



Response
to the
Final
Report of
Health Summit '99

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Introduction

In December 1998, Premier Ralph Klein announced Health Summit '99 and launched a process for seeking input on four key questions about health and the health system for Alberta in the future:

- What is essential in Alberta's health system?
- What changes should be made in how health services are delivered and managed?
- What responsibility do individuals have for their own health?
- How much money is enough to sustain our publicly funded health system?

Two hundred participants were invited to Calgary on February 25 - 27, 1999 to discuss and debate those four questions and to provide advice and recommendations on important directions for the future of Alberta's health system. Summit participants represented a wide range of health professionals, administrators, educators and other individuals and organizations directly involved or working in the health system, combined with an equal number of randomly selected Albertans chosen from across the province.

Prior to the Summit, a workbook was developed to provide background information to summit participants as well as to people throughout the province who were interested in taking part. A questionnaire was included in the workbook and over 1,500 people responded. Several mini-summits were also arranged by MLAs. Many organizations and individuals submitted letters and briefs. Public opinion research on a number of related topics was conducted by Environics Research and this information was presented to the participants at the Summit. All of this various input helped shaped the Summit.


The Summit itself proved to be an intense and challenging few days. The issues were difficult and complex with no easy solutions. Many participants commented that they learned just how difficult the issues are in health and the complexity and inter-relationship of the issues. Clear solutions to challenges were not always found.

Although at the Summit the focus was on the key four questions, no issues were excluded from discussion and every effort was made to discuss any issues raised. Participants were asked to put whatever ideas and questions they had on the table for discussion. Participants worked hard to explore all the issues and options, understand the views of others, and search for workable solutions. The Final Report of Health Summit '99, prepared by Health Summit Chair Harley Johnson, summarized those discussions and attempted to capture the scope of the ideas presented, to reflect accurately the range of recommendations presented, as well as identifying common themes that emerged from the discussions.

This response document addresses those common themes. It identifies strategies and initiatives that are already underway to address the recommendations and some new approaches being developed over the longer-term.

The Government of Alberta accepts in principle and is committed to following up on all of the recommendations received through Health Summit '99. The recommendations will be the basis of the next Alberta Health and Wellness three-year business plan and budget which will be released early in the year 2000.

The following report highlights many of the initiatives already underway or planned, which respond to the Summit recommendations.



Theme One
*People know what they want
from the health system*

The health system should reflect the following basic values and principles:

Access - All Albertans should have equal access to health care when they need it.

Accountable - The health system should be accountable at all levels for the outcomes achieved.

Affordable and sustainable - Those in the health system should make the best and most efficient use of health care dollars.

Adequately funded - There should be sufficient resources to support a comprehensive health care system.

Publicly funded and publicly administered - The health system should continue to be publicly funded and publicly administered.

Consistent with the Canada Health Act - The principles of the Canada Health Act should be retained.

Standards - High standards should be set to guide decisions about quality of care and ethics and integrity.

Information - People should have access to information so they can make responsible decisions about their own health. Information should be used to guide decisions in the health system.

Choices - Patients should be able to choose the provider they want and also be able to make choices between traditional and non-traditional approaches to health. Some of these choices would be available in the publicly funded system and others would not.

Cooperation - There should be shared decision making among users and providers in the health system. Community members should be involved in decisions.

Teamwork - Health providers should work together and with others outside the health system with a focus on serving patients.

Balance - There should be a balance of responsibility between individuals and the health system and a balance between treatment of illness and injury and promotion of wellness.

Adaptable - The health system should be able to adapt to changing health needs and circumstances.

Coordinated - All aspects of the health system should work together without gaps in service. There should be more coordination with areas outside the health system, e.g. education, social services, policing, social agencies, etc.

Recommendation 1:

Government should adopt these values and principles as a guide for future decisions.

Government Response: Accepted in principle.

Actions and Strategies Already Underway or Planned

- Alberta's health system is a publicly funded and administered system with most services (acute care, home care, residential long term care, public health, mental health and community health programs) delivered through 17 regional health authorities and two provincial authorities, the Alberta Cancer Board and the Provincial Mental Health Board. It provides universal access to medically necessary hospital and medical services without user fees or extra billing. Alberta's health system will continue to meet the principles of the Canada Health Act and provide benefits in excess of the Canada Health Act.
- 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.
- Alberta's health system will receive a funding increase of more than \$955 million over three years. This increased funding will be focused so that regional health authorities will hire an additional 1,100 front line staff in the current year alone with further increases in the two subsequent years. It will also address longer than desirable waiting times for life-saving procedures and other major surgeries including cardiac procedures, hip/joint surgeries and organ transplants. This increased funding will improve access to health services in Alberta.
- All components of the health system have clear responsibilities and are accountable for the results they achieve.
- An Accountability Framework has been in place since the Fall of 1998. The ongoing improvement of the health system is the result of shared responsibility between the government, health authorities and health professionals to ensure quality in Alberta's health system. The framework clearly identifies responsibilities and mechanisms for reporting results in the health system.

- The health funding increases meet government's commitment to match Federal health spending increases; meet this government's commitment to address health system pressures; and meet government's commitment to ensure all Albertans have access to a quality, publicly funded health system.
- In the long term, more money alone will not solve all of the pressures on health. Everyone in health must continue to work together to maintain a quality publicly funded system and continue reform of the system.
- **alberta we/net**, a new province-wide health information network, will eventually link health providers, hospitals, regional health authorities, pharmacists, the Alberta Cancer Board, the Alberta Mental Health Board, universities, and other stakeholders. This network will enable health professionals across Alberta to share necessary information and best practices, to make evidence-based decisions about treatment and about resource management.
- The annual Alberta Health Survey, a survey of 4000 Albertans, asks a number of questions each year on Albertans knowledge about the health system and what information they need to help make good decisions about how to use health services and resources.
- A comprehensive review of long-term care services, including home-care, long-term care facility services and new models of care, will be completed in November, 1999 and follow-up actions will be taken on the resulting recommendations.
- New health information legislation will be introduced to protect personal health information while facilitating the use of health information to improve patient care.
- Government departments are participating in the implementation of the Alberta Children's Initiative.

Theme Two
People Want a
Comprehensive, Publicly
Funded, Publicly
Administered Health System
that is Flexible and Meets
Changing Health Needs

"The overall conclusion supported by many of the groups was that people want a comprehensive publicly funded and publicly administered health system. They want a system that is flexible and able to adapt to changing health needs and circumstances. Suggestions were made that there should be a careful assessment of the benefits and impact on health of new treatments and services before they are added to the health system. "

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Recommendation 2:

Government should continue to support a comprehensive publicly funded and publicly administered health care system.

Recommendation 3:

Government should explore options for managing the growing costs of pharmaceuticals including the feasibility of expanding public coverage for pharmaceuticals.

Government Response: Accepted in principle.

Actions and Strategies Already Underway or Planned:

Support for a publicly funded system:

Alberta's health system is a publicly administered system with most services delivered through 17 regional health authorities and two provincial boards. It provides 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 the Canada Health Act.

In addition to meeting the requirements specified in the Canada Health Act, government provides full and/or partial coverage for many other health care services, such as:

- Long term care, home care, immunization programs for children, mental health services, health promotion and injury prevention, respite care, palliative care, physical therapy, respiratory therapy, occupational therapy, speech language pathology and audiology services and communicable disease monitoring.
- As part of the support for this publicly administered system, government has increased health spending by \$406 million, or almost 9.0% in 1999-2000. This will address the current pressures in the health system and help to ensure that Albertans continue to have access to the quality publicly funded health services that they need, when they need them.
- Regional Health Authorities conduct regular health needs assessment in their regions as part of their business plan requirements and develop services and programs to respond to those needs.
- The Government of Alberta provides coverage for prescription drugs for residents of Alberta using four mechanisms:
 1. The Regional Health Authorities provide all medically required drugs used in hospitals and long term care centres at no direct cost to the patient.
 2. The Alberta Cancer Board provides drugs used in the direct treatment of cancer at no direct cost to the patient.
 3. Alberta Blue Cross offers a number of supplementary non-group insurance plans for Albertans that are sponsored by Alberta Health. Benefits are listed in the Alberta Health Drug Benefit List and help reduce the cost of prescription drugs for Albertans.
 4. Special drug programs provide a number of prescription drugs for treatment of select health conditions including cystic fibrosis, growth hormone, immunosuppressants for organ transplants, HIV/AIDS, tuberculosis, and sexually transmitted diseases.

- On February 1, 1999, Alberta Health and Wellness launched the Palliative Care Drug Program, administered through Alberta Blue Cross. The Program provides premium-free coverage for needed medications for patients who have been diagnosed as being palliative and are cared for at home or in the community.
- In Spring 1999, the Government of Alberta announced funding of \$6 million for a new program to help support the cost of drugs for short-term acute care patients receiving treatment in a home setting, as recommended by the Long Term Care Review Advisory Committee. Alberta Health and Wellness is working with its key stakeholders (including the Regional Health Authorities and the Alberta Pharmaceutical Association) to plan and implement the new drug program later this year.
- **alberta we/net** is developing a comprehensive patient medication history program that will be available electronically to support decision-making, improve quality of care, and reduce drug complications. This initiative is known as the Pharmaceutical Information Network or PIN.
- The Alberta Management Committee on Drug Utilization has been given the mandate by the Minister of Health and Wellness to develop and direct, on a three year trial basis, the drug utilization initiative, academic detailing and trial prescription program, to facilitate improvements in the prescription and use of drugs in Alberta. The management committee is co-chaired by the Alberta Medical Association and the Alberta Pharmaceutical Association.

Theme Three

*It is Time For a Clear Plan
For the Future of Alberta's
Health System*

“People think the health system can be made better. They support exploring new approaches and they do not want the system to stay the same or go back to the old ways of doing things. But they want to know what the direction is and what the health system is trying to accomplish. The plan should address significant questions like: how can the health system continue to be reformed to meet changing needs over time? What role should the private sector play in delivering health care services? How can new models of health care be implemented and assessed? “

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Recommendation 4:

Government should establish a forum for health planning to develop a long term plan for Alberta's health system.

Recommendation 5:

The forum should include an ongoing process for significant involvement of people across the province, people in the health system and community members.

Recommendation 6:

Once the plan is developed, significant efforts should be made to communicate the plan and ensure that people are well informed about the plan and the direction for Alberta's health system.

Response: Accepted in principle.

Actions Already Underway or Planned:

- To make the best use of the current health system and help develop any future plans, Albertans need information that will help them make good decisions about how to use available resources. Government will continue to broadly distribute the Three Year Alberta Health and Wellness Business Plan, which is an overview of government plans, initiatives and goals for the health system.
- Continue to conduct and distribute the Alberta Health and Wellness' Annual Survey of Albertans, to assess the quality of health services Albertans are receiving and identify areas in need of improvement.
- Expand and enhance the Alberta Health and Wellness' internet site which contains current information on Alberta's health system and links to other health related sites.
- Continue to widely distribute the Alberta Health and Wellness' Annual Report, a report to Albertans on the strategies and actions that have taken place during the year, what was achieved and the progress made in reaching goals and targets.
- Continue to distribute regular news releases announcing new initiatives or explaining important policy decisions. These news releases are sent to all Alberta media outlets, numerous stakeholders, interested members of the public and also posted on the Alberta Health and Wellness internet site.
- Continue to publish Update on Health, a bi-monthly newsletter, distributed to over 50,000 health stakeholders and other interested organizations/individuals. It highlights initiatives and other important information on developments in the health system.
- Develop new strategies to provide mechanisms for information exchange and discussion related to long term planning for the health system, and identify priority issues and strategies to address those issues.
- Expand the use of the Alberta government's Alberta Connects program, which includes an 1-800 line for two way communication with Albertans, an internet site and a corporate communications program to provide more information on government plans for the health care system.



Theme Four

There are priority areas where changes can and should be made

- Launch a bi-annual report to Albertans on the performance of the health system, updates on actions responding to the recommendations to the Health Summit, and future plans for health system enhancement.
- Work with health authorities to provide more and better information to Albertans on the availability of health services and on the regional health system.

“In the past few years, many changes have been made in the way health care services are delivered and managed. Today, there are pressures in the system and many people suggest that further changes are needed to address those pressures and build a more effective and integrated health system. “

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Recommendation 7:

Government should establish a task force to review education and training programs for health care providers to develop better links among the programs, build greater awareness and understanding of the roles of other health providers, and develop teamwork skills among health providers.

Recommendation 8:

Governments should explore alternative ways of paying health providers, including physicians.

Recommendation 9:

Working with health care professionals and providers, steps should be taken to remove barriers between the different groups and encourage more cooperation.

Recommendation 10:

Government should target innovation funds to expand pilot projects in primary health care models and community health centres across the province.

Recommendation 11:

Government should speed up its efforts to implement a province-wide health information network, currently being developed as alberta we//net.

Recommendation 12:

One of the purposes of the health information network should be to improve access by individuals to accurate health information.

Recommendation 13:

Government should continue to support research and evaluation about what works and what does not.

Recommendation 14:

Government should place a higher priority on province-wide strategies designed to promote good health and prevent illness and injury.

Recommendation 15:

Specific strategies should be developed to address health issues for targeted groups including children, Aboriginal people, people with mental health problems, and groups who are more vulnerable to health problems.

Recommendation 16:

Government should act quickly to complete the work of the MLA Committee reviewing long term care and address the needs identified.

Recommendation 17:

Government should encourage regional health authorities to explore and implement new and more flexible approaches for meeting the needs of elderly people including care centres, day homes and respite care in communities.

Recommendation 18:

Government should work with health professionals and providers, regional health authorities, and post-secondary institutions to develop sound workforce plans to ensure that there is an adequate supply of health professionals and to anticipate and prepare for future needs in the health system.

Recommendation 19:

Government should move ahead with initiatives in telehealth to improve access to health services for people living in rural and more remote communities.

Recommendation 20:

Government should work with regional health authorities and health professionals to set reasonable standards for access.

Recommendation 21:

Government, regional health authorities and health professionals should work together to inform people about standards and expectations for access to health services

Recommendation 22:

Government should use the best available evidence to set standards and targets for key aspects of the health system. Performance and results should be measured regularly and people should be well informed about the results.

Recommendation 23:

Government and regional health authorities should place greater emphasis on using information and evidence to monitor, evaluate and improve health services.

Recommendation 24:

Government should introduce policies that require a clear demonstration of health care benefits before any new treatments, drugs and technology are introduced.

Response: Accepted in principle.

Actions Already Underway or Planned:

Teamwork

- Continue the Provincial Health Workforce Steering Committee’s Education Working Group. This Working Group includes health authorities, health professions, health educators and government and it helps to coordinate health educational activities.
- Continue and expand the work of the Alberta Area Health Education Partnership Program (funded largely by government and health authorities) to bring together all health authorities, post-secondary education institutions and government. One program developed through AAHEPP is the placement of students in health programs in interdisciplinary teams for their practical experience.
- Continue to support and expand alternative approaches to physician payment, service delivery and emphasize collaborative partnerships between physicians, the Alberta Medical Association (AMA), Regional Health Authorities and Alberta Health and Wellness. Six projects that currently receive grant funding through a \$3 million budget established by the Tripartite Secretariat and administered by Alberta Health and Wellness are:
 - Service delivery model for the Gross Multidisciplinary Pain Management Network
 - Obstetricians in the Palliser region
 - Chinook Health Region & Associate Medical Centre in Taber, Alberta
 - Neurosurgical Associates of Edmonton
 - Capital Health Authority Multi-Agency Child and Adolescent Abuse Clinic
 - Northern Lights Regional Health Authority & general practice physicians
- Implement the new Health Professions Act, passed in the legislature in May of 1999. The Act removes many barriers between professions by providing for overlapping scopes of practice and a competence based approach to providing high-risk activities. This legislation was developed with consultation and cooperation with all regulated health professions.
- Implement the new Health Innovation Fund this year. This is a strategic \$10 million funding incentive to be used to demonstrate service delivery innovations that have the potential to move the health system towards a preferred future.

Primary Health and Community Health Care

- Complete and evaluate the 27 primary health care projects funded through an \$11 million allocation from the federal government’s Health Transition Fund

and coordinated by Alberta Health and Wellness. These 27 projects are intended to improve our understanding of primary health care and identify innovative and successful approaches to its delivery. These projects are scheduled for completion by the end of May, 2000.

Health Information and Evidence

- Implement pilot projects through **alberta we//net**, to assist health professionals to provide better health care to Albertans through information technology.

Some pilot projects implemented/results achieved include the following:

- Seniors' Drug Profile pilot at Misericordia Hospital and at the University of Alberta Hospital in Edmonton.
 - Newborn Registration pilot project for metabolic screening is underway.
 - Common financial applications installed in three health authorities, representing over 65% of Albertans.
 - Cost effective Microsoft office automation suites implemented in 19 health authorities and several physician offices.
 - Installation of 22 new telehealth sites in seven health authorities this year.
 - Integrated Cancer Care Network to be operational for one tumour type this year.
 - Planning for Pharmaceutical Information Network in progress.
- Implement strategies to increase Alberta's capacity for utilization analysis including:
 - Establish a new Health Services Utilization Analysis Commission for Alberta to enhance public accountability in the use of health services and to improve the health system.
 - Create an Alberta Centre for Health Services Utilization Research (ACHSUR), a new "centre of excellence" in utilization research with the mandate to conduct high priority utilization research.
 - Continue to develop and disseminate clinical practice guidelines to all Alberta physicians. Clinical practice guidelines (CPGs) are systematically developed, evidence-based statements which set out optimal clinical care options for specified medical conditions. The Alberta CPG Program, in operation since 1994, is a joint program of Alberta Health and Wellness and the Alberta Medical Association.
 - Continue to develop and collect evidence-based information about health information technology through collaboration with the Alberta Heritage Foundation for Medical Research, the Canadian Coordinating Office for Health Technology Assessment, and the funding of health services research through the Institute of Health Economics.

A Better Balance

- Continue and expand strategies to protect health, prevent disease and injury and promote the well-being of Albertans. Examples of current actions supporting this recommendation include:
- Alberta Centre for Injury Control and Research: funds are provided to the Centre to plan, coordinate, implement and evaluate province-wide injury control strategies in collaboration with regional health authorities and many other partners.
- Alberta Tobacco Reduction Alliance: funds are provided to the Alliance to plan, implement and evaluate province-wide tobacco reduction initiatives, in collaboration with a number of partners. Funding to the Alberta Tobacco Reduction Alliance will rise to \$1 million per year for the next three years, an increase of \$250,000 per year.
- HIV Strategy: a new provincial three year HIV Strategy was released in June of 1999 to provide direction for the prevention, management and control of HIV/AIDS in the province. Provincial government funding to the Alberta Community HIV Fund will rise to \$1.76 million this year, an increase of \$265,000 a year
- Action for Health: grants are provided to regional health authorities to support the implementation and evaluation of health promotion and disease/injury prevention initiatives at the regional level.
- Continue to jointly fund and co-manage the HIV/AIDS Aboriginal Project. Health Canada and Alberta Health and Wellness implement a set of strategic initiatives to prevent HIV infection and develop models of care and support in aboriginal communities.
- Continue a major communications program by the Alberta Mental Health Board to increase public awareness of mental illness in Alberta.
- Continue the recently initiated routine testing for HIV for all pregnant women in Alberta, now done through the Prenatal Screening for HIV program.

Children

- Provincial strategies are in place that relate specifically to the needs of children, whether it is mental health needs, special health needs in school or other programs related to child and youth development. Examples of actions to support this recommendation include:
 - Continued collaboration in the Alberta Children's Initiative. The departments of Health and Wellness, Learning , Justice, Community Development, Children's Services and Human Resources and

Employment work together on various initiatives including:

- Continuation of the Student Health Initiative which is providing integrated services delivery for children with special health needs in the school setting.
- Participation in the Child Prostitution Initiative which implements the actions mandated in the Protection of Children Involved in Prostitution Act.
- Work with other government departments and agencies on the Fetal Alcohol Syndrome Initiative which addresses prevention, identification, early intervention and treatment related to the issue.
- Development of the Children's Mental Health Initiative which is a three year strategy by the Alberta Mental Health Board to improve children's mental health services in the province.

Planning for Long Term Care

- The Long Term Care Review Policy Advisory Committee is scheduled to present its Final Report to the Minister of Health and Wellness in November of 1999. Government will respond to the final recommendations once they become available. The Committee has made some interim recommendations to the Minister on short term pressure points. Government has responded as follows:
 - Implemented a drug program for palliative care patients in the community.
 - Enhanced access to front-line services by increasing staff levels. (This includes front line staff for long term care and home care).
 - The Minister of Health and Wellness directed health authorities to use portions of the new funding for 1999-2000 to improve access to long term care, including development of new approaches for serving clients traditionally served by long term care centres. Alternative ways of providing services include group homes, assisted living, lodges, enhanced lodges, adult family care or other supportive housing arrangements with add-on services.

The Right People Doing the Right Work

- In order to examine health workforce issues throughout Alberta, the Health Workforce Steering Committee working group has identified required data elements and data sources that will be used to help in the development of a comprehensive workforce information system.
- Complete, in cooperation with the Alberta Medical Association, a comprehensive physician resource plan for Alberta.
- Continuation of the Rural Physicians Action Plan, designed to support the recruitment and retention of rural physicians and which was largely responsible for the recruitment of 92 new physicians to rural Alberta in the past year.

- The Provincial Health Workforce Steering Committee will develop models to forecast the anticipated needs for health providers and will coordinate with the education sector to ensure student enrolments are adequate to meet anticipated needs.
- Identify the immediate and long term nursing requirements in the province by working with the Alberta Association of Registered Nurses and the Nursing Shortage Stakeholders Group.

Improving Access

- As one of its major initiatives, **alberta we//net**, the provincial health information network, is facilitating the expansion of the telehealth program in the province. **alberta we//net** has assisted seven health authorities to expand their telehealth facilities so that 22 more locations were connected by the end of June, 1999 with over 40 to be in place by the end of 1999.
- Establishment of interoperability standards so that telehealth equipment purchased by the Regional Health Authorities under the **alberta we//net** program will be capable of communicating across regional boundaries.
- Development and support of various monitoring activities e.g.: of wait-lists for long term care beds, waiting times in emergency departments, surgery for joint replacements, MRIs and cardiac waiting list trends, to ensure continued appropriate access to health services.
- Participate in a two-year waiting list project funded by Health Canada. Alberta Health is one of nineteen project partners in the four western provinces. Other partners are health authorities and Public Health Sciences (U of A). Priority areas identified within the project are: MRI, hip/knee replacement, cataract surgery, hernia repair and children's mental health services.

Accountability

- Government has set governance expectations for health authority boards, requiring them to have a comprehensive communications program that informs the public about how to obtain services, how to register concerns, and how to deal with health emergencies.
- Achieving Accountability in Alberta's Health System outlines the broad roles, responsibilities and reporting relationships of those in Alberta's health system and identifies how accountability supports continuous improvement in the health system. In August of 1999 the document *Who is Accountable in Health?* was released. This version is intended for the public and is a condensed form of Achieving Accountability.



- The documents Governance Expectations and Assessment Instrument were released in 1998 by government and assist health authority boards in fulfilling their governance role and assessing their own performance on a regular basis.
- Further development will be done in the area of performance expectations and measures for the continuing care system.
- Provincial Priorities for the Development of Health and Health System Expectations and Measures was released in July of 1999. This document will communicate the progress to date and the next steps for the provincial Expectations and Measures strategy.
- The Ministry of Health and Wellness and health authorities produce annual business plans and annual reports that include performance measures and targets.
- All health authorities are required to produce new quarterly financial statements as of 1999/2000 in order to better understand key service volumes and access issues.
- Continue production of the reports Health Trends in Alberta and Report on the Health of Albertans. These two reports measure, analyze, compare, prioritize and present information on trends in health conditions and health status across the regions.
- A Health Technology Assessment Unit has been established since 1995 under the Health Research Collaboration Agreement with the Alberta Heritage Foundation for Medical Research. This Unit provides information and research services to health providers and other stakeholders regarding new technologies and health interventions.
- Continue funding to the Institute on Health Economics, which is involved in research related to benefits of drugs and related health products.
- Develop and test new service delivery and funding models for the North East Community Health Centre in Edmonton.
- Support and develop stakeholder relationships and infrastructures necessary to sustain new methods of physician service delivery and payment.
- Continue the development of the innovation funding under the contract with the Alberta Medical Association that ensures funding is in place to address such issues as home care reform and changes in medical technology.
- Review of all service sector program legislation has identified some further legislative barriers to interdisciplinary practices. Removal of these barriers will be addressed through legislation.



- Develop further regulations and standards across a broad area of interests in environmental health that clearly address high-risk concerns and activities and remediation measures to deal with those risks. Standards will be developed in the areas of food safety, personal care facilities (body piercing and tattoos), biomedical waste disposal, and intensive livestock operations.
- Develop a comprehensive strategy to increase immunization rates in Alberta.
- Develop further initiatives with AADAC to decrease the use of alcohol and illicit drugs
- Implement the Enhanced Pneumococcal Vaccination Program. This will proceed in the Fall of 1999 to ensure that all Albertans over 65 years of age have protection against pneumococcal disease.
- Develop new strategies to address tuberculosis control and prevention in those communities with significant numbers of people who have immigrated to Alberta from countries with high rates of TB.
- Implement an immunization program to ensure that all children in Alberta have protection against Hepatitis B. In October 1999, Alberta Health and Wellness launched a three-year program that will provide the vaccine to all Grade 12 students in the province.
- Work in conjunction with health authorities, Alberta Municipal Affairs and lodge providers to develop initiatives to enhance health services for all lodge residents.
- Expand future telehealth applications to include other medical specialties such as dermatology, ophthalmology, ultrasound and rehabilitation medicine.

Continue to develop a new framework to ensure Albertans have access to enhanced comprehensive breast screening in collaboration with the Regional Health Authorities, the Alberta Cancer Board, the Alberta Society for Radiologists the Alberta Medical Association and others.

- Develop joint strategies among health authorities and aboriginal communities to improve the provision of health services to these communities.
- Continue to develop and enhance communication plans in association with health authorities to provide Albertans with additional information on standards and expectations for health services.
- Report on the current health status of Albertans to support the development of priorities and targets for the future, including release of a comprehensive report on the health status of Albertans in the Fall of 1999.

Theme Five
Health is a Shared
Responsibility

“Participants at Health Summit ’99 agreed that individuals have responsibilities in protecting and preserving their own health and they identified what those key responsibilities are. At the same time, there was a clear view that responsibility for health lies not only with individuals. It is a shared responsibility - shared among individuals, families, the health system, communities, different levels of government, and other sectors outside the health system.”

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Recommendation 25:

Access to health care must be equally available to everyone. People should not be punished as a result of their individual lifestyle choices.

Recommendation 26:

Government should continuously review its policies on children, on education, social services, environment, justice, and other key areas to assess their impact on the long term health of people in the province and make changes wherever possible to improve health.

Response: Accepted in principle.

Actions Already Underway or Planned:

The vision for Alberta Health and Wellness is healthy Albertans in a healthy Alberta. This 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 promotion and protection of health is listed as one of the priorities for government. An emphasis on health programs that monitor health status, promote and protect health, control disease and prevent injury is clearly stated. Examples of current actions that support this recommendation include:

- Alberta Centre for Injury Control and Research: funds are provided to the Centre to plan, coordinate, implement and evaluate province-wide injury control strategies, in collaboration with a variety of partners.
- Alberta Tobacco Reduction Alliance- funds are provided to the Alliance to plan, implement and evaluate province-wide tobacco reduction initiatives, in collaboration with health authorities and many other partners.
- HIV Strategy- a HIV Strategy has been developed for Alberta Health which provides direction for the prevention, management and control of HIV/AIDS in the province.



Theme Six

We Need to Find Ways to Sustain Alberta's Health Care System

- Action for Health- funds are provided to regional health authorities to support the implementation and evaluation of health promotion and disease/injury prevention initiatives.
- Develop new long-term strategies to promote healthy lifestyles and help Albertans protect their health by preventing illness and injury.
- Continue to work with other departments in collaborative efforts to improve the health of Albertans.
- Collaborate with other provinces/territories and the Canadian Institute for Health Information on common opportunities for application, development, information and technology sharing and issue resolution.

“Questions about appropriate funding levels proved to be a difficult challenge. There was no consensus among Summit participants on the appropriate level of funding for Alberta’s health system. People need to come to a consensus on what an appropriate system is for the province before decisions can be made on how much funding is needed.”

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Recommendation 27:

Government should proceed first with developing a long term plan for the future of Alberta’s health system, then address funding requirements to ensure the system is sustainable.

Recommendation 28:

Government should ensure that there is sufficient funding available to support and sustain a comprehensive publicly funded health system. Funding for health should not be at the expense of other priority areas including education, social services, and infrastructure.

Response: Accepted in principle.

Actions Already Underway or Planned:

- Government will regularly examine what health services and programs need to be expanded or changed to better meet the needs of Albertans The province-wide services funding system identifies the resources needed for highly specialized and complex services in our health system and is reviewed on an annual basis.
- The population-based funding formula for health authorities allocates resources to each regional health authority according to the population in the region and their relative health care requirements. The population’s health care requirements are measured by taking into account:

- total population base of each region
- age and gender of the population base
- socio-economic composition of the population base
- services provided by regions to residents of other regions

Health authorities are responsible for implementing their business plans and explaining any variation between planned and actual performance. This is done formally in the annual report at the end of each fiscal year.

- Continue to develop and refine business plans and annual reports that list the results achieved in our health system. These annual reports help health authorities develop their next business plan, and inform Albertans about both achievements and priorities for improvement.
- Follow up on the provincially required performance targets that are established for all health authorities. These shared goals link the strategies and operations of health authorities with the Ministry of Health's business plan, which sets strategic directions for the health system as a whole.
- Continue to implement the recommendations from the Health System Funding Review Committee (Laing Report). As an example, funding for the health system in the current three year business plan is increasing by \$935 million (21%) from \$4,465 million to \$5,400 million.
- Develop new options for paying health professionals and encourage ongoing improvements in health and the performance of the health system.
- Refine the system for funding academic medicine.
- Develop and implement methodologies for consistent costing of regional health authority services.

Theme Seven

*The Public Should Have
Effective Ways of
Participating in Future
Decisions*

"People want to be better informed and have opportunities to participate in decisions about the health system in the province and in their own communities. Many people said they do not know enough about how the health system operates and how much it costs. Suggestions were made that the Health Summit process should not be a one-time effort, but should continue in communities across the province."

Final Report

Recommendation 29:

Government should consider extending the public consultation process on a regular basis to involve more people in discussions about the health system and its future. This could be done through the recommended forum on health planning.

Recommendation 30:

Government should significantly expand its efforts to inform people about the health system, how it works and how much it costs.

Response: Accepted in principle.

Actions Already Underway or Planned:

- Continue to regularly consult with Albertans on local planning for the health system through existing mechanisms. This is done through the community health councils that are set up in each of the regional health authorities as well as public and stakeholder meetings and other formal consultation programs.
- Expand the circulation of the Update on Health newsletter. This is an Alberta Health and Wellness regular newsletter for distribution to health stakeholders and interest groups across the province with a current circulation of over 50,000.
- Continue to consult with Albertans through the Alberta Health Survey and provide these results to the public.
- Set governance expectations for health authority boards which require them to have a comprehensive communications program that informs the public about how to obtain services, how to register concerns and how to deal with health emergencies.
- Enhance and expand the Alberta Health and Wellness Website which contains the latest news releases, information and publications from and about the department. General inquiries and comments about health and health services are also received.
- Continue to inform Albertans through regular news releases announcing new initiatives or explaining policy decisions. These releases are sent to all Alberta media outlets, numerous stakeholders, interested members of the public and are also posted on the Alberta Health internet site.
- Develop more health related initiatives through the Alberta government's Alberta Connects program that facilitates more two-way communication with Albertans and provides more information on government plans for the health care system. Alberta Connects ads in the weekly and daily newspapers appeared this Summer outlining health system specifics.
- Develop new and enhanced strategies to provide health and health system information to Albertans and provide opportunities for Albertans to participate in health system planning.
- Initiate a bi-annual report to Albertans on the performance of the health system, including actions responding to the recommendations to the Health Summit and future plans for health system enhancement.

Conclusion

Health Summit '99 provided an opportunity to talk about health, to explore four key questions about health and help set clear directions for the future of Alberta's health system.

Government fully supports the direction established by the Health Summit. In this response, the government has made a firm commitment to Albertans to act on these recommendations and develops action plans and initiatives as part of the budget and business planning process.

The recommendations provided within this report speak directly to the level of importance that health care has within individuals' lives. Albertans have very clearly told government that health care is a priority issue and government will plan current and future health directions to reflect this priority.

