

**Alberta Health Services Communications**

# **Strategic Plan**

## **2010 – 2012**

**October, 2009**

## Introduction

Alberta Health Services Communications is responsible for developing and executing a Strategic Plan to drive and support the organization's Strategic Direction 2009-2012. The blueprint that follows embeds Alberta Health Services values, goals, focus and key priorities across Communications planning, priorities and operations. It captures: 1) the core **Values** under which Communications operates and aligns with those of Alberta Health Services; 2) **Goals** for 2010-2012; 3) **Strategic Priorities** to achieve these goals in 2010, both general in terms of communications best practices, and specific in terms of the priorities identified to advance access, quality and sustainability; and 4) a **Strategic Context** to put this Plan into action through 2012.

## Vision

Communications will build trust and public confidence by addressing issues and opportunities with clarity, consistency and confidence, respecting the integrity and complexity of the work of the health care providers we support. Communications will provide strategic advice in issues identification and management, while exponentially increasing emphasis on innovation and the celebration of excellence. We will be visible, accessible and direct. We will:

- Create new points of contact with the community, internal and external stakeholders, and government partners;
- Create new opportunities for proactive communication, including internal and external websites and new channels that expand access to health information;
- Provide timely, responsive communications tools and tactics;
- Integrate and leverage communications across the department and throughout the organization;
- Confront challenges and provide solutions;
- Take pride in the quality and professionalism of our work and that of our colleagues.

## Alignment with Alberta Health Services Strategic Directions

Strategic Directions spans a broad range of areas of focus. The role of Communications is to help the public and stakeholders understand the substance and context of these areas, why they are important, how they were developed and will evolve, and how they will have an ongoing impact on quality and safety.

Alberta Health Services' commitment to patient focus means that Communications must increase access to health information, improve awareness of health services, communicate the importance of health system performance, and emphasize the increasing importance of wellness. Ensuring "The Right Care in the Right Place" depends on the ability of patients to know both *what* care is needed and *where and how* that care can best be provided. This commitment enables individuals to take responsibility for their own health care needs and choices with the highest degree of flexibility and independence.

For example, one of the key issues across Alberta – equity of access – can be addressed in part with increasing awareness of the scope of services and information available through HealthLink.

It is also important for Communications to help the public and stakeholders understand and appreciate the scope and skills of care providers, where innovation is changing health care, and how thoughtful, robust and forward-looking planning today will shape and define health care in the future. Communications will begin in 2009 with an increasing emphasis on community-based care, the use of our external website as a primary point of access for health information, and expand as needed and directed in, for example, the areas of Emergency Care and Primary Care. In the immediate term, all Communications resources as requested and needed will be devoted to preparation for, and response to, Pandemic (H1N1) 2009.

### **Shaping Organizational Culture**

Internal Communications can have a strong positive impact on AHS morale, by providing more, and more detailed, information in times where there is a strong need and desire to understand “what” is happening and “why” in a rapidly-changing environment. Equally important is recognition of exceptional achievement. Celebrating the “heroes of health” is a cornerstone of the process of instilling the values of the organization.

### **Alignment with Government of Alberta Health Services**

AHS communications can be conduit for improved information flow between AHS and government, ensuring clear lines of communication and alignment of communications objectives and emerging issues. The transition to increased levels of community-based care, for example, illustrates again the importance of communicating the “why” as well as the “what” and understanding the need for continuous communication with government.

### **Alberta Health Services Communications today and tomorrow**

AHS Communications is in a rebuilding phase, which creates new opportunities to rethink former structures and patterns of work and information flow. The Communications team is ready to accelerate and execute the strategic plans described below. Communications recognizes the need to create a dynamic program that reflects the diversity of public perspectives and the complexity of a health system in the midst of transformation. A number of stakeholder objectives must be met: External; Internal; Government and Community Relations; and Media.

Communications must also take into account and adapt to the factors that bear on all sectors of public service: A high degree of economic uncertainty, the need to work within our means and the reality of competing interests.

At the same time, confidence in health care providers and a shared public understanding of the importance of health care in the quality of life for Albertans are important and enduring touchstones. The new treatments and technologies that are increasing demands and expectations for health care are also creating new opportunities to be shared and celebrated.

# Values

## Respect

- Listening to staff, stakeholders and Albertans and ensuring that multiple perspectives are captured and expressed in AHS Communications planning and programming;
- Striving to understand concerns and answer questions;
- Demonstrating knowledge and confidence in the health system and those who provide care and services;
- Respecting the integrity of the work of the people with whom we develop and deliver communications;
- Ensuring and sharing patient perspectives; protecting confidentiality.

## Accountability

- Ensuring the accuracy and integrity of communications;
- Providing high quality, professional communications commensurate with what is needed and expected of one of Canada's largest and most complex organizations;
- Developing province-wide communication tools that both respond to regional issues and leverage the strength of an integrated, province-wide communications strategy.

## Transparency

- Developing relationships with staff and stakeholders, including the media and public interest groups, that emphasize honesty and shared responsibility and accountability;
- Demonstrating a willingness to openly discuss and debate important issues;
- Providing information along multiple pathways that create new opportunities to understand AHS plans and priorities.

## Engagement

- Creating and expanding current (website) and non-traditional communications (social media) tools that enable staff and stakeholders to be actively part of the communication process, such as open houses and on-line forums;
- Creating two-way channels of communication.

## **II. COMMUNICATIONS GOALS 2010-2012**

### **Build trust and public confidence**

- Work with the AHS Executive, the Board and government to create a long-term “health plan” based on Strategic Directions, foundational principles, emerging policy directions and community engagement; the plan will provide a long-term context and build understanding and clarity with respect to the “whys” of decision-making;
- Use this plan as a primary communications tool to understand AHS principles and priorities.

### **Create new points of contact with stakeholders and the public**

- Alberta Health Services is a new organization that must develop a different scope and scale of outreach and engagement;
- Use this opportunity to emphasize innovation in communications.

### **Provide strategic communications advice and direction**

- Work with health leaders to identify issues and opportunities earlier and respond more proactively;
- Use this information to position Alberta Health Services as a national and international leader in health innovation and service delivery.

### **Support senior leaders by aligning Communications with AHS organizational structure**

- Ensure communications is positioned internally to leverage its financial and human resources by understanding, influencing and executing the organization’s highest priorities;
- Use this access to ensure communications resources are positioned and deployed to reach a broad range of stakeholders and achieve the greatest impact.

### **Develop and support staff to assume strategic responsibilities**

- Build on AHS Communications strengths and recruit leaders in communications innovation;
- Use these resources to create teams dedicated to delivering measurable results with respect to the strategic priorities identified below.

### **III. STRATEGIC PRIORITIES - 2010**

#### **Focusing on access, quality and sustainability:**

##### **Best Practices**

- Create a shared and centralized pool of detailed information, based on and expanding upon the eight areas of focus in Strategic Directions 2009-2012: timely analyses, position and discussion papers, backgrounders and briefing notes;
- Increasing emphasis on proactive communications to provide a more balanced public perspective on health care issues: more news releases, OpEds, analyses and commentaries; use of a broader range of publications and other media and commentary;
- Build partnerships with other AHS portfolios, particularly the Board Office and Community Engagement;
- Engage staff and physicians by sharing their perspectives and ensuring opportunities for consultation and collaboration are identified, supported and communicated;
- Engage external stakeholders in two-way communication by identifying and building upon networks of supporters and stakeholders;
- Expand the breadth of patient perspectives in news coverage and in AHS communications materials;
- More face-to-face communication with internal audiences.

##### **Specific (2010)**

- Increase use of the external web for public access to health information;
- Launch a single website as the primary source of information on success/progress in AHS;
- Development and executive of a strategy for improved and increased communications with physicians;
- Increase the resources dedicated to increased public awareness of Strategic Direction performance measures related to Emergency wait times, Hips, Knees and Joints and Seniors influenza immunization;
- Increase the depth and scope of communications resources related to H1N1;
- Launch an information campaign focused on Seniors Living Options;
- Staff development re communications best practices including media training;
- Create “Innovation Teams” dedicated to information on innovation and achievement across AHS;
- Realign Communication structure and budget to support the EVP structure and organizational priorities;
- Develop a plan that builds understanding and clarifies the principles and rationale for decision-making as part of a longer-term engagement process.

- Expanding opportunities to include MLAs and Board members and other community leaders in events and other engagement opportunities.

## Measures

Specific measures have been developed to track progress on these priorities. They include:

- Hits/day on the web, internal and external;
- Development and incorporation of survey and public opinion data associated with the development of the Seniors Living Options awareness package, including direct/indirect outreach to 50,000 seniors and expanded health information on the web;
- A prescribed number of media/web packages, including timelines and the internal reallocation of resources to staff the innovation teams;
- Assignment of a senior leader to each EVP and zone portfolio, effective November 2009;
- \$3.02M spending reduction, with a \$4.2M stretch target.

## IV. STRATEGIC CONTEXT - 2010-2012

In addition to the specific goals identified above, a framework has been created to provide a broader strategic context and ensure that Communications resources are allocated and dedicated to communications in four key areas: External; Internal; Government and Community; and Media. Examples of projects in development are included and will form part of the 2011/2012 strategic plan.

### External

Creating opportunities for Albertans to know more about their health options and to become more directly informed and engaged:

- Broadly positioning “The Right Care in the Right Place,” supported by the development of non-media health information packages;
- Use of a broader range of external media, including magazines and radio; non-traditional networks and pathways such as social media;
- Expanding and supporting consistency in health promotion across Alberta;
- Better management of internal and external information flow to ensure AHS staff and physicians have timely access and awareness of emerging proposals, plans and initiatives;
- Media training;
- Development and acquisition of survey data to guide decision-making.

## Internal

Creating opportunities for AHS staff and physicians to become aware of and be part of the changes underway in health care in Alberta:

- Alignment and flow of information from senior executive to other leaders – Leadership Update; launch November 2009;
- Timely information to staff – E-Connect, launch November 2009;
- Showing trust and confidence in our colleagues by empowering staff to tell their stories; timely information on innovation success; expanded zone-specific content in Connect to balance regional and systemwide information;
- Developing closer working relationship with Human Resources and Labor Relations on staff engagement and celebration of success;
- Launching an orientation program for new Communications Staff to capture what do we do and why, emphasizing a culture of creativity and accountability.

### Board of Directors (Launch November 2009)

- Expansion of information flow to the Board beyond media summaries to include look-ahead, key message summaries and analysis;
- Discussion re: scope and substance of health plan;
- Meetings with key stakeholders and community leaders based on evolution of health plan (2010).

## Government and Community Relations

Develop effective, ongoing working relationships with key stakeholders to inform and develop AHS strategic directions:

- Developing clearer understanding of health care policy and health care delivery;
- Aligning and supporting rural engagement and service delivery initiatives;
- Supporting Community Engagement portfolios, including Health Advisory Councils;
- Promoting HealthLink as a cornerstone of interaction and engagement with all communities.

## Media

Providing context and timely, credible information in response to questions and commentary in the public interest:

- Creating a team within Communications and aligning it with Media Relations to increase the number of news releases focused on innovation;
- Ensuring clarity, consistency and broad outreach to key audiences, both geographically and demographically;



- Understanding and responding to the need for both regional and provincial media relations; providing context locally for large provincial messages;
- Providing key messages that both capture AHS positions and anticipate questions, concerns and outcomes.

### **In development (projected through 2011-2012)**

- Create opportunities for physicians and other clinical leaders to communicate directly, either through media or our own channels, such as the web;
- Communications webpage, including information on Communications vision, role, services, priorities and major projects;
- Dedicated resources in each zone to communicate specific issues and innovations;
- Better communication across portfolios to ensure timely awareness and action on emerging issues;
- Accelerating the transition to a common “language” for communications across the former regions, consistent acronyms;
- Regular ‘communication within communications’;
- Professional development to meet the need to add more value as a strategic resource;
- Creation of toolkit for departments to execute small “c” communications.