Accountability Statement

This Business Plan for the three years commencing April 1, 1998 was prepared under my direction in accordance with the Government Accountability Act and the government's accounting policies. All of the government's policy decisions as at January 20, 1998 with material economic or fiscal implications of which I am aware have been considered in preparing the Business Plan.

The Ministry's priorities outlined in the Business Plan were developed in the context of the government's business and fiscal plans. I am committed to achieving the planned results laid out in this Business Plan.

Halvar C. Jonson
Minister of Health
January 26, 1998

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You can find this document on Alberta Health's Internet web site - http://www.health.gov.ab.ca
Vision

Our vision is **healthy Albertans in a healthy Alberta**. This vision statement relates directly to one of the Core Businesses of the Government of Alberta Business Plan, *PEOPLE*, a component of which is: “A healthy society and accessible health care”.

The vision encompasses three characteristics:

- Albertans who are sick have access to quality health care services.
- Individual health and the health of all Albertans is actively promoted and protected.
- Healthy social, economic and physical environments exist and contribute to improved health.

The Alberta health system is a publicly administered system with most services (acute care, home care, residential long term care, public health, mental health and community health programs) delivered through seventeen regional health authorities and two provincial health boards — the Alberta Cancer Board and the Provincial Mental Health Advisory Board. Funding for medical services and allied health services is provided on a fee-for-service basis through the Alberta Health Care Insurance Plan operated by the Ministry of Health. The Ministry funds a provincial air ambulance program and the Alberta Aids to Daily Living Program. It also contracts with Alberta Blue Cross to provide a drug plan and other benefits for seniors and subsidized premiums for individuals who do not have access to group drug plans.

Key Characteristics of the Health System of the Future

System characteristics

- Alberta will continue to be part of a publicly administered health system that guarantees universal access to medically necessary hospital and medical services without user fees or extra billing.
- The Alberta health system will continue to provide benefits in excess of *Canada Health Act* requirements.

Accountability

- A common base of health services that meet provincial standards will be available in all regions of the province. Services will be provided, when appropriate, in homes and communities, not just in hospitals.
- All components of the health system will have clear responsibilities and be accountable for the results they achieve.
- Standards will be in place province-wide and Albertans will receive regular information on whether those standards are being met.

Health Authorities

- Regional health authorities will plan and deliver most health services based on evidence of needs, with input from residents and community health councils and directions from the Minister of Health.
- Health services will be integrated with better linkages between hospital care, home care, community programs, mental health programs, long term care, rehabilitation services and public health programs.
- Regional health authorities will work with other organizations in their communities to address social, economic and environmental issues which affect health.
Funding
- Funding will be provided in a way that is predictable, equitable and affordable.

Health Workforce
- Leadership will be provided to make the best use of the collective skills and expertise of the health workforce.
- New options for paying health providers will be tested and put in place.
- The supply of health professionals, especially in rural areas, will continue to be addressed to meet communities’ needs.
- New technology in communications will bring more specialized skills to rural communities through Telehealth programs.
- Incremental introduction of better approaches to health care will occur as evidence demonstrates their outcomes.

Better Information for Better Health
- There will be regular and understandable information available to Albertans about the health of Albertans and the performance of the health system.
- Better information and an ongoing evaluation of programs and services will lead to ongoing improvements in health.
- Research, technology and telecommunications will be used to improve information and develop new prevention programs and treatments.

Promoting and Protecting Health
- There will be an emphasis on monitoring health status, promoting and protecting health, controlling disease and preventing injury.

Key Directions and Challenges

The Ministry of Health’s key directions address major challenges identified by stakeholders through consultations over the last year.

Direction 1: Ensure Albertans who are sick get the care they need
Challenges:
- Increasing public confidence in the health care system
- Addressing issues arising from the shift to community based services
- Addressing concerns of the health workforce

Direction 2: Prepare for the future
Challenges:
- Creating a predictable and equitable funding system
- Preparing the system for the impact of an aging population
- Ensuring ongoing innovation and integration of new knowledge

Direction 3: Improve accountability and results
Challenges:
- Determining and communicating clear expectations
- Ensuring community input into decision making
- Aligning physician incentives with patient and health system needs
- Having and using better information

Direction 4: Focus on long term health gains
Challenges:
- Addressing major economic, social and environmental factors that influence health
- Addressing major health problems that are preventable
The Ministry of Health's Mission and Core Businesses

One of the goals of the Alberta government is that “Albertans will be healthy”. The mission of the Ministry of Health is to: “improve the health of Albertans and the quality of the health system”. We work to achieve that mission by concentrating on four core businesses:

Core Business 1: Set Direction, Policy and Provincial Standards
Core Business 2: Allocate Resources
Core Business 3: Ensure Delivery of Quality Health Services
Core Business 4: Measure and Report on Performance Across the Health System

Goals and Strategies

The goals and strategies for each of the four core businesses are outlined in the tables that follow.

Core Business 1: Set Direction, Policies and Provincial Standards

Albertans expect high standards for Alberta’s health system. Through its overall leadership role, the Ministry of Health is responsible for developing policy and standards that contribute to improving health and health care for Albertans. Strategic direction is provided to health authorities by setting requirements for health authority business plans.

<table>
<thead>
<tr>
<th>Goals</th>
<th>Strategies</th>
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<tbody>
<tr>
<td>1.1 Clear directions, policies and measurable expectations are in place for all components of the health system.</td>
<td>1.1.1 Finalize an accountability framework which clearly identifies responsibilities and mechanisms for reporting results in the health system</td>
</tr>
<tr>
<td><strong>What Albertans can Expect</strong></td>
<td>1.1.2 Develop health and health system expectations and measures, including standards and targets</td>
</tr>
<tr>
<td>◆ Access to quality health services</td>
<td>1.1.3 Continue review of long term care</td>
</tr>
<tr>
<td>◆ Consistent high standards for health services</td>
<td>1.1.4 Develop strategies for necessary supports, including drugs and medical/surgical supplies, for people discharged earlier from hospital</td>
</tr>
<tr>
<td>◆ A clear understanding of who is responsible and for what</td>
<td>1.1.5 Continue to develop Health Information Protection Act</td>
</tr>
<tr>
<td>1.2 Provincial strategies are in place to improve the health and well-being of Albertans.</td>
<td>1.1.6 Work with Alberta Labour to implement the new Health Professions Act</td>
</tr>
<tr>
<td><strong>What Albertans can Expect</strong></td>
<td>1.1.7 Study and evaluate different approaches to primary health care</td>
</tr>
<tr>
<td>◆ Actions to protect and promote good health</td>
<td>1.2.1 Take a leadership role with other ministries and organizations to improve the health of Albertans, especially children, seniors and populations with high health needs</td>
</tr>
<tr>
<td>◆ Support for the Alberta Centre for Injury Control and Research</td>
<td>1.2.2 Participate in government-wide assessment of the impact of aging.</td>
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</tbody>
</table>
Core Business 2: Allocate Resources

A key role of the Ministry of Health is to determine the scope of financial, capital and human resources required to support the health system and address Albertans' health needs on an ongoing and sustainable basis. The Ministry of Health also is responsible for setting priorities and allocating resources in a manner that is fair, equitable and reflects health needs in different parts of the province.

<table>
<thead>
<tr>
<th>Goals</th>
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<tbody>
<tr>
<td>2.1 The health system has a stable base of adequate, predictable needs-based funding that is allocated fairly and promotes efficiency and effectiveness.</td>
<td>2.1.1 Develop a process for forecasting health needs and economic trends as a means of projecting future resource requirements</td>
</tr>
<tr>
<td><strong>What Albertans can Expect</strong></td>
<td>2.1.2 Further develop the province-wide services funding system for highly specialized and complex services</td>
</tr>
<tr>
<td>◆ Better decisions about funding programs and preparing for future needs</td>
<td>2.1.3 Refine the population-based funding formula for health authorities</td>
</tr>
<tr>
<td>◆ Consistent and predictable funding for health services</td>
<td>2.1.4 Develop and implement methodologies for consistent costing of regional health authority services</td>
</tr>
<tr>
<td>◆ Ongoing support for complex, highly specialized services</td>
<td>2.1.5 Work with the Alberta Medical Association to implement a new master agreement which promotes effective care and provides for predictable and equitable funding</td>
</tr>
<tr>
<td>◆ Pilot projects on different ways of delivering and paying for medical services</td>
<td>2.1.6 Refine system for funding academic medicine</td>
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<td>2.1.7 Review existing drug benefit programs</td>
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<td>2.1.8 Develop options for paying health professionals that encourage ongoing improvements in health and the performance of the health system</td>
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<tr>
<td>2.2 The health system makes optimal use of the workforce.</td>
<td>2.2.1 Work with health authorities, health professions and academic institutions to develop plans for appropriate supply, distribution and management of the health workforce</td>
</tr>
<tr>
<td><strong>What Albertans can Expect</strong></td>
<td>2.2.2 Focus Alberta Health’s resources on the department’s core businesses and strategic directions</td>
</tr>
<tr>
<td>◆ Appropriate supply and distribution of a well-trained workforce</td>
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Core Business 3: Ensure Delivery of Quality Health Services

The responsibility for service delivery rests primarily with health authorities and individual practitioners. The Ministry works with health authorities to ensure appropriate investment and management of provincial resources through review and approval of business plans and capital plans. Through systematic monitoring and action, it ensures that services meet high standards, achieve positive health outcomes, and address the needs of Albertans. It registers Albertans for health care insurance and operates the payment system for fee-for-service practitioners and suppliers of equipment, ambulance and other services. It also addresses ongoing issues of concern raised by the public or stakeholder organizations.

<table>
<thead>
<tr>
<th>Goals</th>
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<tbody>
<tr>
<td>3.1 Health services are accessible, appropriate and well-managed to achieve the best value.</td>
<td>Work with health authorities and health providers to:</td>
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<td></td>
<td>3.1.1 Enhance supports to palliative care clients at home</td>
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<td></td>
<td>3.1.2 Enhance initiatives to attract and keep physicians in rural Alberta</td>
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<td>3.1.3 Establish simpler processes for Albertans to express concerns and appeal decisions</td>
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<td></td>
<td>3.1.4 Incorporate best practices in governance and management</td>
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<td>3.1.5 Enhance mental health services in communities</td>
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<td>3.1.6 Work with other jurisdictions and stakeholders to develop a new national blood agency</td>
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<td>3.1.7 Introduce health strategies to address priority health issues, including low birth weight babies, injuries, and cervical and breast cancer</td>
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<td>3.1.8 Assist in implementing Protection for Persons in Care Act</td>
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<td></td>
<td>3.1.9 Develop and implement a methodology for management of capital infrastructure</td>
</tr>
<tr>
<td>3.2 Albertans are well-informed and able to make decisions about their health and health services.</td>
<td>Work with health authorities and health providers to:</td>
</tr>
<tr>
<td></td>
<td>3.2.1 Implement, complete and evaluate health promotion projects</td>
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<tr>
<td></td>
<td>3.2.2 Ensure Albertans are aware of services available</td>
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<tr>
<td></td>
<td>3.2.3 Assist in implementing Personal Directives Act</td>
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<tr>
<td>3.3 Community members have opportunities to participate in improving the health system in their community.</td>
<td>Work with health authorities and health providers to:</td>
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<tr>
<td></td>
<td>3.3.1 Review the implementation and impact of community health needs assessments</td>
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<tr>
<td></td>
<td>3.3.2 Implement recommendations of Governance Report to improve public input and participation in decision-making</td>
</tr>
<tr>
<td>3.4 Ongoing innovation occurs in the health system.</td>
<td>Work with health authorities and health providers to:</td>
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<tr>
<td></td>
<td>3.4.1 Continue to encourage innovation in service delivery</td>
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<tr>
<td></td>
<td>3.4.2 Initiate Telehealth project and expand Telepsychiatry</td>
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</tbody>
</table>
Core Business 4: Measure and Report on Performance Across the Health System

The measurement of results requires development of measures, collection and analysis of information and reporting of results. Regular public reports are produced by the Ministry of Health and Health Authorities. Analysis of the information collected and sharing of that analysis across the system is important to ensure that continuous learning and improvement takes place.

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>4.1 Timely, comparable and comprehensive information is available for patient care, management and research</td>
<td>4.1.1 Design and proceed to implement <strong>alberta wellnet</strong>, a province-wide information network linking health providers, hospitals, pharmacies, clinics, health organizations and Alberta Health</td>
</tr>
<tr>
<td><strong>What Albertans can Expect</strong></td>
<td>4.1.2 Use technology to improve the Ministry of Health’s capacity to carry out its core businesses</td>
</tr>
<tr>
<td>◆ A province-wide health information network linking health providers, hospitals, pharmacies, clinics, health organizations and Alberta Health</td>
<td>4.1.3 Implement Ministry of Health Research Business Plan</td>
</tr>
<tr>
<td>◆ Pharmacy network as a basis for better patient care and management of pharmaceutical utilization and costs</td>
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</thead>
<tbody>
<tr>
<td>4.2 The performance of the health system and indicators of the health of Albertans are measured, evaluated and reported regularly to Albertans.</td>
<td>4.2.1 Define, collect, analyze and share information about trends in selected diseases, injuries, disabilities and utilization of the health system</td>
</tr>
<tr>
<td><strong>What Albertans can Expect</strong></td>
<td>4.2.2 Collect information related to performance measures and benchmarks</td>
</tr>
<tr>
<td>◆ Regular reports on the performance of Alberta’s health system and the health of Albertans</td>
<td>4.2.3 Provide comprehensive reports on the health of Albertans and the performance of the health system to support continuous improvement</td>
</tr>
<tr>
<td>◆ Ongoing evaluation of services and practices in the Alberta health system</td>
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</tbody>
</table>

Measuring Performance

Key Performance Measures

The key performance measures which follow were selected from a wider range of measures and indicators tracked by Alberta Health about the health system and the health of Albertans.

Health System Quality — Is the Health System Providing Quality Services to Albertans?

1. Albertans’ ratings of the quality of care they received
   Albertans’ views about the quality of care they received are an important measure of the overall quality of Alberta’s health system.
   **Target (1998):** 90% rate the care they received as excellent or good
   **Current (1997):** 86%

2. Albertans’ ratings of the effect of care on their health
   Albertans’ view about the effects of health care services on their health is an important measure of health service outcomes.
   **Target (1999):** 85% rating excellent or good
   **Current (1997):** 83%

3. Breast cancer screening rates
   Mammograms are recommended for women over the age of 50.
   **Target (1999):** 75% of women over 50 receive mammograms every two years
   **Current (1994-95):** 62%
4. **Percent change in expenditure on community and home services**
   
   Moving more programs and services to communities and to people’s own homes is an important direction for Alberta’s health system. By measuring the percent change in expenditure on these services, we can track whether community and home care programs and services are increasing as planned.
   
   **Target (1999):** increasing trend  
   **Current (1996-97):** 6.3%

5. **Trends in fee-for-service expenditures for doctors as a percentage of total spending on physicians’ services**
   
   This measure will track the extent to which alternative methods to fee-for-service are being used.
   
   **Target (2000-01):** increase percentage of expenditures through alternative approaches to fee-for-service  
   **Current (1996-97):** 1%

### Health Access — Are Services Available When People Need Them?

6. **Albertans’ ratings of access to health services**
   
   This measure reflects Albertans’ views about how easy or difficult it is to get the health services they need when they need them.
   
   **Target (1998):** 80% rate access as easy or very easy  
   **Current (1997):** 74%

7. **Albertans’ self-rated knowledge of the health system**
   
   Knowledge of which health services are available is an important factor in ensuring that Albertans can get access to appropriate care when they need it.
   
   **Target (1999):** 75% rating own knowledge excellent or good  
   **Current (1997):** 70%

8. **Percentage of Albertans reporting failure to receive needed care**
   
   Through public surveys, Albertans are asked, “Over the past twelve months, were you ever unable to obtain health care services when you needed them?”
   
   **Target (1998):** 3% reporting failure to receive needed care  
   **Current (1997):** 7%

9. **Percent of general practitioner services obtained within Albertans’ home region**
   
   This measure shows the extent to which Albertans obtain primary health services from a general practitioner in the region where they live.
   
   **Target (2000):** 95% for Capital and Calgary regions; 85% for all other regions  
   **Current (1995-96):** 95%; 81%

### Health Outcomes — How Healthy Are We?

10. **Life expectancy at birth (in years)**
    
    Life expectancy at birth is an internationally recognized indicator of the general health of the population. Among Canadian provinces, Alberta ranks third in life expectancy, behind Saskatchewan and British Columbia.
    
    **Target (2000):** 77 years for males and 83 years for females  
    **Current (1995):** 75.8 years for males; 81.5 years for females

11. **Percent of Albertans rating their own health “excellent” or “very good” by age group**
    
    This measure reports how Albertans describe their own health. It is a general indicator of the health of the population.
    
    **Target (1998):** 75% (ages 18 to 64) and 50% (age 65 and older)  
    **Current (1997):** 65% (ages 18 to 64); and 45% (age 65 and older)

12. **Percent of low birth weight newborn babies**
    
    Low birth weight is often associated with life long health problems. A low percentage of low birth weight newborns indicates good prenatal care provided by the health system and expectant mothers and their families. Overall, Alberta’s rate is poor compared with other provinces.
    
    **Target (1998):** maximum 5.5% of babies weighing under 2500 gm  
    **Current (1996):** 6.1%
13. **Provincial rate of injury deaths including suicide**

   This measure tracks the death rates for injuries and suicide. These are major causes of premature deaths in Alberta, particularly among younger Albertans. Alberta has high rates for these causes of death compared to other provinces.

   **Target (1999):**
   - injury rate: 45 per 100,000 population
   - suicide rate: 13 per 100,000 population

   **Current (1994):**
   - injury rate: 54
   - suicide rate: 16

14. **Rates for selected communicable diseases**

   Low incidence rates for these diseases measure our success in communicable disease control.

   **Targets (1999):**
   - E. Coli Colitis: 4.0 per 100,000 population
   - Pertussis: 18.0 per 100,000 population
   - Tuberculosis: 4.5 per 100,000 population

   **Current (1996):**
   - E. Coli Colitis: 5.8
   - Pertussis: 41.2
   - Tuberculosis: 5.1

15. **Childhood immunization coverage**

   This measure reports the percentage of two year olds who have been immunized to prevent several serious childhood diseases.

   **Target (1998):**
   - 95% of two year olds appropriately immunized

   **Current (1996):**
   - 89%

16. **Cervical cancer screening rates**

   The PAP test is an excellent screening test for pre-cancerous conditions. Higher use of the PAP test could help to eliminate cervical cancer deaths.

   **Target (1999):**
   - 90% of women have a PAP test every 3 years

   **Current (1994-95):**
   - 79%

17. **Number of deaths due to cervical cancer**

   Deaths from cervical cancer can potentially be eliminated through effective use of PAP tests every three years for all Alberta women over the age of 15.

   **Target (2000):**
   - 0 deaths

   **Current (1996):**
   - 37 deaths

18. **Percent of Albertans who do not smoke**

   Smoking is known to affect health. It is estimated that tobacco use contributes to the death of several thousand Albertans each year. This measure shows the proportion of Albertans making a choice which has a direct impact on their health.

   **Target (1998):**
   - 75% of Albertans age 12 and over do not smoke

   **Current (1994-95):**
   - 72%

**Key Indicators**

Key indicators are measures of important areas of health system activity which are critical to monitor, assess, and report on, but which do not have targets. Key indicators will be reported along with performance measures in the Ministry Annual Report.

1. **Volume and rates for cardiac surgery related to population**

   This indicator will show whether Alberta’s volumes and rates of cardiac surgery are high, low or about the same compared with other provinces and countries. This indicator will help us evaluate our cardiac surgery needs and the appropriateness of services provided in Alberta.

2. **Cardiac surgery waiting list**

   This indicator reports on waiting lists for cardiac surgery, comparing the number of persons waiting with the number of surgeries performed. This indicator will show whether referrals are exceeding system capacity.

3. **Utilization rates for selected surgeries and procedures**

   This indicator compares the rates for selected types of surgeries and procedures with rates in other provinces. The information will be used to identify potential areas of over-service and under-service.

4. **Acute care hospital separations per 1,000 population**

   This indicator will show the general level of acute care hospital utilization in Alberta.

5. **Short-term home care clients per 1,000 population**

   This indicator will show the level of health service delivery provided to Albertans in their homes for short-term health needs.

6. **Hospitalization for ambulatory care-sensitive conditions**

   This indicator reports the extent to which care for certain long term health conditions, such as asthma, diabetes and depression is successfully managed in the community without the need for hospitalization.
**Premier’s Council on the Status of Persons with Disabilities**

The mission of the Premier’s Council on the Status of Persons with Disabilities is to enhance and promote the opportunity for full and equal participation of persons with disabilities in the life of the province. The Council’s role is to ensure the needs of Albertans with disabilities are understood so they can be addressed. The Council consults with provincial and local agencies, businesses and organizations and advises government on matters relating to the status of persons with disabilities. The original establishment of the Council contained a sunset clause of July 1, 1998. Following a review of its mandate, the term of the Council has been extended.