

INTERSECTIONS



eHealth's annual awards recently recognized our Acute Care team for its consistent delivery of key clinical upgrades while fostering a collaborative and supportive dynamic.

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A WORD FROM OUR CEO DAVIN CHURCH

It's my pleasure to share the first edition of *eHealth Intersections*, our new quarterly report. Technology is a crucial link in all aspects of health care, from basics like the phones that keep us connected to virtual options that bring doctors to patients. This report highlights how eHealth's work intersects with and supports the health system to achieve our vision of connected health care.

Each story in this issue demonstrates a clear connection to the goals of eHealth and our health system partners. They reflect how our work improves access to care, ensures systems work for health care providers, and simply makes



life better for Saskatchewan people. You'll read about how technology is expanding clinical services into rural and remote communities; a new collaborative, proactive approach to keeping IT infrastructure current; and how registering deaths electronically is making a big difference for care providers and loved ones. We're also sharing some of the numbers behind the technology, from phone system upgrades to MySaskHealthRecord's growth over five years.

Finally, we're sharing a sneak peek of our upcoming #WeDoThat social media campaign featuring some of eHealth's key citizen services.

I hope you enjoy reading about some of the ways eHealth supports health care in Saskatchewan.

MAPPING THE FUTURE

Working together to build a system that works for patients

Development of eHealth's new multi-year strategic roadmap has been guided by a patient-centred focus. Beginning in January, we facilitated two partner engagement events that included patient representatives, along with a series of one-on-one consultations with health sector partner organizations.

These efforts were designed to foster collaboration and ensure we all understand our shared priorities.

As a result of these planning sessions, eHealth produced a new five-year Roadmap, which outlines the "what" - the key outcomes eHealth aims to achieve in the coming years. The Roadmap is built on four focus areas:



Patient access
and outcomes



Partnership and
innovation



Service
availability



Service excellence
and capacity
management

Building on this foundation, eHealth is now defining the "how" - the strategies, initiatives, and actions required to deliver those outcomes.

"Our previous roadmap was more internally focused on how we would mature as an organization," said CEO Davin Church at an eHealth employee town hall. "This plan is about how we move the health system forward. When you look at it, you're going to say 'we can't do these things alone.' We can't. So it's really dependent on us and our partners working together very, very differently than we probably have traditionally."

eHealth also continues to collaborate with health system partners to identify and refine operational priorities. In February, eHealth hosted a planning session with partners to bring alignment on the 2025–26 Integrated Workplan. We're now discussing and informally prioritizing operational initiatives raised during that session at various partner tables.

Improving patient outcomes and ensuring access to care will continue to guide this work, and eHealth remains committed to working collaboratively with our partners on our shared goals and priorities. Coming up we'll be putting plans into action and determining metrics to measure success.

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dependent on us
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-CEO Davin Church,
May 6 eHealth
employee Town Hall



eHealth led conversations about shared priorities at partner planning meetings.

CONNECTED CARE EVERYWHERE

Expanding clinical systems

With every expansion of clinical systems, more patients and providers can access much needed services like lab results or medical appointments.

Here are a couple of ways eHealth is working with partners to make health care services, supports and information accessible to even more patients and providers – especially in rural or remote areas.

Laboratory Information System

The Lab Information System (LIS) is used to process, store and manage patient data related to testing. This is where the results of your bloodwork or urinalysis go, for example. The system was recently expanded to eight additional sites, expanding access to electronic records and providing important real-time lab test results for providers and patients.

This has changed how lab results are shared and accessed in those locations. For instance, hospitals and health centres in Preeceville, Canora and Kamsack care for patients in the same area along with a regional health centre in Yorkton. Despite that proximity, lab systems weren't connected. If you had bloodwork in Canora and the doctor sent you to Yorkton, there could be the extra step of bringing printouts of lab results or even re-doing lab work in the city.

"Now results are easy to access and can be reviewed while the patient is still on that 30-minute trip to Yorkton, saving

In the past year LIS was added to:

- Preeceville
- Canora
- Kamsack
- Lanigan
- Shellbrook
- Rosthern
- Regina Urgent Care Centre
- Watrous

Next up are:

- Wadena
- Wynyard

time for everyone and improving continuity of care, which can result in a timelier diagnosis and treatment," says Mike Wong, Director of Diagnostic and Drug Services at eHealth.

Not only is lab information shared among those facilities, but results from labs in these areas are now accessible to providers across the province and patients can view their records as soon as they're available through MySaskHealthRecord, the online portal that provides secure, online access to personal health information.

"And of course, an increased number of lab results available in each patient's electronic record provides a more complete picture of their health history to help them make informed decisions with their providers," says Wong.

With four more health facilities scheduled for LIS expansion this summer as part of this multi-year project, access to health information continues to grow.

Continued on page 4

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-Mike Wong, Director of Diagnostic and Drug Services

Virtual care

Sask Virtual Visit (SKVV) is a province-wide video-conferencing system that connects patients and providers for everything from regular appointments to emergency care.

SKVV is designed with health care needs in mind, with options like a waiting room and scheduling capabilities built in – a more evolved video-conferencing service. Doctors can book virtual appointments with patients, providing each the flexibility to attend from anywhere as long as they have a reliable internet connection.

Some health care facilities are part of the **Telehealth** program with dedicated space and equipment for patients to come in and meet with a provider elsewhere in the province, making SKVV an ideal way to extend care in remote or rural locations.



SKVV is also the backbone of the **Virtual Physician Program**, making virtual care available whenever it's needed for 28 emergency departments, mainly in remote or rural areas. Those hospitals can connect patients and emergency department doctors through audio and video, complementing care provided by nurses and paramedics in hospital. This helps keep emergency departments open by ensuring a doctor is just a call away. The Virtual Physician Program bridges the gap

Virtual what?

■ **Sask Virtual Visit:**

A province-wide video conferencing solution connecting doctors and patients wherever they are.

■ **Telehealth:**

Patients can visit a health care facility set up with a dedicated Telehealth space and connect with a doctor elsewhere in the province.

■ **Virtual Physician Program:**

Emergency departments can access Virtual Physician Program to connect directly with a doctor in another location in the province for support.

when there are staffing challenges, ensuring access to emergency department services and in many cases saving patients hours of driving.

"Virtual Visit ensures easy and equitable access to care," says Neil Olynick, Virtual Care Program Manager at eHealth. "For instance, many oncologists now use Telehealth or Sask Virtual Visit for regular appointments that would have once required hours of travel for patients. Access to specialized health services needn't be limited by where patients live and doctors practice."

Making the connection

SKVV is web-based, and ensuring equitable and consistent access to the internet can be challenging at times. Before adding the service to a hospital or clinic, eHealth makes upgrades to strengthen the internet connection to ensure service is reliable and consistent. eHealth and the Saskatchewan Health Authority (SHA) have teamed up to provide educational resources about creating a controlled and stable environment to support virtual calls. Things like reliable internet and video software make a big difference. SKVV is also built to work well on low bandwidth, so internet speed won't stop patients and providers from connecting.

All it takes is an internet connection and a computer or mobile device to access specialized or emergency care thanks to eHealth supported clinical services. Every year, more patients, providers and emergency departments come on board, and there are no signs that the growth and popularity of virtual care will slow down.

PREDICTABLE UPGRADES, RELIABLE SERVICE

Imagine you're about to undergo surgery, but your doctor suddenly can't access your CT scan results because the network is down, impacting their ability to view essential tests and lab results. A postponed surgery can result in a frustrating delay for both providers and patients.

Though very few things in health care are predictable, eHealth is working with its partners to limit this type of scenario with regular IT infrastructure upgrades, making sure the technology providers rely on is there when they need it.

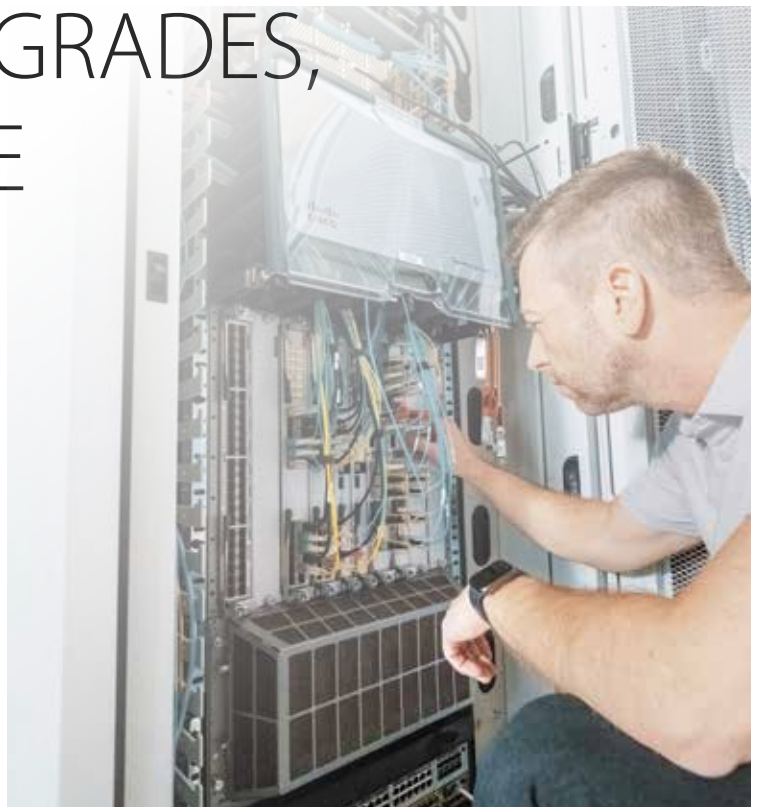
Reliable, secure and timely access to digital tools, patient information and clinical systems needed for informed decision making and faster diagnoses requires well-maintained and supported infrastructure. Things like WiFi, phone systems and network routers must work as expected. When they don't, hospitals, clinics, long term care facilities and other health care facilities face potential downtime and interruptions to patient care.

If a network switch – a small but key piece of equipment – goes down, communications, computers and equipment like X-rays and the mobile carts nurses use to support on-the-spot care may become unavailable. Staff may have to resort to a manual backup plan, potentially delaying care and creating the future burden of entering notes and test results when the network is back up again. eHealth's new infrastructure lifecycle process takes a more proactive approach to regularly upgrading or replacing crucial infrastructure on a predictable schedule.

Planning ahead, working together

Collaboration with health system partners is baked right into the new process. Knowing well in advance what work is scheduled allows eHealth's infrastructure teams to talk about upcoming work with partners like the Saskatchewan Health Authority (SHA). eHealth reaches out to SHA's Digital Health team four to six weeks ahead of planned upgrades to gather information about what services might be affected and who the on-site contacts are.

eHealth teams communicate and collaborate to ensure work is aligned and everyone understands their roles. A project like upgrading Prince Albert Victoria Hospital's network infrastructure involved over 50 people from more than 10 eHealth teams along with the SHA to ensure all services affected were identified and proper testing and verification was done after the upgrades were completed.



By co-ordinating our efforts among eHealth teams and partners and developing a long-term approach to planning, we've built a roadmap for how work is identified and prioritized.

-Justin Thomas,
Director of Network
Services with eHealth

Foundation for success

While IT infrastructure work has long been an eHealth responsibility, the past year was a turning point in maturing the overall process.

“By co-ordinating our efforts among eHealth teams and partners and developing a long-term approach to planning, we’ve built a roadmap for how work is identified and prioritized,” says Justin Thomas, Director of Network Services with eHealth. “In the short term we’ve accomplished what

we set out to do. In the long term we’ll always have a clear and predictable picture of what work is coming.”

Initial efforts included creating an inventory of servers, storage devices and other equipment like routers, switches and network access points; no small task considering we’ve got about 8,000 pieces of equipment to keep tabs on. That inventory tracking will help eHealth and partners plan ahead for years to come.

Staying connected for patients and providers

What does one year of IT infrastructure lifecycle upgrades look like? Here are some of the numbers behind the work of keeping everyone connected through resilient network and datacentre infrastructure that ensures technology and information are there when patients and providers need them.



More places to plug in

Upgraded connectivity in 27 facilities, so that hard wired devices like x-ray or lab equipment and computers have 5,000+ new places to plug in.



Wireless access

Mobile phones, in-facility communications, and health care technology like mobile workstations can reliably connect through nearly **500 wireless access points in 30 facilities**.



Network infrastructure

Stronger facility network infrastructure backbone with **50 routers upgraded in 44 facilities** to keep up with the growing demand for bandwidth that supports communication, patient care and information access.



Inventory

8,000+ pieces of equipment (like routers and switches) and **5,000+ virtual machines** that run nearly every application used in health care inventoried for better tracking.



Collaboration

600 emails to partners advising of upcoming work during the year, spurring collaborative discussion to prepare and prevent disruptions to patient care during IT construction.



Upgraded databases

Hospitals rely on a platform called Sunrise Clinical Manager to manage patient information; eHealth increased the security, functionality and stability of this critical tool by **upgrading almost 100 databases**.

EASING THE BURDEN FOR PROVIDERS AND CITIZENS

A new paperless system is speeding up death registration in Saskatchewan and getting death certificates into the hands of loved ones faster and easier.

eHealth launched the new Electronic Death Registration and Notification (EDRN) system last fall. Accessible from any computer or mobile device, it consolidates and self-populates patient information, saving administration time



and reducing errors. A death must be officially registered before a death certificate can be issued. With EDRN, registrations move instantly to the next step of the process resulting in shorter delays for families waiting to obtain original death certificates for estate-settling purposes.

Before EDRN, the average turnaround time for a death to be registered in Saskatchewan was 45 days. Jennifer Lindenbach, Director of Vital Statistics and Health Registries, says the goal is to reduce this to 15 days. Since launching, more than 6,500 deaths have been submitted through EDRN, with some being registered by eHealth in as little as four days.

Dr. Carmen Johnson from Regina says she's pleased with how simple the system is. "The patient's identifying information self-populates onto the page. This saves a lot of time and ensures the proper spelling of the name and date of birth, etcetera," says Dr. Johnson. "Entering the requested information is very straightforward. Just a few clicks and it's done."

Not only is EDRN easy to use, but it also minimizes back-and-forth communication and eliminates unnecessary paperwork. The Saskatchewan Coroners Service says EDRN has completely transformed how it handles death certificates. "What used to be a time-consuming, paper-heavy, and sometimes confusing process is now streamlined, intuitive, and remarkably efficient. We wouldn't want to go back to the old way - and I don't think anyone else will either once they try it."

EDRN also notifies Service Canada sooner to automatically suspend Old Age Security benefits, so families don't have to deal with overpayments or reimbursements during difficult times. "There's a lot that has to be done when there's a death in the family," says Jennifer Lindenbach, eHealth's Director of Vital Statistics and Health Registries. "We're pleased to take at least one thing off that list during a difficult time."

eHealth continues to promote the benefits of using EDRN and is working with Practitioner Affairs at the Saskatchewan Health Authority to encourage physicians to use the new process. We continue to collaborate with users and stakeholders to identify and implement improvements to make the system even faster and easier to use.

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- Saskatchewan Coroners Service

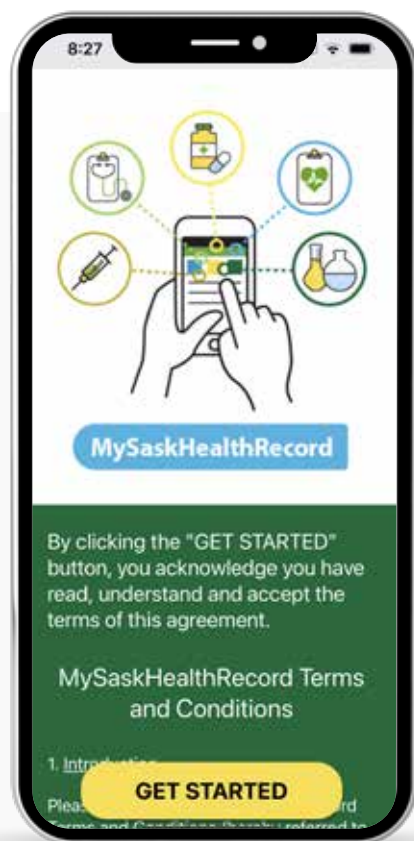


- **360+** funeral home users
- **Nearly 100** provincial and community coroners
- **280+** physicians and nurse practitioners
- **And growing!**

EMPOWERING PATIENTS THROUGH DIGITAL ACCESS

5 years of MySaskHealthRecord

MySaskHealthRecord (MSHR) is one of Canada's leading patient portals and a cornerstone of eHealth's commitment to transparency, empowerment, and patient engagement. The online service gives residents aged 14+ secure, online access to personal health information, empowering them to play a role in managing their health.



How it started

- **46,195 users** in the first year
- Offered **clinical visit history, lab test results and medical imaging**

5 years later

- **729,000+ users** as of June 11, 2025 (58% of Saskatchewan residents)
- **30,000 new users** in 2024-25
- Mobile app with **160,000+ downloads**
- Offers clinical visit history, lab test results, medical imaging, **prescription history, immunization history, select clinical documents and surgical procedure information**

Saving time and money

In a 2023 survey, MySaskHealthRecord users reported the following:

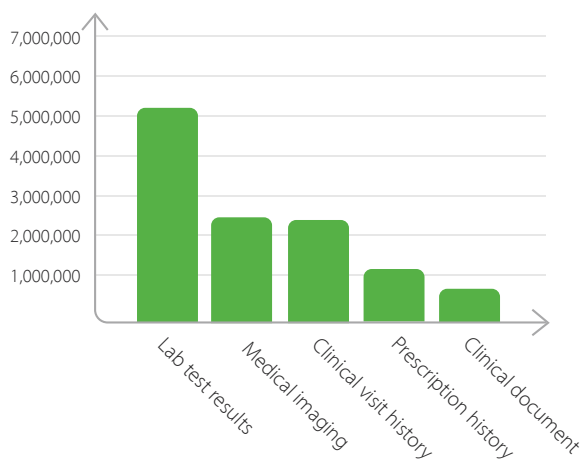
- **37%** reported **reduced costs**
- **30%** reported **fewer doctor visits**
- **9%** reported **fewer ER visits**

Leading Canada

- **58% of SK citizens** accessing personal health data (highest per capita)
- **Most digital health information** available on a personal portal in Canada

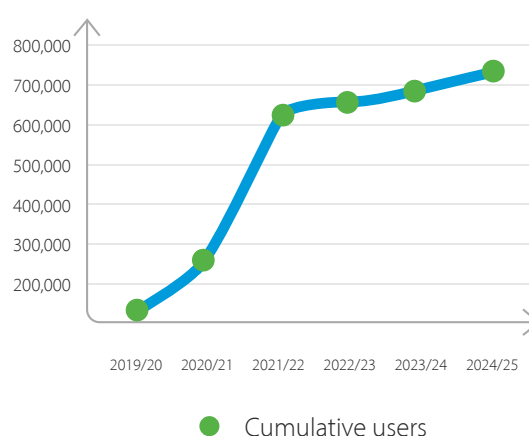
MOST VIEWED CONTENT

MSHR website page views 2024-25



MSHR ACCOUNT REGISTRATION GROWTH

By fiscal year



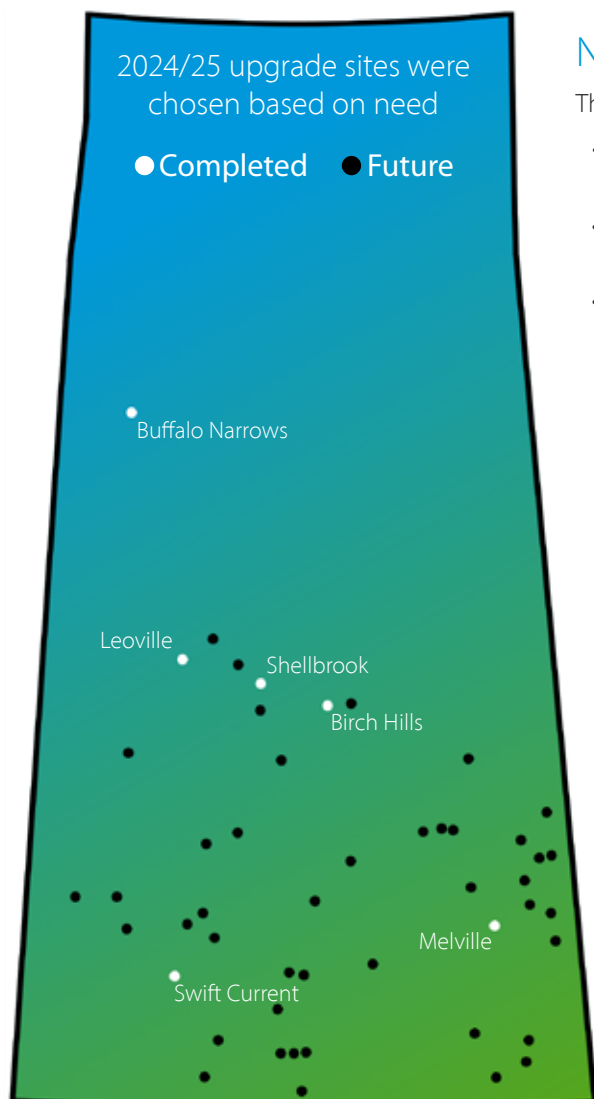
ANSWERING THE CALL OF MODERNIZATION WITH PHONE SYSTEM UPGRADES

Last year, eHealth upgraded phone systems in six facilities, replacing older, unsupported traditional systems with internet connected phone systems (VOIP). This meant replacing 598 phones and a variety of other network equipment.



2024/25 upgrade sites were chosen based on need

● Completed ● Future



Not just phones

The call of modernization goes beyond phones. Upgrades also include:

- Enhanced paging systems that help providers contact each other quickly and effectively
- Integrated nurse call systems that let patients easily call for care when needed
- Expanded voicemail features to ensure no call is missed

Dependable service

- **Reliable internal calling** even when the network is down
- **Fewer unplanned** phone outages
- New provincial standard enables better connection and **high-quality care**, whether rural or urban

Improved access to care

- **Accessibility** functions at the push of a button
- Automated call options mean **calls are addressed more quickly**
- Increased bandwidth and **improved connectivity** for all network-connected applications or equipment in a facility

Anticipating needs

- Remote monitoring of phone systems means **proactive support** and early identification and troubleshooting of issues
- New systems are compatible with **future enhancements** and able to grow with the health system

WE DO THAT

We've launched a social media campaign featuring some of eHealth's flagship citizen services, such as health cards and MySaskHealthRecord. Watch for it on Facebook and Instagram.



To share a story idea or provide feedback on anything you read in Intersections, contact ehs.Communications@eHealthSask.ca.