

Refocusing Alberta's Health System

Alberta Health

Spring 2025

Agenda

- System Refocusing: Overview
- How the System is Organized
- The Provincial Health Agencies
- What We Heard and What We Are Doing
- Discussion

System Refocusing: Overview

Refocusing Health Care in Alberta

- Alberta's health care system is moving to a **unified provincial sector-based model**.
 - The system is moving **away** from Alberta Health Services (AHS) as the single organization providing health care, **toward provincial health agencies** organized by pillar of care.
 - The system will **focus on** patient-centred care, accountability, data driven planning and local decision-making.

The Refocused Health Care System

- Supports patients **accessing the right health care**, especially in rural, remote, and Indigenous communities.
- Reduces **pressure on acute care** and increases focus in other areas to create a more sustainable system.
- Better **supports** health care workers and **improve** leadership to create better **outcomes** for workers and patients.

Ministry Oversight

- The **Ministry of Health** will be responsible for **more** in the health system, including System Planning, Capital Planning, Analytics, and Procurement, etc.
- The Ministries of **Mental Health and Addiction** and **Seniors, Community, and Social Services** will also be responsible for health care delivery.
 - Ministries and provincial health agencies will work together to **integrate services and plans** to support **seamless patient care**.

Where We've Been

Refocusing activities to date

November 8, 2023
Public announcement of health care system refocusing

December 2023
Committed to in-person engagement
Telephone town halls

April 2024
Recovery Alberta announced, CEO appointed
Recruitment begins for advisory councils

April 29 – June 24
Indigenous Information Gathering Sessions
French-language engagement sessions

October 2024
Released “What we heard” report
Announced Primary Care Alberta
PHAA Amendments Tabled

January 2025
Launched Second Round of Engagement
Announced Assisted Living Alberta

April 2025
Acute Care Alberta began operations
Assisted Living Alberta became a legal entity



Launched alberta.ca/healthcare

November 2023
First online feedback form
Telephone town halls
ADM-led stakeholder engagement

January 23 – April 12
65 in-person public engagement sessions
Second online feedback form

June 2024
Health Statutes Amendment Act takes effect

July 2024
Final analysis of all engagement reporting
Compilation of suggestions for action

November 2024
Primary Care Alberta established, CEO appointed
Announced Acute Care Alberta

February 2025
Primary Care Alberta began operations

Next Steps
Advisory Council stand-up
Stand-up shared services entity, move EHS to ACA
Report back on What We Heard

Budget 2025

\$28 billion in operating expense across the refocused health care system. This is an increase of \$1.4 billion or 5.4%.

- Will improve access to quality health services close to home, prioritize patients, build capacity at hospitals and rural facilities, expand surgeries and compensate and retain health professionals.
- Capital investments over three years will support new urgent care and primary care centres, build capacity at existing hospitals, expand surgical capacity, enhance rural hospitals and health facilities, and replace aging equipment to support improved health outcomes.

Provincial Health Agencies Funding

Recovery Alberta \$1.7 billion for implementing the compassionate intervention framework and Recovery Alberta Services.

Primary Care Alberta \$644 million to help attach every Albertan to a primary care team and improve access.

Acute Care Alberta \$4.6 billion to improve acute care in hospitals, urgent care centres, chartered surgical and other health facilities.

Assisted Living Alberta \$3.8 billion to provide wraparound medical and non-medical supports, home care, community care and social services.

How the System is Organized

Provincial Health Agencies

Together, the Ministries of **Health, Mental Health and Addiction**, and **Seniors, Community and Social Services**, are establishing provincial health agencies to deliver care in carefully targeted health care sectors

Recovery Alberta is operational as of September 1, 2024.

Primary Care Alberta is operational as of February 1, 2025.

Acute Care Alberta is operational as of April 1, 2025.

Assisted Living Alberta is a legal entity as of April 1, 2025.

Alberta Health Services (AHS)

Alberta Health Services will shift from a **health authority** to a hospital **service delivery provider**, alongside Covenant Health, Lamont Health Care Centre, and chartered surgical facilities.

- AHS will continue operating its 90+ hospitals with a **renewed focus** on **shorter wait times** and supporting **high-quality hospital care** for patients in communities across Alberta.
- As a hospital service delivery provider, AHS will be accountable to **Acute Care Alberta**, the provincial health agency for acute care.
 - In some rural health centres, AHS will continue delivering long term care to support **streamlined care delivery**.
 - **Covenant Health, Lamont Health Care Centre, and chartered surgical facilities** will also be accountable to Acute Care Alberta and Minister of Health.

Updates

- Emergency health services will move out of AHS to report directly to **Acute Care Alberta** in 2025.
- **Cancer care** services will also move out of AHS and under the oversight of **Acute Care Alberta** in 2025.
- Services for **organ and tissue donation and transplantation** will also move out of AHS and under the oversight of **Acute Care Alberta**.
- A new **shared services entity** is being created to promote **integration** by providing corporate and support services to **provincial health agencies** and service providers, like AHS.
- A new **acute care funding model** has been introduced to increase accountability, efficiency and volume of high-quality surgical delivery.

Establishing Health Corridors

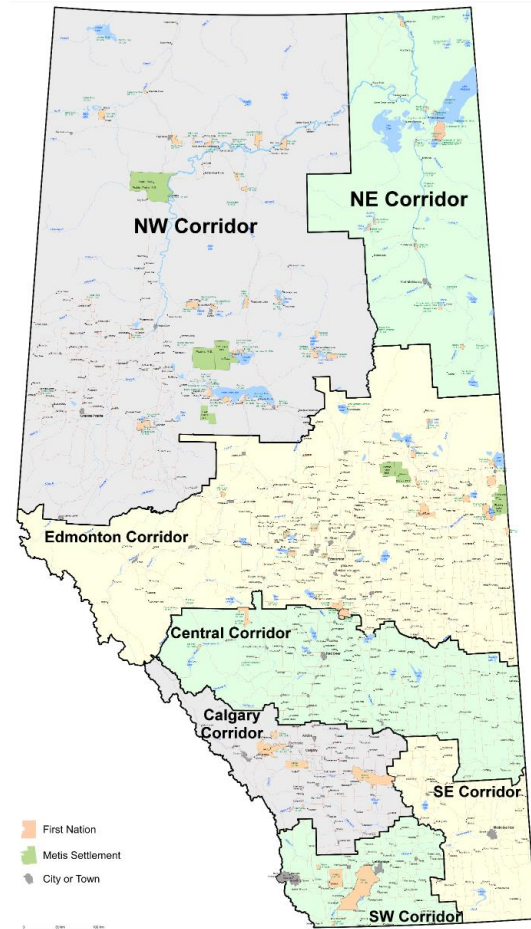
Alberta Health is establishing **seven integrated health corridors** to reflect how and where Albertans access services.

These corridors will help government and PHAs:

- Determine **gaps** in the health care system to **inform** future planning and capital projects.
- Provide a better **understanding** of how the health care system is being used to ensure decisions reflect the needs of all Albertans based on where they access care.

During the transition:

- AHS will **retain its zones** for organizational purposes.
- The Ministry of Health and AHS will **work together** to ensure **reporting structures** and **decision-making** are **streamlined** through the transition.



Advisory Councils – Your Voice in Health

Regional Advisory Councils (RACs) will reflect **local** voices and **community** perspectives by:

- **Advising** the government and the new provincial health agencies on workforce, capital, and clinical service planning.
- **Collaborating** with community partners to identify local health system issues and potential solutions.
- Identifying **opportunities** for the health system to better support local decision-making.

The **Indigenous Advisory Council** will provide **advice** on **priorities** and ways to **improve health care** for Indigenous Peoples by:

- Bringing **Indigenous perspectives** to directly advise the government and the new provincial health agencies on workforce, capital, and clinical service planning.
- Informing the design and delivery of **culturally appropriate health care** programs and services and explore opportunities to integrate traditional Indigenous practices and teachings.

Councils' boundaries align to the new integrated corridors.

Integration and Alignment

- As the system establishes additional organizations, tools are being put in place to make sure it works **collaboratively**.
- An **Integration Council** was established to ensure all ministries, provincial health agencies and service delivery providers **work together** to deliver **better health outcomes** for Albertans.
 - The council looks at **system-wide strategic goals**, finds **efficiencies**, and **removes barriers** to system coordination.

Council membership includes:

- Ministers and Deputy Ministers of **Health, Mental Health and Addiction, Seniors, Community and Social Services**, and **Technology & Innovation**
- AHS CEO and official administrator
- CEOs of Recovery Alberta, Primary Care Alberta, Acute Care Alberta and Assisted Living Alberta
- Health Quality Council of Alberta (HQCA) and Centre of Recovery Excellence (CoRE)

Legislation

- To legally stand up the provincial health agencies, Alberta Health put forward **legislation** that was passed in **Spring 2024**.
- This legislation and its supporting regulations allow the provincial health agencies to **legally operate** in Alberta.
- In Fall 2024, **additional amendments** were made to:
 - Support next steps in the system refocusing work.
 - Would create the legal framework for AHS to transition from a health authority to a hospital service delivery provider.

The Provincial Health Agencies

Recovery Alberta



Overview:

- Lead department: Ministry of **Mental Health and Addiction**
- Recovery Alberta provides services across **inpatient** and **outpatient** settings, including acute care, standalone psychiatric hospitals, community mental health beds, treatment and detoxification facilities, provincial correctional settings, and through community outreach.
- Recovery Alberta was legally established on **July 1, 2024**, under the leadership of **CEO Kerry Bales**.

Recovery Alberta



Goals:

- Continue supporting Albertans facing addiction and/or mental health challenges.
- Provide comprehensive and accessible recovery-oriented mental health and addiction services, and correctional health services.
- Improve mental health and addiction care for Albertans through access to treatment and recovery supports.

Steps already taken to improve access to services, including expanding the delivery of existing programs:

- **My Recovery Plan:** an online tool to help those recovering from addiction.
- **Virtual Opioid Dependency Program:** provides same-day medication starts anywhere in Alberta to help treat opioid dependency and increase chances of recovery.

Primary Care Alberta



Overview:

- Lead Department: Ministry of **Health**
- Primary Care Alberta is a **made-in-Alberta solution** to **improve access** to the primary care services Albertans rely on. This agency is the **front-door of health care**, including essential conversations with a doctor and other health professionals about regular screening, routine health maintenance, prescription renewals, medication management, and everything in between.
- Primary Care Alberta was legally established on **November 18, 2024**, under the leadership of **CEO Kim Simmonds**. It became operational February 1, 2025.

Primary Care Alberta



Goals:

- Make sure all Albertans are attached to a primary care provider.
- Support patients as they move between primary care and other healthcare services.
- Increase after-hours services and improve access to virtual and digital health services.
- Improve access to primary care in communities that need it most.

Steps already taken to improve access to primary care:

- The **Nurse Practitioner Program**, launched in April 2024, will give 30,000 more Albertans access to a primary care provider.

Acute Care Alberta



Overview:

- Lead department: Ministry of **Health**
- Will work with acute care providers, including **Alberta Health Services and Covenant Health**, to ensure delivery of excellent acute care services.
- Acute Care Alberta became a legal entity on **February 1, 2025**, under the leadership of **interim president and CEO Dr. Chris Eagle**. It became operational April 1, 2025.

Acute Care Alberta



Goals:

- Shorter wait times for emergency departments and surgeries.
- Lower emergency medical services response time.
- Higher-quality care across the province and enhance access to care in rural areas.

Assisted Living Alberta



Overview:

- Lead department: Ministry of **Seniors, Community and Social Services**
- Will oversee a **comprehensive** system of care and **wraparound services**, including **medical** and **non-medical** supports, home care, community care and social services.
- Assisted Living Alberta became a legal entity **April 1, 2025**, under the leadership of **interim CEO** Dr. Sayeh Zielke.

Assisted Living Alberta



Goals:

- Fair, timely, and consistent access.
- More beds in the places where Albertans need them most.
- Better long-term care for patients through improved access to other health and social service supports.
- Accelerate transformation of care in home and community care settings.
- Ensure seniors, people with disabilities and other vulnerable Albertans are supported with comprehensive, wraparound services that meet both their medical and non-medical needs.

Assisted Living Alberta will be **responsible** for the delivery of programs already underway, including:

- Programs to **support and protect the health and well-being of caregivers** supporting friends or family members in continuing care.

What We Heard

What We Are Doing

Overview

- The “**Shape the Way**” report summarizes feedback from more than **30,000** Albertans, supporting a **deeper understanding** of the system’s **strengths** and **challenges**.
- Each **theme** was broken down into **actionable steps** for the government to **consider**. Those **suggestions** were shared with government departments to **assess their feasibility**.
- The departments have **reported back** on where **action is being taken** to address these suggestions, including programs put in place and those still being designed.



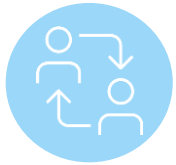
Theme 1: Access to Care

What we Heard:

- **Frustration** due to lack of providers and long wait times.
- Inability to **access** acute care services.

Actions:

- Improving **surgery capacity**
 - Completing a record number of surgeries (310,000)
- New **Primary Care Compensation Model**
 - Will make them the strongest-paid, most patient-focused in the country
- Investing in the **Alberta Midwifery Strategy**
 - \$10 million over three years to expand access to high-quality maternal care



Theme 2: Ongoing Communication and Transparency

What we Heard:

- Lack of communication **negatively impacts** patient outcomes.
- **Mistrust** in decisions made without frontline input.

Actions:

- Conducting the **Second Comprehensive Engagement**
 - Feedback will continue to guide the design of the refocused system
- Launching the **Modernizing Alberta's Primary Health Care System (MAPS) Dashboard**
 - Allows Albertans to hold the MAPS program accountable
- Ongoing Targeted **Health Care Worker Engagement**
 - Supports all staff throughout the refocusing transition



Theme 3: Supporting and Sustaining the Health Care Work Force

What we Heard:

- Providers feel **unsupported**.
- Lack of **meaningful** recognition and **appropriate leadership**.

Actions:

- Improving **Recruitment and Retention**
 - New programs in multiple departments including furthering the Rural Health Professions Action Plan
- Expanding **Accessible Education**
 - New bursaries, training centres, and more physician education spots
- Increasing **Training Opportunities**
 - Health Care Aide grants and entry-level Nurse Practitioner programs



Theme 4: Unique Needs in Rural, Remote and Indigenous Communities

What we Heard:

- Rural and remote patients face **barriers** to care.
- **Travel costs** add to other **challenges**.

Actions:

- Improving **Rural Access**
 - Launched Rural and Remote Health Facility Capital Plan
- Establishing **Indigenous Health Division**
 - Patient navigators, traditional food program, culturally-sensitive care
- Launching the **Rural Health Action Plan**
 - Aims to improve health equity for rural and remote Albertans



Theme 5: Local Decision-Making and Empowerment

What we Heard:

- Lack of **culture** and complex **structures** drive **frustration**.
- Local decision-making will **improve outcomes**.

Actions:

- Adapting **Regional Advisory Council Boundaries**
 - Added two councils and shifted boundaries to reflect corridors
- Health **Foundation Engagement**
 - Helped to better understand considerations for their roles in a refocused system
- Aligning **Indigenous Advisory Council**
 - Council will represent the entire province, and members will sit on Regional Advisory Councils



Theme 6: Accountability of the Health Care System

What we Heard:

- **Lack of accountability** for services/outcomes across the system.
- Two-way accountability should be a **top priority**.

Actions:

- Improving **Reporting**
 - Consistent reporting on EMS, continuing care audits, and engagement
- Building **Oversight**
 - Management frameworks and metrics are in place to monitor patient outcomes
- Expanding **Data Sharing**
 - Expanding Connect Care viewing access to front-line paramedics



Theme 7: System Integration and Coordination

What we Heard:

- Patients want providers to **access** all information and health records.
- Concerns around **navigation** across provincial health agencies.

Actions:

- Integrated **System Planning**
 - Unified approach aligns all entities with provincial priorities
- Established **Integration Council**
 - Aligns system goals, identifies efficiencies, and removes barriers to system integration
- Improving **Patient Navigation**
 - Electronic Referral System supports more timely access to specialist care across sectors

Next Steps

- Work to **implement** actions identified in the public feedback is ongoing.
- **Updates** will continue to be shared when available, including-regional advisory councils, further actions taken, and other system updates.
- Health is **committed** to keeping all Albertans **informed**.

Discussion



Discussion Questions

- Are there **new challenges or opportunities** you have noticed since refocusing started?
- What are some **strengths** you see amongst the **actions** taken?
 - What other **actions** would you like to see?
- What should **Alberta Health Services** focus on as it moves to a **hospital service delivery provider**?
- What should be the **top priority** for each provincial health agency?
- How would you like to continue to **contribute feedback** to the health care system?

Recap of Conversations

Thank you

alberta.ca/leadtheway