# **Clinical Alternative Relationship Plan**

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Program Name:	
Date Submitted:	

Government of Alberta ■





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# CLINICAL ALTERNATIVE RELATIONSHIP PLAN APPLICATION FORM

<b>PLEASE NOTE:</b> All sections of the application <b>MUST</b> be completed before the assessment process can begin.
Program Name:
Date Submitted:
1.0 Rationale for ARP Creation or Expansion
Provide a description of the current service gaps. Identify the expected benefits of implementing an ARP and how it will address the current service gaps, as well as the risks of not proceeding. If the supporting data is extensive, please insert summary here and provided the detailed information in an appendix.
2.0 The Program
2.1 Overview
Provide a brief overview of the proposed program (no more than one or two paragraphs).
2.2 Goals
Outline the goals of the program, identifying any current practices and proposed changes that support ARP principles/purposes. Some groups may already have made changes in their practice in anticipation of moving to an ARP. Please identify these changes under "Current".
Current
Proposed

#### 2.3 The Centre

Provide a list of sites where the program services will be offered.

Current

**Proposed** 

### 2.4 Patients

Describe the patient population to be served. Indicate any proposed changes to patient population to be served. Identify the gender, age, and diagnostic characteristics of patients to be served by the program. Target populations examples: diabetics, under-served populations, etc.

Current

**Proposed** 

# 2.5 Program Services

Provide a bulleted list of the program services to be provided. Program services are insured medical services provided by the participating physicians. Indicate the proposed changes to current services.

Current

**Proposed** 

# 2.6 Service Delivery Model

Describe the service delivery model currently used and the proposed model. Identify clearly proposed changes to the model. Identify how the physicians' services are currently organized and delivered from referral to discharge/transfer. Include clinic hours and other service requirements.

Current	
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<b>Propose</b>	d
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# 2.7 Roles of Non-Physician Staff

Describe the roles of non-physician professional staff on the program team.

#### Current

### **Proposed**

# 2.8 Non-Physician Clinical and Administrative Staff Resource Plan

Outline the number of current and proposed non physicians clinical and administrative staff in full-time equivalents (FTEs) required by the program to deliver program services and achieve program goals. Indicate the allocation of responsibility for compensation.

	ETEc(1)	Proposed FTEs			% Responsibility <sup>(3)</sup>	
Staff By Type	FTEs <sup>(1)</sup> Current Year <sup>(2)</sup>	Year 1 <sup>(2)</sup>	Year 2 <sup>(2)</sup>	Year 3 <sup>(2)</sup>	Physician	Alberta Health
	Current rear				Group	Services
Non-physician clinical staff:						
Administrative staff:						

- (1) 1 FTE = as defined by agreement or contract for that group or person
- (2) Operating year (April 01 March 31)
- (3) Actual dollars not required

NOTE: AHS support of an ARP application as indicated by a signature in the ARP Representatives section of the application does not guarantee, nor prioritize their engagement in the search/provision of the recruits identified.

# 2.9 Program Governance, and Practice and Quality Management

Describe how the program will be managed. Identify any proposed changes.

- How will the physician group be governed?
- What is the governance structure and program management process between the physician group and Alberta Health Services?
- How will the leadership group (physicians and clinic managers) manage service provision to ensure the goals are met?
- How will the quality of care be monitored and maintained or improved?

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#### **Proposed**

# 2.10 Program Funding Provisions

Outline the expense responsibility sharing agreement (% physician group, % Alberta Health Services) by major expense category.

Operating Expenses	% Responsibility <sup>(1)</sup>				
Operating Expenses	Physician Group	Alberta Health Services			
Space and associated costs					
IM/IT					
Capital Improvements:					
Other <sup>(2)</sup>					

<sup>(1)</sup> Actual dollars not required

# 3.0 Supporting Data

# 3.1 Program Data Analysis

Complete an assessment of available program data. Insert tables and graphs as necessary. If the analysis is extensive, please insert a summary here and provide the detailed analysis in an appendix. Also, in the table provided, identify the relevant inpatient and ambulatory service volumes and the projected change in volumes over the next three years. The service volumes selected should align with the program goals (section 2.2) and the proposed FTEs/Hours (section 4.4).

		Fiscal Year	Fiscal Year 3 <sup>(1)</sup>	Proposed Year <sup>(1)</sup>		
Indicator	<b>1</b> <sup>(1)</sup>	2(1)		Year 1	Year 2	Year 3

<sup>(2)</sup> Typical items might include costs of collecting and calculating data for reporting, moving costs, recruitment costs

	Fiscal Year	Fiscal Year	Fiscal Year 3 <sup>(1)</sup>	Proposed Year <sup>(1)</sup>		
Indicator	<b>1</b> <sup>(1)</sup>	<b>2</b> <sup>(1)</sup>		Year 1	Year 2	Year 3

<sup>(1)</sup> Operating year (April 01 - March 31)

# 3.2 Billing/Service Event Reporting Analysis

Provide an analysis of the historical service event reporting data provided by Alberta Health, if available. Insert appropriate tables and graphs as necessary. If the analysis is extensive, please insert a summary here and provide the detailed analysis in an appendix.

# 4.0 Physician Resource Plan

# 4.1 Physician Complement

#### **Physician Participants**

Provide the names of each physician participating in this proposal, as well as the expected contribution of each physician in FTE or sessional hours.

Name <sup>(1)</sup>	Specialty	FTE <sup>(2)</sup> /Hours	Contact Phone
Current Program Total			

<sup>(1)</sup> Provide full legal name and legal name of Professional Corporation (if applicable)

# 4.2 Physician Schedule

Provide a typical physician workload schedule. Insert tables as appropriate.

## 4.3 FTE/Sessional Hours Calculation

<sup>(2)</sup> Based on average days worked in the ARP Guide

Show how the required FTEs or sessional hours are calculated. If applicable, describe the method that will be used to track the FTEs worked by the participating physicians on a monthly basis.

#### 4.4 Physician Recruitment and Compensation

Select the proposed funding model from the ARP Guide.

☐ Annualized ☐ Sessional ☐	Capitation
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#### Current

Calculate the current compensation from the Physician Services Budget for providing the clinical program services

Current Year: (yyyy/yyyy)						
Specialty Physicians FTE/Hours Payment Rate Annual Revenue						
Total			N/A			

#### **Proposed**

Alberta Health expects that each physician group will need to plan for growth. This section is intended to show the physician resource needs by year, as well as to provide a description of the program recruitment plan to meet those needs.

		Year 1:		
Specialty	Physicians	FTE/Hours	Payment Rate	Annual Revenue
Total			N/A	
		Year 2:		
Specialty	Physicians	FTE/Hours	Payment Rate	Annual Revenue
Total			N/A	
		Year 3:		
Specialty	Physicians	FTE/Hours	Payment Rate	Annual Revenue
Total			N/A	
(1) Operating wear (April 01	March 21)			

<sup>(1)</sup> Operating year (April 01 – March 31)

### Recruitment Plan and Challenges:

Identify the strategies to address the year over year change in FTEs/hours as shown in the table above, and the number of physicians the program needs or plans to recruit. Address any anticipated retirements and/or resignations. Describe any known challenges in the recruitment of the required specialties which may limit the program's ability to achieve its goals and proposed targets.

<sup>(2)</sup> Based on average payments per 1.0 FTE by specialty in the ARP Guide

# 5.0 Performance Reporting

# 5.1 Quarterly Report

Identify the performance measures the program will report on quarterly. The measures should reflect the outputs and outcomes of the program and demonstrate the program's success.

Catagonia Performance Data		Data	Actual Results					
Category	Indicator	Source	Responsibility	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Comments

# 5.2 Annual Report

Identify the performance measures the program will report on annually. The measures should reflect the outputs and outcomes of the program and demonstrate the program's success. Provide an annual target for each indicator.

	Performance D		Data	Fiscal Year End			Explanation of
Category	Indicator	Data Source	Responsibility	Proposed Results	Actual Results	Variance	variance

# **ARP Representatives**

Alberta Health Services Zone:

Alberta Health Services Zone Vice President	Alberta Health Services Zone Medical Director
Name:	Name:
Position:	Position:
Phone:	Phone:
Fax:	Fax:
Email:	Email:
Signature	Signature

Name of Physicians or Physician Group:

Physician Leader	Physician Leader
Name:	Name:
Position:	Position:
Phone:	Phone:
Fax:	Fax:
Email:	Email:
Signature	Signature

# Name of Other Organization:

Representative	Representative
Name:	Name:
Position:	Position:
Phone:	Phone:
Fax:	Fax:
Email:	Email:
Signature	Signature

If legal counsel has been engaged, please provide names and contact below:

For Physicians	For Alberta Health Services
Name:	Name:
Phone:	Phone:
Email:	Email:

# **Reports**

The Minister of Health requires that reporting be provided as follows:

Initial to indicate agreement to comply with these requirements

Type of Report	Frequency	Physician Leader	Alberta Health Services Representative
FTE reports/sessional hour invoicing	Monthly		
Service event reports	Within 90 days		
Performance reports	Quarterly/Annually		
Changes in physician membership	Upon occurrence		

Please identify who will be responsible for providing the various products and reports:

	Respons	sible Party		
Product	Physician Group	Alberta Health Services	Contact Information	
Preparing and submitting FTE reports/sessional hour invoices				
Service event reports				
Collecting clinical data				
Preparing and submitting quarterly reports				
Preparing and submitting annual reports				
Notifying Alberta Health of changes in physician membership.				