
Strategic Plan 2008-2011

Department of Health and Community Services



MINISTER'S MESSAGE



Strategic Plan 2008-2011

In accordance with the *Transparency and Accountability Act*, I am pleased to present the 2008-2011 Strategic Plan for the Department of Health and Community Services. The Department has been assigned a Category 1 status and is expected to plan and report in keeping with these requirements. As Minister, I also acknowledge that I am accountable for the preparation of this plan and achievement of specific goals and objectives contained in this document.

In the development of this three-year strategic plan, careful consideration was given to the Provincial Government's strategic directions. These strategic directions form the foundation of the strategic plan and have been communicated to departmental officials and other entities in the creation of their respective three-year plan.

This strategic plan represents the second component of a planning cycle that extends from 2006 to 2011. While the strategic directions have not changed, new focus areas within each direction have been developed. Components of other goals are carried over into the 2008-2011 strategic plan and new goals, measures and indicators have been set. These represent the Department's continued efforts and focus for the next three years.

As Minister, I acknowledge the commitment and contribution of all department employees and entities to achieving a sustainable health care system that is built with quality and safety uppermost in mind.

Sincerely,

A handwritten signature in black ink, appearing to read "Ross Wiseman".

Ross Wiseman, M.H.A.
Minister of Health and Community Services and
Minister Responsible for Aging and Seniors

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PLAN AT A GLANCE

Introduction

In accordance with the *Transparency and Accountability Act*, passed in December 2006, the 2006-2008 strategic plan for the Department identified four strategic directions (see Appendix A) and seven strategic issues for that two year period.

This 2008-2011 plan builds on previous work and addresses five new strategic issues including long term care and community support, health and wellness, prevention and early intervention for children and youth, chronic disease management and quality and safety within the health and community services system. Five goals and yearly objectives have been developed to address these strategic issues. These have been summarized in "*Plan at a Glance*".

The 2008-2011 plan contains the following: an overview of the departmental structure, vision, values, mission, mandate, and lines of business and the strategic issues, which will be the focus for the next 3 years. The associated goals and objectives, measures and indicators for each strategic issue are presented to assist in measuring progress towards these goals. The outcome of these measures and indicators will be reported in an annual performance report, which will be tabled in the House of Assembly to provide a summary of progress in achieving the goals and objectives set out in this plan.

Vision

The vision of the Department of Health and Community Services is for individuals, families and communities to achieve optimal health and well being.

Mission

By March 31, 2011 the Department of Health and Community Services will have guided the implementation of provincial policies and strategies that are developed to ensure equitable and quality services in population health, enhanced public health capacity, accessibility to priority services and improved accountability and stability in the health and community services system.

Goals and Annual Objectives 2008-2009 and 2009-2010

Issue: Long Term Care and Community Support Services

Goal

By March 31, 2011 the Department of Health and Community Services will have introduced more flexible and responsive services to provide individuals and families with increased choice in selecting the appropriate long term care and community support services.

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have developed a conceptual framework to support increased choice in selecting long term care and community support services options.

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have commenced implementation of new assessment models and selected service delivery options to support the identification of appropriate long term care and community support services.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have increased the quantity and diversity of options, and corresponding assessment models available for persons seeking long term care and community support services.

Issue: Health and Wellness

Goal

By March 31, 2011 the Department of Health and Community Services will have enhanced capacity to improve the health of the population by focusing on the following priority wellness areas from Phases 1 and 2 of the Provincial Wellness Plan:

Healthy Eating
Physical Activity
Tobacco Control
Injury Prevention

Mental Health Promotion
Child and Youth Development
Environmental Health
Health Protection

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have addressed the next developmental steps in the respective implementation of wellness priority areas.

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have monitored progress on the development and impact of priority areas of the Wellness Plan.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have addressed the sustainability of the Provincial Wellness Plan.

Issue: Prevention and Early Intervention for Children and Youth**Goal**

By March 31, 2011 the Department of Health and Community Services will have an increased focus on prevention and early intervention programs and services for children, youth and their families.

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have developed a strategy to increase focus on prevention and early intervention programs and services for children, youth and their families.

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have implemented a strategy to increase focus on prevention and early intervention programs and services for children, youth and their families.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have increased focus on prevention and early intervention programs and services for children, youth and their families.

Issue: Chronic Disease Management**Goal**

By March 31, 2011 the Department of Health and Community Services will have increased capacity in the area of chronic disease management.

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have established a provincial chronic disease strategy that includes policy directions to support an integrated and comprehensive approach to manage selected chronic diseases.

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have implemented policy directions and developed guidelines for management of selected

chronic diseases and approved aspects of the strategy.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have implemented a monitoring mechanism to measure the integration of the provincial chronic disease strategy into practice for the management of chronic diseases and conditions.

Issue: Quality and Safety

Goal

By March 31, 2011 the Department of Health and Community Services will have strengthened organizational systems within the health and community services system that foster quality and safety.

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have built the foundation for a culture of quality and safety at the provincial level and within the health and community services system.

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have commenced implementation of initiatives to demonstrate commitment to quality and safety in the health system.

Objective 2010-11

By March 31, 2011 the Department of Health and Community Services will have reported on progress to improve quality and safety within the health and community services system.

MANDATE

The Department of Health and Community Services is mandated under the *Executive Council Act (Regulation 82/03)*, such that the powers, duties and functions of the Minister include supervision, control and direction of all matters relating to:

- a) the preservation and promotion of health;
- b) the prevention and control of disease;
- c) the administration of hospitals, long term care facilities and personal care facilities;
- d) the control, possession, handling, keeping and sale of food and drugs;
- e) contracts, payments and remunerations for medical, dental, pharmaceutical, scientific, technical or other health and community services;
- f) public health and the enforcement of public health standards;
- g) the administration of a plan authorized by the Lieutenant-Governor in Council for the assistance of students in a professional or technical field connected with health and community services;
- h) services to children, youth and families;
- i) adoption of children;
- j) child care services;
- k) in co-operation with the Minister of Justice, the administration of laws relating to the commission of offences by young persons;
- l) programs and residential facilities for persons who are neglected, dependant, abused, persons with disabilities and persons who are being treated for addictions; and
- m) the administration of the Acts set out in the Schedule and of all orders and regulations passed or made under those Acts, including those powers, functions or duties necessary or desirable for carrying out the purpose of those Acts,

which are not, or in so far as they are not, the responsibility of another minister, agency or body, corporation, board, organization or person.

For a list of government entities that report to the Minister of Health and Community Services under *The Transparency and Accountability Act* see Appendix B.

DEPARTMENTAL OVERVIEW

The Department's 252 employees are located throughout five office locations; Confederation Building, Margaret's Place and Pleasantville in St. John's (80.5%); Grand Falls-Windsor (13.5%) and Stephenville (6%). The Department is organized as follows:

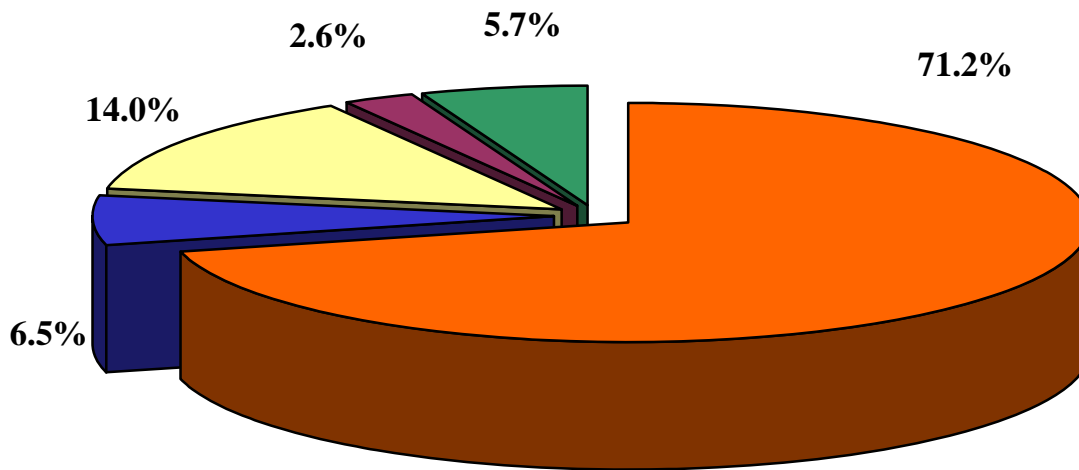
	Female	Male	Total
Minister's/Deputy Minister's Office	8	1	9
Communications	3	Nil	3
Government Relations	4	Nil	4
Medical Services	21	2	23
Regional Health Operations	19	5	24
Policy and Planning	23	7	30
Public Health, Wellness and Children and Youth Services	42	8	50
Corporate Services	80	25	105
Total	200	48	248

In addition to these locations the Department supports the following infrastructure in the health and community services system:

Hospitals	16
Health centers	18
Nursing homes	21
Nursing stations	13
Community/clinical offices	106
Personal care homes	105
Acute care beds	1593
Nursing home beds	2729

Where Health Care Dollars Are Spent

\$2.34 Billion (2008 - 2009 gross original budget)



- Regional Health Authorities & Related Services**
- Medical & Drug Subsidy Program**
- MCP Physician Services**
- Other**
- Capital**

Source: 2008-09 Estimates

LINES OF BUSINESS

Lines of business are discreet and coherent sets of programs and/or services that originate from the mandate and identify key areas of responsibility:

Policy, Planning, Program Development and Support
Monitoring and Reporting
Provincial Public Programs and Services Administration

1. Policy, Planning, Program Development and Support

The Department provides a leadership role for programs that operate under a legislative framework, provincial policy, and/or provincial program standards. These programs include:

Programs under a legislative framework (see Appendix C)

- Insured services (i.e. Medical Care Plan & Hospital Insurance Plan),
- Prescription drug programs,
- Child Youth and Family services,
- Community Youth Corrections services (in conjunction with the Department of Justice),
- Mental health programs and services respecting involuntary patients,
- Child care services, adoptions/post adoptions services,
- Public health services and programs.

Programs not under a legislative framework

- Parent and child health,
- Early childhood development,
- Immunization,
- Wellness initiatives,
- Long term and community support services,
- Emergency preparedness,
- Mental health and addictions services.

The Department establishes funding and/or operational delivery standards in areas such as:

- ambulance services,
- home support for seniors and persons with disabilities,
- transition homes,
- special child welfare allowance,
- residential services for persons with select disabilities,
- special assistance program (eligible supplies and equipment),
- financial eligibility criteria,
- Newfoundland and Labrador Medical Transportation Assistance Program,
- Dental Health Program and
- Newfoundland and Labrador Prescription Drug Program.

The Department ensures that regional health and community services are planned within the strategic directions of Government, the needs of the population and within the fiscal capacity of the health and community services system including determining need and placement of new health technologies and diagnostics, supporting innovation in service delivery, human resource planning, service location and volume, and maintaining facility infrastructure.

The Department provides liaison, interpretation of *Acts* and Regulations, facilitates amendments as necessary, and monitors annual reports as required by 16 *Acts* for regulatory bodies (See Appendix C).

The Department, in conjunction with the post secondary education system, provides leadership to health professional education and training programs to reflect the needs of the health and community services system and in funding some training programs.

The Department represents provincial priorities in the development of intergovernmental (Atlantic and Federal/Provincial/Territorial (F/P/T)) strategic directions and initiatives. In addition, the Department oversees the administration of programs emanating from various F/P/T agreements such as Early Learning and Child Care, Early Childhood Development and the National Child Benefit. These programs also include, but are not limited to, initiatives under the First Ministers' Accord such as wait time reduction, enhancement of home care programs, public health, initiatives under primary health care renewal and other services such as reciprocal billing, and Canadian Blood Services.

2. Monitoring and Reporting

The Department monitors and provides feedback as appropriate with respect to:

- periodic evaluation of selected elements of legislation under the authority of the Department, and in conjunction with other Government departments and agencies as is necessary and required;
- adherence to guidelines/best practices and/or funding/service delivery standards in areas such as Management Information Systems and Reporting Guidelines, Dental Health Program, Medical Care Plan, Newfoundland and Labrador Prescription Drug Program, ambulance, and intervention services;
- periodic evaluation of select programs and services;
- budget allocation and financial monitoring with respect to Regional Health Authorities and other agencies funded by the Department; and,
- implementation of budget directions by the Department or other entities to achieve targeted outcomes, such as improved service levels, reduced wait times, and reduced expenditures.

The Department monitors and reports to stakeholders with respect to performance in the areas of population health, health behaviours, health status, disease control, human resources and access to quality health services.

3. Provincial Public Programs and Services Administration

The Department provides supervision, control, and direct program and service delivery for matters related to:

- inter-provincial, inter-country and approval of all adoption placements and post adoptions services;
- provision of records of immunizations;
- payment and remuneration for medical services (MCP), dental services (Dental Health Program), and drug program (NLPDP) among others;
- special authorization of restricted drug benefits;
- approval and provision of grants to select community agencies;
- bursaries and incentives to students in select training programs according to established criteria;
- distribution and storage of vaccines;
- storage and distribution of National Emergency Stockpile System;
- medical transportation assistance to individuals as per provincial criteria;
- selected information technology initiatives involving health authorities and the health system, such as the development and maintenance of the Client and Referral Management System, in partnership with the Office of the Chief Information Officer; and
- administration of the monetary supplement for early childhood educators.

VALUES

The following values are considered to be important to the Department. These values are incorporated in daily activities and are present in the overall organizational climate. They include:

Collaboration

Each person engages actively with partners.

Fairness

Each person uses a balance of evidence for equity in decision making.

Privacy

Each person manages and protects information related to persons/families/organizations/communities and the department appropriately.

Respect

Each person provides opportunities for others to express their opinions in an open and safe environment.

Transparency in decision making

Each person is forthcoming with all information related to decision making except where prohibited by legislation.

Excellence

Each person performs to the best of their ability, and within available resources.

VISION

The vision of the Department of Health and Community Services is for individuals, families and communities to achieve optimal health and well being.

MISSION

A mission statement is an outcome oriented statement which addresses how the vision will be achieved in a specific time period. The present mission statement covers a five (5) fiscal year time period with two planning cycles, the first from 2006-2008 and the second 2008-2011. The goals, objectives, measures and indicators are to be realistic and achievable in the specified time period. These measures and indicators assist the Department and the public in monitoring and reporting on progress in dealing with the challenges related to an aging population, health status, geography, and sustainability.

The second phase of the planning cycle, builds on the work of 2006-2008. To achieve optimal health and well being of individuals, families, and communities, the Department strives to assure provision of equitable, accessible, and quality services through the development of strategies and best practice policies/standards in the areas of population health, public health capacity, accessibility to priority services and accountability. The goals and objectives represent new focus areas that are current and responsive to the needs of the health system and Newfoundlanders and Labradorians. This mission is in line with the mandate and links with the strategic directions that have been identified.

Mission

By March 31, 2011 the Department of Health and Community Services will have guided the implementation of provincial policies and strategies that are developed to ensure equitable and quality services in population health, enhanced public health capacity, accessibility to priority services and improved accountability and stability in the health and community services system.

Measure: Guided implementation of provincial policies and strategies in the following priority areas:

2006-2008

- Access to select Health and Community Services (wait list areas)
- Long Term Care and Community Support Services
- Seniors
- Early Learning and Childcare
- Public Health Capacity
- Population Health
- Sustainability

2008-2011

- Long Term Care and Community Support Services
- Health and Wellness
- Prevention and Early Intervention for Children and Youth
- Chronic Disease Management
- Quality and Safety

Indicators:

- Developed, revised and/or implemented policies, protocols, guidelines or documents in the above areas;
- Partnered and collaborated with established councils, coalitions, and advisory committees;
- Identified priorities for program, and policy development, public awareness, resource allocation and evaluation in selected areas;
- Supported the introduction/development of advanced information technology and management systems in communicable disease surveillance;
- Responded to issues identified in monitoring health related statistics and changes in the system;
- Increased departmental focus on quality and safety.

STRATEGIC ISSUES

In consideration of Government's strategic directions, the Department's mandate and financial resources, the following focus areas have been identified as priorities for the next three years. The goals identified for each issue reflect the results expected in the next three year time frame and will assist in addressing significant health issues in this province. The objectives provide an annual focus. In year one, 2008-2009, measures, objectives and indicators are provided to assist the Department and the public in monitoring and determining progress. When progress is determined at the end of 2008-2009, indicators for the 2009-2010 year will be developed.

Issue: Long Term Care and Community Support Services

Long term care and community support services is an important area for the Department and the people of this province. These services are intended to help older persons, adults and children with intellectual, physical and psychiatric disabilities to perform activities associated with daily living, and where possible, enable individuals to participate and be included in the community. The Department works within available resources to be responsive to the health and social needs of individuals who require supportive services. This supports the strategic direction of improved access to priority services by offering more choice, options and service diversity.

The Long Term Care and Community Support Services system in this province consists of services in Long Term Care Homes (LTCHs), Personal Care Homes (PCHs), Community Care Homes (CCHs), Alternate Family Care Homes (AFC), Co-operative Apartments, and other independent living arrangements. Non-residential services include, but are not limited to, home support services, family and non-family boarding arrangements, special assistance and programs for families with children with disabilities.

Goal

By March 31, 2011 the Department of Health and Community Services will have introduced more flexible and responsive service to provide individuals and families with increased choice in selecting the appropriate long term care and community support services.

Measure: Flexible and responsive services introduced

Indicators

- Increased number of program service options available
- Increased diversity in available programs and services

- Increased flexibility and responsiveness in responding to identified needs
- Introduced innovative models of care
- More integrated approach to service delivery

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have developed a conceptual framework to support increased choice in selecting long term care and community support service options.

Measure: Developed a conceptual framework

Indicators

- Models of care identified, inclusive of an assessment model that has needs based options
- Conceptual framework developed
- Key stakeholders consulted
- Evaluation criteria identified
- Policy developed to support selected models
- Necessary approvals obtained to proceed with implementation of selected models

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have commenced implementation of new assessment models and selected service delivery options to support the identification of appropriate long term care and community support services.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have increased the quantity and diversity of options, and corresponding assessment models available for persons seeking long term care and community support services.

Issue: Health and Wellness

Health promotion and wellness continue to be an important component of the overall mandate of the Department. A Provincial Wellness Plan: Phase I (2006-2008) guided work in the initial priority areas of healthy eating, physical activity, injury prevention and tobacco control. The Provincial Wellness Plan: Phase 2 (2008-2011) builds on Phase I and expands the focus to the new priority issues of mental health promotion, child and youth development, environmental health and health protection. The key directions remain as:

- Strengthen partnerships and collaboration
- Develop and expand wellness initiatives
- Increase public awareness
- Enhance capacity for health promotion

The evaluation of Phase 1 has confirmed many positive results and provides guidance for improvements. Phase 2 will build on the successes of Phase 1 and challenge us to keep the needed momentum and innovation. Partnerships are key and the work of the Provincial Wellness Advisory Council, the priority issues working groups and committees, as well as the Regional Wellness Coalitions is acknowledged. Resources will continue to be distributed at all levels, including provincial, regional, and community as it takes this combined effort to support and promote health and wellness. By focusing on identified priority areas, this continues to support the strategic direction of improved population health.

Goal

By March 31, 2011 the Department of Health and Community Services will have enhanced capacity to improve the health of the population by focusing on the following identified priority wellness areas from Phase 1 and 2 of the Provincial Wellness Plan:

Phase 1 and 2

Healthy Eating
Physical Activity
Tobacco Control
Injury Prevention

Mental Health Promotion
Child and Youth Development
Environmental Health
Health Protection

Measure: Enhanced capacity

Indicators:

- Continued implementation of Phase I wellness priorities
- Initiated activity in all Phase 2 wellness priorities
- Continued partnership development with existing and new stakeholder groups
- Completed three Annual Report Cards on the Provincial Wellness Plan

- Implemented public awareness initiatives
- Introduced new or revised policy guidelines, programs and services in selected areas
- Completed evaluations on selected initiatives

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have addressed the next developmental steps in the respective implementation of wellness priority areas.

Measure: Next developmental steps addressed

Indicators

- Implemented policy guidelines for selected wellness areas in Phase 1
- Distributed provincial documents/information in selected wellness areas to targeted groups and the general public
- Provided information and training to key stakeholders when implementing new guidelines, policies, and programs
- Incorporated the recommendations of the Provincial Wellness Advisory Council into the identified priorities for Phase 2
- Implemented evaluation and other recommendations as part of the initiation of Phase 2
- Initiated development of a public awareness campaign in selected areas.

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have monitored progress on the development and impact of priority areas of the wellness plan.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have addressed the sustainability of the Provincial Wellness Plan.

Issue: Prevention and Early Intervention for Children and Youth

Increased focus on prevention and early intervention programs and services for children, youth, and their families is a priority for the Department. The focus is founded on clear evidence of childhood, especially in the early years, as an important investment period that has significant influence on life-long health and well-being. Key to the issue is an emphasis on best practice programs and services that help to support healthy holistic child development, prevent risk, and minimize negative influences during critical periods of growth and development.

In recent years, there is a growing understanding and commitment to prevention and early intervention services and programs. This is demonstrated by significant new investments in services and programs that benefit children, youth, and families. Examples are sustainable investments and partnership building in community programs and services, such as child care services, family resource programs, pre and post natal services, and home-based services for children with developmental delays.

The importance of prevention and early intervention in childhood is also a prominent theme in several key strategic initiatives of Government. Some of these include: the Wellness Plan; Poverty Reduction Strategy; Violence Prevention Initiative; Early Learning and Child Care Plan; Ministerial Council on Early Learning; and the development of a Strategy for Services for Children, Youth, and their Families. A continued focus on horizontal policy development is an important means to addressing all aspects of positive child development outcomes. Additionally, this continues to support the strategic direction of improving access to priority services with a focus on prevention and early intervention for children, youth and their families. This will be accomplished within available resources by continuing to support current services and programs, and by involving individuals, communities and regions.

Goal

By March 31, 2011 the Department of Health and Community Services will have incorporated an increased focus on prevention and early intervention programs and services for children, youth and their families in the design and development of programs, services plans, strategies and other required documents.

Measure

Increased focus on prevention and early intervention demonstrated incorporated

Indicators

- Plans, strategies, programs and services assessed to determine the extend to which a focus on prevention and early intervention programs and services for children, youth and their families is included at present and over time;

- Increased collaboration across programs and service areas
- Increased public awareness of prevention and early intervention programs and services.

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have increased emphasis on prevention and early intervention in plans, strategies and programs dealing with children's services.

Measure

Increased prevention and early intervention emphasis in children's services

Indicators

- Reviewed existing children's programs and services to determine the extent to which a prevention and early intervention focus exists
- Identified ways to increase focus in children's services that are also applicable to youth and family services
- Consultations held as needed with key stakeholders

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have started to implement identified approaches that increase focus on prevention and early intervention programs and services for children, youth and their families.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have increased the focus on prevention and early intervention programs and services for children, youth and their families.

Issue: Chronic Disease Management

Many Newfoundlanders and Labradorians have already developed or are at risk for developing chronic conditions such as diabetes, heart disease, lung disease, arthritis, cancer and other diseases. Chronic conditions and diseases are those that begin gradually and impact on an individual's daily activities over a long period of time. These conditions often share many common risk factors including obesity and overweight, physical inactivity, poor nutrition and smoking. Chronic diseases can be managed on a day to day basis where the focus of care is on working with individuals to maintain independence and live well with a chronic condition.

Chronic diseases are long-term and consequently, time and coordinated efforts are needed to prevent progression and effectively manage conditions. This involves screening, treatment, regular follow-up, and support and guidance for healthy living. Goal setting, decision-making and problem solving become routine aspects of care. The changing model of health service delivery requires greater emphasis on primary prevention, community-based services, and the strengthening of partnerships between the community, primary health care providers and the acute care sector, including secondary and tertiary, rehabilitative and palliative services and specialists.

The Department promotes a comprehensive approach to address chronic diseases by engaging in a wide-range of strategies. These may include early child development, public health, and those addressing the underlying determinants of health, such as poverty, health promotion and wellness, mental health, long term care and healthy aging. The aim is to develop consistent and comprehensive approaches for the management of chronic diseases and conditions and to reduce the impact of chronic disease and improve the quality of life and overall health outcomes of the people of this province. This goal supports the strategic directions dealing with population health by addressing support for healthy aging and dealing with access to priority services by strengthening partnerships between primary health care providers and persons with chronic disease.

Goal

By March 31, 2011 the Department of Health and Community Services will have increased capacity in the area of chronic disease management.

Measure

Increased capacity in the area of chronic disease management.

Indicators

- Implemented a strategy to increase the capacity for the effective management of chronic diseases

- Developed provincial guidelines and standards, based on clinical practice guidelines, for selected chronic diseases
- Established a chronic disease data base to support effective care planning and management
- Established a monitoring system to measure the uptake of selected chronic disease prevention and management practices.

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have started to develop a provincial chronic disease management strategy that includes policy directions to support an integrated and comprehensive approach to manage selected chronic diseases.

Measure

Developed a draft provincial chronic disease management strategy

Indicators

- Completed consultation with key stakeholders
- Identified focus areas for select clinical practice guidelines/standards
- Identified chronic disease management models and key priority actions
- Proposed strategy submitted for approval

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have implemented policy directions and developed guidelines for management of selected chronic diseases and approved aspects of the strategy.

Objective 2010-2011

By March 31, 2011 the Department of Health and Community Services will have implemented a monitoring mechanism to measure the integration of the provincial chronic disease strategy into practice for the management of chronic diseases and conditions.

Issue: Quality and Safety

The health system in this province is diverse and presents challenges in the coordination of services given the geographical landscape and demographic profile. The Department is committed to the delivery of high quality and safe services for both recipients and providers. The Department recognizes the leadership role needed to support provincial, regional and other efforts to improve quality and safety. By focusing on this issue, the Department will demonstrate its commitment to addressing quality and safety in a comprehensive and co-ordinated manner which supports the strategic direction dealing with improved accountability and stability in the health and community services within available resources.

This direction focuses on the identification and implementation of monitoring systems for programs and services. It provides a strengthened and specific departmental focus at the provincial level that complements existing Government initiatives, such as *The Task Force on Adverse Health Care Events*, established in 2007, and supports the existing efforts of regional health care authorities to meet national accreditation health standards, which recognize safety and quality as strategic leadership and organizational priorities.

Goal

By March 31, 2011 the Department of Health and Community Services will have strengthened organizational systems within the health and community services sector that foster quality and safety.

Measure: Strengthened organizational systems within the health and community services sector

Indicators

- Developed provincial standards in health service delivery
- Introduced monitoring and performance reporting mechanisms
- Developed a quality and risk management policy framework
- Supported the development of a culture of quality and safety
- Established a Quality Health Council
- Addressed related sustainability issues

Objective 2008-2009

By March 31, 2009 the Department of Health and Community Services will have built the foundation for a culture of quality and safety at the provincial level and within the health and community services sector.

Measure: Built the foundation for a culture of quality and safety

Indicators

- Identified best practices in quality and safety at the provincial level
- Established a Quality Network Team
- Developed supporting documents, such as policies, standards and documents, such as a Terms of Reference
- Implemented provincial standards, quality improvement and monitoring/ mechanisms in Child, Youth and Family Services
- Increased system responsiveness to identified issues
- Identified evaluation criteria for performance reporting

Objective 2009-2010

By March 31, 2010 the Department of Health and Community Services will have commenced implementation on initiatives to demonstrate commitment to quality and safety in the health system.

Objective 2010-11

By March 31, 2011 the Department of Health and Community Services will have reported on progress to improve quality and safety within the health and community services system.

APPENDIX A: STRATEGIC DIRECTIONS

Strategic directions are the articulation of desired physical, social, or economic outcomes and normally require action by more than one government entity. These directions are generally communicated by government through platform documents, Throne and Budget Speeches, policy documents and other communiqués. The directions and focus areas related to the Department are provided in the remainder of this section:

Title: Population Health

Outcome: Improved Population Health

The Province has the highest rate of several chronic diseases, such as heart disease, obesity and diabetes. In addition, we have among the highest rates of smoking, physical inactivity, poor nutrition and heavy drinking and low rates for preventative self care practices, such as cervical screening, and breast screening. Improvements are needed in such areas as health promotion, surveillance and injury prevention. Unique needs of some populations also require special focus in policy and program development, including children and youth, seniors and aboriginal groups.

Government's Strategic Direction	Focus Areas of the Strategic Direction 2008-2011	This Direction is/was			
		Addressed in the:			
		to be addressed by entities reporting to the department	department's strategic plan	department's operational plan	work plan of a branch/ division within the department
Improved population health	Obesity		X		
	Smoking rates and protection from environmental smoke				X
	Dental health of children				X
	Support for healthy aging			X	
	Aboriginal health needs				X

Title: Public Health Capacity

Outcome: Strengthened public health capacity

The core functions of the public health system include population health assessment, health surveillance, prevention, health promotion, and protection. A large focus on strengthened public health capacity occurred in 2006-08 with increased human resource capacity. However, surveillance efforts are carried into the 2008-2011 strategic plan and other initiatives will continue through operational activities within the Department.

Government's Strategic Direction	Focus Areas of the Strategic Direction 2008-2011	This Direction is/was			
		Addressed in the:			
		to be addressed by entities reporting to the department	department's strategic plan	department's operational plan	work plan of a branch/ division within the department
Strengthened public health capacity	Surveillance for communicable disease				X
	Health emergency plan for HCS system				X
	Environmental health policy				X

Title: Access to Priority Services

Outcome: Improved accessibility to priority services

Providing health services to people in all areas of this province continues to be a challenge for the Department due to the province’s unique geographic profile. A substantial proportion of the population live in rural or remote areas of the province and service delivery in these areas is often hindered by the availability of health human resources and the recruitment of health professionals.

Improved access will be accomplished through strategic focus on the following areas:

- community based mental health and addictions,
- primary health care,
- the availability of home care and long term and community support options,
- access to prevention and early intervention services,
- appropriate medications and continued emphasis on wait times in the five priority areas of cancer care, hip and knee replacement, cardiac care, vision restoration, and diagnostic imaging.

Government’s Strategic Direction	Focus Areas of the Strategic Direction 2008-2011	This Direction is/was			
		Addressed in the:			
		entities reporting to the department	department’s strategic plan	department’s operational plan	work plan of a branch/ division within the department
Improved accessibility to priority services	Access to community-based mental health and addictions services				X
	Access to appropriate primary health services				X
	Home care and support services in the areas of end of life care, acute short term community mental health case management, short term post discharge IV medications and wound management				X

	Options to support choices of individuals in need of long term care and community supports		X		
	Access to a strengthened Child, Youth and Family Services		X		
	Access to quality early learning and child care				X

Title: Accountability and stability of health and community services

Outcome: Improved accountability and stability in the delivery of health and community services within available resources

The health and community service system consumes approximately 44% of all government expenditures. As a result, the ability to sustain the provision of quality health and community services requires the coordination and integration of services and the monitoring of the health system. This requires the Department to focus on the identification and implementation of monitoring systems for programs and services, the achievement of balanced budgets, the stabilization of health human resources and the utilization of information for evidenced based best practices.

Government's Strategic Direction	Focus Areas of the Strategic Direction 2008-2011	This Direction is/was			
		Addressed in the:			
		entities reporting to the department	department's strategic plan	department's operational plan	work plan of a branch/division within the department
Improved accountability and stability in the delivery of health and community services within available resources	Identify and monitor outcomes for selected programs				X
	Achievement of balanced budgets				X
	Stabilize human resources			X	
	Quality Management and Patient Safety		X		

APPENDIX B: ENTITIES REPORTING TO THE MINISTER

Under the *Transparency and Accountability Act*, the following government entities are provided with the Strategic Directions of the Department and also prepare plans and annual reports in keeping with their categorization under that Act:

1. Eastern Regional Health Authority
2. Central Regional Health Authority
3. Western Regional Health Authority
4. Labrador - Grenfell Regional Health Authority
5. Newfoundland & Labrador Centre for Health Information
6. Child Youth and Family Services Minister's Advisory Committee
7. Medical Consultants' Committee
8. Mental Health Care and Treatment Review Board
9. Nurse Practitioner Consultative and Appeals Committee
10. Public Health Laboratory

APPENDIX C: LEGISLATIVE FRAMEWORK

The Department of Health and Community Services is responsible for the administration of the following *Acts* and all orders and regulations passed or made under those *Acts*:

- *Adoption Act*
- *Centre for Health Information Act*
- *Child Care Services Act*
- *Child, Youth & Family Services Act*
- *Communicable Diseases Act*
- *Emergency Medical Aid Act*
- *Food & Drug Act*
- *Health Care Association Act*
- *Health & Community Services Act*
- *Health Research Ethics Act (To Be Proclaimed)*
- *Homes for Special Care Act*
- *Hospital Insurance Agreement Act*
- *Human Tissue Act*
- *Medical Care Insurance Act*
- *Mental Health Care and Treatment Act*
- *Neglected Adults Welfare Act*
- *Pharmaceutical Services Act*
- *Private Homes for Special Care Allowances Act*
- *Regional Health Authorities Act*
- *Self-managed Home Support Services Act*
- *Smoke-free Environment Act, 2005*
- *Tobacco Control Act*
- *Venereal Disease Prevention Act*
- *Youth Criminal Justice Act (Canada)*
- *Young Persons Offences Act*

The following is a list of Regulatory Acts for regulatory bodies for which the Department provides liaison, interpretation of Acts and regulations, facilitates amendments as necessary, and monitors annual reports as required by these Acts.

- *Chiropractors Act*
- *Dental Act*
- *Denturists Act, 2005*
- *Dieticians Act*
- *Dispensing Opticians Act, 2005*
- *Hearing Aid Practitioners Act*
- *Licensed Practical Nurses Act, 2005*
- *Massage Therapy Act, 2005*
- *Medical Act, 2005*
- *Occupational Therapists Act, 2005*
- *Optometry Act, 2004*
- *Pharmacy Act*
- *Physiotherapy Act, 2006*
- *Psychologists Act, 2005*
- *Registered Nurses Act*
- *Social Workers Association Act*

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