



Helsedirektoratet

*Norwegian Directorate of Health*

## Norwegian Directorate of Health



# About the Directorate

Specialised directorate and authoritative agency under the auspices of:

- The Ministry of Health and Care Services (HOD)

Works also with:

- The Ministry of Children and Equality (BLD)
- The Ministry of Local Government and Regional Development (KRD)



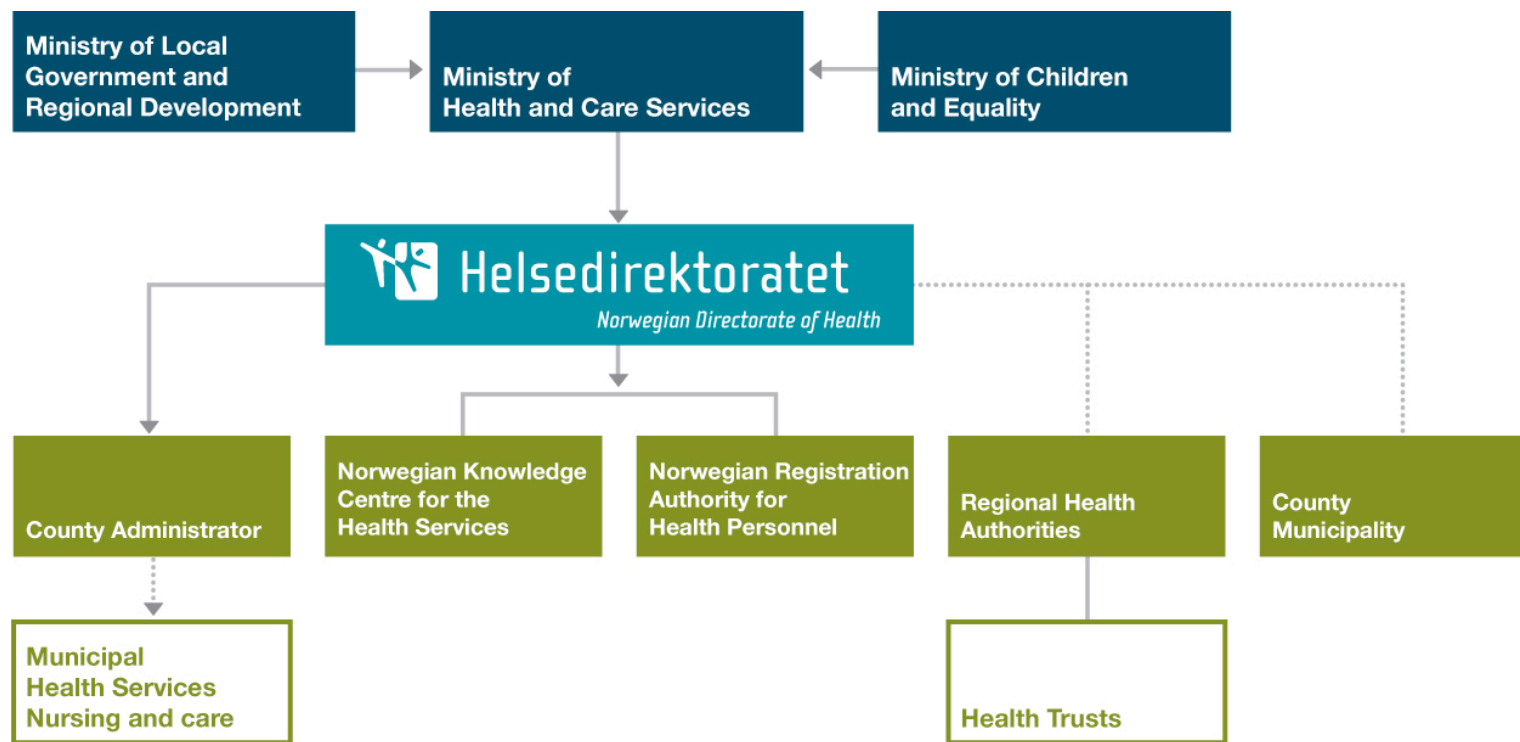
# Social responsibilities



**The Norwegian Directorate of Health shall strengthen general public health and social welfare through uniform, goal-oriented efforts across services, sectors and administrative levels.**



# The Directorate's place in the public administration





## The paramount objectives for all spheres of activity are to:

- Improve the quality of health and social services
- Reduce differences in health and living standards
- Promote factors that improve public health
- Improve the basis for full social inclusion



# Vision and values

## Vision

Good health and care for all

## Values

The activities of the Norwegian Directorate of Health shall be characterised by:

- **Proficiency**
- **Transparency**
- **Cooperation**
- **Efficiency**
- **Participation**

# Development trends and challenges

- Longer life expectancy and standard of living
- Significantly higher education among the general population
- Increasingly better health and healthier lifestyle
- Too many incidents of error and deficiencies in the health care sector
- Large potential for quality improvements in the services

This means that:

- The Primary health services must be strengthened
- Public health work must be prioritised
- Prioritisation skills in the health services must be strengthened
- Demographic developments must be taken into account, and preparations made for major changes in the population

*Source: Development trends in the health and social sector, Directorate of Health and Social Affairs 2006, 2007 and "Skapes helse, skapes velferd – helsesystemets rolle i det norske samfunnet" Helsedirektoratet (Creating health, creating welfare – the role of the healthcare system in the Norwegian society" The Norwegian Directorate of Health)*

# Roles

The Directorate performs its work on the basis of its roles as a:

- Specialist agency
- Administrative agency
- Executor of health policies





# The role of specialist agency

- **Monitor** factors that have an impact on:
  - Public health and living standards
  - Trends in health and social services
- **Be responsible** for providing advice and guidance on strategies and initiatives
- **Compare knowledge** and experience on technical questions:
- **Play a normative role at the national level**
- **Be a competence organisation**

# The role of administrative agency

- **A strong administrative function** at all levels is a key requisite for success in the four stated investment areas
- **Key administrative tasks**
  - The Norwegian Directorate of Health administrates and interprets social and healthcare legislation on behalf of the ministries
  - Financial administration – The Norwegian Directorate of Health administrates funds totalling billions (NOK 9.24 billion in 2008)

**Authority to apply and interpret the laws and regulations, e.g.:**

- Medical Devices Act
- Abortion Act
- Tobacco Act
- Alcohol Act
- Specialist Health Services Act
- Communicable Diseases Act
- Biobank Act
- Health and Social Emergency Preparedness Act
- Municipal Health Services Act

# The role of executor of healthcare policies

Shall carry out the Ministry's policies in accordance with the guidelines established in governance documents such as:

- The State budget and allotment letters
- The National Health Plan
- White Papers (reports to the Parliament)
- The National Strategy for Improving Quality in the Health and Social Services Sector (2005 - 2015)
- The Norwegian Government's plans and action plans



# An international perspective

- Contribute actively to **international efforts**
- The challenges related to health and living standards can best be resolved in collaboration with other countries, e.g. prevention of infection, emergency preparedness, and substance abuse work
- Seek solutions that do not make it more difficult for poor countries to resolve their challenges
- Contribute to better health and living standards in the poorest countries, e.g. reduce child mortality
- The Director General of Health, Chief Medical Officer, Bjørn-Inge Larsen, is Chair on the Board of the World Health Organization - Region Europe.



# The Directorate's organisation





## Budget for the Norwegian Directorate of Health (2008)

Norwegian Directorate of Health	NOK
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Chapter 0720, posts 01, 21 and 22	456 million
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Subsidies	NOK
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Ministry of Health and Care Services	Approx. 6.32 billion
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Ministry of Children and Equality	Approx. 180 million
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Ministry of Local government and Regional Development	Approx. 2.74 billion
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<b>Total subsidies</b>	<b>Approx. 9.24 billion</b>
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# The Directorate's Administration

## Administration

- Director General of Health/Chief Medical Officer: Bjørn-Inge Larsen
- Deputy Director General: Bjørn Guldvog

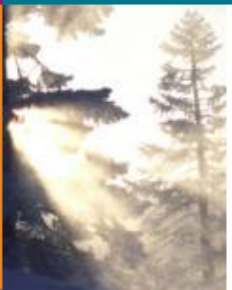
## Division Directors

- Mental Health and Substance Abuse: Ellinor Major
- Public Health and Welfare: Knut- Inge Klepp
- Health Economics and Financing: Olav Valen Slåttebrekk
- Specialised Health Care Services: Hans Petter Aarseth
- Primary Health Services: Frode Forland
- Administration: Bård Olesen

## Communication

- Communications Director: Margrete Halvorsen

## The Directorate's spheres of activity



## Spheres of activity and high-priority areas

### Four spheres of activity:

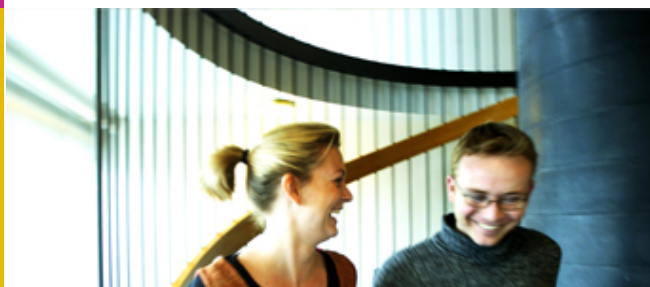
- Public Health Services
- Welfare Services
- Primary Health Services
- Specialised Health Care Services

### Other high-priority transverse areas of operation:

- Mental Health
- Substance Abuse
- Health Economics and Financing
- Administration

## Public Health Services

- Comprise all efforts to promote and maintain public health
- Main goals
  - to prolong healthy life for the general public
  - to reduce health inequalities between social strata, ethnic groups, women and men
- Requires efforts across sectors and administrative levels, through structural and population-related initiatives





## Objectives and initiatives to promote Public Health

### Objectives

- Prolong life with good health
- Reduce health inequalities in society - physical, chemical, biological and social factors
- Safe, health-promoting communities
- Healthier lifestyle through structural and population-related initiatives
- Provide public health services
  - The Specialised Health Care Services
  - The Primary Health Services

### Initiatives

- Identify and influence societal health factors
- Ensure that health is addressed in the public and private sectors
- Intensify preventative efforts

## Welfare Services

- Prevent and help people out of social exclusion
- Promote full social participation for individuals with diminished functional abilities
- Counteract social inequalities in health



## Objectives and initiatives in Welfare Services

### Objectives

- Increase social inclusion
- Improve physical accessibility
- Reduce social inequality in health

### Initiatives

- Contribute to increased inclusion
- Help ensure that initiatives and services are available and universally designed
- Help promote gender parity and anti-discrimination work

## Primary Health Services

- Are the cornerstone of public health care services
- Encompass all mandatory or agreed health and care services
- Ensure good service availability close at hand for everyone
- Offer three types of policy instruments:
  - Personnel
  - Statistics
  - Emergency preparedness



## Goals and initiatives in the Primary Health Services

### Objectives

- Provide services of high quality that are accessible, evenly distributed, effective, safe, well-coordinated, involve the users in the decision-taking process and utilise resources in an efficient manner
- Good services to the general public while striking the correct balance between prevention, treatment, rehabilitation and care
- Equal access to health services
- Reliable, sufficient, organised accessible data and control information
- Access to essential health-related help at all times - also in crises and disasters

### Initiatives

- Quality-improvement work
- Interaction between primary and specialist health care services and other sectors
- Adapt services to needs including with respect to recruitment of qualified personnel
- Ensure good systems for data collection, analysis and dissemination of statistics
- Contribute to optimal robustness and crisis management preparedness



## Specialised Health Care Services

- Provide professional advice and guidance
- Actively participate in framing Norway's national health policy
- Support academic development, quality improvement and interaction
- Administrate health-related legislation and regulations
- Coordinate efforts on medicine products



## Goals and initiatives in the Specialised Health Care Services

### Objectives

- Provide effective, safe and secure services
- Satisfied patients, relatives and cooperation partners
- Efficient, accessible services that are distributed fairly
- Individually tailored services which are coordinated and characterised by continuity

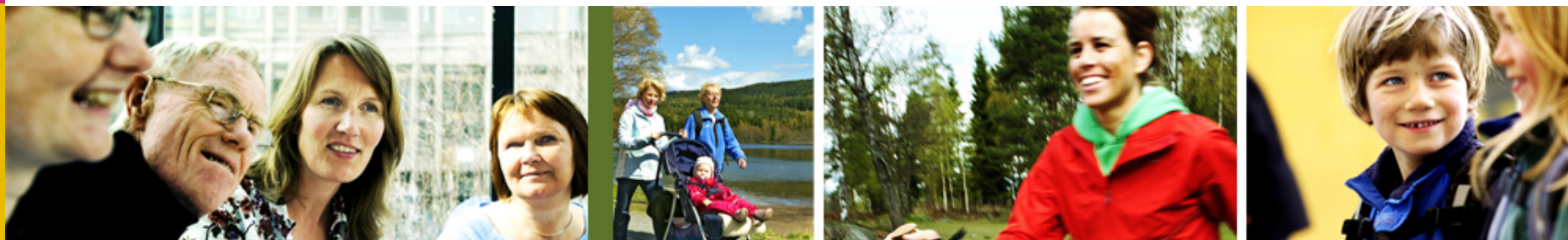
### Initiatives

- Provide good information on the availability, quality and efficiency of the services
- Good user involvement and interaction
- Provide knowledge-based services
- Promote uniform understanding and practice of legislation and regulations
- Development of good rehabilitation strategies

## Mental Health Services

### A cohesive, long-term perspective

- Escalation Plan for Mental Health (1999–2008)
- Strengthening municipal mental health work and good preventative measures
- Suicide prevention
- Work to combat violence and traumatic stress
- Legal work related to the Mental Health Act



## Goals and initiatives in Mental Health Services

### Objectives

- Reduce mental illness among the general population
- Reduce the number of suicides/ attempted suicides
- Reduce adverse effects on the health of people who have been exposed to violence and traumatic episodes
- Reduce the burden of illness and improve coping skills among the mentally ill
- Ensure high-quality services for the mentally ill
- Exercise genuine influence on the design of services for users and relatives

### Initiatives

- Contribute to knowledge development by addressing communication with the general public, working life and schools
- Focus on the coordination of and cohesion in services to individual users – the use of personal plans
- Motivate user involvement and strengthen user organisations
- Develop documentation, statistics and indicators to render results visible
- Develop expertise in the services within suicide prevention, violence and traumatic stress
- Develop cooperation between the mental health services and substance abuse prevention

## Substance Abuse

- Escalation of the Plan for Substance Abuse (launched autumn 2007)
- Close association with the area of mental health
- Substance abuse prevention work
- Administration of the Act relating to the Sale of Alcoholic Beverages
- Administration of subsidy schemes
- Quality improvement in treatment and care services
- “Follow-up responsibility”





## Goals and initiatives in Substance Abuse Prevention

### Objectives

- Reduce social and health-related injuries due to intoxicants through prevention
- Knowledge-based substance abuse policies locally, nationally and internationally
- Ensure the general public has access to services and is given opportunities for social inclusion

### Initiatives

- Monitor trends in the field of substance abuse
- Promote knowledge-based strategies for national substance abuse prevention policies
- Contribute to effective and knowledge-based preventive measures
- Help raise quality and expertise in the field of substance abuse prevention
- Ensure good dialogue and cooperation with volunteer organisations

## Health Economics and Financing

- Administrate and develop expedient financing schemes
- Establish good encoders and classifications
- The Norwegian Patient Register ensures data collection and the analysis of basis data and produce information on different segments of the health care services
- Socio-economic analysis and evaluation of the use of resources and initiatives



## Goals and initiatives in Health Economics and Financing

### Objectives

- Improve financing schemes
- Improve records in the Norwegian Patient Register
- Improve access to relevant information for all users
- Simple, accessible encoders and efficiency targets for all segments of Norway's health care services
- Improved analyses as the basis for assessment of the efficiency and resource consumption of health care and welfare services
- Increase use of socio-economic analyses of measures that have consequences for life and health

### Initiatives

- Have a good dialogue with users and principals
- Ensure local ownership of reporting and data quality
- Use centres of excellence at national and international levels
- Develop financing systems that support good decisions in the services

## The Directorate's Administration

- Ensures continuous organisational development
- Ensures efficient administrative processes and good support services on time
  - Personnel and Payroll
  - Planning and Economy
  - ICT Services
  - Archives
  - Operation and Common Services
  - Communication and Documentation
- Supports a learning organisation with competent development-oriented employees

## Goals and initiatives in the administration

### Objectives

- Recruit and further develop good co-workers, and managers
- Utilise administrative resources in an efficient and timely manner
- Good administrative expertise
- Plan documents shall provide grounds for cohesive control and prioritisation

### Initiatives

- Develop better recruitment methods
- Formulate and follow up a long-term overall ICT plan
- Implement administrative rationalisation projects
- Follow up planning processes
- Create good planning processes with participation, ownership and commitment



# Helsedirektoratet

*Norwegian Directorate of Health*

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**Norwegian Directorate of Health**

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