

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

DATE: 2013 June 20

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## **IMPLEMENTING THE SHARED SERVICES REVIEW RECOMMENDATIONS**

### ***Recommendation***

*It is recommended that Report No. 089-13 re Implementing the Shared Services Review Recommendations – Update #1 be received for information.*

### **Key Points**

- Staff have begun assessing the PricewaterhouseCoopers (PwC) report recommendations and will report on progress at the September Board of Health meeting.
- Engagement with PwC on Phase III has begun. The first component of this is identifying for further analysis those recommendations which will be likely to represent the highest value for money, such as revising the MLHU budget process.

### **Background**

PricewaterhouseCoopers (PwC) presented the “Efficiency and Shared Services Review, Interim Report for Phases I and II” (see [Appendix B](#) of [Report No. 063-13](#)), at the May 9 Board of Health meeting. This report completed the initial phases of the review of Health Unit administrative functions, and identified eight recommendations across four areas to improve the efficiency of the Health Unit’s administrative functions (see Appendix A). At the May 16 Board of Health meeting, the Board passed the following resolution:

1. *That Health Unit staff meet with PricewaterhouseCoopers (PwC) to discuss the next steps and report back to the Board of Health in September; and further*
2. *That the Board of Health supports staff identifying opportunities to move forward, and beginning implementation of the PricewaterhouseCoopers recommendations in the interim, including using PwC as consultants where appropriate.*

### **Addressing the Recommendations**

The implementation process will involve identifying actionable items within the PwC recommendations and categorizing them as ready for implementation, requiring significant further analysis, and/or requiring further direction from the Board of Health. Priority will be given to items which are likely to offer greater value for money.

For those items that are ready for implementation, staff will begin work immediately. This will involve assigning a lead, developing an action plan including timelines, staff and other resources required, and measurable objectives. Items requiring further analysis and/or input from the governance level will be examined over the coming months. The report in September will update the Board on progress across all areas and seek further input on next steps.

### **PwC Phase III**

Staff will prioritize which activities would most benefit from PwC involvement. PwC will play a key role in determining which activities offer the highest value for money and opportunity for revenue-generation/cost-savings. It is anticipated that PwC could be particularly valuable supporting MLHU with recommendations such as 2a: “Integrate and align service area planning and budgeting activities to mitigate against risk of unplanned expenditures and to support optimal allocation of resources to key initiatives” (p. 18). It is anticipated that funds currently allocated for the PwC review will be exhausted by September.

This report was prepared by Mr. Ross Graham, Manager, Special Projects, and Dr. Chris Mackie, Medical Officer of Health.

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