

# Business Plan

2025-26

Ministry of Health

*Saskatchewan!* 

# Statement from the Ministers



*The Honourable  
Jeremy Cockrill  
Minister of Health*



*The Honourable Lori Carr  
Minister of Mental Health and  
Addictions, Seniors and Rural  
and Remote Health*

We are pleased to present the Ministry of Health's 2025-26 Business Plan.

Delivery of high quality, safe, and responsive health care is a value shared across the province. To maintain good health, address unexpected health issues, or manage ailments that come as we age, Saskatchewan people expect to turn to a professional without encountering barriers to access.

That's why expanding access and replicating successful primary and preventative programs are key to ensuring more patients are connected to a primary care provider, whether physician or nurse practitioner. For example, our government is investing in team-based care expansion to five new sites following positive results from a pilot project in Swift Current that embraced new and effective practices resulting in improved patient outcomes.

As our ambitious Health Human Resources Action Plan is in its third year, we will strengthen and expand the workforce by adding more full-time nursing positions in rural and northern locations and establish more physician training seats right here at home.

Priorities supporting acute care will receive major investments this year. To mitigate in-patient hospital pressures, the Saskatoon City Hospital has launched plans to open more than 100 acute care beds. Surgical investments will fund more procedures this year to reduce patient waiting lists, expand innovative technologies, and enhance other services.

Since the Regina Urgent Care Centre (UCC) opening, thousands of patients seeking non-life-threatening but urgent care were seen, effectively reducing emergency room pressures in the city. Planning is now underway for additional UCCs in Moose Jaw, Prince Albert and North Battleford, as well as second UCCs in Regina and Saskatoon.

This year, we will take a significant stride forward by officially opening a dedicated Breast Health Centre in Regina offering a full range of medical services for women. The Saskatchewan Cancer Agency will continue delivering access to world-class care and additional funding towards oncology drugs, therapies, and treatments. Nearly 10,000 Saskatchewan seniors and young adults managing diabetes will be fully covered through an expanded glucose monitoring program to improve quality of life and ease financial impacts.

This year's budget will build on Saskatchewan's multi-year Mental Health and Addictions Action Plan to improve patient access to professionals and services and support a recovery-oriented system of care. New capital funding will expand Complex Needs Emergency Shelters to new communities after success experienced by the 15-bed pilot facilities in Regina and Saskatoon.

Saskatchewan residents will continue seeing steady, significant progress on major infrastructure projects, such as hospital builds in Prince Albert and Weyburn, and long-term care facilities in Grenfell and La Ronge.

We look forward to working with our health system partners to advance our shared commitments to support better access and improved patient care.

# 2025-26 Budget Highlights

<p><b>1</b></p>	<p>The 2025-26 budget investment for the Ministry of Health is a record of \$8.07B, an increase of \$484.6M or 6.4 per cent. Saskatchewan Health Authority will see an increase of \$261.1M or 5.6 per cent, for a total budget of \$4.94B. The Saskatchewan Cancer Agency will receive a \$30.4M increase or 12.2 per cent for a total of \$279.3M.</p>
<p><b>2</b></p>	<p>This year’s budget will invest \$88.1M to improve access to acute health care services. The Saskatoon City Hospital will address capacity pressures and open more than 100 acute care beds. Significant surgical investments to support continued reduction in patient wait times with the overall goal to perform 450,000 procedures over the next four years, and diagnostic imaging investments will help to ramp up volumes and reduce waitlists.</p>
<p><b>3</b></p>	<p>The 2025-26 budget will ensure better patient access to team-based primary care settings to meet the health care needs of Saskatchewan people with investments in:</p> <ul style="list-style-type: none"> <li>• the development of new Patient Medical Home sites after a successful pilot in Swift Current demonstrated better access to primary care for patients;</li> <li>• full coverage to nearly 10,000 Saskatchewan patients managing diabetes aged 25-and-under and seniors aged 65-plus; and</li> <li>• enhanced immunization coverage for Human Papillomavirus (HPV) immunization for males and the Shingles vaccine for transplant recipients.</li> </ul>
<p><b>4</b></p>	<p>Saskatchewan’s Health Human Resources (HHR) Action Plan will continue adding more physician training seats at the College of Medicine and stabilizing rural and northern staffing in high priority professions including registered nurses.</p>
<p><b>5</b></p>	<p>Mental Health and Addictions will receive increased funding to continue building on strategic investments and successful programming within the multi-year Mental Health and Addictions Action Plan to improve patient access to professionals and services. The Action Plan supports a recovery-oriented system of care and enhances program supports for individuals with complex care needs.</p>
<p><b>6</b></p>	<p>A record Health infrastructure budget of \$656.9M reflects significant investments for highly anticipated projects including new hospital builds in Prince Albert and Weyburn, and long-term care homes in Grenfell and La Ronge.</p>

# Government Vision and Goals

## Saskatchewan's Vision

“...to be the best place in Canada – to live, to work, to start a business, to get an education, to raise a family and to build a life.”

>> Government Goals

A Strong Economy

Strong Communities

Strong Families

Saskatchewan's vision and three goals provide the strategic direction for organizations to align their programs and services to build a strong Saskatchewan.

All organizations will report on progress in their 2025-26 annual reports.

## Ministry of Health Overview

### Mandate

Through leadership and partnership, the Ministry of Health is dedicated to achieving a responsive, integrated, and efficient health system that puts the patient first and enables people to achieve their best possible health by promoting healthy choices and responsible self-care.



## Goal: Better Access to Care

Build a responsive health care system so Saskatchewan people have access to the care they need, in the way that best supports them, within appropriate timeframes for their health and wellbeing.

**Strategy:** *The approach we will take to achieve our goal*

### Expand Access to Primary and Preventative Care

Residents enjoy prompt access to a primary care team and receive services from the most appropriate provider working to the top of their scope. There is continuity of care, providers within the team can share information relevant to the patient's care, patients are involved in decisions related to their care, and care is provided in culturally sensitive and appropriate ways. The health system works to prevent and manage diseases to support good health for Saskatchewan residents.

#### **Key Actions:** *What we will do to get there*

- Work towards the goal that everyone in Saskatchewan has access to a primary health provider – a doctor or a nurse practitioner – by the end of 2028.
- Improve access to team-based primary care:
  - Continue to work with system partners to implement Patient Medical Homes and primary health care teams across the province.
  - Continue improving access to nurse practitioners through primary care teams and independent nurse practitioner clinics.
- Enhance programs dedicated to Sexually Transmitted and Blood Borne Infections (STBBI) to address provincial infection rates and support Saskatchewan's Multi-Year Action Plan.
- Improve access to cancer screening by:
  - Continuing the phased implementation to lower breast cancer screening eligibility to age 43 by March 31, 2026, towards the goal of screening all women over the age of 40.
  - Launching the Lung Cancer Screening program pilot in two initial sites.
  - Progressing the transition to HPV at-home self-screening for cervical cancer, targeted for 2026-27.

**Strategy:** *The approach we will take to achieve our goal*

### Increase Access to Acute Care and Emergency Services

Emergency and acute care services are available to patients within appropriate wait times.

#### **Key Actions:** *What we will do to get there*

- Increase surgical capacity through efficiencies and operating room optimization:
  - Standardize pre-surgical patient education and assessment at all surgical sites across the province.
  - Implement centralized scheduling for all surgeries.
- Streamline care to improve surgical wait times and improve appropriateness:
  - Implement enhancements to existing surgical pathways, such as hip, knee and spine.
  - Improve prioritization, wait list management and ensure appropriate case mix of surgeries so the most acute patients get surgery soonest.
- Improve patient access to medical imaging and diagnostics to achieve wait time targets.

- Reduce emergency department wait times and improve patient flow, particularly in our largest urban facilities.
- Increase the number of paramedics in the health system to help improve response times and stabilize services across the province.
- Expand HealthLine 811's Virtual ER Physician Program to support a minimum of 25 small-to-medium rural Emergency Department locations.
- Advance plans for additional urgent care centres in the province for the communities of Prince Albert, North Battleford, Moose Jaw, Saskatoon and Regina.
- Open additional acute care beds at Saskatoon City Hospital.

**Strategy:** *The approach we will take to achieve our goal*

### **Increase Access to Mental Health and Addictions Recovery Supports**

Continue to support recommendations in the Mental Health and Addictions Action Plan, so that Saskatchewan residents have improved access to services from the most appropriate mental health and addictions professional at the right location when needed.

**Key Actions:** *What we will do to get there*

- Continue work towards adding 500 addictions treatment spaces – double the amount now available in the province.
- Increase Mental Health and Addictions health human resources capacity including community and other providers.
- Implement a pilot for a new Virtual Access to Addictions Medicine Program and adding supports for the Provincial Opioid Agonist Therapy Program.
- Initiate a new model for central intake and navigation to addictions recovery services.
- Add Complex Needs Emergency Shelter spaces in new locations.

**Strategy:** *The approach we will take to achieve our goal*

### **Enhance Continuing Care**

Individuals are supported to remain at home and in their communities as long as possible. When community-based supports can no longer meet their needs, high-quality and safe options are available.

**Key Actions:** *What we will do to get there*

- Expand Care for Children with Complex Medical Needs:
  - Expand in-home supports to keep families together and enhance facility-based care for children with complex medical needs.
- Enhance long-term care and personal care home oversight to monitor safety, quality, and improved support for residents:
  - Increase the number of inspectors for long-term care and personal care homes to allow for more frequent inspections and audits.
- Expand the number of long-term care beds across the province to meet growing needs.

**Strategy:** *The approach we will take to achieve our goal*

### **Improve the Health of Indigenous and Vulnerable Populations**

Through partnership with Indigenous stakeholders, the health system delivers care in a respectful and culturally appropriate manner to Indigenous Peoples that is safe, inclusive and improves quality of care and health outcomes. The health system is also responsive to the unique care needs of vulnerable populations to support equitable access to appropriate care and improvement of health outcomes.

**Key Actions:** *What we will do to get there*

- Expand cultural responsiveness training beyond onboarding to all employees.
- Increase the number of Indigenous people trained in health care occupations in the province.
- Applicable health organizations release public accessibility plans.

**Performance Measures:** *What success looks like.*

#### **Expand Access to Primary and Preventative Care**

- By March 31, 2026, 85.5% of citizens report having access to a regular health care provider.
- By March 31, 2026, lower the age of breast cancer screening eligibility to 43 years.

#### **Increase Access to Acute Care and Emergency Services**

- Surgical – by March 31, 2026:
  - No patients are waiting longer than 12 months for surgery.
  - 90% of surgeries are performed or offered within 6 months.
- MRI and CT – by March 31, 2026:
  - Increase MRI and CT volumes to achieve the 60-day wait time target by 2027-28.
  - Implement central intake for MRI and CT referrals.
- By March 31, 2026, additional acute care beds are operational at Saskatoon City Hospital.

#### **Increase Access to Mental Health and Addictions Recovery Supports**

- By March 31, 2026, there will be:
  - 400 operational addictions treatment spaces added toward the target of 500 spaces by March 31, 2028.
  - A reduction in wait times for community mental health and substance use services to an average of 11 days.
  - Virtual Access to Addictions Medicine pilot will be operational by August 31, 2025.
  - Central intake and navigation model has been initiated.
  - Improved website for public navigation for access to addictions treatment spaces.
  - At least one new Complex Needs Emergency Shelter site is operational.

#### **Enhance Continuing Care**

- By March 31, 2026, there will be:
  - A 30% increase in the number of inspections of long-term care and personal care homes.
  - An increase in long-term care beds by over 140 spaces to meet provincial demand.

#### **Improve the Health of Indigenous and Vulnerable Populations**

- By March 31, 2026, there will be an increase in the percentage of health sector staff who have received cultural responsiveness training.
- By March 31, 2026, accessibility plans will be released by applicable Saskatchewan health organizations.

## Goal: Improved Patient Care

Investments in our healthcare professionals, infrastructure, and technology improve system performance and enhance quality and the patient experience.

**Strategy:** *The approach we will take to achieve our goal.*

### **Grow and Support Health Human Resources**

Have the right healthcare professionals to provide effective patient care across the province.

**Key Actions:** *What we will do to get there.*

- **Recruit**
  - Promote employment opportunities to new graduates.
  - Healthcare career promotion to recruit Indigenous employees into high-demand occupations.
  - Identify and attend key recruitment/career fair events around the country for hard-to-recruit positions.
- **Train**
  - Increase the number of Final Clinical Placement Bursaries available to students for hard-to-recruit occupations and in locations of need.
  - Continue adding more physician training seats at the College of Medicine.
- **Incentivize**
  - Continue incentives for rural and remote locations in areas with service disruptions or chronic vacancies.
  - Continue incentives for specialist physicians in hard to recruit areas experiencing shortages.
- **Retain**
  - Support 65 additional new and enhanced full-time positions in rural and remote communities.
  - Establish a patient-focused nursing team task force that includes unions representing all nursing professionals.

**Strategy:** *The approach we will take to achieve our goal*

### **Better Quality, Results, and Patient Experience**

The health system focusses on ensuring Saskatchewan residents receive high quality care leading to improved health outcomes and positive patient experiences.

**Key Actions:** *What we will do to get there*

- Development of a provincial quality and patient safety plan to support improvement of healthcare programs and services.
- Measure the impact of health services and identify improvements through patient reported experience and patient reported outcome surveys distributed to select populations.

**Strategy:** *The approach we will take to achieve our goal*

**Leverage Infrastructure, Technology and Innovation to Support Better Patient Care**

The system uses its resources to drive success in priority areas through advancements in facilities, technology and innovative tools and practices.

**Key Actions:** *What we will do to get there*

- Continue to deliver infrastructure projects that support high-quality care environments:
  - Prince Albert Victoria Hospital Acute Care Tower: continue construction;
  - Regina Specialized Beds facility: begin construction;
  - Weyburn General Hospital: continue construction;
  - La Ronge Long-term Care (LTC) facility: continue construction;
  - Grenfell LTC facility: begin construction;
  - Saskatoon Urgent Care Centre (UCC): continue development in partnership with Ahtahkahoop Cree Developments.
- Continue to advance ongoing projects, including:
  - St. Paul's Hospital Front Entrance, Royal University Hospital Intensive Care Unit Expansion, Saskatchewan Cancer Agency Saskatoon Patient Lodge, Yorkton Regional Health Centre, Rosthern Hospital, Esterhazy Integrated Facility, and long-term care projects in several communities, including Regina, the Battlefords, Watson, and Estevan.
- Continue investment in building improvements, equipment upgrades, and new systems and technologies to improve health facilities and services across Saskatchewan.

**Performance Measures:** *What success looks like*

**Grow and Support Health Human Resources**

- Recruit
  - By March 31, 2026, at least 90% of recent nursing graduates will be hired and working in the Saskatchewan health care system.
- Train
  - By March 31, 2026, 300 Final Clinical Bursaries will have been provided to nursing and allied profession students in rural and northern communities.
  - By March 31, 2026, increase to 150 physician training seats at the College of Medicine.
- Incentivize
  - By March 31, 2026, 50% of eligible Inter-provincial Agreement students return to Saskatchewan.
- Retain
  - By March 31, 2026, launch the patient-focused nursing team task force.

**Better Quality, Results, and Patient Experience**

- By March 31, 2026, develop a provincial quality and patient safety plan to support improvement in patient care.
- By March 31, 2026, patient reported experience measures will be implemented for select sites. Patient reported outcome measures will be implemented in the orthopedic service line for elective hip and knee arthroplasty.

**Leverage Infrastructure, Technology and Innovation to Support Better Patient Care**

- Major Capital Projects – by March 31, 2026:
  - The St. Paul’s Hospital Front Entrance in Saskatoon is operational.
  - 64 new standard beds in Regina are operational.
- Facility Maintenance – by March 31, 2026:
  - Complete urgent and high priority health facility maintenance projects to maintain operational continuity and safety.

# 2025-26 Improvement and Innovation Highlights

<b>1</b>	<b>Provincial Endoscopy Software</b> <p>The health care system currently manages endoscopy reports and images across multiple platforms.</p> <p>In 2025-26, the Ministry will invest \$2.5M to implement one standard provincial endoscopy software system at all endoscopy sites, to support clinicians with procedure documentation, workflow management, reporting, and image and video capture management.</p> <p>The software will allow clinicians to have central access to reports, images and videos, which will greatly improve the safety and quality of care that patients receive and significantly increase workflow efficiencies. Having one provincial endoscopy software system will also open the door for establishing provincial standards for documentation and reporting on outcomes and quality indicators.</p>
<b>2</b>	<b>Medical Imaging Central Intake and Referral System</b> <p>The Ministry of Health recognizes opportunities to enhance coordination of medical imaging referrals across health care networks. A more streamlined approach will improve scheduling timelines, administrative workflows, and communication between providers and facilities.</p> <p>In 2025-26, the Ministry will invest \$2.959 M to support the implementation of a digital central intake and referral system which will provide a referral management and intake solution for medical imaging.</p> <p>This system will streamline the referral intake process, enhance patient care, reduce patient wait times, improve communication across health care networks and simplify administrative processes.</p>
<b>3</b>	<b>Limited Access Exception Drug Status (EDS) Application</b> <p>Patients being released from hospital may be prescribed medication that requires certain medical criteria to be met for EDS approval. Saskatchewan Health Authority (SHA) pharmacists ensure a request for EDS is submitted to the Drug Plan prior to a patient’s discharge. EDS telephone wait times and lengthy turnaround times impact patient discharge planning and result in financial impacts to the patient if coverage is not in place.</p> <p>In 2025-26, the Ministry will implement and expand the real-time, online web-based application in the SHA, following successful pilots that occurred in 2024-25. The application allows SHA pharmacists to submit an electronic EDS approval directly to the Drug Plan.</p> <p>This innovative solution ensures a seamless discharge for patients requiring EDS approval for a specific list of drugs and criteria, preventing any financial burden if coverage is not in place.</p>

## 4

### **Access to Strep Throat and Ear Infection Services in Saskatchewan Pharmacies**

Expanding pharmacists' scope of practice through regulatory bylaw amendments allows trained pharmacists to provide testing (ability to perform Point of Care testing) and treatment for sore throat (strep throat) and ear infections. In 2025-26, the benefits of the pilot program will be evaluated and expanded accordingly across Saskatchewan pharmacies.

The innovative approach will provide timely access to patients requiring strep throat and ear infections assessment and treatment.

## 5

### **Implementation of the National Strategy for Drugs for Rare Diseases**

There is an opportunity to improve access to drugs for rare diseases to improve patient outcomes, enhance system sustainability, leverage evidence, and invest in innovation.

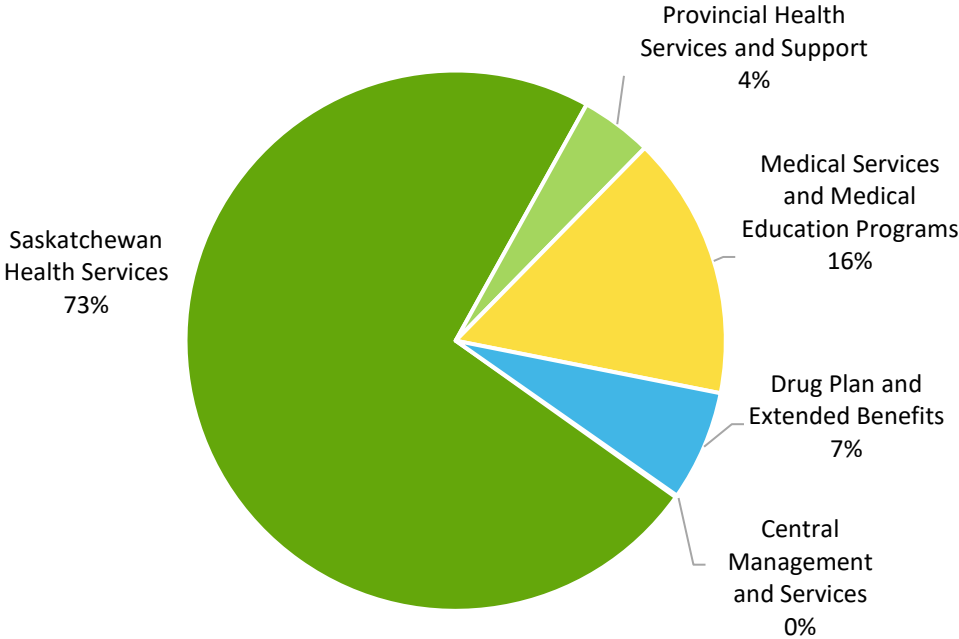
The Saskatchewan Drug Plan and Cancer Agency have listed Poteligeo for Sézary syndrome (a type of skin cancer), Oxlumio for high oxalate levels leading to kidney stones, and Epkinly for large B-cell lymphoma (a blood cancer). Saskatchewan provides 100% coverage for drugs for rare diseases. Saskatchewan continues to monitor drugs for rare diseases as they progress through national health technology assessments, provincial review processes, and pan-Canadian pricing negotiations.

This initiative improves national consistency with access to drugs for rare diseases, which supports a real-world evidence framework and advancements in screening and diagnostics.

# Financial Summary

<b>Health 2025-26 Estimates</b>	<b>(in thousands of dollars)</b>
Central Management and Services	9,736
Saskatchewan Health Services	5,915,828
Provincial Health Services and Support	346,358
Medical Services and Medical Education Programs	1,274,269
Drug Plan and Extended Benefits	533,526
<b>Total Appropriation</b>	<b>8,079,717</b>
Less: Capital Asset Acquisitions	7,077
Plus: Non-Appropriated Expense Adjustment	1,989
<b>Total Expense</b>	<b>8,074,629</b>

Ministry of Health Budget



**Links to More Information**

- [Ministry of Health](#)
- [Government of Saskatchewan Budget, Planning and Reporting](#)