, every person is unique and so is each individual's experience with Alzheimer's. But there are some common threads in most cases. If any of these signs seem familiar, seek help from a doctor immediately for a diagnosis.

Alzheimer's Alert

- One in 11 Canadians over 65 has Alzheimer's or a related dementia.
- Women account for 72% of all Alzheimer's cases.
- Alzheimer's cases are expected to more than double by 2036.

An Ounce of Prevention:

Age isn't the only risk factor for Alzheimer's (though it is a big one).

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January—Alzheimer's Awareness Month

Enhance your brain power and reduce your risk with these bright ideas to keep your brain sharp.

Get active. Many studies suggest a link between regular weekly physical activity and improved brain function. Stay connected. A large social circle might not just be a key to a longer life, it may also protect you from showing the signs of neurological decline.

“Work out” your mind. Reading, crossword puzzles and discovering new routes to take to work can all help keep your mental “muscles” strong and flexible. Even better preventative medicine: learning a second language. A recent St. Michael’s Hospital study found Alzheimer’s symptoms can be delayed by up to five years if you know more than one language.

Keep blood pressure, cholesterol levels and diabetes at bay. A healthy body can help maintain a healthy mind, but ensuring your blood pressure, cholesterol and diabetes are all under control are especially important in reducing your chances of Alzheimer’s disease.

Sleep. A lack of sleep may cause plaque buildup in the brain. This buildup is thought to be linked to Alzheimer’s, so turn off that computer, mobile device or TV and turn in early!

Go Mediterranean. Eat more fish, leafy green vegetables, fruit, olive oil and nuts and cut back on your consumption of saturated fats like those found in red meats, organs and high fat dairy products including butter.

workhealthlife by Shepell

For Health-Care Professionals

Caring for people with Alzheimer's disease and other dementias is a long-term commitment for health-care providers. From diagnosis until the end of life, health-care providers are called upon to support not only the person with the disease, but family caregivers as well.

The Alzheimer Society of Canada has a great website with a section that includes information and resources to help physicians provide early diagnosis and to help all health-care providers support individuals and their families throughout the continuum of the disease.

<http://www.alzheimer.ca/en/We-can-help/Resources/For-health-care-professionals>

BrainBooster® Activities

Give your brain a boost! Did you know that doing puzzles like crosswords and word searches is a great way to keep your brain active? Maintaining a healthy diet and choosing the right foods is a great way to boost the nutrition that feeds your brain. Visit the website for the Alzheimer Society for Canada often for updated puzzles, recipe links and exercise to keep your brain healthy.

<http://www.alzheimer.ca/en/Living-with-dementia/BrainBooster>

Collection, Use and Disclosure of Personal Information

Do you ever document information about another person? If so, did you know the information, no matter the form, is considered Personal Information under the **Local Authority Freedom of Information and Protection of Privacy Act (LAFOIP)**? Individuals have the right to see personal information about themselves and anything you document about an individual may have to be provided to that person if a Request for Access is submitted. This card summarizes the Principles and provides Quick Tips to guide you when documenting information about another person.



FOIP | Freedom of Information and
Protection of Privacy Act

PRINCIPLES

1. The public has a **right of access** to records held by public bodies, unless the Act specifically allows the records to be withheld. This right of access is the cornerstone of the openness and accountability of public bodies to the public.
2. **Personal information is protected** by rules that public bodies must follow when collecting, using and disclosing personal information.
3. Individuals have the **right to see personal information about themselves**. This is a broad right of access with few exceptions.
4. Individuals have the **right to request correction** of their personal information if it is not accurate.
5. **An independent review** by the Information and Privacy Commissioner can be requested of decisions about disclosure of information and possible violations of individual privacy.

It's your Right to Know!

QUICK TIPS

Protect Privacy

- Collect and use personal information only when necessary to perform your duties.
- Disclose personal information only when authorized.
- Ensure personal information is kept secure and confidential.
- Use passwords to protect electronic records.

Create records with access in mind

- Your records (letters, memos, e-mails, notes, reports) could be the subject of a FOIP request.
- Use professional language and be prepared to justify what you write.
- Record professional observations not personal opinions.

Organize and manage your records

- Dispose of transitory records (most drafts, working copies, post-it notes, phone messages) when no longer useful.
- Do not destroy original records before the retention period and without proper authorization.

For more information, visit: www.oipc.sk.ca



FOIP | Freedom of Information and
Protection of Privacy Act

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WINTER, 2017

Join our online Leadership Program on February 6, 2017!

Coaching and Leadership Essentials February 6—June 5, 2017 \$1859

Learn leadership competencies and discover your leadership strengths. Acquire goal setting techniques and practice coaching conversations to effectively lead your team. This program is a blend of classroom and online learning (48 instructional hrs.)—www.saskpolytech.ca/coaching-leadership. Tuition grant may be available for those in the not for profit sector. Call for information.

Module 1: Defining Leadership	Online, February 6—March 30, 2017
Module 2: Leading and Coaching your Team	Classroom, April 3-5, 2017 (8:30-4:30pm, Regina Campus)
Module 3: Leadership Toolbox	Online, April 10—June 1, 2017
Module 4: Leadership in Action	Classroom, June 5, 2017 (8:30-4:30pm, Regina Campus)

Winter Online Applied Project Mgmt. Program—www.saskpolytech.ca/projectmanagement

PROJ 110	Project Initiation & Charter Development	Jan. 7—Jan. 12	\$385
PROJ 111	Project Planning, Scheduling & Budgeting	Jan. 14—Feb. 16	\$1925
PROJ 112	Project Execution & Control	Feb. 18—Mar. 9	\$1155
PROJ 113	Project Leadership & Communications	Mar. 11—Mar. 23	\$770
PROJ 114	Project Closing & Continuous Improvement	Mar. 25—Mar. 30	\$385
PROJ 115	Applied Project Management Integration	Apr. 1—Apr. 13	\$880

Next APM Information session - March 2 from 6:30-8pm. You may attend in person or via the web. Call 775-7481 to register.

Grammar & Punctuation	January 24, 2017	\$245
Bookkeeping 1 – Managing Financial Records	February 6—March 8, 2017	\$495
Writing Business Letters & Emails	February 8, 2017	\$245
Proofreading	March 15, 2017	\$245
Bookkeeping 2—Payroll, Taxes, Forecasting	March 14—April 11, 2017	\$495
Presenting with Confidence	March 31, 2017	\$265

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HOW TO REGISTER:

By Phone: Register with a credit card by calling: 306-775-7301

In Person: Registration Services, Saskatchewan Polytechnic Regina, 4500 Wascana Parkway, S4P 3A3



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