

## 52 in 52, 1-Pager Tracker

Important Note: The items below reflect a summary of what has been shared and highlighted as part of NTHSSA's initiative to showcase 52 improvements in 52 weeks. This list reflects selected topics rather than all emails received. Additional submissions may also be featured in other areas, including social spotlights, public releases, and more.

| Week Shared | Title of Initiative                                               | Region                       | Program Area                         |
|-------------|-------------------------------------------------------------------|------------------------------|--------------------------------------|
| Week 1      | Chit Chat Café                                                    | Stanton Territorial Hospital | Stanton Territorial Hospital         |
| Week 2      | Locum Feedback                                                    | YK Region                    | Primary Care                         |
| Week 3      | STH ED Staffing Level Signage                                     | Stanton Territorial Hospital | Emergency Department                 |
| Week 4      | Medicine Toothbrushes                                             | Stanton Territorial Hospital | Medicine Unit                        |
| Week 5      | Lab Callback Request Form                                         | Territorial Ops              | Laboratory Services                  |
| Week 6      | Medical Supply Expiry Dates                                       | Sahtu                        | Health Centre                        |
| Week 7      | Cystoscope Storage                                                | Stanton Territorial Hospital | Medical Device Reprocessing          |
| Week 8      | Cultural Knowledge Sharing                                        | Fort Smith                   | Child, Family and Community Wellness |
| Week 9      | Preventative Electrolyte Drinks                                   | Territorial Ops              | Correctional Health Services         |
| Week 10     | Health Centre Directory                                           | Fort Smith                   | Health Centre                        |
| Week 11     | Long Term Care Workload Improvements                              | Sahtu                        | Long Term Care                       |
| Week 12     | Refill Clinic                                                     | Beaufort Delta               | Primary Care                         |
| Week 13     | Neurodivergent Education Group                                    | YK Region                    | Occupational Therapy                 |
| Week 14     | Enhancing Patient Safety                                          | Stanton Territorial Hospital | Medicine Unit                        |
| Week 15     | Maintenance Logs                                                  | Sahtu                        | Long Term Care                       |
| Week 16     | Healthy Family Program                                            | Beaufort Delta               | Health Family Program                |
| Week 17     | Dome Mirror Safety Initiative                                     | Stanton Territorial Hospital | Chemotherapy Unit                    |
| Week 18     | Lessons from Fire Drills                                          | Sahtu                        | Health Centre                        |
| Week 19     | Wayfinding Improvements                                           | Stanton Territorial Hospital | Building                             |
| Week 20     | Integrated Wrap-Around Expedited Treatment Access: Fort Good Hope | Sahtu                        | Health Centre                        |
| Week 21     | OHS WHMIS Training                                                | Territorial Ops              | Occupational Health and Safety       |
| Week 22     | Staff Safety in Sahtu Communities                                 | Sahtu                        | Health Cabin                         |
| Week 23     | Medical Travel Bus Service                                        | Beaufort Delta               | Medical Travel                       |

| Total Region                 |           |
|------------------------------|-----------|
| Beaufort Delta Region        | 4         |
| Sahtu Region                 | 12        |
| Dehcho Region                | 1         |
| YK Region                    | 7         |
| Fort Smith Region            | 4         |
| Stanton Territorial Hospital | 15        |
| Territorial Ops              | 9         |
| <b>Total</b>                 | <b>52</b> |

|         |                                                                      |                              |                                     |
|---------|----------------------------------------------------------------------|------------------------------|-------------------------------------|
| Week 24 | Supporting Students and Improving Workflow                           | Stanton Territorial Hospital | Medicine Unit                       |
| Week 25 | Quality Improvement, Supported by Finance                            | YK Region                    | Rehab and Finance                   |
| Week 26 | Child and Family Services Welcoming Station                          | YK Region                    | CFS YK Region                       |
| Week 27 | Automatic Paper Folding                                              | Territorial Ops              | Cancer Care Team                    |
| Week 28 | NSWOC Quality Improvements                                           | Territorial Ops              | Clinical Integration                |
| Week 29 | Pediatric Unit Workflow                                              | Stanton Territorial Hospital | Pediatric Unit                      |
| Week 30 | Improving Efficiency for Distribution of Fit Kits                    | Territorial Ops              | Cancer Care Team                    |
| Week 31 | YK Primary Care, Streamline Team Processes                           | YK Region                    | Primary Care                        |
| Week 32 | Elders Privacy                                                       | Sahtu                        | Long Term Care                      |
| Week 33 | Access to Patient Comms Signs                                        | Stanton Territorial Hospital | Medicine Unit                       |
| Week 34 | RL6 Checklist                                                        | Fort Smith                   | Maintenance/Primary Care            |
| Week 35 | Wayfinding Updates                                                   | Stanton Territorial Hospital | 1st Floor/Chemo                     |
| Week 36 | Elastomeric Infusion Pumps                                           | Stanton Territorial Hospital | Chemotherapy Unit                   |
| Week 37 | Workspace Improvements, Diagnostic Imaging                           | Beaufort Delta               | Inuvik Regional Hospital DI Unit    |
| Week 38 | Improving Troubleshooting Efficiency for STH Laboratory              | Stanton Territorial Hospital | Laboratory Services                 |
| Week 39 | Long Term Care Training                                              | Sahtu                        | Long Term Care/Clinical Integration |
| Week 40 | Message Process                                                      | Sahtu                        | Region Wide                         |
| Week 41 | Medication Return Log                                                | YK Region                    | Long Term Care                      |
| Week 42 | Running Board Tape                                                   | Sahtu                        | Operations Team                     |
| Week 43 | Emergency Department Initial Treatment Order Sets (ITOs), Acute Care | Territorial Ops              | Clinical Integration                |
| Week 44 | Medical Travel Checklist                                             | Fort Smith                   | Specialist Clinic                   |
| Week 45 | Facility Services TV Server                                          | Stanton Territorial Hospital | Facility                            |
| Week 46 | Medical Travel Signage at Airport                                    | Territorial Ops              | Medical Travel                      |
| Week 47 | Alert Buttons                                                        | Stanton Territorial Hospital | Medicine and Surgery                |
| Week 48 | Narcotic Counts                                                      | Sahtu                        | Nursing                             |
| Week 49 | Training in the Dehcho                                               | Dehcho                       | Clinical Integration                |
| Week 50 | Shredder Safety                                                      | Sahtu                        | Region Wide                         |
| Week 51 | Financial Log Sheet                                                  | YK Region                    | Long Term Care                      |
| Week 52 | Improving Access for French-Speaking Clients                         | Territorial Ops              | Corporate Services                  |

# 52 NTHSSA Improvements, in 52 Weeks

For the next 52 weeks, the NTHSSA will be celebrating one improvement each week! These weekly reports are one way we're working to recognize some of the initiatives, often staff-led, that are making a real difference across the organization for both staff and clients. It's all part of our commitment to being responsive, showcase innovation, and demonstrate progress we're proud to be making together.

## Week 1 of 52 (Week of June 30, 2025): Chit Chat Café

**Change Driver:** Across the NTHSSA, staff are always looking for ways to stay connected with clients and listen to what matters most to them. This is critical to delivering better, more meaningful care across each of our diverse regions.

**Link to System Vision:** This links to both 'Better Care' and 'Best Health', offering improved quality and efficiency

**Improvement Initiative:** At Stanton Territorial Hospital (STH), staff have introduced a weekly Chit Chat Café. This is an informal space for admitted patients and clinical staff to share experiences, celebrate successes, and discuss challenges. This open dialogue has led to patient-driven improvements, including the introduction of yoga sessions and activities that support a more positive stay. Access to services has also been enhanced, and lessons learned, such as skills for managing anxiety, emotions, and sleep, are now being shared more widely. These developments highlight the impact of staying connected to clients, active listening and responding to what matters most to patients and staff alike.

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## Week 2 of 52 (Week of July 7, 2025): Locum Feedback, Primary Care

**Change Driver:** Through Primary Care in Yellowknife, staff were made aware that locums were not being consistently onboarded and oriented to Primary care leading to dissatisfaction with teammates and clients.

**Link to System Vision:** This links to 'Better Future', helping improve workforce engagement and develop strategies and initiatives aimed at improving hiring practices and retention.

**Improvement Initiative:** As part of a current Primary Care (PC) CQI PDSA to improve locum onboarding and orientation by the CIM Working group – it was identified PC needed to increase opportunities for locum feedback regarding their experience, preferences, learning needs, and ideas for improvement – including how to continue to streamline onboarding so locums can more easily integrate into the teams they are working on – making workflows easier for everyone!

The CIM WG identified need to have an on-site physical location at Liwegoati to submit locum feedback. Location and box for collection has been completed. Quick tear-away form is currently being worked on. Moving forward, information gathered will be reviewed by the AMD and brought to the CIM WG and OMAC to inform further CQI.

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## Week 3 of 52 (Week of July 14, 2025): STH ED Staffing Levels Signage

**Change Driver:** Physician staffing levels within Stanton Territorial Hospital's Emergency Department may fluctuate on a daily and/or hourly basis. It is important for visitors to know what staffing levels are at the time of their visit as it may impact services and wait times.

**Link to System Vision:** This links to 'Best Health' by clearly outlining and explaining staffing levels so that visitors understand how services and wait times may be impacted at the time of their visit.

**Improvement Initiative:** Within Stanton Territorial Hospital's Emergency Department, staff have developed highly-visible and plain language signage and handouts designed to clearly indicate the department's staffing levels at any given time period. The signage - which can be changed with ease depending on staffing levels at the time - seeks to explain five different staffing levels, and what visitors can expect from the department depending on each scenario. This initiative supports system-wide goals related to transparency, while reminding patients that they will continue to receive safe and compassionate care, with those presenting the most urgent needs being prioritized using the NTHSSA's standard triage system.

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## Week 4 of 52 (Week of July 21, 2025): Medicine Toothbrushes

**Change Driver:** Stanton Territorial Hospital Staff recognized the need to improve oral care for patients. This change driver also supports the delivery of care by staff.

**Link to System Vision:** This links to 'Best Care' and 'Best Health' by ensuring there is better access to better services and supporting the health of the population.

**Improvement Initiative:** This staff-led initiative came when a staff member (Geraldine Maloney) from the STH medicine unit, recognized a gap that could be improved with a small change. That small change was requesting 3-sided toothbrushes to improve oral care for stroke patients and patients who are admitted and require additional support with their oral care.



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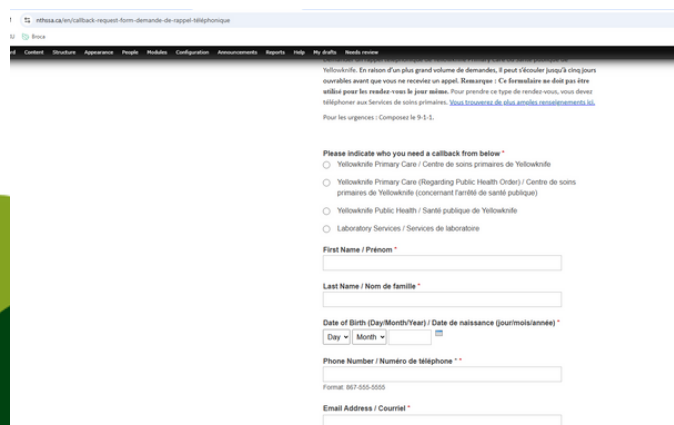
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## Week 5 of 52 (Week of July 28, 2025): Laboratory Callback Request Form

**Change Driver:** Booking challenges for laboratory services have been ongoing, but staff in the lab have collectively discussed proposed solutions to provide improvements and ease booking challenges.

**Link to System Vision:** This links to 'Best Care' as a means to support client access to services in a timeline and efficient manner.

**Improvement Initiative:** Laboratory staff have recognized the importance of streamlining access to lab services and have taken proactive steps to implement an online callback request form. This new system will enhance client access by reducing the difficulties often experienced when trying to reach the lab by phone. At the same time, it supports staff efficiency. By dedicating specific time to monitor and respond to the callback request form via email, staff can provide more responsive and organized communication without the need to juggle phone calls, put clients on hold, and/or interrupt their workflow.

The image shows a web browser window displaying the 'Laboratory Callback Request Form'. The browser's address bar shows the URL 'nthssa.ca/lec/callback-request-form-demande-de-rappel-telphonique'. The form is in French and English. It includes a header with navigation links like 'Accueil', 'Services', 'À propos', etc. The main content area has a title 'Laboratory Callback Request Form' and a brief description in French. Below this, there are four radio button options for where the user needs a callback: 'Yellowknife Primary Care / Centre de soins primaires de Yellowknife', 'Yellowknife Primary Care (Regarding Public Health Order) / Centre de soins primaires de Yellowknife (concernant l'ordonnance de santé publique)', 'Yellowknife Public Health / Santé publique de Yellowknife', and 'Laboratory Services / Services de laboratoire'. The 'Laboratory Services' option is selected. Below the options are input fields for 'First Name / Prénom', 'Last Name / Nom de famille', 'Date of Birth (Day/Month/Year) / Date de naissance (jour/mois/année)', 'Phone Number / Numéro de téléphone', and 'Email Address / Courriel'. The form is styled with a clean, professional layout using a light blue and white color scheme.

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## Week 6 of 52 (Week of August 4, 2025): Medical Supply Expiry Dates

**Change Driver:** A staff member in Norman Wells - Stella Rabisca, Maintenance Technician - noticed short expiry dates on some medical supplies received at the Health Centre and initiated an investigation to see how and where improvements in this area can be made.

**Link to System Vision:** This links to 'Best Care' and efforts towards continuous quality improvements.

**Improvement Initiative:** At the request of staff who identified the need, an investigation took place by the NTHSSA Supply Chain team. Following this work, NTHSSA has now implemented a Supplies Disposal Form for all regions, which will provide the Supply Chain team with a greater understanding of what products are being disposed of due to expiry, obsolescence and/or damage for further analysis and recommendation. This cost-saving, quality-of-care initiative was made possible by staff who identified an opportunity for improvement.



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## Week 7 of 52 (Week of August 11, 2025): Cystoscope Storage

**Change Driver:** Staff at Stanton Territorial Hospital (STH) have identified the need to make access to a cystoscope more accessible in instances where the tool is urgently required for urology related needs. Though urgent need for cystoscope equipment is rare, having quicker access to the scopes on the occasions where an urgent situation happens will improve patient care and workflow, and better support physicians who are delivering the care.

**Link to System Vision:** This links to 'Best Care' and efforts towards continuous quality improvements.



**Improvement Initiative:** While all cystoscopes are stored in in MDR department, to improve access, one has now been designated to ACC storage room. This will ensure a cystoscope is available on the unit 24/7, streamlining workflows. While patients often express gratitude to frontline staff for their care, it's important to recognize how that work would not be possible without the essential support of behind-the-scenes teams. Their contributions are vital to delivering timely, high-quality care.

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## Week 8 of 52 (Week of August 18, 2025): Cultural Knowledge Sharing

**Change Driver:** Staff in Fort Smith understand the importance of cultural knowledge sharing and traditional skills to support clients, and have been looking for ways to improve in this area.

**Link to System Vision:** This links to 'Best Care' and efforts towards continuous quality improvements and 'Best Health' as we strive to improve health for the population in the smaller communities.

**Improvement Initiative:** In Fort Smith, weekly sessions have been implemented with Child, Family and Community Wellness staff to learn traditional skills from each other and/or community members. Effort is made in these sessions to create activities for families (e.g., ribbon skirts, moss bags, baby belts, moccasins, mittens, rattles, dream catchers, medicine bags) and support staff wellness and team connection. This improvement initiative is supporting staff, clients and families who access child, family and wellness care across the Fort Smith region, as well as ensuring that staff are able to share knowledge with colleagues across the NTHSSA.



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## Week 9 of 52 (Week of August 25, 2025): Preventative Electrolyte Drinks

**Change Driver:** NTHSSA Correctional Health Services staff at the North Slave Correctional Complex (NSCC) have been actively looking for small changes that can be implemented to enhance both their work environment and the quality of care provided to clients. One area identified for improvement was the client intake process, particularly in managing and supporting cases of mild alcohol withdrawal that may arise during intake.

**Link to System Vision:** This links 'Best Health': Health of the population served and equity of outcomes.

**Improvement Initiative:** To support the identified change driver, this month staff have started offering clients at risk of alcohol withdrawal electrolyte hydration upon entry to NSCC. This is a proactive measure designed to provide early, in-facility treatment and reduce the need for emergency room visits in cases of mild alcohol withdrawal. Electrolytes help manage mild alcohol withdrawal by restoring hydration and correcting imbalances. This staff-led improvement initiative not only promotes client comfort and safety but also demonstrates the team's dedication to delivering responsive and compassionate care.



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## Week 10 of 52 (Week of September 1, 2025): Health Centre Directory Document, Fort Smith

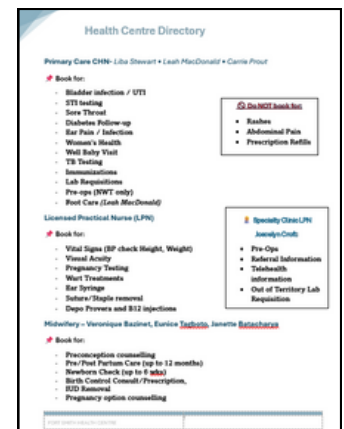
**Change Driver:** Staff in Fort Smith have identified the need to improve processes and ensure patients are booked with the most appropriate provider for their care.

**Link to System Vision:** This links to 'Best Health' by improving coordination to support core health functions.

**Improvement Initiative:** To support staff needs and improve consistency, a "cheat sheet" has been introduced by the Acting Manager, Primary Care. This document, referred to as the Health Centre Directory, aims to:

- Provide clarity and reduce confusion when booking patients
- Clearly outline staff roles and responsibilities
- Serve as a living document that can be updated as staff change, or new roles are added

By implementing this tool, the team expects to see improved onboarding experiences, fewer booking errors, and greater consistency in patient scheduling which is particularly valuable in high-volume or high-turnover settings.



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## Week 11 of 52 (Week of September 8, 2025): Sahtu Long Term Care Team, Workload Improvements

**Change Driver:** Staff in the Sahtu working to support long-term care residents, recognized the need for more equal distribution of workload to improve workflow, enhance staff morale and build efficiencies across the unit.

**Link to System Vision:** This links to 'Better Future' by ensuring over time we have a stable workforce and improved quality, efficiency, and sustainability.

**Improvement Initiative:** Following enhanced staff engagement and participation in planning, Personal Support Workers (PSWs) in the Sahtu recommended changes to workload distribution and daily processes. After positive discussion, changes to workload and process were implemented and trialed over several weeks, with staff committed to providing ongoing feedback. Since implementation, staff have highlighted improved communication and the value of joint planning. Key changes made include ensuring at least one staff member is always on shift in each of the long-term care houses, redefining the float role, and assigning LPN leads to monitor floor coverage. Regular staff check-ins will continue to support and refine the process. This staff-led initiative has already demonstrated success and highlights the impact of small, frontline-driven changes in improving both staff workflow and client care.

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## Week 12 of 52 (Week of September 15, 2025): Refill Clinic, Beaufort Delta

**Change Driver:** Staff in the Beaufort Delta recognized the need to reduce appointment backlog at primary care.

**Link to System Vision:** This links to 'Best Care' supporting better access to better services.

**Improvement Initiative:** To improve access to primary care, staff identified that many appointments were being booked solely for medication refills, contributing to a backlog, and reducing availability for patients with more acute or complex needs. In response, staff proposed the creation of a dedicated "refill-only" clinic when staffing allows.

This initiative has since been implemented as a half-day clinic, where a staff physician sees patients in shorter appointments of typically under 15 minutes. The response from both the community and clinic teams has been positive. This staff-led improvement initiative has not only eased pressure on primary care schedules but has also helped divert non-urgent refill visits away from the emergency department.



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## Week 13 of 52 (Week of September 15, 2025): YK Region Neurodivergent Education Group, Pilot Project

**Change Driver:** Feeding differences are common in autistic children, which can cause stress for caregivers, raise concerns about nutrition, and impact mealtime experiences. Staff in YK region have recognized an increase in families seeking practical strategies and clarity on when to seek nutrition support.

**Link to System Vision:** This links to 'Best Health' supporting equitable access, family-centered care, and continuous improvement.

**Improvement Initiative:** This staff-led idea, which was to host an educational group for caregivers of neurodivergent children (primarily pre-school aged) with feeding differences was a collaboration between the Territorial Specialist, Kerri Adams, Occupational Therapist, Molly Beauregard (both pictured here), and Dietitian, Audra Donison. Five families participated and the sessions that included advice from staff, reflective activities, and caregiver discussion. Feedback was very positive, with families highlighting the value of connecting with other caregivers and accessing practical strategies.

With this feedback, the team hopes to continue these services, including expanding to virtual options to increase accessibility for families outside Yellowknife.



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## Week 14 of 52 (Week of September 29, 2025): Enhancing Patient Safety

**Change Driver:** Staff on the medicine unit at Stanton Territorial Hospital (STH) recognized the need to get creative and find a solution that would deter patients that wander in the unit, from entering patient rooms that were occupied.

**Link to System Vision:** This links to 'Best Care' by improving the safety and overall experience of patients.

**Improvement Initiative:** This new door stop sign is a staff-led improvement that was suggested by Maxine Anderson, an RN on the medicine unit.

While originally implemented to provide a visual barrier to deter patients that wander from going into other patient rooms while on the medicine unit, the successful initiative has also proven beneficial for:

- Allowing staff to spend more time with all patients rather than focusing on one wandering patient.
- Promoting autonomy for patients by enabling them to walk around their own room and not upset other patients by wandering into other rooms and spaces.



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## Week 15 of 52 (Week of October 6, 2025): Maintenance Logs - Sahtu

**Change Driver:** NTHSSA long-term care staff in the Sahtu recognized a need to support the teams responsible for maintenance in the long-term care rooms.

**Link to System Vision:** This links to 'Best Care' as it demonstrates efforts to work towards better access to better services and highlights NTHSSA efforts for continuous quality improvement.

**Improvement Initiative:** Maintenance needs happen, and ensuring quick and reliable tracking of those needs in long-term care rooms improves not just staff workflows, but patient experience. Together, staff in the Sahtu led the development of new maintenance log forms to ensure more accurate and accountable data. These forms have been posted to all elder room doors and are being checked regularly to ensure maintenance needs are met.

This staff-led initiative has improved quality of service, team dynamics and enhanced communication between maintenance staff and the long-term care team.

| SERVICE DATE:         | Forwards:     | Backwards:         | Up:             | Down:              | Charger:        | Charging:  |
|-----------------------|---------------|--------------------|-----------------|--------------------|-----------------|------------|
| Patient Lift          |               |                    |                 |                    |                 |            |
| Electric Patient Bed  | Head Up/Down: | Head Lock Buttons: | Knee Up/Down:   | Knee Lock Buttons: | Bed Wheel Lock: | Wall Plug: |
| Bathroom              | Toilet:       | Support Rails:     | Sink:           | Shower:            | Cabinet:        | Fan:       |
| Lights                | Bedroom:      | Bathroom:          | Front Entrance: |                    |                 |            |
| Maintenance Required  |               |                    |                 |                    |                 |            |
| Patient Lift:         |               |                    |                 |                    |                 |            |
| Electric Patient Bed: |               |                    |                 |                    |                 |            |
| Bathroom:             |               |                    |                 |                    |                 |            |
| Lights:               |               |                    |                 |                    |                 |            |

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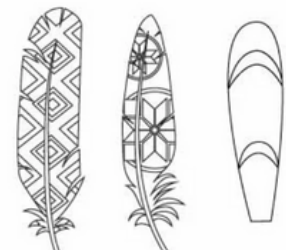
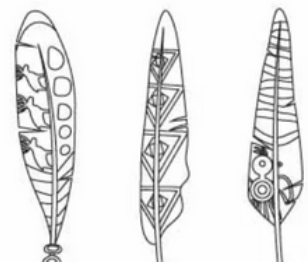
## Week 16 of 52 (Week of October 13, 2025): Healthy Family Program

**Change Driver:** Honouring Truth and Reconciliation and calls to action, staff in Tuktoyaktuk wanted to find ways to connect closer with what that means to them and what they can do to connect reconciliation more closely to their social work practice.

**Link to System Vision:** This links to 'Best Care' by supporting diversity consciousness and understanding to improve access to care for Northern Indigenous families that is respectful and inclusive.

**Improvement Initiative:** This staff-led initiative was created to foster ongoing learning and reflection by providing space for grounding and meaningful dialogue. Team members were invited to use a blank feather template to reflect on what Truth and Reconciliation means to them personally, and what they do or could do towards ongoing efforts to honor those who have come before and with lived experiences.

The completed feathers are displayed in workspaces as a visual reminder of everyone's personal commitment. Together, they represent a collective dedication to reconciliation and serve as a guide for the team's approach to their work and supporting the Healthy Family Program.



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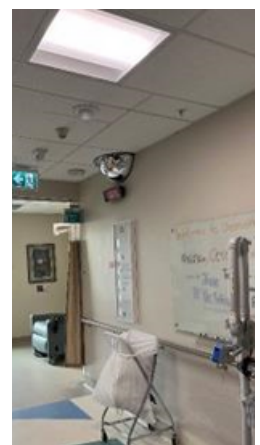
## Week 17 of 52 (Week of October 20, 2025): Dome Mirror Safety Initiative

**Change Driver:** To foster an inclusive and welcoming environment, the main doors of the Chemotherapy Unit remain open to the public during operating hours. However, due to the unit's layout and long hallways, these doors are not visible from the nursing station. This lack of visibility presents a potential safety concern, as staff may be unaware of unauthorized or inappropriate access to the unit, putting both patients and staff at potential risk.

**Link to System Vision:** This links to 'Better Future' by improving workforce engagement and creating a safe work environment.

**Improvement Initiative:** During the April 2025 Workplace Violence Assessment, staff in the Chemotherapy Unit identified the inability to see the front entrance from the main nursing desk as a safety concern. In response, staff consulted the P3 team and the installation of dome mirrors was proposed as a solution to improve visibility of the entryway.

Chemotherapy staff collaborated with the P3 team to determine the optimal mirror placement for maximum coverage and visibility. This staff-led initiative led to a dome mirror being installed in October 2025, enhancing safety for both patients and staff within the unit.



# 52 NTHSSA Improvements in 52 Weeks

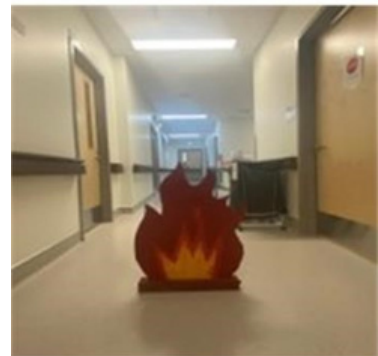
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## Week 18 of 52 (Week of October 27, 2025): Lessons for Fire Drills

**Change Driver:** Staff in the Sahtu requested more interactive, “real-life” fire drills to better prepare for actual emergencies.

**Link to System Vision:** This links to ‘Best Care’ by ensuring better access to better services and continuous quality improvement.

**Improvement Initiative:** Recognizing this need, operations staff worked with stakeholders including the Norman Wells Fire Department to introduce scenario-based drills. This was really important for teams so they could feel better prepared in the case of a real fire emergency to ensure client safety. As a result of the fire drill, not only did they improve on evacuation time and identify areas for improvement, but an idea was also generated for a door indicator system to prevent double checks that will be implemented.



This staff-led improvement initiative demonstrates how frontline feedback can drive meaningful change. By redesigning fire drills to be more realistic and scenario-based, staff improved response times, strengthened teamwork, and enhanced overall emergency preparedness across the facility.

# 52 NTHSSA Improvements in 52 Weeks

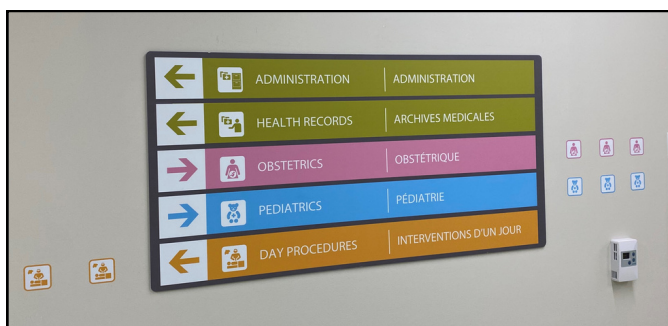
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## Week 19 of 52 (Week of November 3, 2025): Wayfinding Improvements

**Change Driver:** Finding your way around Stanton Territorial Hospital (STH) can be challenging and feedback on ways to improve has been received by staff, patients and through formal audits over the years.

**Link to System Vision:** By making it easier to find and access services, the experience of patients and staff will improve, which is one ways the NTHSSA is meeting its commitment under 'Best Care'.

**Improvement Initiative:** In response to a need to improve wayfinding across STH, wayfinding enhancements have been implemented. These enhancements, which were staff-driven and supported by a local contractor, include improved wall signage with colour code lines painted on walls and floors to support clearer directional guidance. This improvement initiative will not only make it easier to get where you need to go, but also improves safety for patients and staff.



# 52 NTHSSA Improvements in 52 Weeks

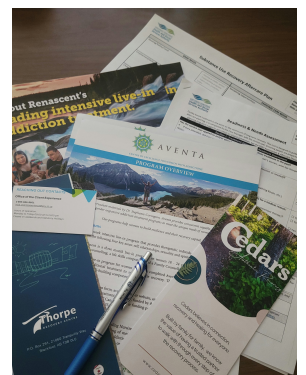
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## Week 20 of 52 (Week of November 10, 2025): Integrated Wrap-Around Expedited Treatment Access: Fort Good Hope

**Change Driver:** In Fort Good Hope, clients need timely, client-centred access to treatment, but resources are limited. Staff in the region have been looking for innovative ways to deliver high-quality care and support as many clients as possible, with the resources available.

**Link to System Vision:** By finding ways to improve delivery of services, this supports NTHSSA efforts to meet the vision for 'Best Care'.

**Improvement Initiative:** This staff-led initiative has resulted in what is being called the Integrated Wrap-Around Model. To support clients with available resources, every client in Fort Good Hope is guided through a full-circle process: front desk support, same-day assessments, medical form completion by the nurses, and phone access. This ensures that clients are ready, safe, and connected to treatment efficiently, removing delays and barriers every step of the way.



This new model has supported clients in completing their treatment applications, medicals, and phone intakes in a single day. Some attended treatment that same month, and others were scheduled for the next month. This demonstrates that coordinated, client-focused strategies can deliver rapid access to treatment even in resource-limited communities.

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## Week 21 of 52 (Week of November 17, 2025): Occupational Health and Safety Course Enhancement

**Change Driver:** Occupational Health and Safety (OHS) Staff identified an inefficiency in cost and process, related to registration for WHMIS courses, which have been traditionally offered through an external provider. This is a course that all NTHSSA staff require annually.

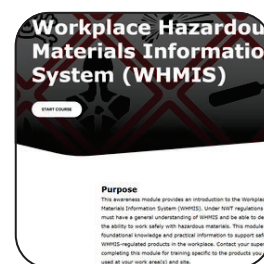
**Link to System Vision:** This links to 'Better Future' by improving quality, operational efficiency and reducing growth in costs.

**Improvement Initiative:** Built on the need identified in the change driver, OHS staff have developed and launched a new internal WHMIS course tailored to the NWT Health and Social Services sector.

Some of the key benefits include:

- Online self-registration, eliminating the previous manual registration process that resulted in waitlists and delays.
- Reduced workload for the OHS team, freeing time for other priorities.
- Lower training costs by delivering the course internally.
- Extended expiry to three years, maintaining best-practice refreshers while reducing annual recertification demands.

This staff-led initiative demonstrates how even small changes within one area of the organization can create significant impacts on workflow and costs organization-wide.



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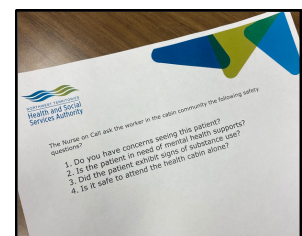
## Week 22 of 52 (Week of November 24, 2025): Staff Safety in Sahtu Cabin Community

**Change Driver:** Staff working in the Sahtu Cabin Community of Colville Lake are regularly looking for ways to enhance safety, with recent efforts focused on after-hour needs.

**Link to System Vision:** This links to 'Best Health' by improving care in the communities through the delivery of culturally safe and relationship-based health and social services.

**Improvement Initiative:** This staff-led initiative focused on enhancing staff safety for after-hour calls. This new initiative has been implemented on a trial basis and involves completing a quick 4-question risk assessment over the phone, prior to physically attending the health cabin. This assessment is done virtually between the staff member needed in the community and the nurse on call from their supporting community. If a risk is identified, they will put a safety plan in place prior to attending the health cabin.

This staff-led improvement initiative is important because it demonstrates an ongoing commitment to safety and serves as a reminder that everyone has a role in making sure staff are prepared and safe before attending any work-related situation. It doesn't mean unsafe situations are expected, it's simply a gentle precaution to help keep everyone comfortable and protected.



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## Week 23 of 52 (Week of December 1, 2025): Beaufort Delta Medical Travel Patient Transport

**Change Driver:** Staff in Inuvik recognized that medical travel clients were experiencing challenges travelling between the Transient Centre (used as a boarding home for clients) located in the Inuvik Regional Hospital and the Airport.

**Link to System Vision:** This supports 'Best Care' by supporting client needs and improving the clients journey and experience during medical travel appointments.

**Improvement Initiative:** Implemented earlier this month, this staff-led initiative involved implementing an NTHSSA bus service to support transportation needs for medical travel clients who need to travel between the airport and the Inuvik Regional Hospital Transient Centre. This improvement initiative ensures that clients are offered dedicated transportation when travelling for care and with scheduled route times, it means less wait times for transportation during peak periods.

By reducing reliance on smaller capacity vehicles, this also means improved safety and accountability, easier group coordination ensuring everyone arrives together and more predictability for both staff and clients when planning their transportation needs. This change will not only improve client experience, but is cost effective to the organization.



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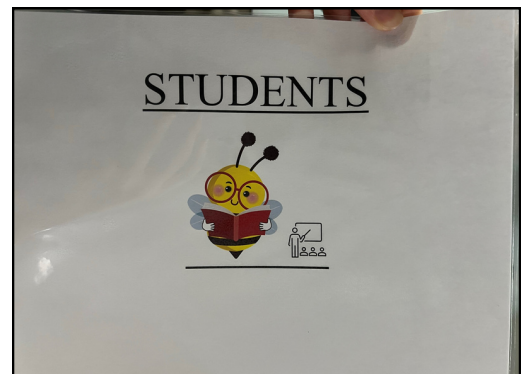
## Week 24 of 52 (Week of December 8, 2025): Supporting Students and Improving Workflow

**Change Driver:** STH staff noted challenges in identifying when a Medication Administration Record (MAR) was removed from a chart due to student activity on the unit.

**Link to System Vision:** This links to 'Best Care' by aligning with the commitment to quality improvement, as well as 'Best Future' by improving workflow efficiency.

**Improvement Initiative:** To resolve the challenge identified, staff came up with a practical solution: a laminated insert that slides into the chart whenever a student has taken the MAR for educational purposes. Adding this laminated sheet to the process will limit delays in staff trying to find out where the MAR is, in instances where they may need to make changes or updates.

This simple yet effective tool provides clear visual identification, ensuring staff can quickly confirm the MAR's status and maintain workflow efficiency.



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## Week 25 of 52 (Week of December 15, 2025): Quality Improvement, Supported by Finance

**Change Driver:** This change driver was a joint effort between staff in the Yellowknife region and the finance team following recognition that challenges were being experienced with collections of revenue for rehabilitation services through benefits.

**Link to System Vision:** This links to 'Better Future' as it aligns with quality, efficiency and sustainability and by improving operational efficiency and reducing growth in costs

**Improvement Initiative:** To support the driver, this improvement initiative focused on regional staff and finance teams working together, and with benefit providers to improve the process for submitting information to billing. This was an important exercise as it gave the teams an opportunity to tune up their skills and ensure they had the right tools.

This staff-led initiative has proved successful not just in supporting a more balanced budget, but in strengthening the collaboration between staff working in different parts of the organization. Way to go, teams!



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THIS STATEMENT MAY CONTAIN CONFIDENTIAL HEALTH INFORMATION. EXPRESS SCRIPTS

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## Week 26 of 52 (Week of December 22, 2025): Child and Family Services, Welcoming Station

**Change Driver:** Staff working with the Child and Family Services (CFS) team are always looking for new improvement initiatives to ensure their work and environment reflect their commitment to cultural safety and hospitality.

**Link to System Vision:** This links to 'Best Care' by improving the experience of clients, who in this case are usually families visiting the space.

**Improvement Initiative:** This staff-led initiative focused on meeting the commitment of the team, while also ensuring families were provided a warm and inviting environment while they wait in the lobby, in the Yellowknife office.

This small change, which included the introduction of a new coffee station in the lobby is enhancing the experience for families visiting the space. By offering a simple gesture of comfort, the team aims to make the office feel more welcoming and supportive for everyone who walks through our doors.



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## Week 27 of 52 (Week of December 29, 2025): Automatic Paper Folder Initiative

**Change Driver:** Staff working within territorial colorectal cancer screening programs were manually folding invitation, reminder, and result letters to mail to residents.

**Link to System Vision:** This links to 'Best Health' by improving coordination of health information to residents, and "Better Future" by enhancing operational efficiency through sustainable technology investments.

**Improvement Initiative:** To support the driver identified, an automatic paper folder was purchased. So far in 2025, the program has manually folded over 10,500 documents. For example, folding 38 letters twice (letter "C" fold) and preparing them for mailing took 30 minutes. In contrast, the new automatic folder can process up to 200 pages at once and as many as 7,400 sheets per hour.



This staff-led initiative and the purchase of an automatic paper folder will save time and resources while ensuring residents receive timely, well-organized cancer screening information. It also supports employee occupational health and safety by reducing repetitive manual tasks, minimizing strain, and lowering the risk of workplace injuries associated with high-volume paper handling.



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## Week 28 of 52 (Week of January 5, 2026): NSWOC Quality Improvements

**Change Driver:** The Territorial Nurses Specialized in Wound, Ostomy and Continence (NSWOC) team identified a challenge in information sharing and service delivery that was impacting timely and effective client care.

**Link to System Vision:** This supports 'Best Care' by making quality improvements that ensure better access to better services for clients, and enhances workflows for staff.

**Improvement Initiative:** The NSWOC team recognized a need and worked together to find a solution that was quick and easy to implement. The solution: implementing a dedicated fax line. This small change has been making a big impact. The enhancement streamlines referrals, both received and sent, ensures client prescriptions are promptly received by pharmacies, and strengthens sending and receiving of information with partners such as Nunavut and Alberta Health Services.



The team has also created a new referral form to clarify and improve the referral process. This will ensure all information is captured up front, reducing any delays.

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## Week 29 of 52 (Week of January 12, 2026): Pediatric Unit Workflow Improvements

**Change Driver:** Staff in the pediatric unit at STH spent some time actively looking for ways to improve workflow and process on the unit, to support both staff time and patient experience.

**Link to System Vision:** This links to 'Best Care' as it relates to improvement initiatives that were made to support better access to the tools needed to offer better services and improves workflows for staff.

**Improvement Initiative:** Across the pediatric unit, improvements have been made that on the surface, might seem small, but in practice, make a big difference. Changes that have been implemented across the unit include: organizing storage room to ensure quicker access for patients and staff to the items required moved, improving document organization with things like wall files added to patient rooms, file cabinet enhancements and improvement organization systems.

There have also been several design changes made to enhance user experience, increase visibility of important posters and support accessibility to frequently used items. Overall, these staff-led improvements have increased staff morale and will support patient experience when accessing the unit. Teams will continue to make improvements as needed.



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## Week 30 of 52 (Week of January 19, 2026): Improving Efficiency for Distributing of FIT Kits for Cancer Screening.

**Change Driver:** In March 2025, Alberta Precision Labs (APL) changed its process for distributing fecal immunochemical (FIT) kits for colorectal cancer screening. Previously, FIT kits arrived pre-packaged with NTHSSA collection instructions. This change meant changes to ordering and workflow challenge of replacing the instructions on each kit to the correct NTHSSA version before providing kits to clients at frontline/primary care facilities and through the territorial colorectal cancer screening program.

**Link to System Vision:** This initiative supports “Best Health” by improving coordination and accuracy of health information provided to residents, and “Better Future” by enhancing operational efficiency through improved capacity and sustainable processes.

**Improvement Initiative:** The Territorial Cancer Screening Program partnered with Stanton Territorial Hospital Materials Management to pre-assemble FIT kits with NTHSSA instructions already included. This streamlined process was a collaborative effort and approach to ensure pre-assemble FIT kits were made available for those who need it, and that the process was integrated into the internal ordering process.

This improvement initiative reduces the need to order two separate items (the FIT kit and NTHSSA instructions), eliminates manual re-assembly, saves time for facilities, and ensures residents consistently receive the correct colorectal cancer screening information.



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## Week 31 of 52 (Week of January 26, 2026): YK Primary Care, Streamline Team Processes

**Change Driver:** Staff working in primary care in Yellowknife know how important the flow of information to one another is to support both workflow and client needs, and have been on the lookout for ways to improve.

**Link to System Vision:** This supports 'Best Care' as it supports the goal towards continuous quality improvement.

**Improvement Initiative:** In an effort to streamline processes and improve internal communication among team, staff in the region implemented a new initiative to make communication between Program Assistants (PAs) and practitioners more efficient, when working on tasks related to investigations. Instead of documenting their work in the formal system as well as sending a note to practitioners that this work was complete, PAs now only document the completion of their actions directly within the investigation itself.

This change saves time, has reduced unnecessary messaging, and improves workflow within the team. By recording the follow-up directly where the investigation is stored, practitioners will have immediate clarity on task completion, supporting smoother and more efficient care delivery.

This staff generated idea has already proved successfully. Staff have said to already noticed a difference and everyone seems to be following the new process with ease.



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## Week 32 of 52 (Week of February 2, 2026): Elders Privacy, Sathu

**Change Driver:** Staff in the Sahtu region recognized that window privacy could be enhanced for residents in Long Term Care in the Sahtu.

**Link to System Vision:** This supports 'Best Care' by making quality improvements to support patients accessing services.

**Improvement Initiative:** Continuing Care Program staff in the Sahtu identified that with the right exterior light, when Long Term Care residents had their curtains open, people could see into the rooms. Because of this, a recommendation was made to add privacy film window coverings so residents could feel comfortable leaving their curtains open to invite natural light into their rooms. This is especially important in our long winter months.

This recommendation has been accepted and the Sahtu Operations team is currently working to source and install these products.



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## Week 33 of 52 (Week of February 9, 2026): Simplifying Access to Patient Communication Signs on Medicine

**Change Driver:** Staff on the Medicine unit identified inefficiencies in the organization and accessibility of patient communication signs. Challenges included difficulty locating signs when needed, lack of clear indication when new signs required creation, and unnecessary staff movement between areas, impacting workflow efficiency.

**Link to System Vision:** This improvement supports the system vision by promoting efficient, patient-centred care through streamlined workflows and timely communication. Improving access to patient communication tools enables staff to respond promptly to patient needs while reducing non-value-added steps and improving overall care delivery.

**Improvement Initiative:** A standardized system for organizing patient communication signs was implemented on the Medicine unit. Signs are now centrally organized and available at both drop-down Nursing Stations, with a visual indicator to identify when new signs need to be made. This approach improves accessibility, reduces staff time spent searching for resources, and supports consistent communication practices.



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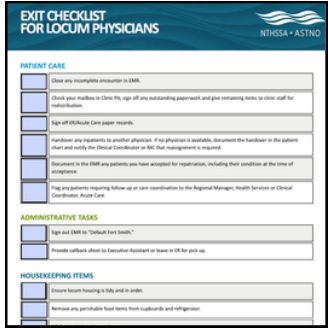
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## Week 34 of 52 (Week of February 16, 2026): Fort Smith RL6 Checklist

**Change Driver:** In the Fort Smith region, there have been several instances where RL6 has been used, which is an incident reporting system to document incidents, risks and hazards. Each RL6 requires review of the incident which takes staff time and adds pressure to the system.

**Link to System Vision:** This supports 'Best Care' by supporting continuous quality improvement.

**Improvement Initiative:** A review was conducted by staff in the Fort Smith region to look at how they could lower the frequency of use for RL6. Upon review, it was determined that most of the RL6s were due to minor items such as staff forgetting to sign out of systems at the end of the day or processes being incomplete. Understanding that these challenge sometimes arises because there are locums in the community who may be unfamiliar with process, staff worked on a checklist that will now be given to all physicians to complete before they leave the community.

The image shows a checklist titled "EXIT CHECKLIST FOR LOCUM PHYSICIANS" with the NTHSSA - ASTND logo. It is divided into three sections: "PATIENT CARE", "ADMINISTRATIVE TASKS", and "HOUSEKEEPING ITEMS". Each section contains several items with checkboxes. The "PATIENT CARE" section includes items like "Close any incomplete encounter in EMR", "Check your mailbox in Clinic PM, sign off any outstanding paperwork and give remaining items to clinic staff for redistribution", "Sign off NTHSSA Care paper records", "Handover any reports to another physician. If no physician is available, document the handover in the patient chart and notify the Clinical Coordinator or HLT for management as required", "Document in the EMR any patients you have accepted for respiration, including their condition at the time of acceptance", and "Flag any patients requiring follow-up or care coordination to the Regional Manager, Health Services or Clinical Coordinator, upon Care". The "ADMINISTRATIVE TASKS" section includes "Sign out EMR for 'Unstaffed Clinic Hours'" and "Provide callback advice to Executive Assistant or Nurse or HLT for pick-up". The "HOUSEKEEPING ITEMS" section includes "Ensure locum housing is tidy and in order" and "Remove any particulate food items from cupboards and refrigerator".

What may seem like a small change is bound to make a big difference. It supports staff who want clear, complete information to do their jobs well. One change at a time, we are making work a little easier, which over time leads to a meaningful improvement in client care.

# 52 NTHSSA Improvements in 52 Weeks

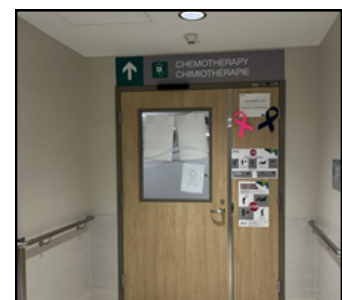
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## Week 35 of 52 (Week of February 23, 2026): Wayfinding Updates, STH

**Change Driver:** To support an inclusive and welcoming environment, the main entrances to the Ambulatory Care Clinic (ACC) and the Chemotherapy Unit remain open during operating hours. Patients arriving for ACC appointments register at the front desk and are then directed to a designated waiting area. However, the signage guiding patients to these waiting rooms was small and easy to miss, causing confusion about where patients should go before their appointment.

**Link to System Vision:** This supports 'Best Care' through improving wayfinding and providing equitable access to services.

**Improvement Initiative:** To support the change driver, this improvement initiative looked at how to support patients and ensure they know where to go after registering, and don't end up in the wrong waiting rooms or units, which can risk delays or missed appointments. In collaboration with NTHSSA Communications, the team decided to install large, highly visible signage to improve navigation. The new signage has been delivered and installed and is helping patients more easily find their way, reducing confusion and supporting timely service delivery.



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## Week 36 of 52 (Week of March 2, 2026): Elastomeric Infusion Pumps

**Change Driver:** Patients undergoing chemotherapy have a great deal to manage, and the staff supporting cancer care patients continue to look for ways to ease some of the burden. After repeated feedback from patients about the numerous return appointments and the limited availability of appointments in the chemo department, one way to reduce the patients' burden was to increase the ability of patients to disconnect their elastomeric infusion pumps at home, if they use them. This would eliminate the need for additional appointments and trips to the chemo unit.

**Link to System Vision:** This supports 'Best Care' by focusing on providing care closer to home by reducing unnecessary hospital visits.

**Improvement Initiative:** The Chemotherapy Unit staff identified the option of patients removing their own elastomeric infusion pumps at home. After working with Cancer Care Alberta to understand which patients would qualify and developing patient teaching resources, the Clinical Coordinator for Chemotherapy led the team in implementing the at-home removal of the pumps and patient teaching.



Now patients who are deemed eligible and do not need to travel by air to receive their chemotherapy will be provided with education and training. This important initiative eliminates the pressures for appointments in the chemotherapy unit and ensures patients are able to spend more time closer to home.

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## Week 37 of 52 (Week of March 9, 2026): Diagnostic Imaging, IRH

**Change Driver:** Diagnostic Imaging staff at Inuvik Regional Hospital identified that the filing and workspace system for imaging requisitions had become cluttered and inconsistent, with ultrasound and mammography requests stored in multiple locations. This made it difficult to efficiently locate, track, and prioritize patient requests.

**Link to System Vision:** This supports 'Better Future' by supporting operational efficiency.

**Improvement Initiative:** To support the change driver, DI staff reorganized the workspace and implemented a chronological filing system for requisitions. Mammography and ultrasound materials were consolidated into their respective booking areas, creating a standardized workflow that improves visibility and tracking of requests, reduces time spent searching for requisitions, and supports more efficient patient booking.



This staff-led initiative, which involved improving organization and workflow, will support faster booking, clearer team communication, and reduced delays for patients awaiting imaging appointments.

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## Week 38 of 52 (Week of March 16, 2026): Improving Troubleshooting Efficiency for STH Laboratory

**Change Driver:** Being in the NWT can sometimes add an extra layer when it comes to troubleshooting equipment, which is a part of the job for Stanton Territorial Hospital (STH) Laboratory staff. With service technicians located in Alberta, STH Laboratory staff need to be more hands on and rely on remote service calls with the technical support teams, which can mean a lot of walking back and forth between equipment and the phone.

**Link to System Vision:** This supports 'Better Future' by improving quality and operational efficiency.

**Improvement Initiative:** To improve efficiency for staff members while performing troubleshooting measures on laboratory equipment, staff came up with the idea to purchase a head set to allow them to work more freely with their hands during these remote calls. Since the purchase of this headsets, staff have been very successful at bringing equipment back online in a more timely fashion. Overall, this improvement initiative has proved successful and is supporting efforts to improve the patient care delivered.



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## Week 39 of 52 (Week of March 23, 2026): Long Term Care, Norman Wells

**Change Driver:** Staff working in long term care in Norman Wells identified the need for more hands-on practice in emergency response skills. This request came from a general desire to increase confidence and awareness to ensure they were ready to respond in an emergency situation.

**Link to System Vision:** This supports 'Best Health' by supporting staff and improving availability and quality of services.

**Improvement Initiative:** To support staff, Clinical Education staff provided training at the regional staff's request, which included:

- A two-day Integrating a Palliative Approach: Essentials for Personal Support Workers course
- Multiple hands-on emergency response simulation sessions focused on CPR, AED use, choking response, and falls

The improvement initiative highlights the important role staff play in identifying the areas where they feel they'd benefit most, and how units work together across the organization to support one another and deliver the best care.



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## Week 40 of 52 (Week of March 30 , 2026): Message Process, Sahtu

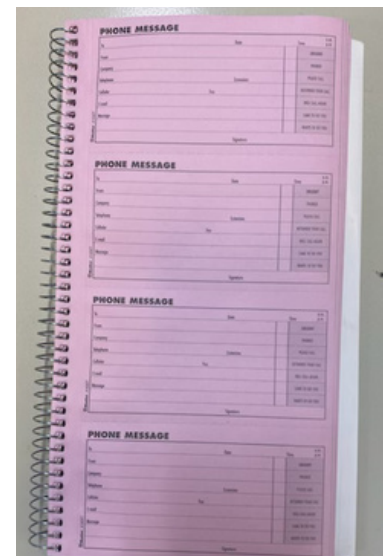
**Change Driver:** Following feedback from a client in the Sahtu, it was noted by the Nurse in Charge that the method for documenting messages was inconsistent and need more clarity.

**Link to System Vision:** This supports 'Better Future' by improving operational efficiency.

**Improvement Initiative:** After identifying an area for improvement, the staff member in the Sahtu implemented a message book process to ensure that all patient and client messages could be easily traced. This also enabled clearer documentation of whether the action has been completed or requires follow-up.

This staff-led improvement initiative shows that change doesn't have to be big or flashy, and that improvements at all levels can make a difference and contribute to organization success.

A message book process has now been implemented across all Sahtu Health and Social Services Centres.



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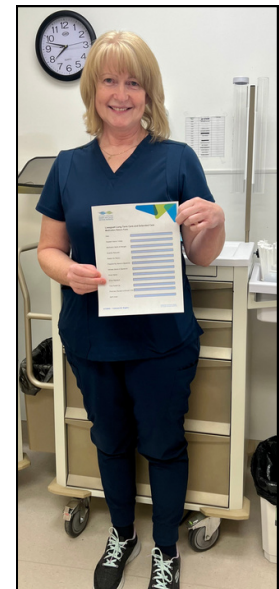
## Week 41 of 52 (Week of April 6 , 2026): Medical Return Log

**Change Driver:** Long-term care (LTC) staff in the Yellowknife region identified an opportunity to improve tracking when delivery drivers pick up medications for return to the Pharmacy for disposal.

**Link to System Vision:** This supports 'Better Future' by improving quality and operational efficiency.

**Improvement Initiative:** This collaborative improvement initiative of frontline staff and LTC staff led to the development and implementation of a Medication Return Form, strengthening internal documentation processes and medication chain-of-custody practices.

The form ensures that all medications collected by delivery drivers for pharmacy disposal are properly documented, with driver signatures required to reinforce accountability and support safe medication handling. This process promotes safety, compliance, and clearer communication between LTC and Pharmacies.



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## Week 42 of 52 (Week of April 13 , 2026): Running Board Tape, Sahtu

**Change Driver:** In the North, weather can highlight opportunities for improvement, as happened in the Sahtu this month. Staff in the region recently identified an opportunity when they noticed that vehicle running boards were extra slippery due to cold and ice buildup.

**Link to System Vision:** This supports 'Best Care' by demonstrating continuous quality improvement.

**Improvement Initiative:** This small and seemingly simple initiative has a big impact on ensuring the ongoing safety of staff across the region. Following the identification of the slippery running boards, the Operations team in the region proposed getting anti-slip tape to prevent slipping.

These are being applied to all vehicles that have running boards.



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## Week 43 of 52 (Week of April 20, 2026): Emergency Department Initial Treatment Order Sets (ITOs), Acute Care

**Change Driver:** Across Emergency Departments, delays in initiating emergent treatment while waiting for physician orders, along with variability in early patient management across sites, were identified as key challenges. There was also a need to reduce risk associated with broad medical directives and establish a more consistent, clearly authorized approach to early care.

**Link to System Vision:** This supports 'Better Care' and 'Better Health' by improving timeliness of treatment, enhancing patient safety, and promoting consistent, evidence-based care across NTHSSA sites.

**Improvement Initiative:** This staff-led initiative involved implementing the first set of 10 Emergency Department Initial Treatment Order Sets (ITOs). These evidence-based tools replaced regional medical directives with a standardized territorial approach aligned with HIROC guidance. The ITOs enable nurses to initiate early diagnostics and treatment for common emergency presentations, based on defined eligibility criteria and physician authorization.

This approach supports more timely care, improves consistency across sites, and reduces uncertainty in clinical decision-making. It also strengthens clinical processes and helps staff work to the full scope of practice within a clear and accountable framework.

**ED Initial Treatment Order Set: ADULT CHEST PAIN**

PATIENT ID: \_\_\_\_\_

DATE: (DD/MM/YYYY) \_\_\_\_\_ TIME: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

**ALLERGIES:** ( ) NONE ( ) LIST ALLERGIES: \_\_\_\_\_

**Eligibility:**

- 18 years or older
- Reports symptoms suggestive of possible Acute Coronary Syndrome such as:
  - Chest pain, heaviness, pressure or indigestion like discomfort
  - Radiation to arm, jaw or back
  - Shortness of breath, dizziness, weakness, nausea
- Cadillac, hypertension, bradycardia

**Authorizations:**

- BNACF completes focused assessment and communicates findings to ERP
- ERP provides verbal or written authorization
- This order set guides initial care until ERP in-person assessment

**Medications:**

- ASA 150 mg (Chewable PD) (do not exceed total dose of 325 mg if already taken ASA)
- Contraindications: Allergy, active GI bleed or suspected aortic dissection

**Interventions:**

- Initiate continuous cardiac and SpO<sub>2</sub> monitoring
- Administer oxygen therapy to maintain SpO<sub>2</sub> 94% or greater
- Insert large bore IV x1
- Reassess every 15-30 minutes after treatment or sooner if symptoms worsen
- Obtain 12-lead ECG (or 15-lead ECG if suspected AF) (monitoring); ERP to review within 15 minutes
- Repeat ECG in 30 minutes with ongoing symptoms or if physiological condition worsens

**Monitoring:**

- Vital signs every 5 minutes until stable, then PRN
- Draw the following labs: CBC, Na, K, Cl, CA, ABG, Hg, Phos, BUN, Creatinine, Glucose, Troponin, BNP/NT
- Perform POCT Chem 8, Troponin and WBC (for sites without lab)
- Reassess every 15-30 minutes after treatment or sooner if symptoms worsen
- Reassess every 15-30 minutes after treatment or sooner if symptoms worsen

**Other Considerations:**

- Record time of symptom onset, first medical contact, and initial pain score (0-10)
- Note reduction, associated symptoms (e.g., nausea, sweating), and response to interventions
- Notify ERP STAT if ECG shows STEMI, atrial fibrillation, or significant new changes
- Obtain prior ECGs from medical records
- Prepare for defibrillation or CPR if patient becomes unstable
- Do NOT administer nitroglycerin unless ECG is completed and reviewed by ERP

Physician Signature: \_\_\_\_\_

Date Approved: 24 Sept 2025  
Medical Pharmacy and Respiratory Committee and Territorial Medical Director

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## Week 44 of 52 (Week of April 27 , 2026): Medical Travel Checklist

**Change Driver:** Staff in Fort Smith identified an opportunity to improve workflow and document tracking for clients accessing the Specialist Clinics.

**Link to System Vision:** This supports 'Better Future' by improving quality and efficiently managing the delivery of program and services.

**Improvement Initiative:** Staff in Fort Smith have implemented a tracking model that includes a checklist for use during client visits to Specialist Clinics. This document is meant to help maintain clear documentation of patient appointments, from when a need is first identified to when a Medical Travel Authorization (MTA) is sent.

This staff-led improvement initiative has proven useful and is helping ensure that each step of the process is followed, supporting accountability.



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## Week 45 of 52 (Week of May 4, 2026): Facility Services TV Server, STH

**Change Driver:** Staff at Stanton Territorial Hospital supporting facility services identified an opportunity to optimize efficiency.

**Link to System Vision:** This supports 'Best Care' through continuous quality improvement.

**Improvement Initiative:** Staff requested that a dedicated hard-wired network connection be added to the STH TV Server in their workshop, to enable remote troubleshooting of in-patient TV units. This upgrade eliminates the need for staff to walk through patient rooms to troubleshoot, which improves efficiency and aims to enhance the patient experience, with one fewer person needing to walk through their rooms when they are receiving care.

As part of this work, the Facility Services staff also requested a ceiling-mounted power receptacle in the center of the room to avoid extension cords and associated tripping hazards. This is a strong display of efforts towards improved safety across facilities.



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## Week 46 of 52 (Week of May 11, 2026): Medical Travel Signage at Airport

**Change Driver:** When medical travel clients travel to Yellowknife from smaller communities, they often seek information upon arrival to make their journey easier. This has also been an ongoing theme in feedback received.

**Link to System Vision:** This supports 'Best Care' by aiming to improve the experience of clients and ongoing efforts towards quality improvement.

**Improvement Initiative:** Medical Travel staff identified outdated signage at the airport and worked with the communications team to find a solution that would meet the needs of clients arriving in Yellowknife from smaller communities while aligning with existing processes. The objective was: to ensure that if a medical travel client was landing in Yellowknife and wasn't sure where to go or needed assistance, they could immediately contact the Yellowknife Medical Travel team.

To achieve this, new, large-scale posters were placed at the Yellowknife Airport in the main baggage retrieval area and at the Air Tindi Airport terminal. Both of these terminals regularly welcome clients. This staff-led, collaborative initiative may seem small, but clear signage can make a big difference.



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## Week 47 of 52 (Week of May 18, 2026): Alert Buttons, STH

**Change Driver:** Alcove's at Stanton Territorial Hospital (STH) have a panic alert button under the workstation for easy access by staff should there be an emergent situation. It has been noted that, on occasion, when staff are sitting there to complete documents, observe patients, etc., the button may be accidentally pushed, sending an alert.

**Link to System Vision:** This supports 'Best Care' through continuous quality improvement.

**Improvement Initiative:** To support the change driver, staff at STH have been exploring different ideas to find the best solution to prevent alert buttons from being accidentally activated. After trying ideas, including placing tape over the buttons to prevent accidental activation, which limited the ability to use them in emergent situations, staff requested that the buttons be moved completely.

Following this request, the buttons have been moved back to a location that will ensure they are not accidentally pushed, but is accessible enough that staff can use them quickly when needed.



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## Week 48 of 52 (Week of May 25, 2026): Narcotic Counts

**Change Driver:** Across the NTHSSA, teams strive for ongoing improvement, including process improvements. In the Sahtu, staff recently recognized an opportunity to improve narcotic counts – an important part of patient safety.

**Link to System Vision:** This supports 'Better Future' by improving operational efficiency and cost, and 'Best Care' through continuous quality improvement.

**Improvement Initiative:** To reduce potential narcotic count errors, the Clinical Nurse Education in the Sahtu provided the nursing staff with an education session on Narcotic Count tips. The team worked together to discuss potential ways to support narcotic counts, and a sign was developed that can be used to decrease the interruptions during narcotic counts.



This staff-led improvement initiative involved both training and initiated the development of signage, better equipping staff and a promoting patient safety.

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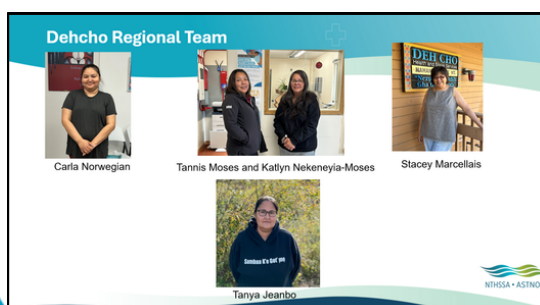
## Week 49 of 52 (Week of June 1, 2026): Training in the Dehcho

**Change Driver:** As part of ongoing efforts to enhance health service delivery in small communities across the Dehcho region, the Clinical Education Team has played a lead role in strengthening local workforce capacity through a coordinated and structured educational approach for Community Health Workers (CHWs) throughout the Northwest Territories. This work has focused on the design, development, and delivery of comprehensive training opportunities that are responsive to community needs and aligned with territorial priorities.

**Link to System Vision:** This links to 'Best Care' through continuous quality improvement.

**Improvement Initiative:** This initiative is team-driven, and many of the identified training sessions have been motivated by staff. So far sessions have included, but are not limited to: introduction to virtual health technologies such as virtual stethoscopes and otoscopes to support remote clinical assessments; recognition and response to suspected opioid overdose, training in the collection and documentation of point-of-care testing; First Aid and Heartsaver, CPR/AED certification, emergency response simulation; family violence and suicide awareness education; and privacy and confidentiality training and much more.

Through this work, the Clinical Education team continues to contribute to a more skilled, confident, and responsive CHW workforce further equipped to deliver safe, effective, and culturally grounded care within their home communities.



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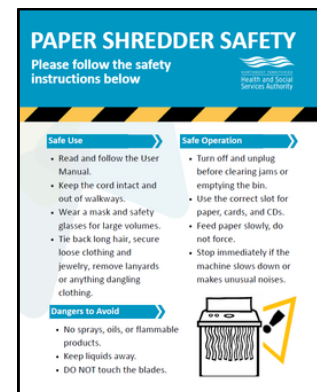
## Week 50 of 52 (Week of June 8, 2026): Shredder Safety, Sahtu

**Change Driver:** While completing routine shredding tasks, staff in the Sahtu noticed a potential safety concern. Long items such as hair, lanyards, or name tags could become caught in the shredder if safe practices were not followed.

**Link to System Vision:** This links to 'Best Care', by ensuring continuous quality improvement for staff, staff safety, and workflows.

**Improvement Initiative:** A small act can make a big difference, and this is a great example of how staff-led improvements contribute to a safer workplace.

After noticing the potential hazards that could arise when shredding with other items stored nearby, a staff member in the Sahtu suggested installing a safety poster. The reminder now helps reinforce safe shredding practices and supports the wellbeing of the entire team.



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## Week 51 of 52 (Week of June 15, 2026): Financial Log Sheet

**Change Driver:** Staff identified the need for a standardized process to document assistance provided to long-term care (LTC) residents accessing personal funds. To address this, management and staff collaborated to develop a standardized Resident Financial Assistance Log Sheet to support consistent documentation and safeguards for resident-directed financial transactions.

**Link to System Vision:** This supports 'Best Health' by Improving availability and quality of services for vulnerable populations.

**Improvement Initiative:** LTC staff and management collaborated to develop and implement a Resident Financial Assistance Log for residents who require staff assistance with financial transactions due to mobility or physical limitations. The process requires two staff members, one to assist and one to witness, to document each resident-directed transaction.

This staff-led, standardized approach, implemented earlier this year, has strengthened accountability, transparency, and documentation while helping to protect both residents and staff.



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## Week 52 of 52 (Week of June 22, 2026): Improving Access for French-Speaking Clients

**Change Driver:** Staff in Yellowknife identified barriers to accessing French-language primary care services and recognized opportunities to improve the management and routing of French-language calls within the clinic.

**Link to System Vision:** This links to 'Best Care' by improving the experience of French-speaking clients accessing primary care services.

**Improvement Initiative:** By working together across teams and bringing their unique expertise to the table, the French Services and Yellowknife Primary Care teams identified practical solutions to improve access for French-speaking clients by streamlining the reception and call-handling process. Through enhanced training, process reviews, and operational improvements, these teams are working together to improve responsiveness and equitable access to care for clients.

This initiative highlights the value of staff-led problem-solving and cross-team collaboration in identifying barriers and implementing improvements. It also demonstrates how small, local improvements can be adapted and applied across regions to strengthen services throughout the territory.

