



Building and Accelerating Implementation at Health PEI

Transformation Forum

October 15, 2026

Health PEI

How We Will Use Our Time

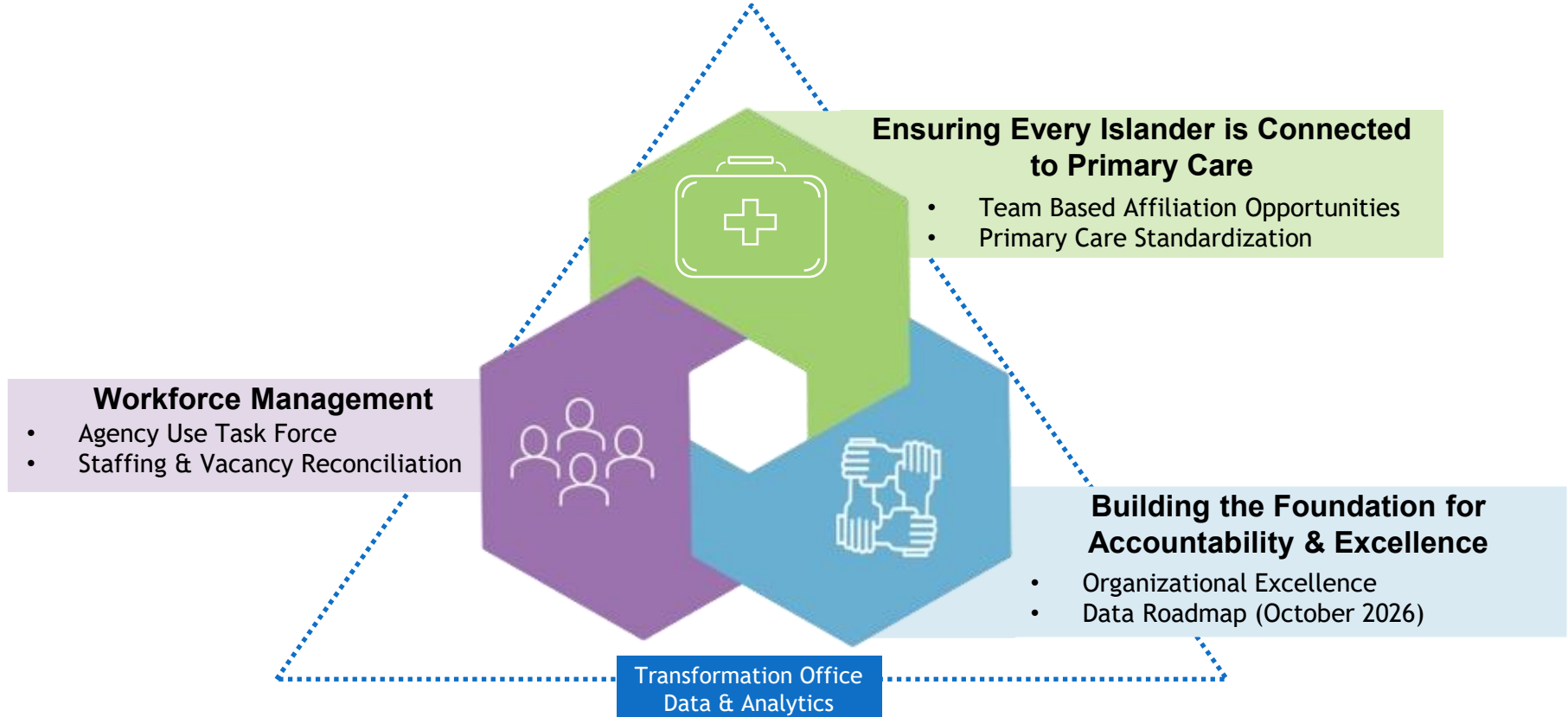
Agenda

01	Introduction	5 min
02	Workstream Accomplishments	35 min
03	Q&A	20 min

Session Objectives

- ✓ Provide updates on progress to date and establish a path forward

Transformation Office - Phase 3





01

Workstream Accomplishments



Ensuring Every Islander is Connected to Primary Care

Team-Based Affiliation

Current Reporting Period:
July 1 - September 30, 2026

Workstream Exec Sponsor:
Corinne Rowswell, Johan Viljoen

Workstream Directors:
Kim Lawn, Kevin Workentin

Milestone	Metric	Target	July 1	September 30	Key Highlights
Stakeholder Engagement	Initial Engagements	8	10	10	Engagement included: MSPEI, PEINU, UPSE, CUPE, IOUE, CPSPEI, and frontline workers.
	Survey Responses	100	125	125	Sent to all of PC, all physicians, all NPs, select hospital administrators, and select patient and family partners.
	Co-Design Workshops	3	0	4	- 2 Sessions held with 28 participants from across all disciplines within Primary Care. - 1 virtual session held with NPs and physicians. - 1 wrap up session with all participants
	Focus Group Sessions	10	0	6	2 groups and 39 participants, total.
Affiliation to a team	PEI Residents affiliated to the PMH at UPEI primary care team	Affiliation Underway	N/A	1,243	4 NPs and 1 Family Physician at the PMH at UPEI. Patients are being affiliated to that primary care team.

Ensuring Every Islander is Connected to Primary Care

Milestone
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On-
track

At-risk

Urgent

Milestone	Key Progress	Critical Path / Risks / Barriers	Focus For Next Report
Affiliation to a Team: address some of the current challenges in Primary Care to enable more connection to Primary Care	+ Completed key stakeholder engagement with Cabinet, unions, and partners to support Team-Based Affiliation (TBA). + Advanced co-design through focus groups and development of foundational documents. + Initiated patient affiliation activities at PMH at UPEI	• Ensuring meaningful co-design and alignment across clinicians, staff, unions, and system partners. • Maintaining stakeholder engagement and change readiness as the TBA model is finalized and implemented.	• Finalizing operational standards and workflows required to support consistent implementation. • Continue staff training, patient affiliation communications, and stakeholder engagement. • Launch the TBA pilot - Oct
Expansion of Patient Medical Homes: will create capacity for affiliation	+ Charlottetown Mall construction is complete, with occupancy permit received in September. Project entering fit up phase with the goal to move in November 2026. + Cornwall MC phase 1 is complete with phase 2 on track for completion in December 2026.	• Construction and facility readiness timelines continue to impact expansion schedules.	• Continue supporting cross-departmental project teams while advancing PMH projects toward operational readiness and transition to ongoing operations management.

Ensuring Every Islander is Connected to Primary Care

PMH Standardization

Current Reporting Period:
July 1 - September 30, 2026

Workstream Exec Sponsor:
Corinne Rowswell, Johan Viljoen

Workstream Directors:
Alex Gamble, Kim Lawn, Andrea Wile, Maribeth Ryan

Milestone	Key Progress	Critical Path / Risks / Barriers	Focus For Next Report
PMH Service Standardization: will optimize current resources and space to provide consistent service across PMH and increase access to Primary Care	+ Completed 6 Appointment Standardization Working Group sessions focusing on developing a standard provincial appointment framework for primary care. + Completing a current state assessment of operating hours, clinical hours, and phone access hours across PMHs - informing development of standard operating hours within a Standard PMH Service Model. + Drafted a Standard Operating Procedure (SOP) to improve consistency and accuracy of measuring Third Next Available Appointment across PMHs + Developing a standard patient experience survey to be launched across primary care clinics	Ensuring appropriate stakeholder engagement Leveraging EMR data & designing around current EMR functionality & configuration	- Complete standard appointment framework pilot at a PMH site in November. - Launch SOP for measuring Third Next Available consistently across PMHs. - Finalize primary care patient experience survey content + prepare implementation plan.

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On-
track

At-risk

Urgent

Workforce Management

Milestone column fill colors:	On-track	At-risk	Urgent
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Current Reporting Period:
July 1 - September 30, 2026

Workstream Exec Sponsor:
Christie Ruff

Workstream Directors:
Alex Hendry, Meghan Van Gaal, Pico Sine

Milestone	Key Progress	Critical Path / Risks / Barriers	Focus For Next Report
Transition and Sustainment: Maintaining implemented process improvements and continuity of reporting to hire enough staff to reduce wait-times and connect every Islander to Primary Care	Huddle boards, weekly reporting processes, and the Monthly Minister's Report has been successfully transitioned to WFR and MAO + Primary Care Provider Space Designation process implemented	Need to maintain space designation frequently to ensure accurate, up to date information for planning and recruitment	Monitor space designation update cycle and ensure accuracy
Reducing Agency Staff Usage: Full reduction of LPNs and RCW Agency Staff by March 31, 2027	+ Root Cause/Corrective Action inputs understood + Teams working on gathering and confirming all data + Identified where further collaboration and connection is required between Workforce Planning, Position/Vacancy Management, Recruitment, and Grad Matching/IEN placement	- Need focused and simultaneous review of Program Review, Flex Hire reconciliation, and Operational manager inputs to determine best corrective actions - Multiple contributing root causes need to be identified, confirmed, and addressed simultaneously	- Further data gathering (Program review, Approved Staffing Model) - Structure work to ensure workforce planning efforts align with staffing model, budget, and operational recommendations - Coordinate efforts to prevent silos and duplicated work

Build a Foundation for Accountability & Excellence

Current Reporting Period:
July 1 - September 30, 2026

Workstream Exec Sponsor:
Christie Ruff, Johan Viljoen

Workstream Directors:
Meghan Van Gaal, Karen McCaffrey, Jennifer LaRosa, Tim Burnley,
Melanie Walsh, Brianne Timpson, Kari Barnes, Pico Sine

To provide the structure and routines that create focus and alignment of priorities across Health PEI and enable a culture of continuous improvement

Milestone	Key Progress	Critical Path / Risks / Barriers	Focus For Next Report
People & Professional Practice: Policy & SOP strengthening creates structure for policy & SOP reviews, updates, & monitoring provides a foundation for P&PP service delivery model work	+ 11 policies approved, uploaded to PDMS, and distributed + Expanded policy & SOP project group + Held Policy 101 training for 43 staff (hosted by Policy Office)	Implementation of monitoring & centralizing tools (e.g., document management system, tracking file), processes and ownership	• Advance next 15 policies in progress • Centralize SOP progression tracking • Implement P&PP SharePoint site
Integrated Risk Management (IRM): program implementation & risk register development supports focus and alignment to priorities, building routines & tools (e.g., risk register monitoring integrated with management system)	+ Completed 2/7 risk records (Financial Instability and Recruitment & Retention) + Held 11 risk assessment exercise meetings and 1 IRM basic education session (QPS) + IRM policy developed and moved through stakeholder consultation with Policy Office, HIROC, QPS, PMAC, PFAC	• Resourcing of IRM program to support divisional reporting and monitoring • Planning for Operational Risk identification and assessment process (2027)	• Complete 3 in-progress risk records for Access to Care, Contract Management, Culture/Engagement • Hold 2 risk assessment exercises not started for Community Relations and Change Management risks • Attain Board endorsement of IRM program, policy, & framework

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To provide the structure and routines that create focus and alignment of priorities across Health PEI and enable a culture of continuous improvement

Milestone	Key Progress	Critical Path / Risks / Barriers	Focus For Next Report
Management System & Leader Standard Work package acts as engine for implementing structure, routines, & tools that focus/align priorities and enable continuous improvement culture	+ Met with regional counterparts (NSH) to learn about LSW development, tips, training, spread/scale + Decided on demonstration projects within TO and Workforce Recruitment	Full Manager team compliment required to begin LSW within Workforce Recruitment	Launch demonstration project within TO
WS Building Block deliverables act as foundational elements to build leadership styles, cascading KPIs, staff capacity and capability (training)	+ P&PP launched Team Values Charters & re-launched PIDP + PPE presented Strategic Plan implementation plan to ELT + Finalized Health Equity Action Series Partnership Agreement with HEC + Registered 26 HPEI participants	Shared ownership with the department (LMS)	- Revised Integrated Quality Patient Safety Framework anticipated for Accreditation - Monitor and participate in HE Action Series (Sept '26 - Apr '27)

Data Roadmap

Why this Work is Needed

Current Challenges

- **Fragmented data environment:** Data exists across multiple systems, teams and functions, with varying levels of accessibility, consistency and integration.
- **Data foundations need strengthening:** Core capabilities such as data governance, standards, quality, metadata, architecture and access need to be further developed and coordinated.
- **Growing demand for data and analytics:** Health PEI increasingly requires timely and trusted data to support operational decisions, system performance, planning and improvement.
- **Approaches are not yet consistent across the organization:** Processes, tools, roles and accountabilities related to data management and use vary across teams and functions.

How We'll Address Them



- **Understand the Current State:** Assess existing data, systems, processes, governance, capabilities and pain points.



- **Establish Stronger Data Foundations:** Define governance, standards, quality, metadata, architecture, access and other core data management practices.



- **Build Organizational Capability:** Strengthen tools, technology, analytics capability, data literacy and supporting resources.



- **Implement Incrementally:** Prioritize initiatives and sequence implementation based on value, readiness, dependencies and available resources.

Outcome: Establish a practical, implementable roadmap that strengthens Health PEI's ability to manage, access and use data effectively.

What the Roadmap is Trying to Build

- Data governance and stewardship
- Data inventory and catalogue
- Data quality management
- Metadata management
- Data standards and architecture
- Data access, sharing and integration

Data Foundations



- Business intelligence and visualization
- Analytics infrastructure
- Data operations
- Enterprise technology enablement
- Advanced analytics and responsible AI capability

Analytics & Technology



- Roles and accountabilities
- Data stewardship capabilities
- Training and data literacy
- Change management and communications
- Resource and capacity requirements

People & Ways of Working



Outcome: Establish the foundations for effective data governance, business intelligence, advanced analytics and organizational capability across Health PEI.

How the Foundations Project Will Be Organized

Governance	Data Management	Technology	Culture & Skills
• Develop data governance framework and model • Clarify roles, decision rights and accountabilities • Coordinate work across the project • Align with the Data Governance Sub-Committee (DGSC)	• Develop policies, standards and procedures • Advance data inventory and catalogue work • Establish metadata and data lifecycle management practices • Define data quality approaches and measures	• Pilot enterprise technology for data management and analytics • Support business intelligence and visualization • Enable data architecture and integration • Align technology with governance and business requirements	• Support communications and stakeholder engagement • Build training and data literacy • Support adoption of new practices • Address change and resistance

The four workstreams will operate in parallel and inform one another, with Governance providing integration across the project.

Patient Access & Flow

Current Reporting Period:
July 1 - September 30, 2026

Workstream Exec Sponsor:
Corinne Rowswell

Workstream Directors:
Meghan Van Gaal, Donna Daniec

Milestone	Key Progress	Critical Path / Risks / Barriers	Focus For Next Report
Simplify Transitions to LTC - LTC Admission, Transfer, and Placement Policy and Procedure	- Presented policy changes to: PMAC - Aug 27; Hospital Operations - Sept 15; DHW Senior Leadership Team - Sept 22; Public LTC Leadership Meeting - Sept 28. - HBC Working Group has completed all SOP/Workflow documentation in prep for education sessions.	- ELT review/endorsement of LTC Policy is set for Nov 18, 2026. - Policy & Procedure implemented by Jan 1, 2027.	- Present policy updates to QPS on Oct 15. - Present policy updates to Private LTC Operators - date TBD. - Send final version of policy to HPEI Policy Team. - Set dates for education sessions.
Discharge Rounds Sustainability	- Prov Patient Flow Bed Coordinators continue to support 6 hospital Discharge Rounds. - Patient Flow PM now onboarded and managing PATHS transition to the Provincial Patient Flow Steering Committee (Oct 2026).	SWAT has been reduced to one day per week leading to increased risk of delays in transition.	Monitoring key metrics of % of ALC coded patients occupying acute care beds (% of Midnight Alternate Level of Care Census Days).
Home First Philosophy	- Launched at 6 Hospitals over Summer 2026. - Transition & Sustainability Plan created; ownership transitioned to Patient Flow.	Translation requirements for patient materials under review (Arabic, Punjabi, Tagalog).	- Advance PFAC engagement and public awareness planning. - Continue Learning Exchange preparations and MH&A collaboration.



Any Questions?

Stay up to date with our SRC Page:
src.healthpei.ca/transformation-office

Health PEI

