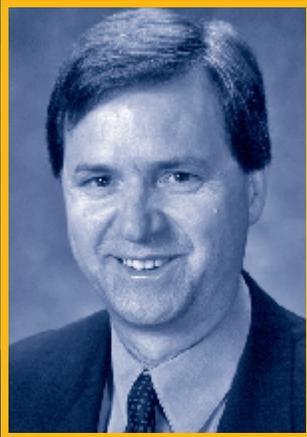


MINISTRY OF HEALTH SERVICE PLAN SUMMARY 2007/08–2009/10

Message from the Minister



I am pleased to present the 2007/08–2009/10 Service Plan for the Ministry of Health. This plan outlines the strategic priorities and key initiatives for the health system over the next three years.

The Ministry of Health along with B.C.'s health authorities and a hundred thousand dedicated health

professionals are committed to delivering high quality health services to British Columbians. Our work is done in support of our government's Five Great Goals for a Golden Decade that highlight healthy living and a quality health system as key priorities for British Columbia. Our vision of a modern health system is one that assists British Columbians across their life span, whether they need support to stay healthy, get better from an illness or injury, live with and manage a chronic disease or disability, or cope with the end of life.

Providing quality health services and ensuring the health system is sustainable for our children and grandchildren are of primary importance to the Ministry. Accordingly, in September 2006 Premier Campbell launched the Conversation on Health. In 2007 the Conversation on Health will continue to engage British Columbians in a discussion about health service priorities. The Conversation on Health is providing a valuable opportunity for government to hear about the health issues and solutions that matter most to British Columbians, and will guide us in our efforts to renew and improve our health system for today and ensure that we have a sustainable system for our children and grandchildren in the years to come.

Our 2007/08 – 2009/10 Service Plan also focuses on a number of initiatives that build on our Pacific Leadership Agenda to improve the health of British Columbians and renew our public health care system. One of our top priorities is to improve the health of the First Nations population through the implementation of the First Nations Health Plan. Another priority is to fulfill our commitment to build 5,000 net new residential care beds and assisted living units; we have now built over 2,500 net new beds and we will complete our 5,000 bed commitment by the end of 2008. We will also continue to work to enhance mental health and addiction services, reduce waiting times for surgeries, particularly for hip and knee replacements, and ensure that our hospital emergency departments serve people in a timely manner. In addition, we will continue to expand educational and recruitment programs to ensure there are enough health professionals and health workers to help meet the needs of British Columbians now and in the future.

A handwritten signature in black ink that reads "George Abbott". The signature is written in a cursive, flowing style.

Honourable George Abbott

Minister of Health February 14, 2007

Purpose of the Ministry

The Ministry of Health is responsible for British Columbia's health system, with a mandate to guide and enhance the province's health services to ensure British Columbians are supported in their efforts to maintain and improve their health. The B.C. health system is one of the province's most valued social programs as it touches all British Columbians' lives – at some point virtually every person in the province will access some level of health care or health service.

The Ministry of Health provides leadership, direction and support to its service delivery partners, such as health authorities, physicians and other health professionals,

who directly deliver the majority of health services in British Columbia. The province's six health authorities are the main organizations responsible for local health service delivery. Five regional health authorities are responsible for delivering a full continuum of health services to meet the needs of the population within their respective regions and the Provincial Health Services Authority is responsible for ensuring British Columbians have access to a coordinated network of specialized health services, such as cancer care, cardiac services and transplant operations.

Strategic Context

In the past 35 years, the scope of the public health system has expanded beyond traditional hospital and physician services to include comprehensive public health programs, a broad team of service providers, prescription drugs, home and community care and more.

This expansion of health services, along with the realities of British Columbia's aging population is threatening the sustainability of the health system. The health system faces increasing pressures from rising rates of chronic disease, expensive advances in technology and pharmaceuticals, and the challenge of providing enough health workers to meet system needs. Government understands the importance of the health system to British Columbians and is working to ensure high quality health services are available now and in the future. A key approach in this task is engaging British Columbians in a Conversation on Health that discusses the complex issues involved in delivering health services and will inform Government about the issues and solutions that matter most to British Columbians.

The Ministry has also identified a number of priority areas for action to improve health services and the health of British Columbians including:

- » Improving the health and wellness of British Columbia's Aboriginal population.
- » Building 5,000 net new residential care, assisted living and supportive housing beds by December 2008.
- » Strengthening our primary health care system to better meet the changing needs of B.C.'s population.
- » Reducing waiting times in key areas, including cardiac treatment, diagnostic imaging, joint replacements, cancer services and sight restoration.
- » Addressing emergency department congestion and improving effectiveness and efficiency.
- » Enhancing mental health and addiction services.
- » Ensuring there is an appropriate supply of health human resources, now and in the future.



Vision

A health system that supports people to stay healthy, and when they are sick provides high quality publicly funded health care services that meet their needs.

Mission

To guide and enhance the province's health services to ensure British Columbians are supported in their efforts to maintain and improve their health.

Ministry Goals and Performance Measures

Goal 1: Improved health and wellness for British Columbians.

Objectives

- 1.1 Individuals are supported in their efforts to stay healthy and make healthy lifestyle choices.
- 1.2 Protection of the public from preventable disease, illness and injury.
- 1.3 Reduced inequities in health status across the B.C. population, with a particular focus on improved health status for the Aboriginal population.

Performance Measure	Baseline	2007/08 Target	2008/09 Target	2009/10 Target	Long-Term Target
Obj 1.1 Physical Activity Index (age 12+)	58% classified as active or moderately active (2003)	Increase towards long-term target	Increase towards long-term target	Increase towards long-term target	69.5% classified as active or moderately active (2010)
Obj 1.2 Immunization Rates:					
<i>Two-year-olds with up-to-date immunizations</i>	67.9% (2005)	5 percentage point increase over prior year	5 percentage point increase over prior year	5 percentage point increase over prior year	95% (2015)
<i>Influenza immunization for residents of care facilities</i>	92.4%	Maintain at or above 90%			
Obj 1.3 Gap in life expectancy between the Aboriginal and the rest of B.C. population.	7 years difference in life expectancy between the Aboriginal and the rest of the B.C. population	Decrease the gap	Decrease the gap	Decrease the gap	Close the gap to less than 3 years difference (2015)

Goal 2: High quality patient care.

Objectives

- 2.1 Timely access to appropriate health services by the appropriate provider in the appropriate setting.
- 2.2 Patient-centred care tailored to meet the specific health needs of patients and specific patient groups.
- 2.3 Improved integration of health service providers, processes and systems to allow patients to move seamlessly through the system.

Performance Measure	Baseline	2007/08 Target	2008/09 Target	2009/10 Target	Long-Term Target
Obj 2.1 Waiting times for cancer treatment:					
<i>Radiotherapy</i>	96.5% began treatment within four weeks of being ready to treat	Maintain at or above 90% within four weeks	Maintain at or above 90% within four weeks	Maintain at or above 90% within four weeks	Maintain at or above 90% within four weeks
<i>Chemotherapy</i>	85% began treatment within two weeks of being ready to treat	90% within two weeks	90% within two weeks	90% within two weeks	90% within two weeks
Obj 2.1 Waiting time for surgery:					
<i>Percentage of hip replacement cases completed within 26 weeks</i>	52% completed with 26 weeks	Increase towards 90% within 26 weeks	Increase towards 90% within 26 weeks	Increase towards 90% within 26 weeks	90% within 26 weeks (2010)
<i>Percentage of knee replacement cases completed within 26 weeks</i>	47% completed with 26 weeks	Increase towards 90% within 26 weeks	Increase towards 90% within 26 weeks	Increase towards 90% within 26 weeks	90% within 26 weeks (2010)
Obj 2.1 Proportion of patients admitted from an emergency department to an inpatient bed within 10 hours of the decision to admit	66% admitted within 10 hours	Increase toward long-term target	Increase toward long term-target	Increase toward long-term target	80% admitted within 10 hours
Obj 2.2 Percentage of patients with diabetes who undergo at least two A _{1c} tests per year	45%	50%	55%	60%	70% (2014)
Obj 2.2 Percentage of natural deaths occurring in settings outside hospital (home, residential care, hospice)	45.7% of natural deaths occur in settings outside hospital	>48% of natural deaths occur in settings outside hospital	Further increase in natural deaths in settings outside hospital	Further increase in natural deaths in settings outside hospital	Not yet determined

Performance Measure	Baseline	2007/08 Target	2008/09 Target	2009/10 Target	Long-Term Target
Obj 2.3 Percentage of persons hospitalized for a mental health or addictions diagnosis that receive follow-up treatment within 30 days of discharge.	77.5%	80%	80%	80%	80%

Goal 3: A sustainable, affordable, publicly funded health system.

Objectives

- 3.1** British Columbians provide input into the development of the strategic direction of the province's health system.
- 3.2** Strategic investments in information management and technology to improve patient care and system integration.
- 3.3** Optimum human resource development to ensure there are enough, and the right mix of, health professionals.
- 3.4** Sound business practices to manage within the available budget while meeting the priority needs of the population.

Performance Measure	2005/06	2007/08 Target	2008/09 Target	2009/10 Target	Long-Term Target
Obj 3.2 Percentage of physicians implementing electronic medical record systems.	N/A (Program did not exist)	Program introduced and systems made available to physicians	25%	40%	100%

Resource Summary Table

Core Business Areas	2006/07 Restated Estimates	2007/08 Estimates	2008/09 Plan	2009/10 Plan
Operating Expenses (\$000)				
Services Delivered by Partners ¹	11,781,313	12,528,547	12,893,939	13,313,471
Services Delivered by Ministry ²	274,796	291,295	310,956	327,447
Executive and Support Services ³	125,923	147,078	152,659	156,695
Total	12,182,032	12,966,920	13,357,554	13,797,613

1 Primarily health authorities, medical services (physician payments), and PharmaCare.

2 Emergency Health Services (ambulances), Vital Statistics Agency.

3 Ministry staff and operations.

CONTACT INFORMATION

For more information on the Ministry of Health and the complete Ministry 2007/08-2009/10 Service Plan visit our website at: www.gov.bc.ca/health

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www.bcbudget.gov.bc.ca/2007/serviceplans.htm