

Provincial Health Tour | Summer 2022

Slave Lake – July 26, 2022

What We Heard Summary

The Government Alberta and Alberta Health Services are jointly hosting a series of engagement conversations across Alberta over summer 2022. The Provincial Health Tour was designed to allow Alberta Health and Alberta Health Services to engage with healthcare staff, partners and stakeholders in communities across the province; to share current approaches and priorities, discuss current state and future opportunities, celebrate our successes and to work together to identify strategies to address challenges within the healthcare system.

Slave Lake

15 Stakeholders participated representing municipal and community leaders



MLA Garth Rowswell (Vegreville-Lloydminster-Wainwright) welcomed participants on behalf of local MLA Pat Rehn (Lesser Slave Lake).

Minister of Health Jason Copping provided an update on healthcare including sharing successes and an update on Government investment and areas of focus.

North Zone Medical Director Dr. Brian Muir shared the AHS Health Plan and priority areas, as well as the challenges and opportunities for our future vision.

The power of partnerships

Healthcare is all about partnerships - with advisory councils, health foundations, social agencies, community organizations and businesses, as well as private citizens that can help make a positive difference.

There are many examples of the power of partnerships unique to Slave Lake.

At the height of the pandemic, the Slave Lake Healthcare Centre partnered with E.G. Wahlstrom School on an initiative where students in Grades 4 to 6 used computer tablets to read to patients and long-term care residents, easing their feelings of isolation while visitation was restricted.

This heartwarming endeavour is one that could only be achieved through collaboration with community partners.

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Alberta Health Highlights

Budget

Alberta Health’s budget is \$22B, and anticipated to increase by \$600M a year over the next three years including key investments as follows:

- \$64M increase to EMS budget
- \$60M in new funding over three years to expand recovery-oriented support for people experiencing addiction and mental health issues
- \$3.7B for continuing care, community care and home care programs
- \$3.5B over three years in capital funding for health facilities, equipment and IT systems across the province.
 - The Health Capital plan also includes \$45M over three years for the Rural Health Facilities Revitalization Program.

Physician Recruitment

Approximately \$90M is being spent in 2022 including:

Rural Remote Northern Program:	~\$57M	Rural Medical Education:	~\$6M
Rural Integrated Community Clerkship Program:	~\$4M	Rural Health Professions Action Plan (RhPAP):	~\$9M
Locum Program:	~\$3M	Rural Physician On-Call program:	~\$12M

Alberta Health is working with RhPAP on its Rural Education Supplement and Integrated Doctor Experience (RESIDE) program to help address challenges in rural and remote areas.

System Recovery

Over the next three years, AHS will perform between 20 and 23 per cent more surgeries compared to 2018-19 to reduce surgical wait lists.

AHS will return to pre-pandemic surgery wait list status by the end of 2022-23.

AHS is resuming many regular public health activities in 2022-23.

AHS will add 50 permanent, fully staffed ICU spaces by the second quarter of 2022-23.

Government is providing funding for more ground ambulances and additional EMS staff.

In each of the next three years, AHS will add about 1,000 new continuing care spaces and increase the number of unique home care clients by four per cent.

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AHS Health Plan 2022-25

AHS is entering a new era of transformation and innovation. The Health Plan 2022-25 is the roadmap for this exciting journey. At the heart of this plan are the 10 priorities that align with direction from the Minister of Health and reflect feedback from patients, clients and families who have received care from AHS.

The 10 priorities are:



1. Alberta Surgical Initiative

Implementation of the Alberta Surgical Initiative, ensuring that, by 2025, all Albertans receive their scheduled surgeries within clinically approved wait times.



6. Rural Initiatives and Engagement

Rural engagement and rural initiatives, to strengthen partnerships with rural communities, to better support the rural healthcare workforce and to better meet the unique needs of Albertans living in non-urban communities.



2. EMS 10-Point Plan

Implementation of the EMS 10-Point Plan, designed to improve EMS services and availability, especially in rural and remote communities.



7. Continuing Care

Continuing care, increasing the numbers of continuing care spaces and living options, expanding home care hours, and shifting reliance from facility – to home-based care when appropriate.



3. Mental Health and Substance Use Recovery

Mental health and opioid recovery, which includes adding AHS-managed treatment spaces, and expanding in-person and virtual recovery-oriented programs and services.



8. Workforce Recruitment and Retention

Workforce recruitment and retention, which involved supporting our current workforce following more than two years of pandemic response, as well as recruiting and retaining needed healthcare workers.



4. Pandemic Response and Recovery

Pandemic recovery, which involves adding acute care spaces (ICE beds), supporting continued access to vaccines and treatments to COVID-19, and establishing specialty clinics to support Albertans with ongoing COVID-19 symptoms.



9. Quality of Patient Outcomes

Quality of Patient Outcomes, ensuring patient safety and high-quality care are maintained and enhanced during a period of transformative change in the organization.



5. Digital Health Evolution and Innovation

Digital health evolution and innovation, including the ongoing rollout of Connect Care and continued expansion of virtual health to support more community – and home-based care, programs and services.



10. Sustainability

Financial sustainability, ensuring that AHS is run efficiently, with Albertans getting full value for every health dollar.

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The event included a working session where participants reflected on the following questions:

- *What is our healthcare system doing well?*
- *What challenges currently exist within the system?*
- *In addition to what is currently being done, how can we better address challenges?*
- *What can you do to improve the provision of health care in your community?*



Here’s a sampling of what we heard in Slave Lake.

What we are doing well

Participants **identified workforce** and **patient care** as examples of success. One participant said Slave Lake and area residents benefit from *“phenomenal inpatient care”* and that patients are treated with dignity when they are receiving care in AHS facilities. The workforce was praised by many for their dedication and flexibility and community stakeholders also talked about the Family Care Clinic and its collaborative approach to care delivery.

“811 access to advice – “Guardian Angels” – they are a lifeline.”

Virtual Health was also identified as a success.

Participants talked about having access to services from home during the pandemic and appreciating the fact they could avoid travel and still get the care they needed.

Several participants commended staff for the rollout of the COVID-19 vaccine program and other successes identified by the participants included access to surgery through chartered surgical facilities which they said is reducing wait times, EMS, Cancer Care and the use of multi-disciplinary teams in the healthcare system.

Top healthcare challenges and opportunities

Workforce: Like other communities, participants in Slave Lake identified recruitment of physicians and healthcare professionals as a number one concern.

“Don’t believe healthcare is a good profession – work/life balance. Not recommending to my children.”

The topics discussed ranged from compensation and incentives to training, education and barriers that impact recruitment such as GPA requirements for students who have interest in pursuing a healthcare career being too restrictive, process for licensing physicians in Alberta being cumbersome,

and lack of access to housing in rural areas for new healthcare workers.

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Participants discussed a wide range of opportunities to help address recruitment and retention challenges beginning with initiatives that would make a career in healthcare both more desirable and more achievable for local youth. One person suggested the St. John's Ambulance First Aid course be added to the curriculum for youth 12 and up to give them exposure at an early age to the healthcare field. Others suggested schools would be great partners to promote healthcare careers.

“Set up a team of surgeons, nurses, etc. to go to rural areas.”

“Involve kids in healthcare at an earlier age.”

Compensation and incentives that would help current healthcare workers to expand their knowledge and bridge to other roles (i.e., LPN to RN) were also recommended during some discussions. One participant also raised student loan forgiveness.

While **patient care** was identified as a success, discussions by several groups also focused on where challenges exist around continuity of care. There needs to be *“clearer communication between health professionals”* when patients move between care providers, for example.

Access is still a challenge when it comes to getting into see a physician within primary care, transportation or some, and wait times to access surgery or specialists.

One participant lamented the loss of funding for schools and what they see as a loss of connection between AHS and schools while examples of **community partnerships** were identified as opportunities for improvement. Participants suggested better connections between mental health organizations in Slave Lake and surrounding communities (i.e., Soul Sisters, Jessica's House), partnerships with Indigenous communities and a municipally-led initiative to secure housing for visiting or new physicians.

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Evaluation of event

- Of the 25 individuals who completed a survey (both internal and external events):
 - 23 (85%) responded that the topic was highly relevant, and something they wanted to know more about (16 ranked as 5 out of 5; 7 as 4)
 - 24 (77%) felt strongly that the session was a good use of their time (18 ranked as 5 out of 5; 6 as 4)
- Many respondents indicated that the most valuable part of the meeting was the opportunity to share their perspective directly with AHS and the Minister of Health, and to hear the perspective of colleagues.
- Participants indicated a desire for more time to discuss the questions, and having additional community-specific sessions.

“[This session] brought together different fields/ departments to see what everyone’s challenges/ strengths are.”

Next steps

- All notes and partnership ideas generated from the Provincial Health tour will be shared with Alberta Health and Alberta Health Services leadership.
- A report and recommendations will be produced by Alberta Health.

Thank you

We are grateful to all who took the time to meet with Alberta Health and Alberta Health Services leadership to discuss the future of healthcare in Alberta. Your experience and personal insights will inform future planning and changes that will improve healthcare for all Albertans.

Contact us: community.engagement@ahs.ca