

**Healthcare Excellence Canada**

# **Challenges and Risks**

**April 1, 2020 to March 31, 2021**



Further to a contribution agreement with Health Canada, the Canadian Foundation for Healthcare Improvement reported annually on challenges and risks facing the organization, including mitigation strategies. Following the amalgamation of CFHI and CPSI, Healthcare Excellence Canada will continue to report on challenges and risks. In addition, management and our Board of Directors also undertake more detailed ongoing enterprise risk monitoring and mitigation.

## MEETING CHALLENGES

Even before the pandemic, there were persistent challenges in improving patient safety and experience, health outcomes, work-life of health providers, and value for money across the country. While results in some areas have been among the best in the world, performance was uneven. For instance, unintended harm in the health sector is a leading cause of death in Canada. Likewise, almost 9 in 10 people in Canada want safe and appropriate care closer to home, but almost half of those who visited an emergency department said that their condition could have been treated elsewhere if timely care had been available. By creating a single organization with an integrated focus on quality and patient safety, we could help move the dial on these types of challenges.

The COVID-19 pandemic is a global challenge that has affected people and organizations across Canada through most of 2020-21, exposing stark gaps in both care and equity. Many healthcare systems and the people who work in them have been pushed to their limits. At the same time, it's also shining a light on creative, highly effective responses to needs. We have an opportunity to expand the reach of proven innovations so more people can benefit.

Listening to public health guidance, both CFHI and CPSI pivoted to virtual work and virtual program delivery to ensure we could continue to support our partners. Many of those partners were forced to pause their improvement initiatives to focus on pandemic response. The mantra of delivering value to our stakeholders, rather than creating noise, led us to be flexible to their needs while quickly adapting our annual plan to roll out new programs to respond to this health emergency.

Together with our partners, we responded by contributing resources, expertise and networks to help put quality and safety evidence into action through programs like LTC+ Acting on Pandemic Learning Together. We also helped our partners maintain essential non-COVID care – including shifting care closer to home for patients where appropriate and focusing Canadian Patient Safety Week on safe virtual care. And, we doubled down on our commitment to help the people we work with find meaningful and effective ways to partner with patients, family and caregivers through programs like Essential Together.

Many organizations are striving to improve healthcare but identifying shared priorities and coordinating efforts requires time and collaboration between partners. In previous years, identifying shared priorities and aligning our work to these priorities was a greater challenge, but shared pandemic priorities have facilitated tremendous collaboration. Health Canada's efforts to facilitate greater coordination among Pan-Canadian Health Organizations through a coordinating table and targeted work on pandemic priorities have also enabled greater collaboration.

CFHI's and CPSI's modest capacity relative to the size of Canada's health system has been an ongoing challenge. This year, we took a major step towards bolstering this gap by amalgamating CFHI and CPSI into Healthcare Excellence Canada – a new quality and safety organization with an enhanced capacity to improve healthcare for everyone in Canada.

The amalgamation process brought its own challenges as we sought to adapt to rapidly changing pandemic circumstances and assist our partners while also supporting our staff. However, as a united organization we engaged with stakeholders to chart our course, optimistic about the promise of enhancing our ability to achieve safer, higher quality, more efficient, coordinated and patient-partnered healthcare. A new five-year funding agreement beginning in 2021-22 has enhanced our ability to plan for the future and deliver collective impact with our partners.

## MITIGATING RISKS

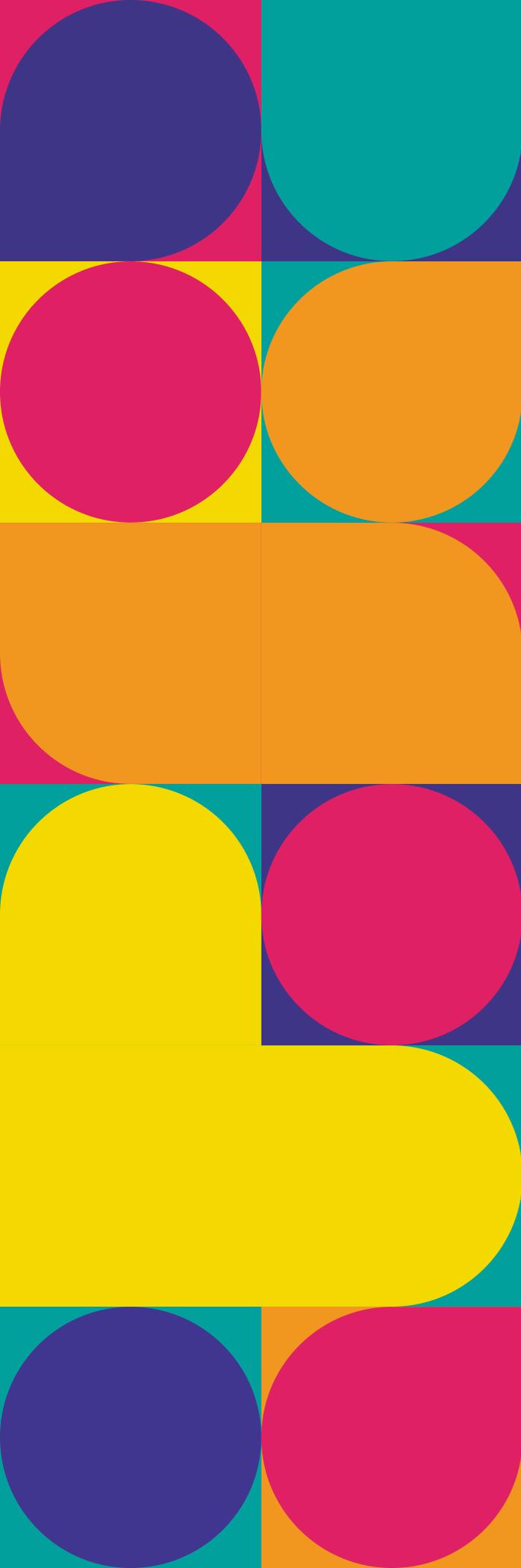
This section provides examples of the operational, financial, human resources, information technology management, and strategic risks that we track, as well as associated mitigation strategies.

Functional Area	Risk	Mitigation Strategies
Finance	Inability of HEC to have enough assets to meet all current and future obligations.	HEC's Reserve Fund is closely monitored to ensure HEC can meet its current and future obligations. Wind-up scenarios and analyses are conducted on a quarterly basis. HEC's new Contribution Agreement includes a \$6.4M wind-up clause from Health Canada should HEC have to wind up its operations within the next five years, which provides a contingency.
	Capacity of finance and/or financial systems to support HEC operations.	HEC develops a three-year risk-based internal review plan that it reviews annually. The finance function was reviewed in 2018-19 (former CFHI) and in 2020-21 (primarily the former CFHI with some consideration of the amalgamated organization) and recommendations are currently being implemented. The amalgamation of the legacy organizations also allowed HEC to develop a new organizational structure for the finance team and the harmonization of financial systems.
Human Resources	Mental health, stress among employees	<p>As we experience a third wave of COVID and lockdowns in several jurisdictions where HEC staff live and work, we are seeing the growing impacts of this stress on our staff. This is compounded by the ongoing pace of change related to organizational development. Ongoing office closures and the uncertainty of when staff may return to the workplace will continue to have an impact.</p> <p>Management is monitoring progress and the overall well-being of staff and launched a Pandemic Planning Committee with diverse staff representation to guide the organization's response. Throughout the amalgamation, significant investments have been made in change management. Staff mental health and well-being has also been supported through access to an Employee Assistance Program and focused sessions available to all staff. Management has also identified some quick wins and small tests of change to support staff in the short term.</p>

Functional Area	Risk	Mitigation Strategies
	Inability to recruit and retain highly qualified staff.	<p>Ongoing change and transition due to amalgamation increases the likelihood of unexpected staff departures. HEC continues to provide staff with regular updates on ongoing transition and integration activities. It is anticipated that turnover may increase in spring 2021 before stabilizing over the summer.</p> <p>HEC will also continue to develop its onboarding platform, maintain communications with staff at critical times during the onboarding period, maintain a competitive compensation package, act on professional development opportunities identified in employee performance and development plans, and proactively manage employee concerns. In addition, HEC will continue to complement staff skill mix/capacity/expertise and analytical capacity with external expertise to support program delivery, as needed.</p>
Information Technology & Knowledge Management	Insufficient security over corporate databases, networks, or administrative processes leading to breaches in confidentiality, privacy and/or data integrity, particularly as staff continue to work remotely.	<p>HEC is working on strengthening its information technology and finance policies based on the robust foundation of its legacy organizations, ensuring HEC has the proper controls in place. In addition, any data collected from HEC's programs is stored on a data acquisition platform located in Canada and certified for all PIPEDA requirements.</p> <p>The IT team continues to train staff on security risks and mitigating strategies and has included security awareness as part of the employee onboarding process.</p>
Communications	Inability to raise awareness of HEC and the organization's new mandate in a way that resonates with diverse external stakeholders.	<p>HEC launched on March 3, 2021 to enable the organization to begin to build brand awareness and launch programs (such as EXTRA and Clean Your Hands Day) under the new brand. Given the pandemic context facing many of our stakeholders, our approach focused on delivering value rather than adding noise and this continues to be important.</p> <p>HEC is developing its new communications channels and seeking out opportunities, building on the reach of our legacy organizations. Staff are also ensuring our communications are sensitive to key issues. The launch of HEC programs under the 2021-22 Operational Plan and the completion of HEC's new, multi-year strategy will provide further opportunities to raise brand awareness. As part of the strategy development between March and June 2021, HEC has been engaging stakeholders. In late 2021-22 staff will also undertake market research to gauge brand awareness and perceptions.</p> <p>Staff are working with legal counsel to protect elements of HEC's brand through trademarking.</p>

Functional Area	Risk	Mitigation Strategies
Programs	Inability to align HEC programming with federal, provincial and/or territorial and partner priorities.	HEC's senior leadership/CEO are engaging 1:1 with federal, provincial and territorial Deputy Ministers of Health and CEOs/senior leadership of other PCHOs, provincial quality councils, and professional associations, patient partners, and key partners around strategy development, and to better understand priorities and what HEC can do to help address those challenges via the organization's new strategy. Greater partnerships with PCHOs and other organizations around federal and shared health priorities will continue to help enhance our collective impact. We currently have partnerships with organizations across the country.
	Inability for HEC to fulfill its strategic objectives due to the ongoing COVID-19 pandemic.	Although the COVID-19 pandemic impacted delivery of the 2020-21 operational plan, progress generally remained strong to deliver both legacy organizations' operational plans. Nevertheless, there remain risks that the stakeholders with whom we work will continue to be challenged in participating in our programs as they respond to the COVID-19 pandemic. HEC has monthly program and budgeting tracking procedures in place to identify and mitigate any issues and make appropriate shifts related to the ongoing pandemic in a timely way.
	Inability for HEC to respond to the demands for more programming than HEC can deliver with its current financial and human resources.	To support as many participants as possible in the LTC+ program beyond the 1,000 for which we received funding (in fiscal years 2020-21 and 2021-22), HEC has: 1) allocated as much of the 2020-21 and 2021-22 underspend in HEC's budget as possible to support more homes; 2) approached the external funding partners, receiving targeted funding from the CMA Foundation and Health Canada; 3) explored options for the use of HEC's reserve fund now that there are some protections in place in our Contribution Agreement with Health Canada.
Evaluation	Inability for HEC to demonstrate impact of its programs and initiatives on the healthcare system.	HEC has developed an interim performance measurement framework (PMF) for 2021-22 while it develops its longer term PMF. Quarterly reporting against HEC's strategic objectives and performance indicators will be reported via the President's Report and Quarterly Update to the Board where the Board will be able to assess HEC's progress against its strategic objectives and targets.
Organizational Transition & Integration	Insufficient clarity and understanding among staff on new HEC processes, procedures and ways of working.	As the organization continues the journey of amalgamation, there are many new processes and procedures being established. HEC has established a new unit focused on organizational transition and integration that works closely with the senior leadership team to continue to ensure a smooth transition and to work with teams to integrate HEC's systems and processes.

Functional Area	Risk	Mitigation Strategies
Legal/Compliance	Ensuring legal compliance with changing laws affecting HEC operations.	<p>Staff are spending considerable time to better understand applicable laws and implement approaches to HEC compliance that enable effective operations.</p> <p>Under the Accessibility for Ontarians with Disabilities Act (AODA), beginning 1 January 2021, all public websites must meet Web Content Accessibility Guidelines (WCAG) 2.0 Level AA. HEC's approach to compliance has focused on building an accessible website for the new organization, enhancing internal capacity and mitigating risk by posting an updated accessibility notice on all its websites (HEC, as well as CFHI and CPSI legacy websites); this approach was informed by legal advice.</p> <p>Staff have also sought legal advice and developed an approach to federal-provincial-territorial lobbying compliance in jurisdictions where these laws apply to HEC due to the nature of our work communicating with stakeholders that include public office holders regarding improving the quality and safety of healthcare.</p>



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