

DHW-Health PEI

# Accountability Framework

10-15-2021

## **DHW and Health PEI Accountability Framework (MOU)**

### **1. Introduction and Purpose**

This accountability framework (“Framework”) is being developed pursuant to subsection 3(3) of the *Health Services Act* (the “Act”), which provides that the Minister of Health and Wellness (the “Minister”), in consultation with Health PEI, may establish an accountability framework that describes the roles and responsibilities of the Minister and Health PEI within the provincial health system. The Department of Health and Wellness (the “Department”) is committed, in collaboration with Health PEI, to maximizing the potential of the provincial health care system.

The purpose of this Framework is to:

- establish the accountability relationship between the Department and Health PEI;
- identify performance objectives;
- clarify roles and responsibilities;
- support issues management and communication; and
- articulate the performance expectations and requirements of both the Department and Health PEI.

The parties to this Framework are committed to performing their duties in accordance with the Act and this Framework, including their duties and other applicable legislation, regulations, directives and policies. Both parties acknowledge that this Framework will mature over time to reflect the evolution of the health system in Prince Edward Island (“PEI”) and the needs of Islanders. As such, both parties mutually agree to periodically review and amend this Framework as needed.

This Framework does not replace or displace the Act. In case of any disagreement between the terms of the Framework and the Act, the Act prevails.

### **2. Definitions**

In addition to the terms defined above, the following words and phrases in this Framework have the following defined meanings:

- a. “Applicable Government Directives” means the regulations, directives, policies and procedures listed in Appendix 1, which may be revised or replaced from time to time;
- b. “Board” means the Board of Directors of Health PEI;
- c. “Board Member” means a director of the Board of Health PEI;
- d. “CEO” means the Chief Executive Officer of Health PEI;
- e. “Chair” means the Chair of the Board of Health PEI;
- f. “Department” means the Department of Health and Wellness;

- g. “Deputy Minister” means the Deputy Minister of Health and Wellness;
- h. “Government” means the Government of Prince Edward Island;
- i. “Health PEI” means the Crown corporation established under subsection 6.1 of the Act; and
- j. “Minister” means the Minister of Health and Wellness.

### **3. List of Applicable Governing Legislation**

The Framework is guided and informed by various pieces of legislation, including:

- a. *Health Services Act*, R.S.P.E.I. 1988, c. H-1.6.
- b. *Interpretation Act*, R.S.P.E.I. 1988, c. I-8.
- c. *Legislative Assembly Act*, R.S.P.E.I. 1988, c. L-7.1.
- d. *Executive Council Act*, R.S.P.E.I. 1988, c. E-12.
- e. *Financial Administration Act*, R.S.P.E.I. 1988, c. F-9.
- f. *Health Information Act*, R.S.P.E.I. 1988, c. H-1.41.
- g. *Freedom of Information and Protection of Privacy Act*, R.S.P.E.I. 1988, c. F-15.01.

### **4. Delegation of Responsibilities**

The Minister is responsible for the administration of the Act. The Minister is, by virtue of subsection 2(2) of the Act, ultimately responsible for ensuring the provision of health services in the province in accordance with the Provincial Health Plan.

Like every Minister of the Crown, the duties and powers of the Minister, as assigned by the Act, also extend to the Deputy Minister. Subsection 21(1) of the *Interpretation Act* expressly provides for this delegation of authority:

#### *21. Power to act for Ministers*

(1) *Words in an enactment directing or empowering a Minister of the Crown to do something, or otherwise applying to him by his name of office, include*

(a) *a Minister designated to act in the office;*

(b) *the deputy of the Minister.*

### **5. Agency’s Legal Authority and Mandate**

The legal authority of Health PEI is set out in the Act. Subsection 12(1) of the Act provides that Health PEI is responsible for planning, organizing and delivering health services in PEI. This includes an obligation to evaluate the health services being provided and its delivery of those services. It is

recognized by the parties that HPEI must provide the services that the Minister determines are be provided to Islanders, through the powers and authority of the Minister contained in subsection 12(2) of the Act and in accordance with the Provincial Health Plan (PHP) provided in section (3). Specifically, subsection 12(2) of the Act provides that the duties and responsibilities of Health PEI include the following:

- assessing the health needs of Islanders;
- coordinating its health services with those provided by other providers of health services;
- evaluating the health services provided by Health PEI and its delivery of those services;
- promoting and encouraging health and wellness;
- assisting the Minister in the development of and implementation of health policies and standards, health information systems, human resource plans for the health care system and other provincial health system initiatives;
- meeting any standards established by the Minister respecting the quality of health services;
- complying with any directions, policies or guidelines issued or established by the Minister with respect to health services and the administration of those health services;
- implementing any health services plans and any other plans required by the Minister;
- providing any reports that may be required by the Minister;
- operating in accordance with any accountability framework established by the Minister;
- operating within its approved budget; and
- undertaking any other activities directed by the Minister.

## **6. Agency Type and Public Body Status**

Health PEI is a Crown corporation designated in Schedule B of the *Financial Administration Act*. Health PEI is also a public body designated in Schedule 1 of the *Freedom of Information and Protection of Privacy Act* and a custodian of personal health information under the *Health Information Act*.

## **7. Corporate Status and/or Crown Agency Status**

Health PEI is a Crown corporation established by subsection 6(1) of the Act. By virtue of subsection 6(2), Health PEI has the same general powers as conferred on a company except where such powers are inconsistent with the terms of the Act. The affairs of Health PEI are controlled and managed by a Board of Directors appointed by the Minister pursuant to subsection 7(1) of the Act. Subsection 8(1) of the Act provides that the board may make bylaws and policies, which are not inconsistent with the legislation and regulations, regarding its internal organization and the management of its operations. Subsection 8(2) requires the Board to make bylaws governing the medical staff of Health PEI, including, but not limited to, bylaws regarding privileges, classification, and the quality of health

services. Subsection 11(1) of the Act provides for the appointment of a chief executive officer by the Lieutenant Governor in Council from a list of candidates who have been recruited and recommended by the Board, and who pursuant to subsection 11(1.1) of the Act shall be responsible for the general management and conduct of the affairs of Health PEI in accordance with the policies and directions of the Board.

By virtue of section 33 of the Act, the Minister, the directors and chief executive officer of Health PEI, and any person acting on their instructions or under the legislation, regulations, or bylaws and policies of Health PEI, are not personally liable for any loss or damage suffered by any person by reason of any action or inaction taken in good faith.

## **8. Guiding Principles**

Parties to the Framework will carry out their individual and mutual responsibilities and obligations in a manner that aligns with provincial priorities as articulated by the Minister from time to time. Based on the current guiding principles, the parties agree to the following principles:

### **Collaboration**

Encourage and actively seek to build a shared culture of trust, mutual respect, and collaboration.

### **Engagement**

Demonstrate efforts to engage citizens, patients, families, and caregivers in the development of health policies, priorities, and services.

### **Efficiency and Sustainability**

Facilitate development of effective policy that is aimed at delivering programs and services to promote sustainability of the health system.

### **Transparency and Communication**

Advance communication, transparency, and timely exchange of information between the parties and health services providers.

### **Evidence-Informed**

Commit to learning that is impassioned by innovation but grounded in evidence-informed policy decisions and service delivery.

## **9. Shared Goals**

The parties to the Framework have a shared vision for a healthy Island community, and each party contributes to that vision in different ways. However, the parties work together to complement, and coordinate with, each other. Each party maintains a three-year strategic plan to guide their respective work. The parties to the Framework are mutually committed to the success and sustainability of the provincial health care system.

The Department's 2019-2022 strategic plan focuses on three goals:

- protecting the health of Islanders;

- enabling Islanders to achieve their optimal health; and
- improving effectiveness and promoting sustainability of the health system.

Health PEI's 2021-2024 strategic plan focuses on three similar goals. These include:

- establish a healthy, safe and high-performing workplace that supports and develops our people;
- integrate quality and patient safety into the culture of the organization;
- provide quality, equitable and patient-focused care across the organization; and
- develop new and innovative approaches to improve efficiency and utilization of our resources.

## **10. Accountability Relationships**

### **10.1 Minister**

The Minister is accountable:

- to Executive Council for the performance of the Department, compliance with Applicable Government Directives, and other duties set out in the Act;
- to Executive Council for the performance of Health PEI, compliance with Applicable Government Directives, and other duties set out in the Act;
- to Treasury Board for the financial operations of the Department and Health PEI;
- to the Legislative Assembly for the work of the Department and Health PEI;
- for approval of the strategic plan, annual business plan, and annual budget for Health PEI;
- for receipt of the annual report from Health PEI; and
- for delivery of the annual report from Health PEI to the Legislative Assembly and making the annual report available to the public.

### **10.2 Chair**

The Chair acts on behalf of the Board and is accountable to the Minister for management and control of the affairs of Health PEI, and for carrying out any roles or responsibilities assigned to the Chair by the Minister, and applicable directives from the Minister. The Chair is accountable to the Minister for reporting, as requested, on the affairs of Health PEI.

### **10.3 Board of Directors**

The Board sets the strategic direction for Health PEI within the parameters of the Act and subject to the direction from, and accountability to, the Minister. The Board is accountable to the Minister, through the Chair, for the management and control of Health PEI as established in the Act. The connection of the Board to the operational organization, its achievements and conduct, is through the CEO of Health PEI.

The Board sets Board Operational Expectations Policies which are statements about the Board's position on operational matters delegated to the CEO, including both actions and conditions to be accomplished and avoided. The Board views CEO performance as identical to organizational performance and conduct as outlined in Health PEI's Strategic Direction and compliance with Operational Expectations policies outlined in the Board's Governance Policies.

#### **10.4 Deputy Minister**

The Deputy Minister is accountable to the Clerk of Executive Council and the Minister for the performance of the Department in providing administrative and organizational support to Health PEI and for carrying out the roles and responsibilities assigned by the Minister, this Framework, and other duties and powers delegated to the Deputy Minister by the Minister.

#### **10.5 Chief Executive Officer**

The CEO is appointed by the Lieutenant Governor in Council from a list of candidates who have been recruited and recommended by the Board. The CEO is the administrative head of Health PEI. The CEO is accountable to the Minister, through the Board, for the general management and conduct of the affairs of Health PEI, including the performance of other duties assigned by the Board.

The CEO is also accountable for health system performance in accordance with the strategic plan of Health PEI. The CEO works under the direction of the Board to implement policy and operational decisions at Health PEI. As outlined in the Board's Operational Expectations for the CEO, the CEO reports the performance results of Health PEI to the Board and the Minister.

The CEO is the primary link between the Board and the operational performance and conduct of Health PEI, so that all authority and accountability for staff at Health PEI is considered the authority and accountability of the CEO.

### **11. Roles and Responsibilities**

#### **11.1 Minister**

The Minister is responsible for:

- a. the administration of the Act (2);
- b. ensuring the provision of health services in accordance with the provincial health plan;
- c. establishing a provincial health plan, which includes:
  - the principles upon which the provision of health services are to be based;
  - the goals, objectives and priorities for the provision of health services;
  - the health services to be provided or made available and the health facilities to be operated by Health PEI;
  - the health services to be provided or made available by the Department and other organizations;

- a financial plan, including a statement of how financial, material and human resources are to be allocated to meet the goals, objectives and priorities established; and
  - any other matters prescribed by the regulations under the Act;
- d. establishing an accountability framework, in consultation with Health PEI, that describes the roles and responsibilities of the Minister and Health PEI in relation to each other within the provincial health system;
- e. giving written directives to the Board of Health PEI, from time to time, requiring it to:
- carry out its operations and provide health services in accordance with the strategic direction, plans, priorities or guidelines for the health care system set by the Minister;
  - carry out its responsibilities as set out in the Act and to exercise its powers in accordance with the Act; or
  - coordinate the activities that it undertakes and the health services that it provides in the public interest.
- f. approving bylaws made by the Board in accordance with the Act;
- g. appointing and reappointing Board Members in accordance with the Act;
- h. appointing the Chair of the Board;
- i. approving Health PEI's annual business plan and annual budget;
- j. approving Health PEI's strategic plan, which shall include a public engagement strategy. Stakeholders involved in the development of a public engagement strategy may include but are not limited to staff and leaders from Health PEI, the Community Health Engagement Committees, family and patient partners, and community partners;
- k. receiving Health PEI's annual report, delivering it to the Legislative Assembly, sharing it with the Community Health Engagement Committees (CHEC), and making the annual report available to the public;
- l. providing funding to Health PEI out of money appropriated by the Legislative Assembly; and
- m. working with the Deputy Minister to ensure the Department delivers on key priorities specific to its mandate.
- n. ensuring services provided by the Department and core Government to Health PEI, including Recruitment and Retention, IT Shared Services, Mobile Mental Health, and Public Service Commission, meet agreed upon standards .

## **11.2 Chair**

The Chair is responsible for:



- a. assuring the integrity of the Board's processes and representing the Board to outside parties;
- b. ensuring that the Board operates consistently with its own bylaws and policies (3); and
- c. participating in the decision-making of the Board in accordance with the Act and policies of the Board. (4)

### **11.3 Board of Directors**

The Board is responsible for:

- a. controlling and managing the affairs of Health PEI in accordance with the Act (5);
- b. ensuring that Health PEI uses public funds prudently, only for the business of Health PEI, and within its approved budget allocation, all in compliance with applicable legislation and directives;
- c. ensuring that Health PEI funds are used with integrity, honesty, fairness and effective controllership;
- d. ensuring that Health PEI meets accreditation standards by working with the Board's Quality and Safety Committee, the CEO and Health PEI leadership to identify and support implementation of actions to meet accreditation standards.
- e. evaluating the Health PEI CEO;
- f. making the schedule of its regular meetings available to the public, including the date, time and location of each meeting;
- g. making bylaws and policies regarding its internal organization and proceedings and the management of its operations;
- h. making bylaws governing medical staff of Health PEI pursuant to section 8.2 (2) of the Act;
- i. providing the linkage between the operational organization and the Minister;
- j. providing written policies that address the broadest level of all organizational decisions and situations, including strategic direction, operational expectations, governance processes and delegation;
- k. approving the strategic plan for Health PEI for submission to the Minister;
- l. approving the annual operating and capital budget for submission to the Minister;
- m. approving privileges as outlined under the Medical Staff Bylaws;

- n. appointing an external auditor to audit the records, accounts and financial transactions of Health PEI on an annual basis;
- o. monitoring strategic direction and operational expectation policies to ensure successful organizational performance; and
- p. monitoring governance processes, bylaws, and policies to ensure effective Board performance. (6)

#### **11.4 Deputy Minister**

The Deputy Minister is responsible for:

- a. advising and assisting the Minister regarding their individual and collective responsibilities, including informing the Minister of policy direction, policies and priorities of relevance to the Department and Health PEI;
- b. advising the Minister on the requirements of Executive Council and Treasury Board, and other Applicable Government Directives that apply to the Department and Health PEI;
- c. consulting with the Chair and/or CEO of Health PEI, as appropriate, on matters of mutual importance, strategic direction, and priorities;
- d. recommending to the Minister, as required, the evaluation or review of programs, and, as necessary, presenting to the Board concerns regarding management or operations of Health PEI;
- e. facilitating regular briefings and consultations between the Chair, the CEO and the Minister, and between departmental staff and Health PEI;
- f. consulting with senior officials to ensure that decisions by the Minister are based on the best evidence available;
- g. advising the Minister as to the accountability requirements set out in the Act for Health PEI, and other Applicable Government Directives, including the approved business plan and strategic plan;
- h. establishing a framework for reviewing and assessing Health PEI's annual business plan and other reports;
- i. supporting the Minister in reviewing the performance targets, measures and results of the Department and Health PEI;
- j. advising the Minister on documents submitted by Health PEI for review and approval by the Minister;
- k. consulting with the Chair or CEO, as needed, on matters of mutual importance, including services provided by the Department and compliance with the Act and Applicable Government Directives;

- l. Working with the CEO to ensure delivery of common priorities and ensuring that operational directions are in writing and minute-able where appropriate;
- m. facilitating regular briefings and consultations with the Chair or CEO, as directed by the Minister, or on the request of the Chair or CEO; and
- n. upon notice to the Board, undertaking any review of Health PEI as directed by the Minister (7).

## **11.5 CEO**

The CEO is responsible for:

- a. the general management and conduct of the affairs of Health PEI and performing other duties assigned by the Board (8);
- b. working strategically with the Board or senior management to ensure the effective day-to-day delivery of quality health services in line with the Act, Applicable Government Directives, policies of the Board, and directives of the Minister;
- c. championing and orchestrating changes required at the systems level to achieve Health PEI's strategic plan, while promoting a high standard of patient safety and health outcomes;
- d. collaborating closely with Government, stakeholders, partners and the public to formulate and implement solutions to improve service delivery (quality and access) on a cost-effective basis;
- e. cultivating, supporting and maintaining collaborative stakeholder relations regarding the provincial health system at the community, provincial and national levels;
- f. cultivating open, transparent, two-way communication with staff, physicians, health care partners and other Health PEI stakeholders;
- g. cultivating and maintaining government relations, advocacy, public and media relations;
- h. engaging in effective discussions to determine viable and effective approaches to achieving Health PEI's strategic plan;
- i. managing Health PEI within the established direction of the Board, and subject to the strategic plan, policies of the Board, and directives of the Minister;
- j. ensuring the timely preparation of the strategic plan, annual business plan, annual budgets and annual report, including annual audited financial statements;
- k. ensuring the deployment of Health PEI resources in line with budgets, plans, legislation and applicable professional standards;
- l. providing interpretation of policies adopted by the Board and delivering regular monitoring reports to the Board;
- m. guiding the implementation of the strategic plan in a manner that aligns with organizational values and stakeholder needs and adjusting strategic direction as necessary;

- n. ensuring that Health PEI's administrative processes and practices are consistent with the strategic plan, meet requirements of the Department, and comply with the Act and Applicable Government or Minister Directives;
- o. supporting the Board by providing appropriate supports, timely information and advice that enables the Board to effectively accomplish its role; and
- p. promoting a positive organizational culture and maintaining on-going engagement with staff, physicians, teams, stakeholder and partners in our health care system (9).

## **12. Accountability Requirements**

### **12.1 Requirements Based on Legislation**

The reporting requirements from Health PEI to the Minister are clearly defined in the Act. These requirements include:

- a. Health PEI is accountable to the Minister for the performance of its functions under the Act and must operate in accordance with its approved business plan and approved strategic plan;
- b. every three fiscal years, Health PEI must prepare and submit to the Minister, for approval, a strategic plan, which has to include a public engagement strategy, for the following three fiscal years; and
- c. Health PEI may submit any revisions or amendments to the approved strategic plan, or the approved business plan, to the Minister for consideration and approval by the Minister.
- d. Health PEI is required to operate within its approved budget.

### **12.2 Reporting Requirements**

#### **Strategic Plan**

Every three fiscal years, Health PEI shall prepare and submit to the Minister, for approval, a strategic plan, which shall include a public engagement strategy. The Board is responsible for approving the strategic plan prior to submission to the Minister. The strategic plan establishes performance measures and targets for Health PEI. It also outlines how Health PEI will evaluate the results of its actions. Health PEI's annual business plan is framed in accordance with the performance measures and targets identified in the strategic plan.

#### **Business Plan and Budget**

Each fiscal year, Health PEI shall prepare and submit to the Minister, for approval, an annual business plan, and an annual operational and capital budget in accordance with the Act. The Board is responsible for approving the annual business plan prior to submission to the Minister.

The annual business plan includes a budget, the strategic objectives of Health PEI, and a statement of any performance measures Health PEI will meet. The annual business plan describes key tactical actions that Health PEI will take in deploying its available resources to achieve expected results in the next fiscal year. The business plan must include performance measures and targets that permit annual comparison of actual results achieved by Health PEI.

After reviewing the plan or budget the Minister may approve the plan or budget or refer the plan or budget back to Health PEI for amendment, with any direction that the Minister considers appropriate. Health PEI shall resubmit the plan or budget to the Minister. Health PEI may submit to the Minister any revisions or amendments to an approved strategic plan or approved business plan. Health PEI must provide information to the Minister, such as financial, program or management information, as may be requested from time to time by the Minister.

### **Annual Report**

The annual report is a legislative requirement in the *Financial Administration Act*. The annual report is a document that supports Health PEI's reporting and accountability requirement to the Legislative Assembly and the general public. The annual report provides information on key areas fundamental to public accountability, including governance, organizational and legislative requirements.

The Board is responsible for approving the annual report before submission to the Minister. The Chair is responsible for ensuring that Health PEI's annual report is prepared and submitted to the Minister. The Chair, together with the CEO, is responsible for ensuring that Health PEI's annual report fulfills all requirements of the *Financial Administration Act*, the Act, and Applicable Government Directives. The Minister will receive, deliver, and make available Health PEI's annual report.

### **Other Reports**

The Chair is responsible on behalf of the Board for ensuring that the reports and documents are submitted for review and approval by the Minister in accordance with the prescribed or agree-upon timelines. In addition, Health PEI may be asked to supply specific data and other information from time-to-time, at the request of the Minister or Deputy Minister, for the purpose of informing the priorities and policy directions of the Department and the Government. All such requests shall be made in writing to the CEO of Health PEI.

## **13. Information Sharing**

Parties to this framework are committed to using evidence to inform their practice and decision-making. As such, both parties mutually agree to access and share health information, where authorized and appropriate, for the better delivery of health services and the planning and management of the health care system in accordance with the *Health Information Act*, the *Freedom of Information and Protection of Privacy Act*, and other applicable laws or regulations. Subject to legislative requirements, information sharing between the Department and Health PEI will be proactive, open, transparent and collaborative.

#### **14. Communications and Issues Management**

The parties to this Framework acknowledge the importance of clarity and the desire for providing clear written direction where relevant. The parties acknowledge the importance of establishing a process of open dialogue and engagement.

Considering this, the parties recognize that the timely exchange of information about the operations and administration of Health PEI is essential for the Minister to meet the responsibilities for reporting and responding to the Legislative Assembly, Executive Council, and others about the affairs of Health PEI. The parties equally recognize that it is essential for the Chair on behalf of the Board to be kept informed by the Department in a timely manner of the Government's planning, priorities and policy directions that may affect Health PEI's mandate and function.

The Minister and the Chair, on behalf of the Board, therefore, agree that:

- a. the Chair will keep the Minister advised, in a timely manner, of all planned events or anticipated issues, including matters that concern or can be reasonably expected to concern the Minister in the exercise of the Minister's responsibilities;
- b. the Minister will consult with the Chair in a timely manner, as appropriate, on Government priorities, policy initiatives, or legislative or regulatory changes being considered by the Government that may impact Health PEI's mandate or function, or would have a significant impact on Health PEI;
- c. the Minister and the Chair will consult with each other on public communication strategies and publications, and they will keep each other informed of the results of stakeholder and other public consultations and discussions;
- d. the Minister and the Chair will meet monthly or as requested by either party, to discuss issues relating to the fulfillment of Health PEI's mandate, management and operations. At the discretion of the Minister and the Chair, the Deputy Minister and the CEO may be requested to participate;
- e. the Deputy Minister and the CEO will meet as needed, or as requested by either party, to discuss issues relating to the delivery of the strategic plan and the efficient operation of Health PEI; and
- f. the Deputy and the CEO will provide timely information and advice to each other concerning emerging issues and significant matters affecting the Department or the management and operations of Health PEI (10).

#### **15. Effective and Periodic Review of the Framework**

The parties to this Framework are committed to reviewing the body of the agreement every three fiscal years and the appendices/schedules annually to ensure the Framework reflects the evolution of the health system in Prince Edward Island and the ongoing needs of Islanders. The Deputy Minister and CEO will lead this process and provide recommended changes to the Minister and the Chair for approval. Engagement from time to time with stakeholders in our health care system may be included in the review process. Stakeholders may include but are not limited to staff and leaders from the Department

and Health PEI, family and patient partners, community partners and private sector health care providers.

## **16. Performance Expectations/Performance Management**

The parties to this Framework acknowledge that in order to understand health system performance, consistent health system performance indicators must be identified or developed and be aligned with accountability mechanisms. The parties will strive to achieve on-going performance improvement. They will follow a proactive, collaborative and responsive approach to performance management and improvement. Appendix 2 outlines a process to develop a performance framework.

It is agreed that:

- Performance indicators will be selected and agreed upon by the parties utilizing a performance framework that has been developed from best practices and published literature in health system performance and accountability.
- Performance indicators currently utilized in strategic planning and accreditation will be considered first as a performance framework is being developed to ensure alignment with existing work to avoid duplication data collection and analysis efforts.
- Roles, responsibilities and performance expectations are clearly defined and communicated.
- Performance indicators must be in balance with capacity to deliver results and must reflect the provincial health system context and available human, fiscal and capital resources available. This includes: data systems, tools and processes for collection and resources required to ensure indicators are measured and data is collected, analyzed and reported as required.
- Regular reporting of performance indicators allows for informed decision-making and priority setting for the parties, in addition to providing the status of health system performance.
- The Performance Framework will allow for adjustments as required and agreed upon by the parties.

## **17. Signatures**

The authorized signatories for the Parties have signed this Memorandum of Understanding as of the dates indicated.

**[Original Signed By]**

**[Original Signed By]**

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**The Honourable Ernie Hudson**  
Minster, Health and Wellness  
October 18, 2021

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**Derek Key**  
Chair, Health PEI Board of Directors  
October 18, 2021

## References/ Notes

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2. *Health Services Act*, R.S.P.E.I. 1988, Cap. H-1.6.
3. Health PEI. *Board of Directors: Governance Policies* (March 14, 2018).
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13. Veillard, J., Tipper, B., Allin, S. 2015. "Health system performance reporting in Canada: Bridging theory and practice at pan-Canadian level." *Canadian Public Administration* 58(1): 15-38.
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17. Government of Northwest Territories –Department of Health and Social Services. 2014.  
“Accountability framework and system-wide risk-based evaluation accountability report.”

## **Appendix 1: Applicable Government Directives**

1. Written directives issued by the Minister pursuant to s. 3.1(1) of the Act.
2. Regulations prescribed by Executive Council pursuant to s. 35 of the Act.

## Appendix 2: Development of a Performance Framework

### Definitions

A **performance indicator** is a measure of the health system's performance for which a performance target is set. An indicator provides comparable and actionable information across different geographic, organizational or administrative boundaries and/or can track progress over time. Indicators support provinces and regional health authorities and institutions as they monitor the health of their populations and track how well their local health systems function. (11,12,13,14)

A **performance target** is the planned level of performance expected of the health system in respect of performance indicators. (11,12,13,14)

A **performance benchmark** is an identified point of comparison that is derived from data of existing best practices and/or successful organizations and is used to pursue the implementation of best practices. Regular monitoring and comparisons of performance are a part of benchmarking. (15)

### Performance Framework Development

The development of a performance framework is a phased approach including research, engagement with key stakeholders, review of the current state of health system data, identification of indicators and targets and reporting frequency. (14,15,16,17)

1. Establish Performance Working Group with identified resources/support staff
2. Conduct research and analysis of health authorities/jurisdictional scans, best practices, data standards/guidelines and current frameworks, scorecards or other performance monitoring and reporting tools/processes.
3. Engage with stakeholders to identify potential approaches and indicators
4. Establish outline for performance framework:
  - a. Create inventory of indicators
  - b. Create indicator criteria against which indicator options will be measured (and weighted?)
  - c. Identify focus areas/domain for indicators. For example: Access to Care, Safe Care, Efficiency, Innovation, Utilization and Flow, Patient Experience, and Organizational Health – Resources/Capacities, Employee Experience
  - d. Evaluate and review indicators
  - e. Establish time frame for performance framework
  - f. Identify indicators and targets and schedule for setting targets and reviewing indicators
  - g. Identify reporting frequency, audience and tools to report progress (e.g. Scorecard, dashboard etc...)
  - h. Identify process to mitigate targets not being met or challenges with progress
5. Develop Performance Schedule for MOU (see example below)

**Template for Performance Indicators (Information to be included in MOU Performance Schedule)**

Focus Area/Domain	
Performance Indicator	
Measurement Unit (e.g. hours, %, \$)	
Performance Target	
Performance Indicator Data Source	
Performance Benchmark/Standard (if available)	
Reporting Frequency	
Responsibility	
Background/Rationale and Description of Performance Indicator	

### **Appendix 3 – Strategic Goals**

#### **2019-2022 Department of Health and Wellness Strategic Plan 2019-2022**

<https://www.princeedwardisland.ca/en/publication/department-of-health-and-wellness-strategic-plan-2019-2022>

#### **2017-2020 Health PEI Strategic Plan\***

<https://www.princeedwardisland.ca/en/information/health-pei/health-pei-strategic-plan-2017-2020>

\*The Health PEI 2021-2024 strategic plan is under development as of.

## **Appendix 4 – Communications**

### **Development and Implementation of a Department of Health and Wellness and Health PEI Communications Framework**

A multi-phased approach will be utilized to develop a communications framework to support key functions of the Department of Health and Wellness and Health PEI and promote effective communication with all health system stakeholders. This approach will utilize the RACI framework and standard communications processes as identified by Communications and Public Affairs (Executive Council).

An effective communication framework will clearly define roles and responsibilities for the Department and Health PEI and will also:

- Instill public confidence,
- Develop efficient communications,
- Identify clear expectations,
- Foster openness and transparency,
- Demonstrate a continued commitment to quality improvement and
- Foster positive relationships.

Phase 1 will be developed and implemented over the next 6 months.

#### **Phase 1: Plan Design**

##### **Step 1: Initial Assessment**

- Select a design team
- Identify key objectives and accountabilities of the work
- Develop a work plan with specific deliverables and timelines
- Obtain engagement and support of senior leadership:
  - Department of Health and Wellness
  - Health PEI
  - Communications and Public Affairs
- Identify key communications stakeholders:
  - Department of Health and Wellness: Minister and Deputy Minister, Senior Leaders
  - Health PEI: Board of Directors, CEO and Senior Leaders
  - DHW and HPEI Senior Communications Officers
  - Executive Director, Communications and Public Affairs
- Develop stakeholder consultation plan

## **Step 2: Research, Analysis and Alignment**

- Identify current and relevant best practices in strategic communications from other organizations and existing accountability framework/agreement/MOU documents
- Identify alignment and integration with the RACI framework: **R**esponsible, **A**ccountable, **C**onsulted and **I**nformed. The RACI framework will support stakeholders in developing a shared understanding of roles and accountabilities in communications for the DHW and HPEI. Benefits of RACI include engagement of stakeholders and clarity on roles and expectations.

## **Step 3: Stakeholder Diagnostics**

Through stakeholder engagement and document reviews:

- Identify current communication processes utilized and policies or guidelines implemented by the Department of Health and Wellness, Health PEI and Communications PEI
- Diagnose any current sources of departmental and agency conflict as it pertains directly to communications processes/practices
- Identify current successes and opportunities for improvement with existing processes/practices

## **Step 4: System Design**

- Develop and conduct a facilitated design workshop:
  1. Bring together key stakeholders or their delegates from the Department, Health PEI and Communications and Public Affairs
  2. Present findings from Steps 1-3
  3. Provide the group with different options and tools to clarify processes
  4. Have group “design” framework utilizing RACI as a foundation and key elements potentially including: situation, target audience, target communicators, key messages, outcomes, evaluation, strategies/tactics
  5. Test framework designed by stakeholder group through additional focus groups or consultations
    - Obtain feedback and buy-in
    - Ensure that the design is aligned with organizational needs (DHW and Health PEI), staff and leadership expectations, and culture
  6. Refine framework based on feedback from focus groups and consultations
- Identify where the framework will sit (e.g. Communications and Public Engagement, Department and/or Health PEI)
- Present the communications framework to Department, Health PEI and Communications and Public Affairs senior leadership for approval

## **Phase 2: Initial Implementation and Review**

- Develop an implementation plan, including details on the management of the communications framework
- Communicate new framework to relevant leaders and staff
- Finalize evaluation plan to review the framework in 12 months