



# Office of the Auditor General

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## Auditor General's Statement to the Media

Release of December 2014 Report to the Nova Scotia House of Assembly  
12/3/2014

**Office of the Auditor General of Nova Scotia**  
**Auditor General's Statement to the Media, December 3, 2014**  
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Good morning ladies and gentlemen. Thank you for coming today and for your interest in our work.

Late yesterday, I tabled my December 2014 Report with the Speaker of the House of Assembly, for distribution to the Members of the House this morning. The report provides the results of three performance audits completed by my Office in the latter half of this year.

This is my first report as Auditor General of Nova Scotia. I want to thank the staff in my Office for their professionalism and their dedication to the work they do. They identify issues with important public programs, and recommend solutions, because they are committed to better government for Nova Scotia. Better government means more economical, more efficient, and more effective government.

I also want to thank management and staff in the entities we audited, including government departments, school boards and health authorities. Their cooperation is essential to our work and is paramount to getting the necessary changes made.

The report I am releasing notes significant concerns with the failure of the Department of Health and Wellness and health authorities to meet national surgery wait time benchmarks for areas like hip and knee replacement; how the Tri-County Regional School Board is not addressing poor student performance in literacy and numeracy; and poor security over the computer controls in the Department of Community Services' integrated case management system.

Our audit of surgical wait times and operating room utilization found that Nova Scotia is far behind national wait time benchmarks for surgeries like hip and knee replacements. In 2013, Nova Scotians needing a hip replacement waited approximately 521 days; those needing knee replacements waited roughly 615 days. This is in comparison to a national standard of 180 days. It is also worth noting that the other three Atlantic Provinces are all closer to meeting the national benchmark of 180 days. In Nova Scotia, annual demand outpaces completed surgeries. The Department and the health authorities need an overall plan, including short-term targets, to move this Province's health system towards meeting national benchmarks.

Nova Scotia's wait time reporting system is reasonably accurate in that the wait times you see are reliable. However, over the past four years, roughly forty percent of booking information from surgeons' offices has been submitted late.

We visited Annapolis Valley Health, Capital Health, and the IWK Health Centre. These entities have not established realistic wait time performance targets. For example, having a target of one year to complete surgeries which are currently taking twice that time. Given where Nova Scotia is, short term targets should be established to move the system towards the national benchmarks. There have been some efforts to manage wait times by considering the overall Provincial perspective, but progress has been slow. Health and Wellness needs to move these issues forward in a more timely manner.

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We found that the allocation of operating room time is not always based on patient priority and current lists. Rather, OR time is often allocated as it has been historically for a number of years. Additionally, we found opportunities for improvement in OR utilization at all entities we visited. In many instances, management does not know whether available operating room time is fully utilized. A common Provincial approach that identifies surgical services to be performed by location is needed to help make improvements.

Students at the Tri-County Regional School Board have some of the Province's worst results in literacy and numeracy testing. Only sixty percent of grade three students in reading, and only sixty-five percent of grade six math students, at Tri-County met expectations on provincial assessments in 2013-14. Yet our audit found that neither the governing Board, nor management, are fully meeting their responsibilities to oversee and monitor the delivery of educational services. Management is not taking action on poor student progress in key areas and there is a lack of regular monitoring of other subject areas.

Despite the poor results compared to the rest of Nova Scotia, we found Tri-County has not determined the reasons for these results. The governing Board has not identified its information needs so that it can fulfill its oversight responsibilities. The Board's annual business plan includes a goal to improve student performance, but no analysis has been completed to identify underlying issues which are contributing to poor results. The Board does not receive information to know whether schools are planning for improvement in these areas or making sufficient progress towards achieving goals.

Management at Tri-County is also not fulfilling its responsibilities. We found some schools did not develop annual school improvement plans, and those with plans did not always provide details of how goals were to be achieved. Management is also not regularly monitoring the performance of students in all subject areas to determine where changes might be needed.

At the Department of Community Services, our audit found improvements are needed to security over the Department's integrated case management system, or ICM. We identified security weaknesses which could allow unauthorized users from within the government network to access sensitive information in ICM. My staff were able to gain unauthorized access to files on half of the servers we reviewed. While Department management has addressed this issue, other security weaknesses remain.

Improvements are also needed to Community Services' processes to grant or make changes to user access. We found some users had greater access than was required for their job.

ICM users have been experiencing system outages. Efforts to find and correct the underlying issue have not been successful to date and the Department is still working to fix this. Community Services does not have processes to ensure timely resolution of IT issues and management rely on staff to inform them of recurring problems.

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We analyzed the data in ICM and found there are many instances of duplicate clients and trustees in the system. While we understand that it may be difficult to completely eliminate this issue, the Department should work to reduce duplicates.

I recognize that government officials who deliver services to Nova Scotians work in an environment of new and changing priorities and, increasing demands in a time of limited financial resources. However, this is all the more reason to make improvements and for government to take action to address these issues. While all 31 of our recommendations have been agreed to, that is only the starting point for government. Now government departments, health authorities and school boards must deliver on those commitments so as to make improvements to health care delivery, improve the education of Nova Scotian children, and ensure appropriate delivery of services to vulnerable citizens of Nova Scotia. In conclusion, given the importance of these matters, we will follow up on these recommendations to determine if government or any other entities responsible have taken the promised actions. My hope is that they will do so.

These are some highlights of the report. Now I would be happy to take your questions.