The 2017–2020 Health Plan and Business Plan

A healthier future. Together.

Year
3
of 3-year plan
2019-2020





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Message from the Board Chair and President & CEO

2020 and Beyond: Entering a New Decade of Serving Albertans

As Alberta Health Services (AHS) enters its third and final year of the 2017-20 Health Plan, we recognize the opportunity to reflect on our progress, and to begin setting our sights towards the future as plans for a new threeyear health plan begin.

AHS is committed to working collaboratively with Alberta Health (AH) to carry out the mandate and vision for healthcare that Albertans have entrusted us with, as we strive to fulfill our mission to provide a patient-focused, quality healthcare system that is accessible and sustainable for everyone. Serving a population of more than 4.3 million Albertans, we will continue to create a health system that puts patients first while improving efficiency.

Sustainable, Responsible Healthcare

AHS is committed to finding efficiencies while maintaining or improving the frontline care our patients receive. As Alberta's largest public sector organization, we remain ever-mindful of the need to deliver services in the most cost-effective way possible. We will continue to make key investments in priority areas, appropriately manage contracts

and agreements and work to reduce variation in the cost of providing services across facilities and zones.

- We spend 3.3 per cent of our total expenses on administration - the lowest admin-to-total expenses ratio in the country and 22 per cent below the national average.
- In 2019, health leaders from around the world ranked AHS in the top five most integrated health systems in the world at the 18th annual International Congress for Integrated Care.

Reducing Surgical Wait Times

Through various initiatives, including the Alberta Surgical Initiative, AHS is dedicated to reducing surgical wait times and increasing access for Albertans. We will work in partnership with Alberta Health to develop additional comprehensive strategies to improve surgical access, including better utilizing non-hospital surgical facilities. We will look for ways to increase options for patients, while reducing wait times and managing costs.



AHS President and CEO Dr. Verna Yiu.



Improving Quality and Safety

We are constantly striving to improve the health outcomes for Albertans by improving the quality and consistency of care they receive from AHS.

- Fourteen hospitals have implemented the National Surgical Quality Improvement Program to help guide improvements in surgical care. It means Albertans spend less time in hospital after surgery and experience fewer complications.
- We have increased the accessibility of cancer screening programs and tobacco cessation programs. In lung cancer care, specialists are seeing patients sooner and the fiveyear-survival rate has jumped from 16 to 22 per cent.

Integration of Care

Alberta Health Services is Canada's first and largest provincewide, fully-integrated health system. A decade ago, AHS was considered a bold experiment but today, other provinces like Saskatchewan are following the Alberta example. This integration allows us to leverage and scale the knowledge, expertise and best practices of healthcare providers across the province. We are committed to enable all regulated health professionals to work to their full scope of practice.

- Connect Care continues to be phased in over the next 3 years.
 Supported by a shared provincial clinical information system, it will enable AHS healthcare teams to access and record information in a consistent way and link patients, healthcare teams and information together.
- AHS established the Primary Health Care Integration Network to connect primary care with acute, emergency and specialty care, and with social organizations and other services, making care more seamless for patients and families.

Research and Innovation

A strong commitment to research, innovation and analytics has provided significant opportunities to use data to make meaningful improvements in care and outcomes for patients.

 Our 16 Strategic Clinical Networks (SCNs) have brought together clinicians, researchers, patients and policy-makers to improve the quality and standardization of care in specific areas of health, such as cancer care, seniors care and cardiovascular health. Since their creation, Strategic Clinical Networks have resulted in cumulative savings of 43,000 bed days, cost avoidance of \$28 million and savings of over \$15 million.

Alberta Health Services marked its tenth year as a single, provincewide healthcare organization in 2019. In the past decade, we have been through many changes and have met some difficult hurdles along the way. But through those challenges we pushed ourselves to become a better, more innovative, more costeffective healthcare system - and a system that puts our patients at the centre of everything we do. As a learning organization, we know further improvements are always possible. AHS is looking forward to valuable insights from the AHS Review to help us be the most efficient and effective organization possible while delivering quality health services. This Health Plan outlines what we aim to accomplish in the 2019-2020 fiscal year.

Original signed by

David Weyant, Q.C.
Chair
Alberta Health Services Board

Original signed by

Dr. Verna Yiu President and Chief Executive Officer Alberta Health Services

December 11, 2019

Purpose

The AHS Health Plan and Business Plan is a public accountability document spanning a three-year time frame. It describes at a strategic level the actions AHS will take in carrying out its legislated responsibilities with a primary focus on the delivery of quality health services.

Health Plan and Business Plan development is guided by direction received from Alberta Health and is aligned with and supports the Ministry's business goals. A key feature of the plan is ensuring that mechanisms for measuring and monitoring results and achievements are identified.

The responsibilities as set out in Section 5 of the *Regional Health Authorities Act* are to:

- 1. Promote and protect the health of the population in Alberta and work towards the prevention of disease and injury,
- 2. Assess on an ongoing basis the health needs of Alberta,
- 3. Determine priorities in the provision of health services in Alberta and allocate resources accordingly,
- 4. Ensure that reasonable access to quality health services is provided in and through Alberta, and
- 5. Promote the provision of health services in a manner responsive to the needs of individuals and communities, and supports the integration of services and facilities in Alberta.

AHS Vision

Healthy Albertans. Healthy Communities. **Together.**

AHS Mission

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

AHS Values



compassion accountability respect excellence safety

Our Path

Moving Forward in Year Three

The Health Plan and Business Plan outlines what Alberta Health Services (AHS) will do in the future to transform the healthcare system. It also shares what we're doing right now, in communities across the province, to improve the quality, safety and accessibility of care for all Albertans - and how we're doing so in a financially sustainable way.

We see healthcare as a collaboration – we are all part of a team. We need the support and involvement of our partners — including advisory councils, patient and family advisors, community representatives and health foundations and the Albertans we serve. Their insights and perspectives have tailored the actions in this Health Plan, now in its third year of a three-year plan. Below are some examples of the important work we have in progress.

Financial Sustainability

We know containing costs and getting maximum value from every

health dollar are essential for us to preserve and protect our publiclyfunded healthcare system.

Alberta's healthcare transformation over the past 10 years has had a dramatic impact on the cost of care and our overall bottom line. AHS has saved nearly \$1 billion over the past decade through efficiencies.

By offering high-quality, comprehensive healthcare, we not only serve the best interest of our patients, but we can avoid costs through fewer complications, fewer readmissions, shorter hospital stays, and reduced need for emergency and inpatient care.

The actions outlined in this Health Plan and Business Plan are having a positive, transformative effect on the health system. Work on the 2020-2023 Health Plan began immediately following the development of the Alberta Health (AH) Business Plan and will include strategies and measures emerging from the AHS Review conducted by Ernst and Young.

Wait Time & Access

While significant work has been undertaken to reduce the amount of time Albertans wait for access to their healthcare system, there are a number of points across the care continuum where wait times remain a challenge such as emergency departments, diagnostic testing, surgical access, and continuing care.

AHS is looking beyond current systems and processes to determine if there are better, more innovative ways to deliver sustainable care through the development and implementation of a Wait Time and Access Strategy.

This strategy will guide priority service areas within AHS to review their approach to matching demand with capacity (access); as well as identifying gaps and actions, implementation, and measuring progress.

Creation of the Alberta Surgical Initiative

AHS and Alberta Health have co-led the development of a provincial surgical strategy called the Alberta Surgical Initiative (ASI). The ASI will seek to reduce wait times for all scheduled surgeries over a 4 year time frame in alignment with the government health platform commitment.

Once implemented, ASI will reduce wait times and improve access to care more broadly for Albertans.



Connect Care

AHS wants Albertans to be more involved in their own health and wellness and we need to give them the tools to do that. That's what Connect Care will do. In partnership with Alberta Health, Connect Care will bridge information between patients, healthcare teams and the future.

The foundation of Connect Care is a shared provincial clinical information system, or CIS, that enables AHS healthcare teams to access and record information in the same place and way for each patient. With a provincial CIS, health information will move with the patient within AHS sites and services. It's expected to be completed by 2023.

Enhancing Care in the Community

Enhancing Care in the Community refers to AHS' goal of helping people to be as healthy, well and independent as they can be in their homes and communities and remains a cornerstone of the AHS Health Plan. By meeting the health and social needs of Albertans in their communities, we can improve wellness, independence, and quality of life thereby reducing a reliance on costly hospital stays.

We are focused on bringing together health services, including primary care, home care, seniors care, EMS, mental wellness/health supports, nutrition and public health, and linking them with community supports (such as those provided by other government departments), the not for profit sector and municipalities.

We want to shift the focus of our current hospital-based care system to a community-based care focus, keeping Albertans out of hospital when not required and freeing up beds for those who really need them. To do this, we are putting more services and supports within local communities. Hospital care will always be there when needed, but Albertans will be able to access more convenient services in their local areas.

For instance, with the Community Paramedic Program, specially trained paramedics visit a patient's residence to perform services typically delivered in hospital, such as diagnostics, suturing and IV rehydration.

We're also expanding home care services, palliative and end-of-life services, providing technologyenabled hospital-level care at home, developing partnerships to provide more easily accessible services in the community and performing tens of thousands of consultations and appointments remotely through secure videoconferencing technology that we call Virtual Health.

Another area where improving care in the community holds great promise is the Primary Health Care Integrated Geriatric Services Initiative. It aims to deliver comprehensive care to people living in the community with cognitive impairment, dementia or another geriatric syndromes, such as frailty.

Indigenous Health

Working together with Indigenous communities, the AHS Wisdom Council, and provincial and federal governments, we will adapt services to better meet the health needs of Indigenous peoples.

AHS is developing a provincial Indigenous Health Strategy and some zones have already begun engaging with Indigenous communities to develop Indigenous Health Action Plans.

Partnership, collaboration and co-operation are cornerstones of AHS' 16 Strategic Clinical Networks (SCNs). They are comprised of front-line clinicians, researchers, policymakers and patients who are passionate and knowledgeable about specific areas of health, such as cancer care, seniors care, kidney health and surgery. These SCNs leverage provincial resources and drive innovation in order to improve the quality, standardization and sustainability of healthcare services across the province.

Our Current Environment

The graphs below show some of the ways Alberta's population is growing and changing. This growth will certainly mean an increased demand for healthcare services in future years.

These demographic trends also clearly show that we must improve healthcare access and health outcomes for Indigenous Albertans. We are working to reduce the disparities that exist in almost all areas of healthcare when it comes to

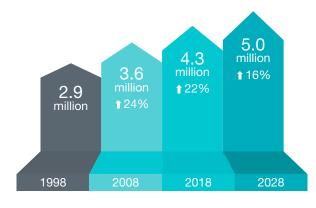
Indigenous peoples' health including lower life expectancy. (At this time data is only available for First Nations people in the province, not the total Indigenous population, which would also include Métis and Inuit peoples.) On average, First Nations people live fourteen years less than non-First Nations people living in Alberta. This is a challenge shared by many other jurisdictions; disparities in Indigenous peoples' healthcare are mirrored across Canada.

and North America. However, we at AHS are committed to finding an Alberta solution, in partnership with Indigenous peoples, communities, and federal partners.

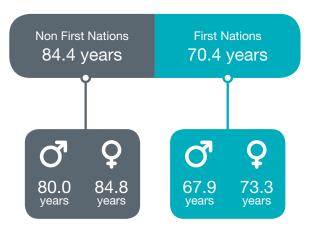
This is a key part of our 2017-2020 Health Plan and Business Plan, which guides us to improve the health outcomes of Indigenous peoples in areas where AHS has influence.

How much is Alberta growing?

Alberta Health IHDA as of May 2018



How long will Albertans live?



How much of Alberta's population is 65+?



What is the median age of Albertans?



Meeting the Needs of a Growing Alberta

The Health Plan and Business Plan address many factors that drive costs and demand on the healthcare system – a system that must still deliver the highest quality of care despite these pressures. Below are some of the challenges facing Alberta Health Services as we enter our next decade as a single, provincewide healthcare organization.

A Growing and Ageing Population

Albertans are expected to live longer in the coming years. Life expectancy for females is predicted to be 87.1 years by 2046, and for males it is predicted to be 83.6 years. Alberta's population is expected to reach 6.1 million by 2046 – an increase of approximately 1.8 million people from 2017.

The number of Albertans aged 65 or over is also expected to grow. In 2017, nearly 530,000 people in our province were 65 or over, or approximately 12 per cent of our population. By 2027, the number of seniors in Alberta is expected to be over 800,000.

Alberta is already experiencing rising rates of chronic diseases and growing demand on hospitals, surgical care and continuing care; this is expected to intensify as our population ages.

Diverse Community Needs

Alberta has an increasingly diverse population, with large rural and some remote populations. Our population is predicted to become even more diverse as those coming to Alberta from other countries make up approximately 47 per cent of our growth in the years to come.

Certain geographical areas within Alberta are home to different ethnicities and cultures with unique health needs requiring tailored approaches to healthcare. For instance, Indigenous peoples comprise six per cent of Alberta's population and have reduced life expectancy, higher rates of infant mortality, diabetes and suicide compared to non-Indigenous populations.

Recent population predictions also indicate that Albertans will become even more concentrated in our larger urban centres, and especially along the Edmonton Calgary corridor. By 2046 almost 8 in 10 Albertans are expected to live in this region.

AHS is committed to supporting diversity and inclusion of the



Community input and engagement further our ability to provide quality, patient-focused healthcare that is accessible and sustainable.

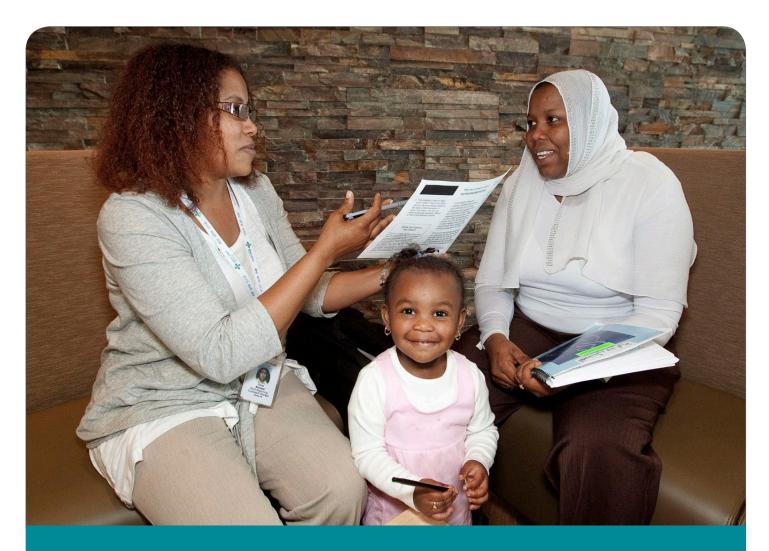
LGBTQ2S+ community which historically has been under-served.

When it comes to serving our diverse populations, patient, family and community engagement it critical to gaining an understanding that will improve the health system and result in better health and wellness for Albertans.

Fiscal Responsibility and Rising Costs

Alberta Health Services has a responsibility not only to deliver highquality, accessible healthcare, but to do so in a manner that is mindful of public resources, and gets the greatest value out of every healthcare dollar spent. We need to ensure that our investments are strategic: improving the health of our citizens while always seeking efficiencies that can avoid duplication, increase integration, and lower costs where possible. Seeking ways to reduce hospital readmissions, perform fewer unnecessary tests and reduce complications for our patients are all goals that improve the patient experience and reduce the costburden on the system.

The 2017–2020 Health Plan and Business Plan is reflective of our on-going commitment to improving the quality and safety of the care we deliver, while demonstrating strong financial stewardship through finding efficiencies and savings to maximize every healthcare dollar spent.



The East Calgary Health Centre is designed to meet the multicultural needs of the community, and consolidates health and community services in one location to make care convenient and easier to access.

AHS: Leading the Way

Alberta Health Services (AHS) is a national leader in many areas of healthcare, according to the latest statistics from the Canadian Institute for Health Information (CIHI). While AHS has many successes, we recognize the need to improve outcomes and continue to address the challenges in healthcare.

First in the country for:

- · Least total time spent in emergency department for admitted patients
- Lowest potentially inappropriate use of antipsychotics in long-term care
- · Best perceived health
- Highest percent of hip fracture surgeries within 48 hours
- Highest percent of patients receiving radiation therapy within national benchmark of 28 days (tied)
- Lowest administrative expenses

Second in the country for:

- Fewest repeat hospital stays for mental illness
- Lowest obstetric patients readmitted to hospital
- Fewest hospital deaths following major surgery
- Lowest restraint use in long-term care
- Fewest hospitalized heart attacks
- Fewest experiencing pain in long-term
- Highest physical activity (age 18 and older)
- Lowest 30-day in-hospital mortality after percutaneous coronary intervention (tied)

Third in the country for:

- Fewest hospitalized strokes (tied)
- Lowest 30-day in-hospital mortality after isolated aortic valve replacements
- · Fewest 30-day readmissions after percutaneous coronary intervention

Provincial Quick Facts

Primary Care / Population Health



127,214 Unique home care clients

694,313 Health Link



560.434

Acute Care



2,055,864 Emergency department visits (all sites)



401,179 Discharges

2,852,480 Total Hospital Days

Diagnostic / Specific Procedures

79,829,388 Laboratory tests



40,140 Cataract surgeries





6,278 Total hip replacements (scheduled and emergency)



6,613 Total knee replacements (scheduled and emergency)

Addiction & Mental Health

Addiction residential treatment & detoxification admissions

Mental health hospital discharges

Cancer Care

668.817

Cancer patient visits (Patients may have multiple visits)

59,249 Unique cancer patients

2018-19 AHS Annual Report

Developing the Plan

Working Together to Forge our Future

Alberta Health Services cannot build the health system of the future without the informed and active involvement of our valued partners, including the Albertans who rely on us. Our vision is Healthy Albertans. Healthy Communities. Together. It's what guides us. And the word 'together' is crucial because health system transformation is a shared responsibility – of those who work in the healthcare system, and those who use the healthcare system. We need to do this work together.

The 2017-20 Health Plan's objectives and performance measures were originally developed through a grass roots approach with engagement sessions, including employees, physicians, volunteers, advisory council members, health foundations, patient and family advisors, Alberta Health, and focus groups with populations who are more vulnerable to poor health outcomes. This diverse group of Albertans brought objectives that were prioritized, grouped, reviewed and refined through consultation. Through this engagement process, AHS determined objectives/outcomes and identified corresponding performance measures. Since 2016-17 (the baseline year), AHS has seen improvement in seven out of 13 performance measures.

Detailed actions supporting this Health Plan and Business Plan will be reported quarterly and will include progress and results achieved in key areas. Moving forward to the development of the 2020-2023 Health Plan, AHS is looking forward to working with AH to develop objectives and performance measures that better align to the government's priorities and mandate. These include measures from the MacKinnon Panel report, results from the AHS Review and objectives that align with the AH Business Plan.

The four goals of the Health Plan and Business Plan (see Page 14) align to the four areas of focus in AHS' Quadruple Aim:

- Patient and family experience.Patient and population health
- outcomes.Experience and safety of our
- Experience and safety of our people.
- Financial health and value for money

AHS believes when we balance all four areas, we are doing the best we can for patients and for the health system.

Engagement efforts with our many partners continue as the five geographic zones of AHS develop zone-specific healthcare plans designed to apply local strategies and solutions to meet the goals of the provincial Health Plan and Business Plan. AHS senior leaders have also been visiting communities across the province to talk about the Health Plan. Community Conversations are being held across Alberta to get feedback from Albertans about their health challenges and



to encourage suggestions for community partnerships. In addition, Together4Health is a new online platform where Albertans can get involved and have their say on various healthcare topics.

Over its three years, the Health Plan and Business Plan has been refreshed annually to reflect the progress we've made. Together.

AHS Alignment with Alberta Health

Alberta Health Services' 2017–2020 Health Plan and Business Plan, incorporates Alberta Health's vision and priorities as set out in the Ministry of Health's Business Plan. The provincial government is committed to supporting a health system that puts

patients first while recognizing and operating within a fiscally sustainable environment.

The 2017-2020 Health Plan aligns to the requirements set out by the Government of Alberta.

Consistent with the Regional

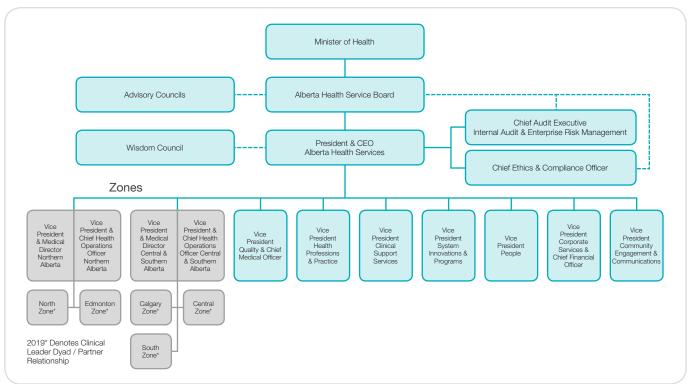
Health Authorities Act, the table below outlines how AHS intends to fulfil its mandate over the next three years.

Under Section 5 of the *Regional Health Authorities Act*, AHS has the following responsibilities:

AHS Responsibilities	AHS Objectives
We will protect and promote the health of the population in the health region and work toward the prevention of disease and injury.	We will work to reduce and prevent incidents of preventable harm to patients in our facilities. We will focus on health promotion and disease and injury prevention with an emphasis on childhood immunization. We will work to reduce disabling injuries in our workforce.
Assess on an ongoing basis the health needs of the health region.	We will work to improve health outcomes of Indigenous People in areas where AHS has influence.
Determine priorities in the provision of health services in the health region and allocate resources accordingly.	We will work to make the transition from hospital to community-based care options more seamless (Enhancing Care in the Community). We will work to improve efficiencies through implementation of operational and clinical best practices, while maintaining or improving quality and safety.
Ensure that reasonable access to quality health services is provided in and through the health region.	We will respect, inform and involve patients and families in their care while in hospital. We will work to improve access to community and hospital addiction and mental health services for adults, children and families. We will strive to improve health outcomes through clinical best practices with a focus on wait times and access.
Promote the provision of health services in a manner that is responsive to the needs of individuals and communities and support the integration of services and facilities in the health region.	We will strive to make it easier for patients to move between primary, specialty and hospital care. We will strive to improve our workforce engagement. We will work toward integrating clinical information systems to create common, comprehensive patient records (Connect Care).

AHS Organizational Structure

The AHS Board is responsible for the governance of AHS, working in partnership with Alberta Health to ensure all Albertans have access to high-quality health services across the province. The Board is accountable to the Minister of Health.



Health Plan Goals

Our Commitment to Albertans

These goals and their corresponding objectives will help define our specific commitments and propel us toward our vision. Within three years, Albertans can expect a stronger, more integrated provincewide health system. We are focusing our actions on enhancing care in communities, improving health

outcomes, and creating a more sustainable system. By putting these operational goals into action, AHS will emerge better positioned to meet the health needs of Albertans today and in the future. We are also supported by the work done to-date finalizing AHS' vision, mission and values. We are also guided by our four foundational

strategies that focus on our people, our patients, research and innovation, and the information management and information technologies required for a best-practice healthcare system. Outlined below are our four organizational goals.



Goal 1: Improve patients' and families' experiences.



Goal 2: Improve patient and population health outcomes.



Goal 3: Improve the experience and safety of our people



Goal 4: Improve financial health and value for money.

On the next four pages, we show each goal with its related objectives and examples of the priorities we are undertaking to achieve these goals. We have also defined performance measures and targets over this three-year health plan which will enable us to evaluate our progress and to link our objectives to specific results.

To achieve better health for all, we must take a different approach to the planning and design of services, ensuring our health system is integrated and co-ordinated between providers and patients. This will improve the experiences of patients and will lead to improved clinical practice, a more co-ordinated approach to team-based care, and more satisfied patients and staff.

Objective 1

We will work to make the transition from hospital to community-based care options more seamless (Enhancing Care in the Community).

- Implement Enhancing Care in the Community to shift some services out of busy hospitals and into the community.
- Increase capacity in continuing care by enhancing home care supports in communities across Alberta and, where appropriate, adding additional continuing care spaces.

Objective 2

We will strive to make it easier for patients to move between primary, specialty and hospital care.

 Work in partnership with Alberta Health to better support integration across the continuum of patient care and support patients along their respective clinical pathways.

Objective 3

We will respect, inform and involve patients and families in their care while in hospital.

 Continuing to apply our Patient First Strategy will enable us to advance healthcare by empowering and supporting Albertans to be at the center of their healthcare teams.

Objective 4

We will work to improve access to community and hospital addiction and mental health services for adults, children and families.

- Focus on better integration of addiction and mental health services across the continuum, including use of virtual technology-based solutions with a focus on vulnerable and rural populations.
- AHS continues to work together with Alberta Health, health professionals, first responders, law enforcement and community organizations, to address the opioid crisis and other emerging substances and offer programs, services and supports that reach Albertans.

Working toward improvement, we will monitor and report on: 2014-15 | 2015-16 | 2016-17 | 2017-18 | 2018-19 Performance Measure Percentage of clients placed in 59.9% 59.6% 56.1% 51.8% 58% 56% 58% 61% continuing care within 30 days Percentage of days patients no longer require acute care services 12.2% 13.5% 15.4% 17.5% 16.5% 14% 13.5% 13% but wait in acute care beds (referred to as alternate level of care) Timely Access to Specialty Care 3 0 8 12 10 15 20 (eReferrals) Patient Satisfaction with 81.8% 81.8% 82.4% 81.8% 83% 85% 85% 85% Hospital Experience Wait time (in days) for clients to receive addiction outpatient 15 13 15 13 14 12 11 10 treatment

Goal 2: Improve patient and population health outcomes.

We encourage Albertans to be co-partners in health. To reflect this, we actively engage with patients and families, staff and physicians, volunteers, local communities and other health partners. Together, we are building a health system that gives patients control over factors that affect their health, improves service quality, promotes leading practices, consistently applies standards, and increases local decision-making.

Objective 5

We will strive to improve health outcomes through clinical best practices with a focus on wait times and access.

- Continued focus and progress on access improvement (reduced wait times) initiatives across the whole patient journey including surgery, cancer care, emergency departments, continuing care and mental health services.
- Increase the capacity for evidence-informed practice and policy through clinical information systems, enhanced data sharing, research, innovation, health technology assessment and knowledge translation.

Objective 6

We will work to improve the health outcomes of Indigenous People in areas where Alberta Health Services has influence.

 Support reducing the health gap between Indigenous and non-Indigenous peoples by developing population and public health initiatives, including increasing the number of Indigenous communities that receive appropriate health services. Support the improvement of: women's health; maternal, infant, child and youth health; and, the health of the vulnerable and those in need or expressing need.

Objective 7

We will work to reduce and prevent incidents of preventable harm to patients in our facilities.

 Reduce preventable harm through various initiatives such as the Patient Safety Plan, antimicrobial stewardship program, equipment cleaning program, and hand hygiene practices.

Objective 8

We will focus on health promotion and disease and injury prevention with an emphasis on childhood immunization.

- Support health protection initiatives in the areas of environmental public health, food safety, immunization, and infection prevention controls.
- Actively contribute and lead, where appropriate, in the management of health crises and disease outbreaks.

Working toward improvement, we will monitor and report on:

Performance Measure		2014–15	2015–16	2016–17	2017–18	2018-19	2017–18 Target	2018–19 Target	2019–20 Target
Percentage of medical pa with unplanned readmiss hospital within 30 days o	ion to	13.6%	13.7%	13.6%	13.6%	13.8%	13.4% 13.3% 13.29		13.2%
Perinatal Mortality rate Nations among First Nations		10.5	10.7	9.7	8.4	8.66			
(number of stillbirths and deaths in the first week of life per 1,000 total births)	Non First Nations	5.7	5.3	4.7	5.5	5.41	Reduce gap between First Nations and Non First Nations populations		
	Gap	4.8	5.4	5.0	2.9	3.3			
Hand-hygiene complianc	e rate	75%	80%	82%	85%	87%	90% 90% 90%		90%
Childhood Immunization Diphtheria, Tetanus, Acellular Pertussis, Polio, Haemophilus Influenzae Type B (DTaP-IPV-Hib) Measles, Mumps, Rubella (MMR)		78% 88%	78% 87%	78% 87%	78% 87%	78% 86%	80% 88%	82% 89%	84% 90%

Goal 3: Improve the experience and safety of our people

We have a skilled and dedicated workforce of health professionals, support staff, volunteers and physicians who promote wellness, prevent disease and injury, and provide healthcare to a diverse population every day. We also host students from universities and colleges, providing clinical education experiences.

Objective 9

Disabling injury rate**

We will strive to improve our workforce engagement.

- Create an adaptable and resilient workforce, building leadership capabilities and effectively engaging our staff, physicians and volunteers.
- Enable all regulated health professionals to work to their full scope of practice.

3.69

3.57

Objective 10

We will work to reduce disabling injuries in our workforce.

 Foster an inclusive workplace that supports the health and safety of our people, and builds a culture where people enjoy what they do and remain committed to the purpose of helping others.

3.50

3.40

3.30

working toward improvement, we will monitor and report on:								
Performance Measure	2014–15	2015–16	2016–17	2017-18	2018-19	2017–18 Target	2018–19 Target	2019–20 Target
AHS employee engagement rate*	n/a	n/a	3.46	Next surv expected i	ey results n 2019-20	No survey	No survey	3.67

4.11

4.12

* Employee engagement rate is based on a five-point scale, with one being 'strongly disagree' and five being 'strongly agree' for overall satisfaction AHS employees responded about the work they do at AHS.

3.85

** Disabling injury rate is the count of disabling injury claims per 200,000 hours based on Alberta Health Services (AHS) paid hours. A disabling injury is defined as any Workers Compensation Board (WCB) claim resulting in lost time and/or modified work.

Goal 4: Improve financial health and value for money.

As we face service and cost pressures, we will continue our efforts to manage expenditure growth and to maximize the value of each dollar we spend to remain within provincial budget targets. We have to evolve and adapt to a changing system with increasing demands. This requires innovation to work differently, while maintaining quality and safety. We must also make difficult decisions in the coming years to contain costs and become sustainable, and guide future planning to reach positive financial health.

Objective 11

We will work to improve efficiencies through implementation of operational and clinical best practices while maintaining or improving quality and safety.

- Consider and pursue new service pathways and models of care which would see care delivered in the community in partnership with Alberta Health, other ministries, the voluntary and commercial sector, and communities in both their development and implementation.
- Focus on quality and health outcomes as priorities of the Strategic Clinical Networks by reducing inappropriate variation in service delivery and development, and application of consistent clinical standards and service specifications across AHS.

Objective 12

We will work toward integrating clinical information systems to create common, comprehensive patient records (Connect Care).

- Implement Connect Care to provide a single AHS health record for every Albertan.
- Improve access to information by supporting Alberta Health in enhancing and expanding Alberta Netcare, MyHealth Records, and MyAHS Connect to assist Albertans in taking an active role in managing their health.

Working toward improvement, we will monitor and report on: 2018-19 Performance Measure 2014-15 | 2015-16 2016–17 Percentage of nursing units achieving best practice efficiency targets: Monitoring 19% 20% 28% 40%* nursing units to identify and 38% 32% 35%* 45%* (AHS GL)** (AHS GL)** (CIHI) reduce variations in the cost of delivering high quality services at our different sites. There is no AHS measure for this specific AHS objective. Success is measured Connect Care based on meeting key milestones related to the Connect Care initiative.

CIHI = Canadian Institute for Health Information

^{*}Addressed only through attrition.

^{**}AHS general ledger

Our Performance Measures

This section explains how the performance measures link to each of the objectives. Targets were established in 2017 and were based on historical performance data as well as benchmarking with peers. Targets were endorsed by AHS and Alberta Health.

Goal 1: Improve patients' and families' experiences.							
Objectives	Performance Measures	How this links to our objectives					
Objective 1: We will work to make the transition from hospital to community-based care options more seamless (Enhancing Care in the Community).	Percentage of clients placed in continuing care within 30 days Percentage of days patients no longer require acute care services but wait in acute care beds (referred to as alternate level of care)	Monitoring how quickly patients are being moved from hospitals into community-based care has a direct link to the AHS objective of transitioning care from hospitals to communities. It also is an indication that patients are receiving the most appropriate care for their needs.					
Objective 2: We will strive to make it easier for patients to move between primary, specialty, and hospital care.	Number of specialties using eReferral	We will assess our work's success through eReferral to improve the flow of information between community services and more specialized services (hospitals, specialists). eReferral is also designed to improve the patient's path to care and support more appropriate and timely access to specialty care across Alberta.					
Objective 3: We will respect, inform and involve patients and families in their care while in hospital.	Patient Satisfaction with Hospital Experience	Directly measuring patients' healthcare experiences helps us see our services through the eyes of our patients, put them first and make them part of their healthcare team.					
Objective 4: We will work to improve access to community and hospital addiction and mental health services for adults, children and families.	Wait time (in days) for clients to receive addiction outpatient treatment	Improving access to addiction and mental health services is a priority, and AHS is working to increase addiction and mental health capacity in primary care to support Albertans' ability to receive the help they need to address their addiction and mental health needs.					

Goal 2: Improve patient and population health outcomes.							
Objectives	Performance Measures	How this links to our objectives					
Objective 5: We will strive to improve health outcomes through clinical best practices with a focus on wait times and access.	Percentage of medical patients with unplanned readmission to hospital within 30 days of leaving the hospital	Our Strategic Clinical Networks use readmission rates to measure success and improve outcomes for patients. This information helps us develop clinical best practices. While readmission for medical conditions may involve factors outside hospital care, high rates of readmission act as a signal to hospitals to look more carefully at their practices, including the risk of discharging patients too early and the relationship with community physicians and community-based care.					
Objective 6: We will work to improve the health outcomes of Indigenous People in areas where AHS has influence.	Perinatal mortality rate among First Nations	This is important as the rate of infant mortality among First Nations is significantly higher than the rest of the province. Monitoring this rate helps AHS develop and adapt health initiatives and services to better meet the health needs of Indigenous People and reduce the health gap between Indigenous People and other Albertans.					
Objective 7: We will work to reduce and prevent incidents of preventable harm to patients in our facilities.	Hand-hygiene compliance rate	AHS must continue to improve healthcare worker hand-hygiene compliance in order to keep patients and staff healthy.					
Objective 8: We will focus on health promotion and disease and injury prevention with an emphasis on childhood immunization.	Child immunization rate	Our disease prevention efforts will focus on protecting children and adults from a number of vaccine-preventable diseases, some of which can be fatal or produce permanent disabilities.					

Goal 3: Improve the experience and safety of our people. Objectives Performance Measures How this links to our objectives

Objective 9: We will strive to improve our workforce's engagement.

Objective 10: We will work to reduce disabling injuries in our workforce.

AHS staff engagement rate

Our People Strategy is built on the knowledge that when those who work in healthcare feel safe, healthy and valued in the workplace, the result is excellent patient-and family-centred care. Monitoring employee engagement enables us to determine the effectiveness of programs which support a satisfied workforce.

Disabling injury rate

Monitoring the disabling injury rate enables us to determine the effectiveness of programs that provide AHS employees, volunteers and physicians with a safe and healthy work environment, free from injury.

Goal 4: Improve financial health and value for money.

Objectives Performance Measures How this links to our objectives

Objective 11: We will work to improve efficiencies through implementation of operational and clinical best practices while maintaining or improving quality and safety.

Percentage of nursing units achieving best practice efficiency targets

Monitoring nursing units to identify and reduce variations in the cost of delivering high quality services at our different sites.

Objective 12: We will work toward integrating clinical information systems to create common, comprehensive patient records (Connect Care).

There is no AHS measure identified for this specific AHS objective. We will monitor our progress over the next three years through the accomplishment of our actions (key milestones and deliverables).

Enhancing Care

A New Paradigm, a New Era for Healthcare

What we've described in the Health Plan, and the actions we're currently taking, represent a shift away from how healthcare has been delivered for decades in Canada. In the past, the healthcare system has been centred on a hospital-based model of care: you get sick, you go to the hospital, and a physician will be at the centre of your care team. But modern-day demands on our publicly funded healthcare system require modern-day solutions. Building and staffing more hospitals cannot relieve pressures on our healthcare system and often do not best meet the needs of the patient.

A paradigm shift is needed — and this plan, and our current actions, represent this shift. Rather than focusing on illness, we will focus on wellness and illness prevention. Rather than focusing on single-provider care, we will focus on team care and wrapping an appropriate mix of supports around each patient. Rather than having a physician or specialist at the centre of a healthcare team,

we will put patients and families at the centre and involve them in all decisions regarding their care.

Enhancing Care in the Community is key to this paradigm shift and key to our Health Plan. We've shown how it benefits patients and families but its also good for the health system as a whole.

By shifting our focus to the community and finding innovative ways to improve wellness through supporting social needs:

- We're freeing hospital resources and beds for Albertans who truly need that high level of care, improving access and patient flow.
- We're enabling many hospital inpatients to be released earlier because they can access follow-up care, including rehabilitation, in their communities and sometimes right in their homes.
- We're enabling Albertans to remain at home, as appropriate, when they become ill or infirm with the supports they require.

 We're maximizing the value of every health dollar, enabling AHS to reinvest savings into high-priority areas.

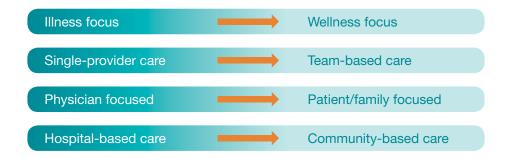
Ultimately, the Health Plan is transforming Alberta's health system so it focuses on the needs and preferences of patients and families, not the needs and preferences of the health system itself.

In addition to increasing the volume and scope of services located closer to where Albertans live, we are also developing partnerships with community groups, municipalities, employers/industry, insurers, government departments, and other partners, all sharing the goal of keeping Albertans healthy and well.

The work is underway and it's already making a difference in the lives of Albertans. We're excited about what's possible over the next year of this Health Plan.

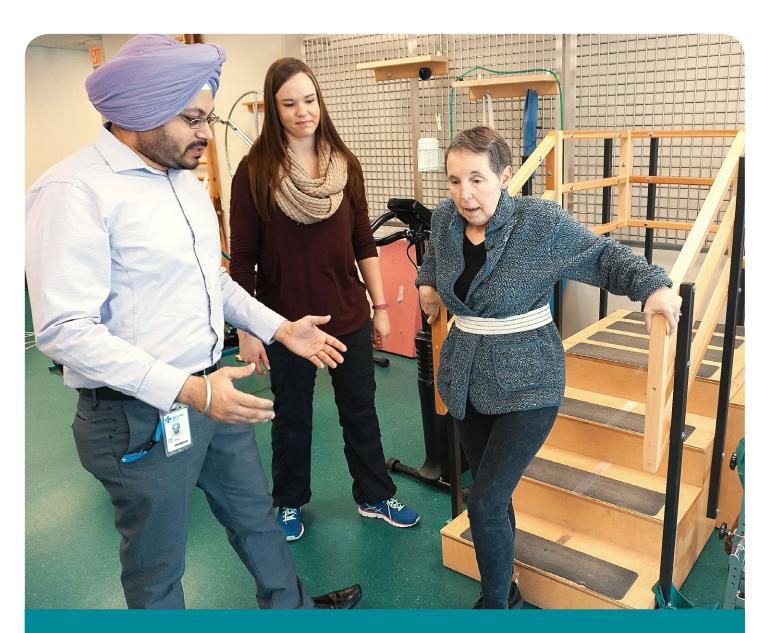
Enhancing care in the community

Alberta Health Services is focused on enhancing care in the community. This means supporting people in their residence or in their community so they can enjoy the highest quality of life possible. Hospital care will always remain a crucial component of the health system. However, we want to keep people out of hospital wherever possible – and when they do need acute care, we want to get them back home as soon as it's safe to do so. This will require a new paradigm within AHS.



Community care improves patient comfort, patient convenience and the overall patient experience while, at the same time, easing demand on our hospitals. This means acute care services will be more accessible for Albertans who truly need them and will also improve the financial sustainability of our healthcare system.





Physical therapist Jagbir Mudharh and therapy assistant Melissa DeMille support Janet Schlinker. Rehabilitation helped the Drumheller woman get back on her feet following surgery and to eventually walk five kilometres each day.

2019–2020 Business Plan

A healthier future. Together.





Overview of the Business Plan

Budget Summary

In the previous pages, the Year 3 2017-20 Health Plan outlined what Alberta Health Services (AHS) will do over the coming years to enhance and improve health services in Alberta. In this section, the 2019-20 Business Plan outlines the funding that will support the objectives of the Health Plan and how we are committed to working with the government to ensure

funding is allocated to improve the health of Albertans.

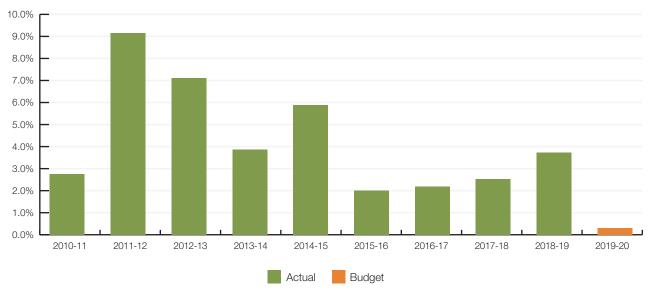
The plan focuses on various initiatives including the implementation of Connect Care and Enhancing Care in the Community.

These initiatives will improve the way we care for our patients and allow patients and families to be empowered as partners in their healthcare.

The AHS Review conducted by Ernst and Young is currently underway, and will identify potential ways which AHS can reduce costs and improve overall system performance. This budget has been created with the understanding that we must continue to find cost savings and efficiencies to be financially sustainable in our current fiscal environment.

AHS Growth of Expenses

(as a percentage)



2019-20 Budget

Revenue

In 2019–20, total revenue will be \$15,365 million, an increase of 0.6 per cent over the 2018-19 actual. AHS will receive a 1.3 per cent funding increase from Alberta Health. Other government transfers and other income appear to decrease due to one-time revenues received in 2018-19.

Expense

In 2019-20, total expenses will be \$15,365 million. Increased funding and reallocation of budget as a result of planned efficiencies will allow us to maintain operations and invest in limited priorities as described below.

Capital

In 2019-20, total capital spending will be \$542 million. This will support the development of the Connect Care system, new and replacement equipment purchases, facility enhancements and upgrades, and Information Technology investments in equipment, infrastructure and systems.

AHS Statement of Operations

(in millions of dollars)	2018–19 Actual	2019–20 Budget
Base operating grant from Alberta Health	12,486	12,600
One-time base operating grant from Alberta Health	29	-
Other operating grants from Alberta Health	1,193	1,294
Capital grants from Alberta Health	65	61
Sub-total revenue from Alberta Health	13,773	13,955
Other government transfers	430	427
Other revenue	1,071	983
Total revenue	15,274	15,365
Community	1,439	1,521
Home care	688	689
Continuing care	1,136	1,157
Population and public health	348	361
Ambulance services	528	517
Acute care	5,045	4,940
Diagnostic and therapeutic services	2,505	2,495
Education and research	316	319
Support services	2,260	2,265
Information technology	508	588
Administration	540	513
Total expenses	15,313	15,365
Annual operating surplus (deficit)	(39)	-

2019-20 Priorities

Financial Sustainability

AHS must continue to enhance and improve health services, while maintaining strong fiscal stewardship and operate within the budget approved by the AHS Board of Directors and the Minister of Health.

AHS' administrative expenses are tied for the lowest in the country as a percentage of total spending. According to the latest Canadian Institute for Health Information (CIHI) data (2017-18), AHS spends 3.3 per cent on administration, versus the national average of 4.5 per cent. We are investing in priority areas, and reducing operational costs as well as costs for hospital care. AHS is increasing the value Albertans receive from each health dollar and finding

savings without compromising care.

AHS is supporting strategies to improve efficiencies related to clinical effectiveness and appropriateness of care, operational best practice, and working with partners to support service delivery.

Operational Best Practice (OBP) is an AHS-wide initiative that compares healthcare delivery costs within Alberta, and with healthcare systems across Canada. This initiative ensures we are efficient and focused on quality care; it helps us achieve more equitable service delivery across the province while delivering safe, quality healthcare to Albertans.

Other initiatives including managing vacant positions, clinical service changes, and realigning the mix of

beds are also being implemented to ensure AHS is providing the most appropriate care to patients.

Continuous improvement is necessary to ensure health services for Albertans are sustainable into the future. AHS is focused on improving quality, which not only improves the patient experience, but reduces costs to the system through fewer complications, fewer hospital readmissions, shorter hospital stays, and providing seniors the option to remain independent and in their own homes, longer.

Wait Times & Access

A detailed plan to address surgical wait times is in development for budget 2020-21.

- Finding savings enables AHS to invest additional dollars into areas that matter most to Albertans.
- We will continue to work with the government to ensure we are operating efficiently and effectively, so we can be as responsive as possible to the health needs of Albertans.
- The AHS Review conducted by Ernst and Young will identify potential ways which AHS can reduce costs and improve system performance.



Connect Care

Connect Care continues to be a priority for AHS and will be implemented in waves across the organization over the next five years.

Starting in 2017–18, Alberta Health has committed \$400 million in capital funding over six years to support this largest clinical transformation project powered by IT. In November 2019, AHS launched Wave 1 of the Connect Care program in Edmonton Zone, including the Walter C. Mackenzie Campus and the existing eClinician ambulatory clinics.

Connect Care will transform the way clinicians and patients can access health information in a timely, consistent manner to achieve better outcomes.

Enhancing Care in the Community

AHS will continue to work towards providing more appropriate care in community settings. We want to enable Albertans to be as healthy, well and independent as possible in their homes and community.

AHS believes that putting more emphasis on community care and wellness will result in better health outcomes and more positive experiences for our patients and their loved ones.

Additionally, as we shift where and how we deliver care, we will not only better meet the needs of Albertans in their homes and communities, we will also reduce pressure on hospitals allowing improved access to acute care services for those who require it.

In 2019-20 AHS will increase access to home care services and the number of long-term care and supportive living beds across the province. This will further reduce the demands for hospital beds and improve patient flow in hospitals and emergency departments. Making sure that Albertans are receiving care in the most appropriate and comfortable setting as they age will lead to better health outcomes for patients and achieve overall savings to the system.

AHS will also increase the number of courses of care delivered by midwives in Alberta.

- Connect Care will span AHS' continuum of care, and will consolidate many of the approximately 1,300 health information systems into a common platform.
- In the past nine years, AHS has invested \$510 million to open over 7,400 continuing care spaces to support individuals who need community-based housing and supports.
- The 2019-20 AHS budget includes a 3.2 per cent (\$104 million) increase for community, home and continuing care.



2019-20 Risks

In 2019–20, AHS plans to spend \$42 million per day to support the healthcare of Albertans. The assumptions made during the preparation of this budget were developed at a specific point in time and are subject to change. The following pressures are specific to the budget.

AHS has an Enterprise Risk
Management program which supports
AHS leadership and management in
identifying, analyzing, and monitoring
risks that may impact the achievement
of its strategic objectives. Priority
strategic risks for AHS are updated
annually and - where needed - risk
management strategies are developed
and monitored.

Population and demand

As outlined in the Health Plan, the population of Alberta is growing, ageing, and life expectancy is increasing. In 2020, Alberta's population is expected to increase by 1.6 per cent. On average, AHS is providing more healthcare per person compared to previous generations. These factors are driving increased demand and costs in many areas of the healthcare system. AHS will work with Alberta Health to increase Albertans' understanding of the health system and to reallocate funding to support transformation towards a more sustainable system.

Costs

Healthcare costs have been rising more rapidly than general inflation and costs associated with treating patients are also increasing. The largest cost for AHS is expenses related to salaries and benefits for our workforce, including physician fees, purchased services and compensation related to clinical contracted providers.

AHS will continue to mitigate cost increases by reviewing contracts and bulk purchasing opportunities and will work with the Government of Alberta to negotiate agreements for employees and physicians.

Health workforce

AHS will continue to work towards enabling all regulated health professionals to work to their full scope of practice. This will increase capacity and create efficiencies within the AHS workforce.

Multiple priorities

AHS must continue to work with Alberta Health to find the right balance of programs and services to ensure that the healthcare needs of Albertans are met within an efficient and sustainable system.

Healthcare needs and priorities of Albertans are very divergent: we have rural and urban communities with different needs, we have minority populations (like Indigenous communities) that have traditionally been underserved, we have to contend with emerging strains on the system in areas like Mental Health and addictions that demand new strategies and new resources, while still being agile enough to respond to an emerging public health issue should one arise.

Engagement

Enhancing care and managing cost growth requires engagement from multiple stakeholders including Albertans, AHS employees, physicians, other healthcare providers, and the Government of Alberta. AHS will work with these key stakeholders to support our priorities, while managing cost growth and maximizing the value of each dollar spent.



Dr. Andrew Cave listens to the breathing of two-year-old Gabriel Carlson as his mother Katherine looks on. The Respiratory Health SCN has standardized clinical pathways for pediatric asthma.



Healthy Albertans. Healthy Communities. **Together.**









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