Health reform and wait times in Alberta

Wait times, health reform, public policy

Background

This study was part of a cross-provincial project aimed at understanding the determinants of health care policy decision-making related to health reforms during the 1990s. The impact of government policy choices in these areas has ranged from negligible to substantial; yet to date there is limited research that describes the factors and processes which shape these policy outcomes. The findings from the case studies can assist in identifying pre-requisites for future policy change.

Methods

Semi-structured, qualitative interviews were conducted with key stakeholders, representing the political executive, civil servants, and representatives of major NGOs or interest groups. Relevant written records (government publications, Hansard, print media) were reviewed to establish context and for confirmatory purposes. Data were analyzed using the N*6 software program and a pre-established coding framework. We sought to determine the relative role and importance of institutional factors; ideas, beliefs, values; interests; and external environmental factors in explaining policy outcomes.

Results

The results from the Alberta-wait times case study suggest that the nature of the problem was complex and could not be addressed by governments until significant policy learning had occurred and adequate data was available. Concerns about accountability, cost control and professional autonomy shaped the thinking of decision makers about the policy choice. The introduction of regionalization allowed for ‘whole-system’ thinking around this issue.

Conclusion

Management of wait times in Alberta has occurred largely as voluntary participation by providers in provincially-sponsored initiatives. The province has taken a lead role in fostering a policy network around these issues based upon policy learning, filtered through Alberta’s unique political sensibilities.