

2024 Bill 213

First Session, 31st Legislature, 3 Charles III

THE LEGISLATIVE ASSEMBLY OF ALBERTA

BILL 213

CANCER CARE DELIVERY STANDARDS ACT

MS GOEHRING

First Reading

Second Reading

Committee of the Whole

Third Reading

Royal Assent

BILL 213

2024

CANCER CARE DELIVERY STANDARDS ACT

(Assented to _____, 2024)

HIS MAJESTY, by and with the advice and consent of the
Legislative Assembly of Alberta, enacts as follows:

Definitions

1 In this Act,

- (a) “cancer service” means a cancer diagnosis or treatment service or a class of cancer diagnosis or treatment services provided to an individual patient by a cancer specialist physician;
- (b) “Committee” means the Cancer Treatment Standards Committee established under section 3;
- (c) “delivery standard”, in respect of a designated cancer service, means the time period established under section 4(1)(b) that applies to the delivery of the designated cancer service;
- (d) “designated cancer service” means a cancer service that has been designated by the Committee under section 4(1)(a);
- (e) “health care body”, in respect of a designated cancer service, means a corporate body or statutory entity that
 - (i) provides a designated cancer service, and
 - (ii) is prescribed by regulation as a health care body;

- (f) “Minister” means the Minister determined under section 16 of the *Government Organization Act* as the Minister responsible for this Act;
- (g) “reporting year” means a calendar year.

Purposes

2 The purposes of this Act are

- (a) to ensure that Albertans have consistent, reliable and timely access to high-quality, publicly administered and publicly funded cancer services by ensuring that those services are delivered to patients within a fixed and reasonable period of time,
- (b) to establish independent, expert-informed and transparent standards for the delivery of high-quality essential cancer services by a publicly administered and publicly funded health care system to ensure that the Government is held accountable for providing the resources that are necessary to meet those standards, and
- (c) to ensure that Albertans’ lives and quality of life are not unnecessarily put at risk due to a lack of transparency in respect of the resourcing required to provide essential cancer services within a reasonable period of time.

Committee

3 The Cancer Treatment Standards Committee is established.

Mandate

4(1) The Committee must, in accordance with the regulations, if any,

- (a) designate one or more cancer service as a designated cancer service, and
- (b) establish a delivery standard for each designated cancer service that sets a time period within which the designated cancer service must be provided to an individual patient.

(2) For the purposes of designating a cancer service and establishing a delivery standard for that designated cancer service, the Committee must do the following:

- (a) consult with the Minister;

- (b) consult with Indigenous communities;
 - (c) as the Committee considers necessary or appropriate, consult with the following:
 - (i) each association or organization that represents patients;
 - (ii) each health care body to which the delivery standard would apply;
 - (iii) each post-secondary institution with a program related to the designated cancer service;
 - (iv) each association or organization representing the interests of workers who provide the designated cancer service;
 - (v) any other person or body that could be reasonably assumed to have an interest in the establishment of the delivery standard;
 - (d) consider all relevant recommendations of the Canadian Institute for Health Information;
 - (e) for the purpose of establishing the delivery standard, consider the following objectives:
 - (i) reducing the average time taken before a patient is correctly diagnosed;
 - (ii) reducing the average time between a patient's diagnosis and the commencement of treatment;
 - (iii) materially improving patient survival rates by prioritizing the establishment of delivery standards for
 - (A) the most common types of cancer, and
 - (B) the most treatable types of cancer.
- (3)** For greater certainty, the reference to Indigenous communities in subsection (2)(b) includes First Nations, Metis and Inuit peoples.
- (4)** The Committee must, immediately on establishing a delivery standard for a designated cancer service, provide the Minister with a report detailing the designated cancer service and delivery standard.

(5) On receiving a report under subsection (4), the Minister must, as soon as practicable, make that report publicly available by posting the report on the publicly accessible website of the Minister's department.

(6) Within 3 years of the date on which a report is made public under subsection (5), the Committee must, in accordance with the requirements set out in subsection (2), conduct a review of each designated cancer service and delivery standard described in that report.

(7) For greater certainty, nothing in subsection (6) prohibits the Committee from conducting a review of a designated cancer service or a delivery standard before the expiry of the 3-year period referred to in that subsection.

Report on performance

5(1) On a delivery standard for a designated cancer service being established, a health care body that provides the designated cancer service must, in accordance with subsection (2) and the regulations, if any, report to the Committee on the health care body's performance as it relates to achieving that delivery standard.

(2) A health care body's report under subsection (1) must be

(a) in written or digital form as the Committee directs, and

(b) submitted to the Committee within a reporting year as follows:

(i) if a period is prescribed by regulation in respect of the designated cancer service to which the report relates, immediately on expiry of each recurring period within that reporting year;

(ii) if no period is prescribed by regulation, immediately on the expiry of each recurring 3-month period within that reporting year.

(3) On receiving a report from a health care body under subsection (1), the Committee must immediately provide a copy of the report to the Minister.

(4) On receiving a report under subsection (3), the Minister must, as soon as practicable, make that report publicly available by posting it on the publicly accessible website of the Minister's department.

Action plan if delivery standard not achieved

6(1) If a report referred to in section 5(1) identifies that a health care body has not consistently met a delivery standard to which the report relates, the Minister must, as soon as practicable after receiving the report and in consultation with the health care body, make a plan or revise an existing related plan, if applicable, that sets out the actions that must be carried out to enable the health care body to meet that delivery standard in a timely manner.

(2) An action plan referred to in subsection (1) must contain the following:

- (a) the health care body's existing or proposed methods to be used to achieve the delivery standard;
- (b) an assessment of the types and amount of resources that are required for the health care body to achieve the delivery standard in a timely manner;
- (c) an assessment of whether the health care body can achieve the delivery standard in a timely manner based on existing resources and, if not, an assessment of the health care body's resource deficiencies that act as a barrier to achieving the delivery standard;
- (d) any other information prescribed by regulation to be included in the action plan.

(3) For greater certainty, an action plan may relate to more than one delivery standard.

(4) The Minister must, immediately on completing an action plan,

- (a) provide a copy of the action plan to the health care body,
- (b) publish the action plan on the publicly accessible website of the Minister's department, and
- (c) as necessary, exercise the Minister's discretion in accordance with section 7 for the purpose of assisting the health care body to achieve, in a timely manner, the delivery standard to which the action plan relates.

Minister's discretion to be guided by public health care principles

7(1) The Minister must, in a manner consistent with the principles set out in subsection (2), exercise the Minister's powers conferred under each enactment for which the Minister is responsible that applies to a health care body's delivery of a designated cancer service.

(2) For the purpose of subsection (1), the principles are as follows:

- (a) a health care body is to be provided with reasonably adequate and predictable resources to enable it to achieve each delivery standard that applies to it;
- (b) Albertans' fundamental right to reasonable access to public health care is not to be impeded by financial or other barriers that are within the Minister's power to remove;
- (c) finite and limited public health care resources are to be directed to publicly administered health care bodies to ensure that Albertans' fundamental right to reasonable access to public health care is not compromised.

Appointment of Committee members

8(1) Subject to subsections (2) and (3), the Lieutenant Governor in Council must appoint 12 members to the Committee.

(2) At least 3 members of the Committee must be physicians with medical expertise in the diagnosis or treatment of cancer.

(3) At least 2 members of the Committee must represent the interests of cancer patients.

Remuneration and expenses

9 The Lieutenant Governor in Council must set out each of the following in a member's appointment to the Committee:

- (a) the amount of remuneration that may be paid to the member;
- (b) each type of expense for which the member may be reimbursed.

Regulations

10 The Lieutenant Governor in Council may make regulations

- (a) prescribing a corporate body or statutory entity as a health care body for the purpose of section 1(e)(ii);

- (b) respecting the designation of a cancer service or establishment of a delivery standard under section 4(1);
- (c) respecting a health care body's report under section 5(1);
- (d) prescribing a period for the purpose of section 5(2)(b)(i);
- (e) prescribing additional information to be included in an action plan for the purpose of section 6(2)(d);
- (f) defining any word or expression used but not defined in this Act.

Coming into force

11 This Act comes into force on Proclamation.

