

Envisioning the future of healthcare

Central Zone



Healthy Albertans and healthy communities in 15 years require collaborative planning today if we are to build the right community partnerships, strategies and approaches. This document provides an overview of the zone's current demographics and system use, future projections, as well as innovative practices around the world.



The Current State of Health in Central Zone

How do we co-design and co-deliver a sustainable, quality health system that promotes healthy communities and provides appropriate access to services, programs and facilities across Alberta?

Demographics 2015

Population

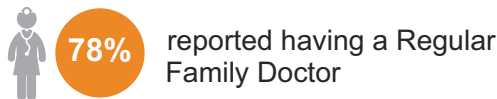


Aging Population



66,817 people were age 65 and older. That's **1 in 10** people.

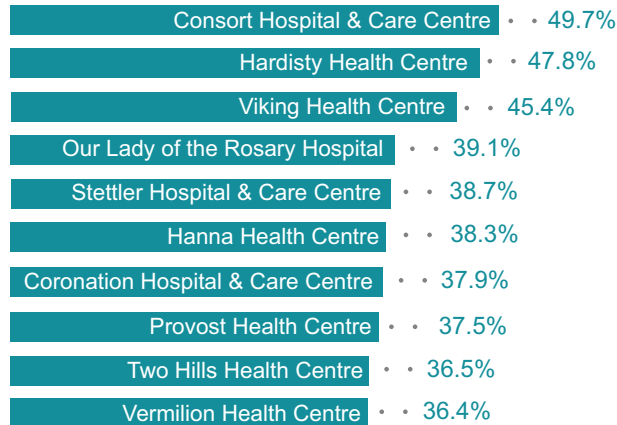
Primary care 2014/15



Avoidable Emergency Department Visits 2015/16

Canadian Institute of Health Information: health conditions or reasons for emergency department visits that may be appropriately managed at family physician's office.

Top 10 Facilities

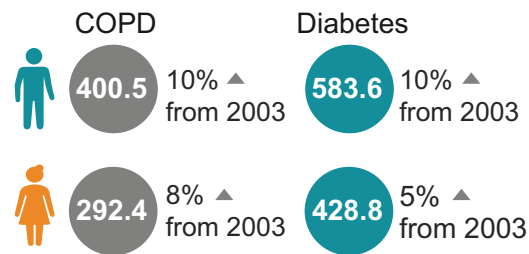


78% of people residing in Central Zone report having a family doctor, however many individuals are still visiting the ED for an issue that could be managed in primary care. Is there opportunity to expand primary care? Are there ways to more appropriately and effectively use primary care and the Emergency Department in rural Alberta?

The Current State of Health in Central Zone

Chronic Disease 2013

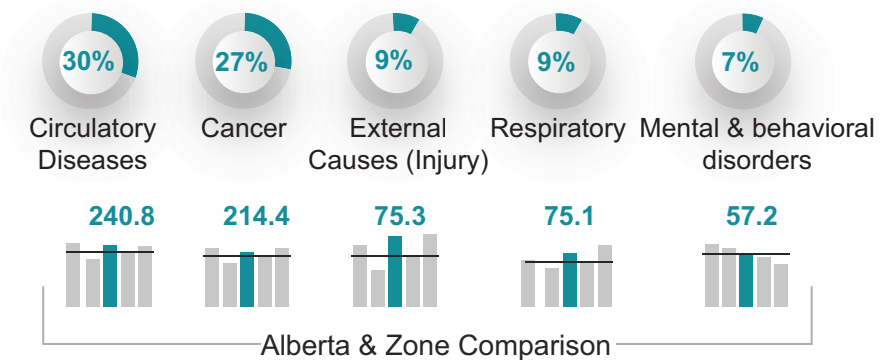
Incidence (per 100,000 population)



Rates of diabetes are on the rise, as are chronic obstructive pulmonary disease (COPD) and hypertension. Diabetes is the fourth most common reason for hospital admissions in Central Zone. How can we improve this through prevention? Are there more effective ways of managing patients with diabetes?

Mortality 2014

Top 5 Causes of Death



Mental health and behavioral disorders are among the top 5 reasons for Emergency Department visits, and the second most common reason for Hospital Discharges in Central Zone. Should addiction and mental health be an area of focus in the zone? How can we better manage people before they have to go to the emergency department?

What Are We Planning For?

Demographics 2015

Population

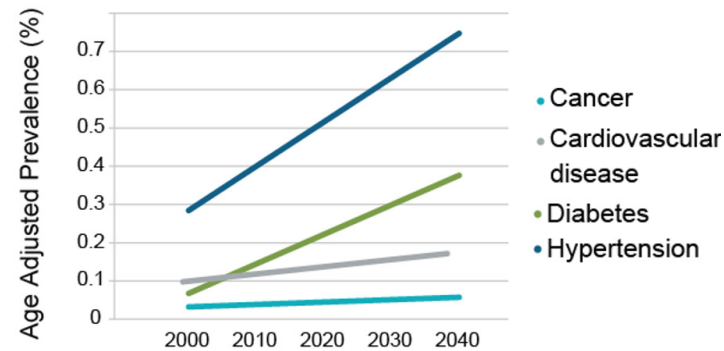
2015: **475,233**

2025: **587,657**

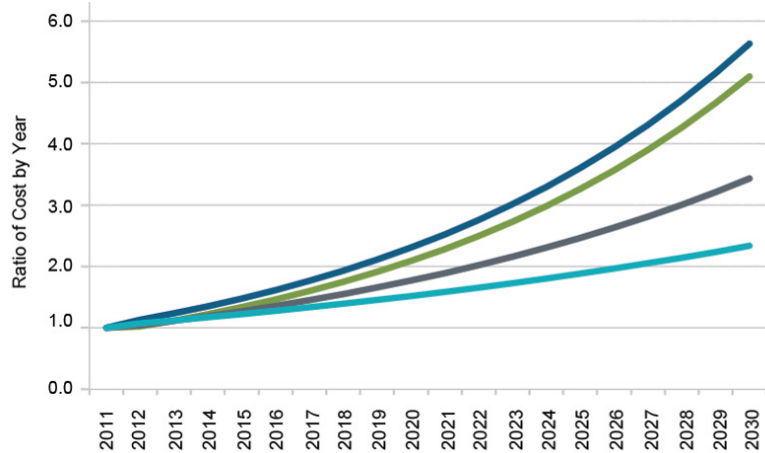
24% growth over the next 10 years.

By 2025, **17%** of people will be over 65 years of age.

Canada



Rates of chronic disease in Canada are increasing by 14% a year. How do we prepare for this?



We have an opportunity to prepare and plan for our future. If we improve population health (green line), we can make a slight difference. If we improve how we deliver care (grey line), we can have a significant impact on our financial health. If we are able to do both, we can significantly bend the cost curve over time (light blue). What's possible?

- **Status Quo**
- **Population Health Innovation**
prevention and health promotion strategies
- **System Innovation**
system navigation, primary care initiatives, service re-design, emerging technologies
- **Population Health & System Innovation**

Determinants of Health

What makes Canadians sick?

Your life

- Income
- Early childhood development
- Disability
- Education
- Gender
- Social exclusion
- Social safety net
- Race
- Employment / working conditions
- Safe and nutritious food
- Aboriginal status
- Community belonging
- Housing / homelessness

Your environment

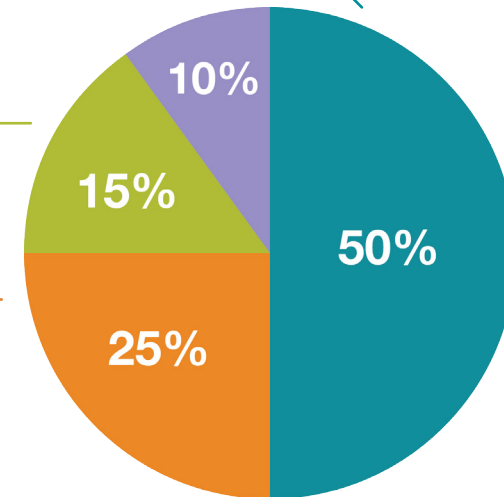
- Air quality
- Civic infrastructure

Your biology

- Biology
- Genetics

Your healthcare

- Access to healthcare
- Wait times
- Healthcare system



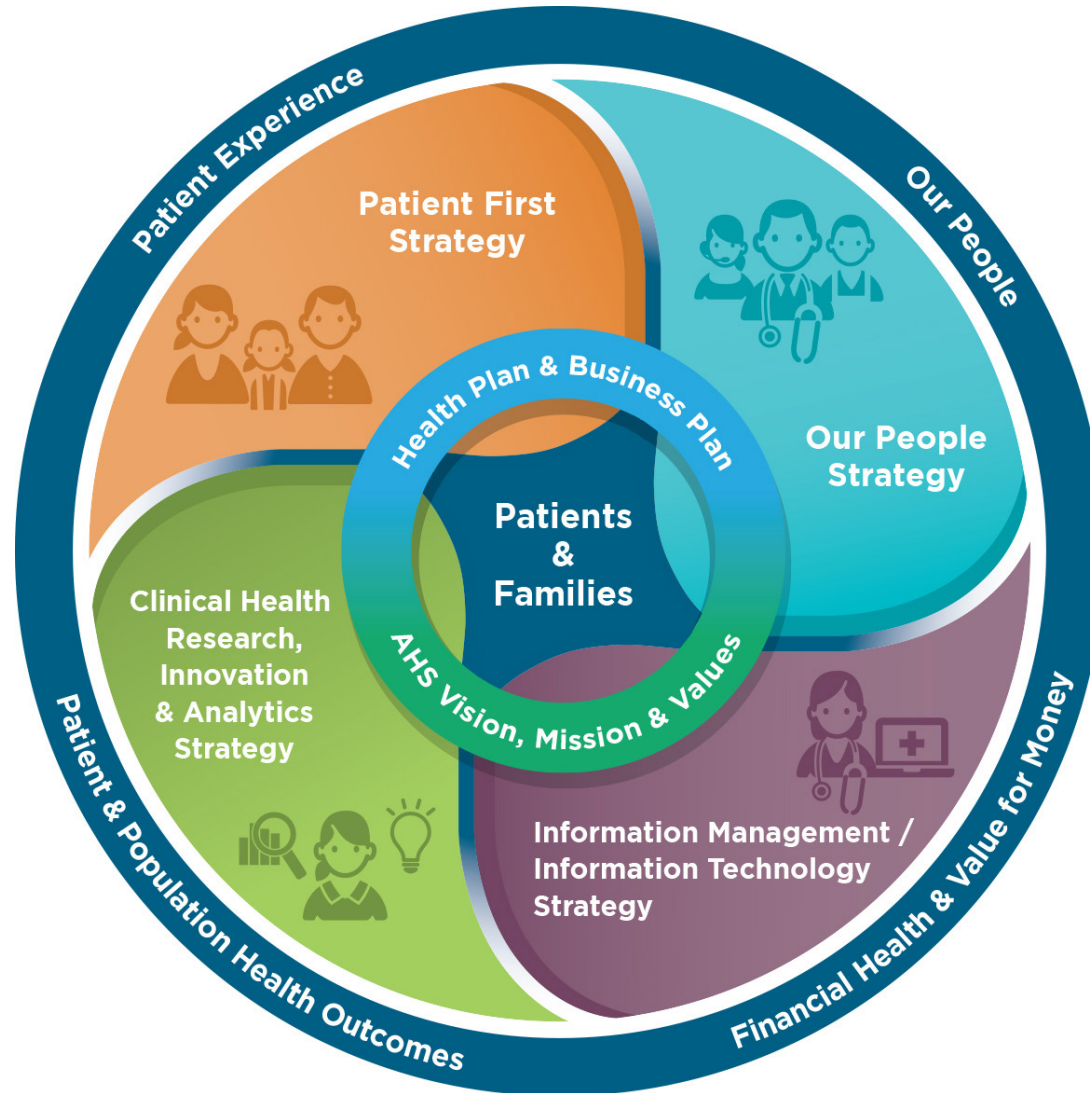
Innovative Practices in Other Jurisdictions



Quadruple Aim

Patient experience

Our people



Patient and population outcomes

Financial health and value for money

Our Vision

Healthy Albertans.
Healthy Communities.
Together.

How to Stay Involved

Long range planning involves envisioning what will be needed in the future, and beginning to develop it today. Input gained from those who participate in engagement activities will be used to inform the future of health care in the zone and the province. A report on how the input was used will be provided to those who participated.

This is just the beginning. There will be further opportunities for participation as this work continues. One way to keep the conversation going is to contribute online. Visit www.ahs.ca/blog/longrangeplanning for information on how to stay involved, updates in the long range planning process, and a forum to share your thoughts on a number of topics.

This web page will be available to all Albertans, we encourage you to share it with your network and grow the conversation.

For additional information, please email community.engagement@ahs.ca.



Information Sources

- 2015 Alberta Provincial Registry data (POP_HLTH @AHSDRRX)
- Alberta Health IHDA: http://www.ahw.gov.ab.ca/IHDA_Retrieval/selectCategory.do; Accessed Oct 5/2016
- Alberta Health PHC Community Profiles, March 2015
- Alberta Physician Claims, 2013-14
- Statistics Canada. 2013. NHS Profile. 2011 Released Sept 11/2013.
- <https://tableau.albertahealthservices.ca/#/views/CommunityProfile/UtilizationRates?:iid>
- Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada, using POHEM Model, Statistics Canada.
- Alberta Health and Wellness, Chronic Disease Projections 2006 to 2035: Ischemic Heart Disease
- Lau, R. S., Ohinmaa, A., & Johnson, J. A. (2011). Predicting the Future Burden of Diabetes in Alberta from 2008 to 2035. *Canadian Journal of Diabetes*, 35(3), 274-281.
- AHS Analytics (DIMR), Modeling the Future - Quantitative Scenarios
- Canadian Medical Association: <https://www.cma.ca/En/Pages/health-equity.aspx>