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ALBERTA HEALTH SERVICES**

**THE FUTURE OF HEALTH CARE IN RURAL COMMUNITIES  
PRESENTED TO THE SHEEP RIVER HEALTH TRUST**

**FOOTHILLS CENTENNIAL CENTRE  
SMITH AND MESKEN WEST ROOM  
#4 – 204 COMMUNITY WAY  
OKOTOKS, ALBERTA**

**FRIDAY, OCTOBER 9, 2009  
12:30 P.M. to 1:30 P.M.**

- **Good afternoon, everyone, and thank you for inviting me to be a part of your Speakers' Series Luncheon. It is my pleasure to be here today to discuss health care in rural communities.**
- **I really enjoy events like this – not only does it allow me to travel and see different areas of Alberta, but it also helps me get a better feel for your concerns regarding the health-care system.**
- **To kick things off, I would like to congratulate the Sheep River Health Trust for celebrating 15 years of raising funds for medical and health equipment and programs for the Sheep River area.**
- **Since your inception, you have funded hundreds of pieces of equipment, and supported programs and services in your community. This work has not gone unnoticed, and on behalf of Alberta Health Services, I would like to thank you.**
- **I'd also like to recognize the work of the Sheep River Health Trust board chair, Dr. Bob Haslam. A recipient of the Order of Canada, Dr. Haslam has a well-deserved reputation as a champion of children's health.**

- **One of the many things he is responsible for is the development of the Department of Pediatrics at the University of Calgary—which later resulted in the establishment of the Alberta Children’s Hospital.**
- **Under his leadership, the trust has been revitalized and gained a new focus these last few years. This speaker series is just one example of new ideas to link the trust with the communities it serves.**

**And I have one more group to thank - everyone who came from other parts of the province to attend this event. I’m sure some of you came a long way to be here today.**

- **Oh, and I have one final thing before I get started. I’d like to congratulate your Okotoks Dawgs for being declared the 2009 co-champions of the Western Major Baseball League. I hear this is your third straight championship, so I guess this “winning thing” is nothing new to you...still, congratulations to your community and the Dawgs are definitely in order.**
- **And now, I’d like to speak with you about rural health care in Alberta.**

- **This goes without saying, but it is essential that rural communities and Alberta Health Services engage in frequent communication. One of my top priorities is to keep Albertans apprised of our overall plan for the health-care system.**
- **So today, I hope to leave you with a sense of how we will work with rural communities – and health Foundations and Trusts – to help us reach some of our goals.**
- **Obviously rural health care is a very complicated issue, so it stands to reason everyone here has a lot of questions for me. If you could, please wait until the end of my speech to ask them. I'll be happy to answer them at that time.**
- **Over the past few months, there has been a lot of gossip and misinformation spread about our plans for the health care system – including our plans for rural communities.**
- **This really disappoints me, as it causes unnecessary anxiety and distress among any communities named, as well as our staff.**
- **Before we go any further, I want to be very clear on this point. Alberta Health Services recognizes the important role our health services play in rural communities.**

- **Alberta Health Services values engagement, and is working diligently and quickly to ensure the right care is delivered in the right place at the right time to all Albertans, including those who live in rural and remote areas.**
- **We know that no two rural communities are alike; each one has its own set of needs. Accordingly, we can not approach the provision of health services with a one-size-fits-all attitude because that won't allow us to best meet the needs of Albertans and the unique communities they live in.**
- **Take for example the northern communities of La Crete, Fort Vermillion and High Level. All three are located within a 70 kilometer radius of each other. However, the health services offered in each community must meet the needs of significantly diverse populations based on the health status of the people who live, work and visit there.**
- **High Level is a community driven by natural resources, La Crete hosts a large Mennonite culture and Fort Vermillion serves a largely Aboriginal population. When we take the differences into consideration, we know it is neither effective nor efficient to offer a consistent set of services in all of our rural centres.**

- **But what we do need is a consistent approach to how we make those decisions.**
- **We are committed to providing rural communities with quality, accessible and sustainable health care. To ensure this, we're developing a comprehensive rural and community health planning strategy.**
- **This strategy will include a framework that supports and outlines consistent processes for decision making and providing quality, safe care.**
- **We want our decision making to be based on evidence, including demographics and population health data, that will give us understanding as to what services are truly needed in a community.**
- **And we need to work with communities to determine if the data we're using is giving us the full picture or if there's something we're missing as we work to determine the right mix of services for their areas.**
- **Rest assured, any decisions about the future mix and type of services provided will be based on standards for quality and safety of services, and what support services need to be in place to make sure we meet those standards. We are committed to ensuring each community has the volume of**

**services necessary to ensure safety.**

- **It is vital that all communities, both urban and rural, are engaged in the continued development of our health care system. To that end, we're building mechanisms to engage and involve local stakeholders into our planning strategy.**
- **Your attendance here shows your interest and I ask each of you to remain engaged with us as we work to provide quality care that is accessible and sustainable.**
- **We know there is a limited supply of health-care professionals in the province. Not all of them are willing to work in rural or remote communities. What we need to do is locate those who do in communities where their skills are best utilized.**
- **For example, some health-care professionals are specially trained to meet the needs of Aboriginal cultures. It makes more sense to recruit those skill sets to Peace River or Lac la Biche than to Canmore or Drayton Valley where they can have a greater impact on the health of Albertans.**
- **We need to engage local stakeholders in supporting our efforts to recruit staff to their communities, helping health care professionals see the opportunities available for both work and play. We want to ensure that we have people**

**providing care in our communities who know and love those communities.**

- **We should also explore using other types of health-care providers in rural communities to provide the greatest range of services possible. Enhanced use of EMS in our Emergency Departments for example, or making more use of the skills of Alberta’s physician assistants and nurse practitioners.**
- **At any rate, ensuring the right skill mix for the range of services is a critical issue we need to address.**
- **It will never make sense for us to offer every service in every community. If we attempted to provide every type of service everywhere this would quickly prove unsustainable and definitely not provide the quality of care we all want and need.**
- **We simply don’t have the financial or human resources to provide all services to all communities, and in some cases we’d be offering services no one would make use of.**
- **As we make decisions about health service delivery in rural Alberta, we also need to take geography and proximity into account.**

- **If we go back to our discussion about High Level, La Crete and Fort Vermillion, we've identified the importance of recognizing the differences that set these communities apart. But just as important is that we identify needs they commonly share, including children who need to be immunized, adults who need help managing chronic illness, and residents who require emergency medical services.**
- **When communities are close together we can take advantage of their proximity to share services and service providers.**
- **In some cases, it will mean having service providers travel to neighbouring communities. In others, it will mean having residents travel to the services. This reduces the number of facilities we need to maintain or space we need to rent. We're already doing this in many areas, but we need to maximize the available efficiencies while always ensuring quality care that is accessible and sustainable.**
- **We want communities to be engaged with us as we determine which services are housed where. We also want communities to be engaged with each other in this discussion. As I said before, it will never make sense to offer every service everywhere.**

- **But when we look at general service areas, communities working together and working with us can play a role in determining what might go where to best meet the needs of local residents.**
- **We know changes are needed in the levels and types of services provided in some rural communities, just as they are in larger centres. The makeup of rural communities and the needs of those who live there has changed over the past couple of decades and continues to change.**
- **You've seen it here in your community. According to the 2006 Statistics Canada Census, the population of Okotoks increased by 46 per cent as compared to the tally in 2001. Other bedroom communities, such as Airdrie and Chestermere, have also seen substantial growth.**
- **Some of the rural communities in this area, however, are growing smaller as younger generations are choosing life in urban centres as compared to living on the family farm.**
- **As our communities change, our thinking and planning must change accordingly. And as we make decisions, we need to ensure we're planning for the future.**

- **We can not continue to operate as we have been. Not only won't our budget allow it, but we have to be able to meet the changing health-care needs of Alberta's population in ways that meet our goals of access, quality and sustainability.**
- **There are tough decisions before us to be made, and we need to make them now or they will get even tougher. I've promised that Alberta Health Services will involve communities in the planning of future health service delivery in their areas and I'm sticking to this promise.**
- **Before I leave here today, I would like to talk about the importance of health foundations and trusts.**
- **A healthy relationship between Alberta Health Services and Foundations is essential in delivering quality health care to Albertans—such as the very collaborative and productive relationship between local health administration and the Sheep River Health Trust.**
- **Right now, there are 75 Foundations supporting Alberta Health Services. 20 of these are based in urban areas, with the remaining 55 (like the Sheep River Health Trust) are found in rural areas.**

- **More than 600 volunteer Trustees currently serve with the 75 Foundations across the province – and thousands more volunteer their time to assist Foundations in the important work they do.**
- **For the 2007/2008 year, we gathered financial data from 70 per cent of those Foundations. They showed a total gross revenue of a whopping 156.9 million dollars, with total endowment funds across the province reaching 209 million dollars.**
- **The amount of money raised by groups like yours is very, very impressive – and this only represents 53 out of the 70 Foundations. These funds go a long way toward ensuring the sustainability and quality of our health system.**
- **Speaking of funds, one of the questions I keep hearing is “How do I know the money I donate will go to my area?”**
- **To be very clear, *local funds will stay local*. They won’t be randomly distributed to some other area of the province.**
- **That money won’t be used to develop a program in another community, or new equipment for a health centre elsewhere. The money donated to a local Foundation will stay within that community or area. Period.**

- **The funds raised by the Sheep River Health Trust, for example, have contributed a great deal to your community. The Okotoks Health and Wellness Centre, Black Diamond's Oilfields Hospital and the Rising Sun Long Term Care Unit, along with in-home care and other community wellness programs have truly benefited from your support over the years.**
- **Now if you don't mind, I think we should take a moment to congratulate not just the Sheep River Health Trust, but all Foundations and Trusts across Alberta. Their contributions are essential to the success of the health care system. Please join me in a round of applause to thank everyone for their hard work.**
- **As we are building a system that is focused on the needs of Albertans, we recognize how important public feedback regarding health care service delivery truly is. If we want to meet the needs of the public, we need to have them involved.**
- **Foundations are vital in gathering community support and developing partnerships across the province. Their commitment to helping build excellence and innovation within our system will do a long way towards ensuring its success.**

- **To ensure the public is engaged and has ample opportunity to provide their feedback on all types of care, Alberta Health Services has created a Community Engagement Portfolio. This portfolio is responsible for supporting the operations of Foundations and Health Advisory Councils.**
- **Our Community Engagement team has contacted all of the Foundations and Trusts in Alberta to better understand the operations, goals and needs of organizations like yours across the province. Enhancing the relationships between all parties will help us reach our goals of quality, access and sustainability**
- **Please take the time to engage with us in this dialogue so we can better work together to improve the health and well-being of Albertans.**
- **I also ask that you continue the outstanding work you have been doing over the years. It is your support that helps our doctors, nurses and all other health-care professionals provide the best possible care to all Albertans.**
- **To close, I would like to thank you for your attention and for inviting me to speak today. I now welcome any questions you may have.**
- **Thank you.**