

**Alberta Health Services
Strategic Direction
2009 - 2012**

Defining Our Focus / Measuring Our Progress

June 30, 2009

Introduction

Alberta Health Services is a new organization that was officially launched on April 1, 2009. This document outlines the Strategic Direction for Alberta Health Services.

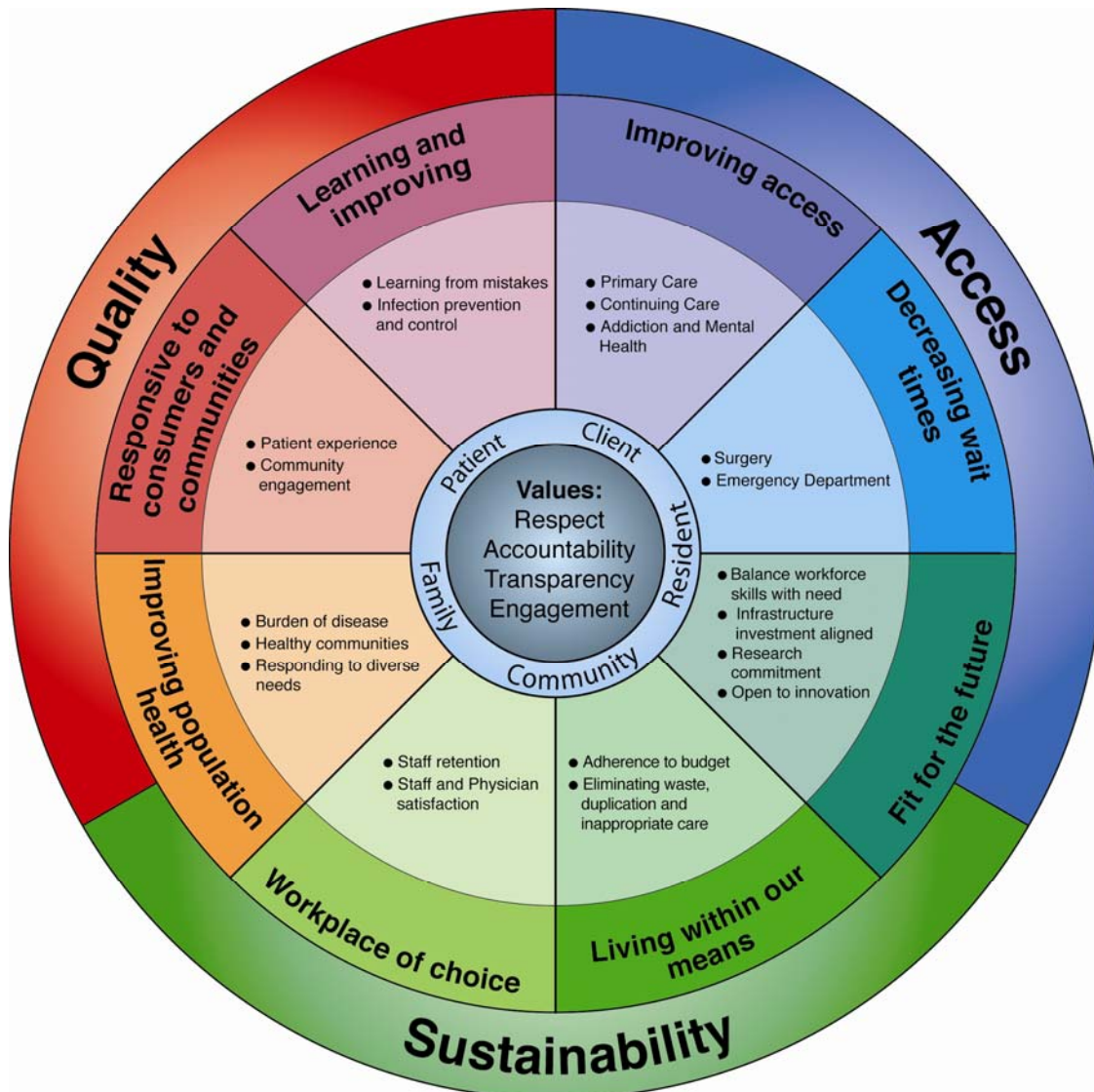
This plan describes our values, goals, focus and key priorities. These priorities address goals established by the Government of Alberta and are aligned with *Vision 2020*. This plan also incorporates feedback received through a consultation process. Input was received from a number of sources including physicians, staff, associations and foundations. The plan was endorsed by the Alberta Health Services Board on June 30, 2009.

Access, quality and sustainability are challenges facing health care systems across Canada and in most jurisdictions around the world. Meeting these challenges requires us to focus on the system as a whole, while addressing key priorities. This document outlines the approach that Alberta Health Services will take.

The Alberta Health Services strategic plan will guide our organization and initially be operationalized by implementation of key initiatives outlined in the subsequent pages. It will be refreshed every year. Everyone throughout the organization will contribute to achieving the priorities through portfolio specific action plans and be measured through accountability agreements.

The Strategic Plan

Mission: To provide a patient-focused, quality health system that is accessible and sustainable for all Albertans.



3 Goals
8 Areas of focus
20 Strategic priorities
4 Values
3.5 million people

Values

Our values drive and sustain all activities of Alberta Health Services. They create a shared understanding about how we relate to each other as well as to our patients and the public. The four values will guide the way we deliver services, define our organization and are part of our strategic foundation. They are core to what we do and therefore occupy the central place in the Strategic Plan.

WE VALUE	AS SHOWN BY
Respect	<ul style="list-style-type: none"> Valuing each other and each patient/family/client we interact with as individuals Being compassionate As staff, treating people with dignity, fairness and respecting confidentiality As patients, treating staff with dignity, fairness and respect Being sensitive to diversity Being inclusive and recognizing contributions
Accountability	<ul style="list-style-type: none"> Displaying integrity and ethical behavior Being honest Doing what we say we are going to do Taking responsibility for our own decisions and actions, and holding each other responsible for theirs Building trust and being trustworthy Evaluating and improving the quality, safety and effectiveness of our services and the outcome of our decisions Promoting excellence, innovation and continuous improvement through using best evidence/best practice
Transparency	<ul style="list-style-type: none"> Being open, honest and having timely communication Disclosing information to help learn from mistakes Providing accessible, understandable information about system and financial performance Providing clearly defined expectations Being clear about what and how decisions are made
Engagement	<ul style="list-style-type: none"> Collaborating with patients and their families, health care providers, research and education institutions, government and the community Involving community, clinicians and colleagues in meaningful ways Listening to and considering ideas and concerns of others in the decision making process Facilitating people to understand choices and take responsibility for their own health

Mission

To provide a patient-focused, quality health system that is accessible and sustainable for all Albertans.

Goals

Our Strategic Direction is structured around three key goals. Our future success will be measured by the health and satisfaction levels of Albertans, their ability to access the system and our ability to meet these goals within sustainable budgets.

Quality: health care services are safe, effective and patient-focused

Access: appropriate health care services are available

Sustainability: health care services are provided within available resources both now and into the future

Areas of Focus

The health system is complex. To make improvements, actions are required on many fronts. Alberta Health Services has eight areas of focus supporting the three goals described above. A focus area is where the organization will invest its time, energy and resources. For each focus area, we have defined key priorities and highlighted some specific strategies. We have also indicated one or two performance measures that will be used to monitor our progress. These measures will be monitored on a quarterly basis and may evolve over time. It should be noted that these measures are high level indicators of our overall performance and a number of other performance measures will also be monitored and acted upon throughout the organization.

It should be noted that the targets are indicative and are subject to finalization in the budget context.

1. Improving population health

Our population is growing, rapidly aging and facing a significant burden of chronic disease. The costs for managing these diseases are increasing. If we continue to deliver health care in the same way, it will be a challenge for us to provide accessible and high quality care for Albertans in a sustainable way.

Within Alberta there are specific populations that require targeted and customized approaches to meeting their health care needs. While it is important to think of Alberta as a whole it is also important to give special attention to diverse population needs with the aim to reduce inequities of outcomes.

By focusing on health promotion, disease prevention and wellness, we can enable Albertans to take better care of themselves. We need to focus on improving both physical and mental health. By doing so, we are decreasing the future demand for care and treatment, improving the quality of life for Albertans and enhancing the sustainability of our health system.

1.1 Burden of disease

We Will:

- Strengthen awareness and availability of community-based services for people with chronic disease.
- Implement comprehensive health promotion strategies to reduce the burden of disease, injury and disability, and allow for better use of health system resources.

Performance Measure	Baseline 2007	Targets		
		2009/2010	2010/2011	2011/2012
Hospitalization rates for ambulatory care sensitive conditions (chronic disease) per 100,000	360	TBD	TBD	TBD
Self reported health status: % of Albertans reporting "excellent", "very good" or "good" health				
18 to 64 years	88%	90%	90%	90%
65 years and over	84%	85%	85%	85%

* Targets to be finalized in budget context.

1.2 Healthy communities

We Will:

- Strengthen prevention, preparation and response to public health risks.
- Increase education, support and propose new legislation to better assist Albertans to make healthy choices and protect their health.
- Target efforts to reduce rates of smoking, obesity, substance abuse, addictions and other factors that negatively impact health and well-being.
- Facilitate people to understand choices and take responsibility for their own health.
- Reduce the harm associated with alcohol, other drugs and gambling by strengthening the availability of addiction information, prevention and treatment services.

Performance Measure	Baseline March 2009	Targets*		
		2009/2010	2010/2011	2011/2012
Influenza immunization rates:				
Seniors	58%	60% - 75%	60% - 75%	60% - 75%
Children aged 6 to 23 months	43% (64% March 2008)	60% - 75%	60% - 75%	60% - 75%
% of Albertans with an acceptable BMI				
Adults > 18 years	43% (2007)	43%	45%	45%
Children and Youth	TBD	TBD	TBD	TBD
Childhood Immunization coverage rates for				
Diphtheria/Tetanus/acellular Pertussis, Polio, Hib	80% (2006)	95%	95%	95%
Measles/Mumps/Rubella	91% (2006)	95%	95%	95%
Prevalence of smoking (20 to 24 years old)	30% (2007)	29%	27%	25%
Prevalence of heavy drinking (15 to 29 years old)	32% (2007)	30%	30%	30%

1.3 Responding to diverse needs

We Will:

- Ensure access throughout the province to customized health promotion and disease / injury prevention strategies that are culturally appropriate.
- Develop targeted programs and services to respond to diverse populations (such as prevention of low birth weight, fetal alcohol spectrum disorder, diabetes and injury).
- Support policies that reduce social barriers (standardized income eligibility assessments, food security, transportation, and recreation access).

Performance Measure	Baseline	Targets*		
		2009/2010	2010/2011	2011/2012
Number of First Nations women receiving formal pre and post natal care.	Developed by 2010/2011	Approach developed and validity established	Baseline established	Increase by 5% of number of First Nations women
Number of customized programs for diverse populations.	Developed by 2009/2010	Baseline established	Increase by 3%	Increase by 5%

* Targets to be finalized in budget context.

2. Responsive to consumers and communities

The mission of Alberta Health Services highlights the importance of having a health system that has the patient at its core. We need to view all interactions through the eyes of the consumer and strive to improve their experience through the health care system. We also need to view patients as partners in their care and appropriately involve them in decision making.

Consumers' experiences in health care are often characterized by fragmentation, duplication and system gaps. Having patient-focused care will mean we will need to work to resolve these system problems.

Albertans are passionate about the delivery of health care in this province and want to be involved. There are several avenues that Alberta Health Services needs to embrace to ensure that we are connecting with the community. This includes working with Foundations (fundraising agencies) and Health Advisory Councils. We need to ensure that our investments and focus aligns with the expectations of the public, and that we can work collaboratively to address issues of mutual concern. We also need to recognize and respond to the diversity that exists throughout the province.

2.1 Patient experience

We Will:

- Create a consistent province-wide process to track and address patient concerns.
- Foster a culture of patient-focused care throughout the organization.

Performance Measure	Baseline 2006	Targets		
		2009/2010	2010/2011	2011/2012
% of Albertans satisfied with health care services received in Alberta within the past year	57%	60%	63%	65%

2.2 Community engagement

We Will:

- Create opportunities for meaningful engagement with the public including Foundations and Health Advisory Councils.
- Report performance and financial information in a transparent manner.

Performance Measure	Baseline March 2008	Targets*		
		2009/2010	2010/2011	2011/2012
% rating the health care system as either "excellent" or "good"	60%	60% - 65%	65% - 70%	70% - 73%

* Targets to be finalized in budget context.

3. Learning and improving

Health care is ever changing. There are continual opportunities to improve the provision of high quality, safe care to positively impact outcomes and system efficiencies. We need to continue to embrace opportunities to learn from each other and from other jurisdictions.

While everyone strives for excellence in care, errors do occur and there are always opportunities to do things better. We need to be committed to promoting a “Just and Trusting Culture” in which its health care providers can readily report harm, close calls and hazards so that we can learn and work to improve the safety and quality of patient care.

3.1 Learning from mistakes

We Will:

- Implement a process for a provincial adverse event monitoring and develop processes to support organization-wide learning.
- Create a climate and environment of full disclosure and fair, supportive treatment for staff, physicians, patients and families when unexpected outcomes or “near misses” occur.

Performance Measure	Baseline 2009	Targets		
		2009/2010	2010/2011	2011/2012
Timeliness of response to identified adverse events	TBD	TBD	TBD	TBD

3.2 Infection prevention and control

We Will:

- Optimize infection prevention and control practices and policies across the province to enhance patient care and safety.
- Implement hand hygiene standards.
- Share best practices across the organization.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Number of reported cases of methicillin resistant staphylococcus aureus (MRSA) infection acquired by patients in acute care hospitals in Alberta	TBD	Establish baseline	TBD	TBD

* Targets to be finalized in budget context.

4. Improving access

Access to services is a major issue in Alberta. By improving access to a few key areas we will be able to improve patient flow throughout the system, provide more appropriate care to meet patient needs, decrease wait times and deliver care in a more cost effective manner.

A key concern to Albertans is a lack of access to family physicians (primary care). Provision of primary care services is the foundation for an effective health care system. This is an area that we recognize must be strengthened in Alberta to meet current and future needs. Investing in this area will improve health outcomes, reduce demand on hospitals and address a key concern of Albertans.

Another major concern related to access is seniors care. This issue will continue to grow with the aging of our population and needs a focused multiple-strategy approach. We want to offer seniors and persons with disabilities more options for quality accommodations that suit their lifestyles and service needs. By improving choice and availability of services, more capacity will be opened for acute care patients inappropriately waiting for continuing care (home care, supportive living and long-term care).

Addiction and Mental Health is another area where providing the right service, in the right place and at the right time can be improved. There are a variety of community care approaches that effectively serve individuals with mental illness. Many of these approaches have been successful in reducing emergency room and hospital visits, in providing a more cost-effective approach to care and most importantly, in improving the lives of those with mental illness and their families.

4.1 Primary Care

We Will:

- Enable physician-led and interprofessional based care in which teams of care providers are working to full scope.
- Strengthen processes to attach patients to primary care teams.

Performance Measure	Baseline March 2008	Targets*		
		2009/2010	2010/2011	2011/2012
% of Albertans with a family physician	81%	82%	83%	84%
% of Albertans attached to a physician in a Primary Care Network	56%	58% - 70%	60% - 80%	75% - 80%

* Targets to be finalized in budget context.

4.2 Continuing Care

We Will:

- Implement the Continuing Care Strategy which will provide Albertans more options and choices to receive health services to “age in place”.
- Increase supportive living spaces.
- Invest in Home Care services to support the shift from facility to community based care.

Performance Measure	Baseline March 2009	Targets*		
		2009/2010	2010/2011	2011/2012
Number of persons waiting in an acute care hospital bed for continuing care placement (ALC)	700	550	420	350
Number of persons waiting in community for continuing care placement	1,075	TBD	TBD	TBD

* Targets to be finalized in budget context.

4.3 Addiction and Mental Health

We Will:

- Expand Addiction and Mental Health innovations across the province.
- Increase children and youth mental health services in schools and communities, reduce risk factors for special populations, and implement early intervention strategies for children and youth at risk.
- Reduce the harm associated with alcohol, other drugs and gambling by strengthening the availability of addiction information, prevention and treatment services.

Performance Measure	Baseline March 2009	Targets*		
		2009/2010	2010/2011	2011/2012
% of Children receiving “scheduled” mental health treatment within 30 days.	78% received services within 30 days	82%	85%	90%

* Targets to be finalized in budget context.

5. Decreasing wait times

This area is very closely connected to the previous focus of *improving access*. Long wait times are a major issue in Alberta. Two areas where pressures in the health system are currently very evident and require action are in the emergency department and surgery. Solutions to these issues are much broader than within the emergency department or surgical programs themselves. We need to use all available resources in the most efficient and effective manner to reduce wait times.

Some patients are not being cared for in the right setting, resulting in increased waits for needed services. Too many patients are using emergency departments for health concerns that could be handled by a primary care practitioner, and too many continuing care patients are being cared for in hospitals. This backs up admissions throughout the hospital and delays emergency department admissions and hospital services for people needing scheduled surgical procedures.

Improving the availability of continuing care resources (long term care and supportive living) for seniors will effectively increase the availability of acute beds for other patients and hence significantly decrease overall system wait times. Additionally, this is an important strategy for the quality of care of seniors as discussed under the *improving access* focus area.

5.1 Surgery

We Will:

- Review operating room utilization to ensure efficient practice.
- Optimize bed availability for surgical patients through system-wide initiatives to decrease length of stay.
- Develop specialty centres of expertise in areas with long waits.
- Develop strategy for equitable access to appropriate care across the province.
- Establish mechanisms to track and improve wait times through all steps in the care process, including through real time measures of performance.

Performance Measure	Baseline March 2009	Targets*		
		2009/2010	2010/2011	2011/2012
Heart Surgery (CABG) wait times:				
Urgent Median wait times	1.00 weeks	≤ 1 weeks	≤ 1 weeks	≤ 1 weeks
Semi-Urgent Median wait times	1.86 weeks	≤ 2 weeks	≤ 2 weeks	≤ 2 weeks
Non-Urgent Median wait times	9.00 weeks	6 - 10 weeks	6 - 8 weeks	≤ 6 weeks
Elective Primary Hip replacement surgery wait times	33 weeks	26 - 30 weeks	26 - 28 weeks	26 weeks
Elective Primary Knee replacement surgery wait times	48 weeks	26 - 45 weeks	26 - 40 weeks	26 - 35 weeks

* Targets to be finalized in budget context.

5.2 Emergency Department

We Will:

- Implement strategies to improve patient experience in the Emergency Department.
- Develop and implement initiatives for hospital-wide improvement of patient flow.
- Work with primary care, Emergency Medical Services (EMS) and Health Link to increase the number and availability of community-based services such as physician clinics and urgent care centres (facilities with expanded hours that provide care for less serious emergencies).
- Implement strategies to enhance utilization of paramedic skill set and promote the integration of EMS services into the health system.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Wait time from triage to discharge for Emergency Department in urban areas:				
90% of patients with minor or uncomplicated conditions	5.6 hours	5 hours	4.5 hours	4 hours
90% of patients with complex conditions	16.1 hours	14 hours	11 hours	8 hours
EMS integration progress	TBD	TBD	TBD	TBD

6. *Fit for the future*

We all recognize that we have challenges in the health system today. We need to fix today's challenges but also need to address what's coming ahead. Our look into the future requires innovative thinking and actions related to people, infrastructure, technology and research.

Innovative approaches need to be adopted in the way we utilize people's skills. This may include changes in the way we view the care team and support individuals to work to the full scope of their practice. We also need to collaborate with all educational institutions, including universities and post secondary institutions, to ensure responsiveness to changing educational needs, worker readiness and assessment of internationally trained professionals.

Wise infrastructure investment is critical for the future. We need to ensure all investments in buildings, technologies, equipment and information technology (IT) is done with careful consideration of costs and benefits.

While there are pockets of long-standing health research excellence in Alberta, there is the opportunity to fundamentally transform the health research agenda. We need to participate fully in research initiatives with our academic partners, encourage research that will further our goals and put relevant findings into practice to improve outcomes.

Overall we need take control of our future. We're going to have to look very carefully at everything and adopt innovations that will help us. We can't afford to pretend that we can do things like we have in the past.

6.1 Balance workforce skills with need

We Will:

- Ensure optimal deployment and utilization of skills and knowledge of all health care providers.
 - Determine appropriate numbers and types of staff that are matched to patient needs for care.
 - Realize full benefit of nurse practitioner services and other advanced practice professionals such as midwives. Ensure use of License Practical Nurses (LPN) and Health Care Aides (HCA) to full scope of practice and broader utilization where appropriate.
- Develop a targeted approach to recruitment focusing in areas of greatest need (specialty and geographic).
- Improve coordination with educational institutions to ensure that there is an adequate workforce with skills to meet current and future needs.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Composition of direct care teams				
Number of LPNs (and HCAs) in the system	# LPNs and HCAs	Establish baseline	Increase by 5%	Increase by 8 - 10%

6.2 Infrastructure investment aligned

We Will:

- Develop a capital plan that aligns with needs and available resources.
- Review all existing assets (buildings, equipment and information technology) to ensure they are optimally utilized.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Asset utilization	TBD	TBD	TBD	TBD

6.3 Research commitment

We Will:

- Lead, facilitate and implement centres of excellence with focused health research agendas that address key priorities to improve access, quality and sustainability for all Albertans.
- Lead and coordinate a research program that increases clinical, translational, health services and public health research outputs that are applied provincially and globally to improve health service delivery and health outcomes; the program will attract and retain world-class clinician scientists in all health professions.
- Lead the development of a single provincial environment that facilitates and fosters health research.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Research activity/knowledge translation	TBD	TBD	TBD	TBD

6.4 Open to innovation

We Will:

- Seek global innovations and implement best practices.
- Embrace technology that will improve access (i.e., Telehealth, Health Link, etc.)
- Initiate systems and technologies to enable individuals to have access to their health information so they can participate in their care.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Implementation progress of information technology priorities	TBD	TBD	TBD	TBD

7. Living within our means

Currently, we spend more than we have. Clearly this is not good practice and we can't continue down this path. We have to make hard choices and set priorities in our spending to live within our means. Although, this challenge has become greater in our current tight fiscal times, we always need to be fiscally responsible and good stewards of resources.

Operating as one organization provides opportunities to reduce duplication and to streamline our processes. We can compare and contrast more easily; to look at differences in how we do things between one end of the province and the other. We can also benefit from making it easier for services and facilities to learn from each other to improve efficiency and/or service outcomes.

We will have to introduce disciplined and rigorous approaches to understanding where we are spending our resources and the benefits obtained.

7.1 Adherence to budget

We Will:

- Strengthen application of financial management controls to ensure alignment of allocated resources and expenditures.
- Reduce expenditures that add minimal value to the organization.
- Ensure robust processes are in place to identify and mitigate financial risk.
- Work with Government of Alberta to develop a predictable, sustainable budget process covering both capital and operating budgets (including the operating consequences of capital decisions).

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Budget variance	TBD	0	0	0

7.2 Eliminating waste, duplication and inappropriate care

We Will:

- Streamline administration to eliminate duplication.
- Implement a procurement strategy to optimize the buying capacity of our health system.
- Redesign business and clinical processes where appropriate.
- Introduce equitable funding formula based on activity.
- Review variance in clinical practice across the province.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Overtime costs as a % of total worked hours	TBD	TBD	TBD	TBD
Ratio of administration/management to frontline staff	TBD	TBD	TBD	TBD

8. Workplace of choice

One of the biggest challenges facing our organization is to attract, retain and support a strong workforce to deliver health care into the future. This workforce must be viewed in the broadest sense, and be inclusive of a wide array of health professionals, and other staff who work in support areas such as finance, planning and information technology.

We need to work on creating an environment that recognizes staff as being our most valuable asset, enables the best use of all people's skills and abilities, and develops the capacity to support people through the evolving nature of their careers. Working in an environment that is safe and promotes staff and physician wellness is also critically important.

People base their decisions on whether to work with, or for, a particular organization on a number of factors. With the current and future scarcity throughout the global workforce, there is a strong need for Alberta Health Services to pay close attention to these factors and strive to be an employer people seek.

8.1 Staff retention

We Will:

- Support the ongoing education of health care providers to enhance their knowledge and application of emerging evidence, quality improvement methodology, safety practices, technologies and services available.
- Regularly monitor morale and act on results.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Staff exit rate (separation rate)	11.4% - 25.3% reflects geographic variance	TBD	TBD	TBD

8.2 Staff and Physician satisfaction

We Will:

- Develop and sustain an energizing work environment that supports professional growth and personal satisfaction.
- Shape the work environment to respond to issues important to staff.
- Establish opportunities for meaningful engagement and open communication.
- Create a work environment that promotes safety and wellness.

Performance Measure	Baseline March 2009	Targets		
		2009/2010	2010/2011	2011/2012
Staff and physician satisfaction rates	TBD	TBD	TBD	TBD
Staff injury rate	TBD	TBD	TBD	TBD

Making It Happen / Measuring Our Progress

Everyone within Alberta Health Services plays an important role in advancing this Strategic Plan. Within Alberta Health Services portfolios, at all levels of service delivery, operational units will develop strategies indicating what they will do to support the applicable focus areas. These action plans will identify performance indicators/targets, resource allocations, etc.

Accountability agreements aligned to these action plans will be defined and reviewed annually for all services, facilities and community programs alike. Individual performance appraisals (including 360° feedback) will be realigned to incorporate adherence to the accountability agreements and our core values of respect, accountability, transparency and engagement. Policy will be developed as required to guide our work and assist us in meeting our strategic objectives.

To ensure we stay on course we will monitor our measures regularly. Progress on advancing on our Strategic Direction will be reported to the Board on a quarterly basis. Through this process we will continually evaluate our actions and make any necessary revisions. This “feedback” loop will ensure we are continually engaged in achieving our organizational goals.

We will be actively monitoring our progress in achieving our Strategic Direction, and providing staff and physicians with data needed to improve performance and results. We will report our progress to the government and public providing the level of transparency that is expected of our publicly funded organization. This Strategic Plan will be refreshed on an annual basis.

