

Healthcare Excellence Canada

Challenges and Risks

April 1, 2021, to March 31, 2022

Further to a contribution agreement with Health Canada, Healthcare Excellence Canada (HEC) reports annually on challenges and risks facing the organization, including mitigation strategies. In addition, management and our Board of Directors also undertakes 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 nine 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. HEC launched in the spring of 2021 from the amalgamation of the Canadian Foundation for Healthcare Improvement (CFHI) and Canadian Patient Safety Institute (CPSI). By creating a single organization with an integrated focus on healthcare 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 continued to affect people and organizations across Canada throughout 2021-22, further 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 from them.

Responding to the challenge, HEC engaged virtually with stakeholders across the country to inform our five-year strategy – the first for our new organization. We talked to people across the country about what excellence in healthcare means to them, the issues that matter most and how we can help. Our strategy focuses on improving care of older adults, care closer to home with safe transitions, and pandemic recovery and resilience – with quality and safety embedded across all our work.

Both our physical office and our program delivery remained virtual throughout the year to keep our staff and partners safe. Many of those partners were forced to pause or adjust their improvement initiatives to focus on COVID-19 response through evolving phases of the pandemic. The mantra of delivering value to our stakeholders, rather than creating noise, led us to be flexible while offering programs tailored to their needs, such as LTC+, Essential Together, Virtual Care Together, and more.

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 (PCHOs) through a coordinating table and targeted work on pandemic priorities also enabled greater collaboration.

CFHI's and CPSI's modest capacity relative to the size of Canada's health system had been an ongoing challenge. Last year, we took an important step towards bolstering this gap by amalgamating the two legacy organizations into HEC. Despite the pandemic, HEC has hit the ground running and achieved impressive results working with partners in 2021-22. A five-year funding agreement with Health Canada, along with program-specific funding boosts, have enhanced our ability to plan for the future and deliver collective impact with our partners.

The past year was still a year of transition as we continued to integrate processes and systems in our new organization. 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.

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	Harmonization and implementation of new HEC pension plan.	Over the past year, HEC has engaged external pension consultants to assist with pension harmonization triggered by the amalgamation. HEC's Board of Directors approved a new pension plan model, and a formal Memorandum of Agreement was signed. The jointly sponsored pension plan is consistent with the former CFHI's approach to retirement savings and with many comparator organizations. Staff engagement and information sessions were held to inform staff of the implications of the change for them.
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 some contingency. Another wind-up analysis will be completed after the pension harmonization is complete.
Finance	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 (CFHI) and 2020-21 (primarily CFHI with some consideration of the amalgamated organization), and recommendations have been 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	Impact of implementing a hybrid workplace on organizational culture.	As HEC plans a phased reopening of its Ottawa office, management recognizes that the pandemic has changed staff perception, preferences, and expectations regarding working virtually and in-person, which could have an impact on culture and cohesion. As a PCHO, HEC has also hired more remote staff throughout the pandemic who will be unable to attend the office in-person on a regular basis. Managing hybrid teams will come with new opportunities and challenges. HEC's Pandemic Planning Committee is supporting plans for the office re-opening, and staff are developing a flexible and remote work policy.

<p>Human Resources</p>	<p>Employee mental health, stress, and well-being.</p>	<p>As we experience multiple waves of COVID-19 where HEC staff live and work, we are seeing the ongoing impacts of this stress, as well as other external events, on our staff. This is compounded by the ongoing pace of change related to the transition and integration of the new organization. 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. We also have an active People and Culture Committee which provides a pulse of the organization. Throughout the amalgamation, significant investments have been made in change management. Staff mental health and well-being has also been supported through access to Employee Assistance Programs 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, including flexible working hours as well as support for managing workload and building resilience.</p>
<p>Human Resources</p>	<p>Inability to recruit and retain highly qualified staff.</p>	<p>Ongoing change and transition due to amalgamation, as well as the current employee market and pending retirements, increase the likelihood of unexpected staff departures. This is normal for an organization going through a transition and in the context of the current external environment.</p> <p>HEC has undertaken a succession planning process to mitigate this risk. HEC will also continue to 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>

<p>Information Technology and Knowledge Management</p>	<p>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>	<p>HEC is strengthening its information technology and finance policies based on the robust foundation of its legacy organizations, ensuring the organization has the proper controls in place. This includes annual third-party security audits and cybersecurity insurance, as well as a recent comprehensive review by a third party of HEC's cybersecurity. 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. Responding to recommendations from the cybersecurity practices review will be a major focus for 2022-23.</p>
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Communications	The potential for negative publicity, public perception, or uncontrollable events to have an adverse impact on HEC's reputation, thereby affecting trust in the organization.	Functional risks reported in this register also have the potential to impact our reputation. Their mitigation strategies contribute to ensuring we are addressing the risks associated with each one specifically. The communications team remains focused on developing clear, transparent, and consistent communications with external stakeholders, while actively monitoring mainstream media and social media for mention of HEC and our staff. Market research is being undertaken to provide the baseline needed to better understand the extent of this risk based on perceptions about HEC.
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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 in March 2021. Awareness of the new organization continues to grow because of corporate and program-related marketing and communications opportunities, such as the launch of our new strategy and Canadian Patient Safety Week. Due to the pandemic context, staff continues to proceed cautiously with raising brand awareness, balancing it against the need to be respectful of the competing priorities facing stakeholders.</p> <p>HEC continues to develop our communications channels and seek new opportunities. Staff are also ensuring our communications are sensitive to key issues, such as the balance of healthcare quality and patient safety, the importance of patient partners and a commitment to being guided by Indigenous perspectives. The launch of HEC's new strategy provided further opportunities to raise brand awareness into the fall. Staff are also undertaking market research to gauge brand awareness and perceptions.</p> <p>Staff worked with legal counsel to receive Official Mark trademark protection for HEC's name and wordmarks in English and French.</p>
Programs	Inability to align HEC programming with federal, provincial and/or territorial and partner priorities.	HEC's senior leadership continues to engage with federal, provincial, and territorial Deputy Ministers of Health, CEOs/senior leadership of other PCHOs, provincial quality councils, professional associations, patient partners and key partners. Greater partnerships with PCHOs and other organizations around federal and shared health priorities will continue to help enhance our collective impact. We have partnerships with organizations across the country. A regional relations approach has been implemented to identify system priorities for HEC programming consideration as well as to increase reach and collaboration.
Programs	Inability for HEC to fulfill its strategic objectives due to the ongoing COVID-19 pandemic.	Progress to deliver HEC's 2021-22 operational plan has been impacted by the COVID-19 pandemic. HEC experienced ongoing delays among stakeholders who were challenged to participate in our programs because of other pandemic priorities. HEC has monthly program and budgeting tracking procedures in place to identify and help mitigate issues, and make appropriate shifts related to the ongoing pandemic in a timely way.

Programs	Inability for HEC to respond to the demands for more programming than the organization can deliver with its current financial and human resources.	Staff are pursuing opportunities to leverage existing resources and secure additional support to advance priority programs identified in the operational plan. This includes additional funding from Health Canada and the Canadian Medical Association (CMA) Foundation to enable expansion of the number of homes participating in the LTC+ program, as well as support for other initiatives.
Performance Measurement and 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 evaluation strategy. Quarterly reporting against HEC's strategic objectives and performance indicators will be reported via the President's Report and Quarterly Update to the Board of Directors where the Board will be able to assess HEC's progress against its strategic objectives and targets.
Organizational Transition & Integration	Insufficient policies and procedures developed to address regulatory requirements and/or operational activities.	A preliminary review of the legacy policies/guidance documents was conducted in 2021 to recommend priorities and timelines for policy review/development based on consideration of initial HEC leader feedback, legislative/regulatory requirements, and other areas of risk and operational impact during this period of transition and forming. Staff continue to identify, define, and integrate HEC policies and related procedures in a staged manner that addresses key HEC priorities.
Organizational Transition & Integration	Insufficient clarity and understanding among staff of new HEC processes, procedures, and ways of working.	As the organization continues its 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.

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 January 1, 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 the CFHI and CPSI legacy websites). This approach was informed by legal advice.</p> <p>Staff have also sought legal advice and developed an approach that ensures federal-provincial-territorial lobbying compliance in jurisdictions where these laws apply to HEC due to the nature of our work communicating with stakeholders, including public office holders, regarding improving the quality and safety of healthcare.</p> <p>HEC worked with legal counsel to register with the respective Workplace Safety and Insurance Boards where staff is located.</p>
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