

Our People Story





Together, we do amazing things every day

For the second year in a row, we've been named one of Canada's Top 100 Employers, one of Alberta's Top 75 Employers and one of Canada's Top Employers for Young People. And we're honoured that this year, we've added another significant title: one of Canada's Best Diversity Employers.

We're a team of almost 133,000 staff, physicians and volunteers working together to deliver quality healthcare to Albertans.

To learn more about how we serve Albertans, visit ahs.ca.



Healthy Albertans.
Healthy Communities.
Together.



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This Alberta Health Services document
was prepared by Community Engagement
and Communications, and Human Resources

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ON THE COVER (clockwise from top): See stories pages 20, 8 and 28



Dr. Verna Yiu is President and CEO of Alberta Health Services.

Celebrating our 10 years together

Ten years ago, Alberta Health Services began its journey as Canada's first single, provincewide healthcare system.

Together, we've overcome challenges to create a patient-focused, quality health system for all Albertans. We've marked significant milestones and made our health system better, more innovative and cost-effective.

Getting to where we are today involved engaging with our exceptional workforce, as well as with advisory councils, community partners, community leaders, foundations, and

the patients and families for whom we care. Their collective voices have helped us understand what our people need to feel good about coming to work every day and supported in caring for Albertans. This matters because, when our people feel engaged at work, patient care improves.

We've acted on what we heard and set a common vision, shared values and a foundational strategy—Our People Strategy—to help guide us in creating workplaces where people feel safe, healthy, valued and included, and able to

Verna's words

"Thanks to your hard work, we lead the country in many areas, including stroke care, the lowest total time spent in emergency department for admitted patients, and the fewest repeat hospital stays for mental illness. We also have the lowest administrative costs in the country."

—Thanking staff and noting a few of AHS' achievements over the past 10 years

"If there was an Olympic competition in health supply chain management, AHS would win the gold medal. Transforming our supply chain improves safety, improves health system quality and, most importantly, patient care. Recognition like this is great news for Albertans."

—On AHS being recognized in the journal Healthcare Quarterly as having one of the top health supply chain management programs in the world

"We're learning a lot about what our people need and we're making changes to create welcoming workplaces defined by partnerships, collaboration and treating patients, families and each other with dignity. It's an ongoing journey and not always an easy one—but we're in it together. I thank each of you for doing your part and making AHS such a great place to work."

—On AHS being named one of Canada's Best Diversity Employers for 2019

reach their full potential.

As a relatively young and highly diverse organization, we have a bright future and I know that we are on the right track. Our people are thriving—rising to the challenges before them, enhancing their skills and growing their careers with ready access to the information, resources and technology they need.

We showcase some of their efforts here. I encourage you to read and be inspired by these stories and learn more about the amazing things our people do

together, every day.

I am grateful for the opportunity to lead this organization and would like to thank each of you for everything you do for Albertans each and every day.



—Dr. Verna Yiu
President and Chief Executive Officer

“AHS is grateful for the partnership we have with the Alberta Children’s Hospital Foundation to build the first standalone centre for child and adolescent mental health in Calgary. The foundation’s commitment will help us provide the best care possible to children and youth in our community who experience mental health issues.”

—Announcing the development of
a new centre for child and
adolescent mental health in Calgary

“I’m grateful that during AHS’ turbulent early years, we had exceptional healthcare leaders who put in place the building blocks for our organization. What we’re able to do today in regard to innovation, sustainability, quality, safety and integration—you can trace these achievements to the work done in AHS’ early days. And this recent period of stability has enabled us to become the high-performing, learning healthcare organization we’ve always strived to be.”

—On a decade of healthcare
transformation in Alberta

AHS Vision

Healthy Albertans.
Healthy Communities.
Together.

AHS Mission

To provide a patient-focused, quality health system that is accessible and sustainable for all Albertans.

AHS Values

compassion accountability
respect excellence safety

AHS Foundational Strategies

AHS has four foundational strategies supporting our efforts to deliver safe, high-quality patient- and family-centred care to Albertans:

- **Patient First Strategy** strengthens AHS’ culture and practices to ensure patients and families are at the centre of all healthcare activities, decisions and teams.
- **Our People Strategy** is about how we support each other and create a culture in which we all feel safe, healthy, valued and included, and able to reach our full potential.
- **Strategy for Clinical Health Research, Innovation & Analytics** generates, shares and uses evidence in the delivery of care to improve patient outcomes and to solve the complex challenges affecting the health system.
- **Information Management/ Information Technology (IM/IT) Strategy** focuses on making the right information available to the right people at the right time across the health system, so that providers and patients have access to complete information at the point of care and to learn from in the future.

Who we are

We are doctors, nurses and therapists. We are lab technicians and dietitians. We are scientists and researchers. We are cleaners and volunteers. We are Alberta Health Services—and we are more than the sum of our parts because we are stronger, together

The health of all Albertans lies at the heart of everything we do at Alberta Health Services (AHS).

As a high-performing healthcare organization, we dedicate ourselves to delivering safe, quality, patient- and family-centred care to 4.4 million Albertans in communities throughout our province.

We're committed to supporting the people who work here by creating a culture in which we all feel safe, healthy, valued and included—and able to reach our full potential.

AHS is Canada's first, provincewide integrated healthcare system—the nation's largest—and one of its biggest employers.

Our talented workforce includes 110,000 employees, 8,400 physicians

and 14,485 volunteers. We are nurses, physicians, lab techs, power engineers, housekeepers, IT analysts, accountants, carpenters, dietitians, physiotherapists, HR advisors, porters, social workers and pharmacists—and we enjoy the support of our colleagues in clinical, business and other indispensable roles who also contribute to safe, quality care.

Together, we do amazing things every day.

We work at 650 sites in 145 communities across the province, including hospitals, urgent care centres, clinics, continuing care facilities, cancer centres, mental health facilities and community health sites.

We work 24 hours a day, seven days a

week, 365 days a year.

We support a wide-ranging network of community-based services that assist Albertans to maintain or improve their health.

We share our knowledge, too, with students from universities and colleges across Alberta and Canada who choose to receive their clinical and practical education alongside us.

We're also users of our health system. We live in Alberta's small towns and big cities. We're neighbours, family members and friends. We come from all walks of life, have diverse backgrounds, embody many cultures and hail from countries around the world.

And each of us calls Alberta home.

Our words

"Through it all, the Cross offered hope—physicians and staff who showed that they cared for me, who answered my questions and used their expertise to treat my cancer and to support me through the treatments. I told myself that when I retired, I was going back to the Cross in a volunteer role."

—Retired nurse Debbie Elliot, who was diagnosed with breast cancer—which later recurred—on the care she received at Edmonton's Cross Cancer Institute. She now volunteers there



"The great thing about volunteering together is that it always becomes an opportunity for team-building. In helping others, we always walk away with a greater understanding and appreciation of each other."

—Kirsten George-Phillips, a clinical practice leader at the University of Alberta Hospital in Edmonton, on making Sunday brunch for more than 40 families at Ronald McDonald House with the Pharmacy Services North clinical practice leader team, pictured at left



Healthcare is the focus of what we provide at Alberta Health Services. But the best healthcare involves a multitude of people working together: physicians, nurses, clinicians, patients and families. And equally as important but less on the front lines: administrators, protection officers, cleaners and many, many others.

OUR PRIORITY IS THE HEALTH OF ALL ALBERTANS

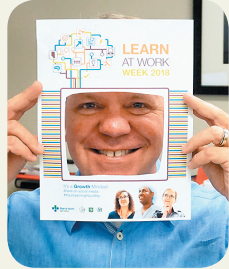
- AHS has five geographical zones of care—South, Calgary, Central, Edmonton and North.
- These zones help AHS provide decision-making at a local level, and enable AHS to listen to and respond to local communities, local staff, and patients and clients.
- Provincewide services—including emergency medical services; population, public and Indigenous health; diagnostic imaging; and quality and safety—work in cooperation with the zones to deliver care.
- AHS works at providing more community-based resources and services for Albertans, including long-term care, supportive living, palliative care and home care.



“We chose to support the Alberta Cancer Foundation because several of us have had very close family members affected by cancer ... it’s something we could support that helps people right now.”

—Kiron Jhass, a registered nurse at the Cross Cancer Institute and guitarist and vocalist with the Dungarees, a country music band who hosted a 24-hour Gig-a-thon to raise money for the Alberta Cancer Foundation’s Patient Financial Assistance program. Jhass is pictured at far left with his bandmates

“As we modernize learning within AHS, we’re moving toward this philosophy that everyone has talent, and the principle of what’s called a growth mindset. Everybody can learn. Everybody has potential.”



—Brad Dorohoy, senior program director, Talent Management Program

What we do

Our goal at AHS is to make a positive difference in the lives of Albertans every day. We call it patient- and family-centred care. But really, it's all about our passion for helping people—such as in this program, which takes a jab at Parkinson's disease

A smile lights up the face of Joan Roberts as she jabs a left, then lands a right punch onto a pad held by volunteer trainer Raphael Bergmann during a boxing workout at the Reach Centre in Grande Prairie.

"It's good fun," says Roberts, who travels from Fairview to take part in the PWR!4Life Parkinson Wellness program—a community partnership between Alberta Health Services (AHS) and the Parkinson Association of Alberta.

AHS physiotherapists Sailaja Bayapaneni and Rosanna Clark lead the twice-weekly Parkinson-specific exercise program, which has 18 participants. It features work on treadmills, PWR!Moves floor exercises and boxing, with a focus

on improving range of movement, flexibility and balance, as well as boosting cardiovascular endurance.

Parkinson's is a chronic neuro-degenerative condition which affects the parts of the brain that control how we move. As the disease progresses, people experience limited movement, rigid muscles and tremors, as well as potential issues with balance and walking.

But the program is making a positive difference in Parkinson's participants.

"We do pre- and post-assessments," says Bayapaneni. "The improvements have been impressive and the number of falls are down ... it really is a success story."

Clark agrees: "We see improvements in some people quickly. It's amazing to see

the psychological improvements as well."

Ron Hindman, who was diagnosed in 2012, and Linda Sodergren, who was diagnosed in 1989, say the program has made a huge difference in their lives.

"With this disease, there's a lot of darkness," says Hindman, "but when you come out of here you just feel good. It's given me my life back, really."

"It's slowed the progression," says Sodergren. "There were things I was having problems doing that I can do easier now."

The social aspects of being able to share her experiences with group members also appeal to Sodergren, who adds: "It takes the stress away."

Bergmann, who owns and operates Champion Gym in Grande Prairie, has

Our words



"I've described it as analagous to the first delivery you see; bringing a life into the world. I recall the first delivery I witnessed, and I was quite emotional. I had the same emotions going through my mind with this case. I don't think I've done any of these with a dry eye. It's empathy for the family and empathy for the patient."

—Dr. Tobias Gelber, family physician in Pincher Creek, on Medical Assistance in Dying, and helping a patient through the dying process



"We've had family members who come up to us and say, 'Wow. They've eaten so much today—this is the first time!' And after the patient gets to eat, they're almost an entirely different person. Seeing that improvement is my favourite part of the program."

—Andrew Panteluk, a third-year honours student in immunology and a volunteer with the Mealtime Companion Program

"Feeling the care that Kristin provides to her patients and seeing the respect she has from her colleagues is a Mother's Day gift I get to cherish all year long."

—Martina Kunkel, medical radiation technologist at the University of Alberta Hospital, on working with her daughter Kristin

"Sharing a love of healthcare helps us relate to each other, so if something goes wrong, she can kind of support me."

—Registered nurse Kristin Kunkel on working with mom Martina

WE PUT PATIENTS AND FAMILIES AT THE CENTRE OF EVERYTHING WE DO

We provide comfort and caring, perform life-saving surgery and conduct groundbreaking research.

We welcome babies into the world, help people recover from serious injuries and illness, and support them through physical, emotional and mental health challenges—at every stage of life. And, when healing is no longer possible, we provide compassionate care and support.

We promote healthy living in communities, immunize, and prevent disease, disability and injury.

We teach, learn from our colleagues and mentor and train students from universities and colleges within Alberta, across our nation and many other countries.

We engage with people, patients and families to gain meaningful input. We work at 650 sites located in 145 small and large communities across Alberta providing care in:

- Emergency departments
- Urgent care centres
- Acute care hospitals
- Mental health and addiction centres
- Corrections centres
- Cancer care facilities
- Continuing care centres
- Outpatient clinics
- Public health clinics
- Schools
- Emergency medical services (EMS).

In 2018, AHS staff:

- Assisted in 51,671 births
- Answered 706,280 Health Link (811) calls
- Attended 544,744 EMS events
- Administered close to 1.3 million seasonal influenza vaccinations
- Conducted 78,311 food safety inspections
- Saw cancer patients during 639,449 visits.



Volunteer Raphael Bergmann, left, puts Leslie Fraser and Joan Roberts through some pugilistic paces during a boxing session at the PWR!4Life program at the Reach Centre in Grande Prairie. The program is a community partnership between Alberta Health Services and the Parkinson Association of Alberta.

been volunteering his time to share his boxing and training know-how with folks in the PWR!4Life program.

“When I come in here and I haven’t

been having a very good day, they just lift my spirits,” he says. “The personalities, the stories, they make me smile—and they work hard, you know.”



“It can be a frightening, overwhelming experience to have a child in intensive care, and I want to do whatever I can to help not only care for the babies, but to support the parents, as well.”

—Sandra Walker, the Red Deer Regional Hospital Centre's first neonatal nurse practitioner. At left, Walker cares for baby Madison Vasselin. In back, her sister Jessica sleeps comfortably in the arms of her mother Melissa Vasselin

Why we care

Ask any AHS employee why they do what they do and the No. 1 answer is because their care makes a difference for people in all stations and walks of life, including those who travel a more difficult path. This ARCH program connects people with their communities

As it marks the first anniversary of their immunization program, the Addiction Recovery and Community Health (ARCH) team at the Royal Alexandra Hospital in Edmonton looks forward to making a positive difference for years to come.

The ARCH program—launched in 2014 with funding from the Royal Alexandra Hospital Foundation—takes three approaches: clinical, research and education, all designed to support patients who use substances and face multiple health and social inequities.

“It helps us look beyond why they came into the hospital. It’s an opportunity for us to offer other care and our patients have been very willing to get as much care as possible,” says Dr. Kathryn Dong,

physician lead for ARCH.

On the clinical side, patients receive addiction treatment and counselling, have access to harm reduction and social work support and, more recently, to additional immunization services at their bedside.

Public health staff work with inner-city agencies to offer immunization services to people who are transient, unemployed or without a family physician.

“This is a great opportunity to help this population. They likely wouldn’t get immunized otherwise,” says Jennifer Beaudry, clinical development nurse with Communicable Disease Control in Edmonton Zone.

Anyone referred to the ARCH program, who is not immune to Hepatitis B

infection, now gets an individualized immunization assessment that looks at their health history. Edmonton Zone’s Central Immunization Team prepares a recommendation that can include just one immunization or several. It’s then up to the patient if they wish to proceed.

Patients can get caught up on childhood vaccines, as well as vaccines recommended for people with chronic health conditions such as HIV and Hepatitis C. In many cases, these help patients ward off vaccine-preventable diseases.

“Immunization is extremely complex, especially for patients with chronic or multiple health issues,” says Beaudry. “Each patient needs something different

Our words

“I believe in the work we’re doing to not only support Stollery kids, but the families who bring their kids here. It’s so meaningful to see the difference on the level of care received. To me, this is really about supporting the wellness of patients and families.”

—Michelle Devlin, volunteer with the Stollery Women’s Network, on the Giving Comfort campaign, which supplies books, toys, blankets and toiletry kits to patients and their families in the emergency waiting room at the Stollery Children’s Hospital in Edmonton



“I’ve always been motivated to create art. I feel it improves everybody’s health and well-being. And I enjoy seeing people appreciate the work. I love to see them happy.”

—Registered nurse Jelena Marjanovic, who painted several murals for the general medicine unit at Foothills Medical Centre in Calgary. Research indicates that such murals deter wandering in mental health patients who have behavioural issues or dementia, lower anxiety for patients and have a calming effect on staff



Dr. Kathryn Dong, left, physician lead for the Addiction Recovery and Community Health (ARCH) team and Jennifer Beaudry, a clinical development nurse with Communicable Disease Control in Edmonton Zone, celebrate the anniversary of a collaboration allowing the ARCH team to provide immunizations to their clients.

and without that specialized assessment, something might get missed or they won't get the appropriate vaccines."

Since the immunization program began, it's received 157 referrals and administered

167 doses of vaccine to 67 participants.

"We're so grateful for these partnerships," says Dong. We really value them and they make such a difference for our patients."

THE NEEDS OF PEOPLE SHAPE OUR ORGANIZATION

We are driven by hope, compassion and a desire to help.

We are fuelled by knowledge, discovery, science and evidence.

AHS is shaped by the health needs of individuals, families and communities, and with the input of patients and families, as well as local, provincial and Indigenous advisory councils.

Our roots can be traced to the first clinics and hospitals in the province. We stand on more than 150 years of advances and innovations in caring for people.

Our interactions with patients, clients and their families are meaningful and rewarding in countless ways. The importance of what we do is reflected in their voices:

- **www.thanksforcaring.ca** is a website featuring posts of online messages of gratitude for care or support received from any person working in any role at any AHS site.
- **Because You Cared** is a video series in which Albertans thank their care providers.



"It's the patient's response—they're so, so grateful. It's heart-warming, yet heart-breaking. When you've been called someone's angel because you've come to their rescue, it leaves a mark. You meet families who are so grateful that their loved ones got to do things on their terms I've had my share of tears."

—Rachel McGean, registered nurse and patient navigator, on Medical Assistance in Dying

"Rehabilitation is about building relationships and rapport. If we really know 'who' the patient is and what matters to them, it goes a long way toward helping them meet their goals in a motivating and meaningful way. For example, if they tell us they love to get out on the golf course, we can design our care plan around that—and get them back out there."

—Jason Knox, manager of tertiary neuro rehabilitation unit 38 at Foothills Medical Centre in Calgary

"Volunteering has helped me become more compassionate and enlightened. I've always felt very fortunate because I live in a country where there's free healthcare and everyone's friendly. I have a loving family. I have good health. I have a good set of skills and for me, it's a way to give back for all the blessings I have."

—Giancarlo Estoesta, emergency department volunteer at Red Deer Regional Hospital Centre, on receiving the 2018 Rotary Young Citizen of the Year award in May



We support our people

At AHS, we believe that before we can help Albertans live happier and healthier lives, our people need to be the best they can be mentally, physically—and educationally. Here, a course helps volunteers learn to ‘speak’ a new kind of language

Picture this: You’re an Alberta Health Services (AHS) volunteer working in a healthcare facility. A patient with Alzheimer’s begins to yell and motion to you. It’s clear he wants something—but you don’t know what.

Fortunately, the Central Zone Seniors Health Rural Clinical Education team has developed a course to help volunteers through such situations. Understanding Responsive Behaviours aims to help decode what a person with dementia is trying to communicate.

“Often our volunteers are called to sit with someone who is agitated, aggressive or experiencing anxiety,” says AHS instructor and registered nurse Susan Anning. “This course gives volunteers

techniques for addressing the behaviours they’re seeing but may not understand.”

In addition to learning the basics of dementia, volunteers are taught that every behaviour has a meaning, and that they are in a position to understand what the patient is trying to tell them—whether they’re experiencing discomfort, pain, hunger, thirst or more.

“We help volunteers use the right words such as, ‘Tell me what you’re feeling,’ or, ‘Tell me why you’re frustrated,’ says Anning. “And if residents or patients can’t answer, volunteers are empowered to request care staff to assist by asking, ‘Can I have a cup of tea for this individual because I think they may be thirsty,’ or ask if you can take them for a walk in the

garden to decrease their anxiety.”

In addition to providing theory, the five-hour course includes an opportunity to put oneself into the shoes of patients. Volunteers don noise-cancelling headphones and restricted-vision glasses and are then read a list of tasks to undertake.

Gerry Fitzgerald, who volunteers in palliative care, says it was a difficult but important exercise.

“It was confusing. I couldn’t hear a thing. Not long ago I was in the hospital and I felt the same way as I came out of surgery: I could hear my wife talking to me but I couldn’t understand a word. It made me feel agitated and helpless,” says Fitzgerald. “I can relate to patients better and have more empathy and understanding now.”

Our words

“We originally agreed to the program for the patients to help them cope when they’re in crisis, but it’s had such a positive impact on staff morale. You can just see the energy lift when one of the dogs walks on the unit.”

—Carla Seal-Riemann, unit manager for Calgary’s South Health Campus emergency, on a canine comfort pilot pet visitation program whereby dogs visit the emergency department. Rook, is pictured at right on the job



“It’s easy to get caught up in our routines, and this is a way to recognize each other and give positive feedback using specific examples. Your day doesn’t always go according to plan, but this is a way to be aware of the amazing moments that happen each day.”

—Tove Leblanc, patient care manager for the Royal Alexandra Hospital’s intensive care unit, on the gratitude jars where physicians, staff and visitors jot down what they’re grateful for. Once a month, the jars are gathered and the comments emailed to the critical care team



In a dementia simulation, volunteer Gerry Fitzgerald listens to instructions from Volunteer Resources coordinator Erin Poissant as part of the Understanding Responsive Behaviours course developed in Central Zone.

“An unfortunate reality of an active assailant situation is things are moving so quickly. That’s why this training is so important. There’s nothing worse than being ill-prepared when something happens and you just don’t know what to do. If you’ve thought about what to do before it happens, you’re so much better prepared.”

—Shane Iutzi, with Protective Services at Alberta Children’s Hospital in Calgary, on the benefits of the Active Assailant Emergency Response Plan online course on MyLearningLink



“We’re good at putting on a uniform and disguising how we feel. If we sit at that revved-up state and don’t give ourselves time to come down, our stress response is really affected. Having time to de-stress allows us to calm down the system—and tap into an area where we can make good judgment calls once we’re back on the job.”

—Molly Varga, Alberta College of Paramedics AHS peer support worker, on the need for the Zen Den at Edmonton’s Queen Mary Park EMS station

HERE ARE A FEW OF THE MANY RESOURCES GUIDING HOW AHS SUPPORTS OUR PEOPLE

AHS CARES values

These five values: compassion, accountability, respect, excellence and safety were chosen by AHS staff. CARES guide us in our interactions with patients, their families and one another.

Front-line Leader Advisory Council

This group of front-line leaders from across AHS zones and programs provides feedback on corporate initiatives, as well as input on issues concerning front-line leaders.

Our People Strategy

This strategy is about creating a culture at AHS in which all employees feel safe, healthy, valued and included and able to reach their full potential.

Our People Survey and Pulse Survey (interim followup)

These two surveys help AHS leaders gauge, assess and continually improve workforce engagement.

Joint Workplace Health and Safety Committees

Committees of managers and workers from local AHS sites and programs promote health and safety.

Confidential reporting line

This is an external 24/7 confidential reporting and disclosure service to receive reports of improper activity.

‘Your Voice Matters’ blog

Staff post their comments, ideas, suggestions and solutions on current topics for AHS.

Insite

The AHS intranet, Insite, is a one-stop shop for what’s happening at AHS. It allows staff to access the information and resources they need.

We are diverse and inclusive

Diversity of cultures and religions, genders and sexuality, skills and age groups—these are the glue that makes AHS stronger, together. And recognizing this has made a massive impact in our facilities—such as in this Spiritual Cultural Room

Laina Strongman made her arrival into the world earlier than expected, but did so surrounded by positive energy, thanks in part to a cultural smudging ceremony at Red Deer Regional Hospital Centre (RDRHC).

Prior to Laina's arrival, her mother Lainey Strongman attended a smudge with an elder at the Spiritual Cultural Room in RDRHC—something she says not only connected her with cultural practices, but gave her peace and comfort during labour.

"My mom and I had been planning to smudge that week, prior to the baby being

born," says Strongman. "I went in labour early and was by myself when I came to the hospital. I was really nervous when they admitted me. I didn't want to be alone or have my baby born without being smudged."

A Red Deer resident for several years, Strongman grew up in Maskwacis on the Montana First Nation. Since moving to the city, she says she's found it hard to keep active links to her cultural practices, including ceremonial smudges.

Smudging is a sacred Indigenous tradition that's been practiced for

hundreds of years.

"We burn traditional plants, including sage and sweetgrass to create a cleansing smoke," says Wilson Okeymow, a Cree Elder and cultural helper who performs weekly smudges at RDRHC. "The smudge balances energies and cleanses the body, mind and spirit.

"As the smoke rises, negative energy, feelings, and emotions are lifted away. Our prayers rise up with the smoke to the Spirit World where the Creator resides."

During Strongman's labour, a volunteer came by her hospital room to say the

Our words



"One of the things AHS is being more effective at is creating these moments where people can reflect on their biases in a safe space.

It's tough for people who grew up thinking about things a certain way, and then to sit back and realize the way of their thinking was harmful."

—Dr. Alike Lafontaine, an AHS anesthesiologist at Queen Elizabeth II Hospital in Grande Prairie. Of Cree and Anishinaabe descent, he says addressing biases can improve the health of First Nations, Métis and Inuit peoples

"As a trans person, there are many places in the world where I don't feel safe. There were times when my workplace was the only safe place I had in my life ... I worked in an environment where people truly were in the business to care for each other. And because I felt such support, I know if I couldn't (transition) here, I couldn't do it anywhere else. It was that realization that allowed me to be fully me. (AHS) changed my life—and probably saved it."

—Marni Panas, Diversity and Inclusion senior advisor

"It's the way of our people. It's important that people have the option to include traditional practices in their healing journey if they want to. Our ceremonies are powerful. And they work. They have for a long, long time. Each person's healing journey is their journey. I just help them navigate that."

—Marlene Arrance, cultural liaison for AHS in the North Zone



Elder Wilson Okeymow places an eagle feather over the belly of Lainey Strongman during a Cree smudging ceremony.

smudge was underway—something she says gave her an immediate sense of relief.

“I was so happy knowing that I’d be able to have smudging and prayers,” she says. “It brought me peace and comfort,

and helped me feel safer knowing that there wasn’t going to be any negative energy around myself and the baby.”

“It’s just amazing that the hospital has this.”

“Our diversity is a strength and an integral part of who we are. It helps us to understand, to empathize, to provide perspective and to support one another.”

—Judith Hockney, senior operating officer of the Royal Alexandra Hospital (RAH) and Sturgeon Community Hospital in Edmonton, on the first Pride event, pictured at right, hosted at an AHS facility—the RAH. She noted the event symbolizes AHS’ commitment to create safer and more inclusive environments for staff and patients of sexual and gender minorities



AHS HAS CREATED A CULTURE OF DIVERSITY AND INCLUSION

We have a dedicated diversity and inclusion centre of expertise with three staff and a director to support diversity and inclusion initiatives.

Our Diversity and Inclusion Council is made up of approximately 30 members from across AHS. The council meets a minimum of four times annually and provides direction and support for diversity and inclusion priorities including:

- Building relationships with our people
- Improving leader and workforce awareness and competence.

We have developed a framework and governance structure to guide diversity and inclusion activities.

We offer education and resources to physicians, staff, and volunteers to provide culturally sensitive care and services on:

- Unconscious bias
- LGBTQ+ community
- Intergenerational relationships.

We have implemented initiatives to reduce barriers for marginalized populations to access care and services, including:

- Resources and education to support more inclusive spaces for LGBTQ+ people
- Gender-neutral washroom and change-room standards
- Reflection rooms, which provide quiet space for staff to pray, meditate and reflect.

We offer resources and activities to support, develop and grow our Indigenous workforce and ensure appropriate and innovative health service delivery for Indigenous Peoples in Alberta.

We have formed the Sexual Orientation & Gender Identity & Expression Provincial Advisory Council to focus on improving care and services to the LGBTQ+ community.



Our Alberta Health Services (AHS) vision—Healthy Albertans. Healthy Communities. Together.—and our core values, AHS CARES, are at the heart of everything we represent. They inspire, empower and guide how we work together to build healthy communities and support Albertans in leading healthy lives. We live our values together, because we are stronger together.

We live our values

compassion

We show kindness and empathy for all in our care, and for each other.

"Our goal is for our nurses to use comfort strategies with every patient, every time."

—Lisa Porret, manager of the Westview Public Health Centre on the Positive Immunization Experience program

...

"I just started a young father on medication to combat his fentanyl addiction. He was desperate. His skin felt as if it were crawling. His muscles were so weak he could barely stand. 'We can help you,' I said. 'And you'll start feeling better as early as today.'"



—Dr. Nathaniel Day, medical lead of the Alberta Health Services Rural Opioid Dependency Program, on the positive difference the program made in the life of one Alberta man

...

"Our people give back every day with the work they do in our communities. Partnering with the United Way just continues our culture of compassion and care. Many people may not realize it, but partners like the United Way help enable our patients to stay out of the health system longer and live healthier lives."

—Todd Gilchrist, vice president, People, Legal & Privacy, on partnering with the United Way in an annual workforce fundraising campaign

accountability

We are honest, principled and transparent.

"We're balancing our budget, running Canada's largest health system with the leanest administration in the country, carefully investing in priority areas, and reducing operational costs as well as costs for hospital care."

—Dr. Verna Yiu, AHS president and CEO

...

"A big part of the Truth and Reconciliation Call to Action is everyone's responsibility to gain cultural awareness. We're seeing some real change as a result of the Indigenous Health Program. AHS is like a big steamboat and it takes a lot of people to change that trajectory. A lot of people want to make things better for Indigenous peoples and we're creating that opportunity to make big changes across Alberta."

—Nadine McRee, executive director of the Indigenous Health Program

...

"The cost savings we estimated were quite conservative. We expect this will continue to save money year after year, probably in larger amounts."



—Dr. Steven Bisch, on a study which found Enhanced Recovery After Surgery initiatives reduced hospital stays from five days to three days in women with gynecological cancers

respect

We treat others with respect and dignity.

"The use of force is always the last option. We treat people with respect. We treat people ethically and morally the right way. Yes, we have the ability to use force—but it's not something that we want to do."



—Jerry Scott, senior program director, Protective Services, on training his 430 staff members and 330 contract members how to interact safely and professionally with staff and patients

...

"Sexual assault can happen to anyone. Most victims know the person who attacked them, but only three per cent of victims of sexual assault actually report it. As healthcare providers, we want to do everything we can to support survivors of sexual assault. We listen to what the patient wants and support them in whatever decision they choose."

—Ronnie Biletsky, Central Alberta Sexual Assault Team coordinator

...

"The big shift here is really in philosophy. We changed the question from 'What's the matter with you?' to 'What matters to you?'"

—Bev Hranac, physiotherapist member of the Home Rehabilitation team at Lethbridge Centre, on how they've taken a new approach to helping heal patients

excellence

We strive to be our best and give our best.

"The ability to provide mobile medicine to our most vulnerable people has proven to be an effective way to support individuals who would otherwise go without needed healthcare because of the barriers associated with homelessness, mental health and substance abuse."

—Darren Sandbeck, AHS Emergency Medical Services chief paramedic, on the City Centre Team Mobile Paramedic Program in Calgary Zone winning a 2018 Health Quality Council of Alberta Patient Experience Award

...

"When a family comes in to show me pictures of the kids I helped over the years, and how much they've all grown up, it brings me to my knees every time. Clinical work is hard, but all of us here share the same desire to do better."



—Stacey Dagleish, neonatal nurse practitioner at Foothills Medical Centre in Calgary, who received a Clinical Practice Award from the Canadian Nursing Association

safety

We place safety and quality improvement at the centre of all our decisions.

"We really stressed to our people that, at AHS, our priority is fixing the problem, not pointing fingers. We wanted people to feel safe when they report an adverse event and, judging from the high number of adverse event reports we get every year, I think we have succeeded. Everything boils down to trust and relationships."

—Dr. Verna Yiu, AHS president and CEO, on improving workplace safety

...

"A phrase used that had an impact on me was 'long-distance worrying.' It highlighted to me how often patients—and even myself—worry about things well before anything is going to happen."

—Megan Mielnik, registered psychiatric nurse, on mental health lessons learned at the 11th annual Health Professions Strategy and Practice conference, which is open to all AHS employees

...

"Getting vaccinated means you're offering protection to people you come in contact with every day—like our patients, or others in passing within your own community and beyond."



—Michelle Regier, occupational health advisor, Workplace Health and Safety, Standards & Innovation

We strive to be healthy

At AHS, we recognize that if we are to counsel Albertans on their health, we need to look after ourselves, as well. We offer many exercise and safety programs and, for mental health, sometimes it's just about taking the time to reach out to our colleagues

As residents of Fort McMurray continue to recover from the emotional scars of the 2016 wildfires, Alberta Health Services staff remain committed to not only caring for their community's mental health, but also to the ongoing healing of their healthcare colleagues.

For the last year and a half, mental health staff at the Northern Lights Regional Health Centre (NLRHC) have participated in Team Care Wednesdays.

"We started to realize something needed to be done to take care of each other," says Tammy O'Quinn, mental wellness facilitator, Addiction and Mental Health.

The idea is simple. After a draw of names, each staffer is assigned a random week to provide an activity or

self-care contribution. Some staff have brought homemade treats. Others have encouraged each other to share positive stories or appreciation, or to play games.

"Sometimes it's something as simple as bringing in coffee and sharing that together. We can all connect over a cup of coffee. Sometimes it's a team-building activity ... or people will bring in tips or ideas for self-care such as the schedules for local fitness facilities," she adds.

When O'Quinn's turn came up, she decided to involve the team in a larger community movement. Thousands of residents are involved with a Facebook group—Fort Mac 'Rocks!—that encourages people to paint rocks and place them around the city. You can keep

a rock you find if you replace it with one of your own creation—or you can simply rehide the one you find.

"It's become pretty big here in Fort McMurray," says O'Quinn.

"Everyone's been posting pictures. People are getting outdoors, going to parks and green spaces. Families are out there finding and hiding rocks together. It made sense for us to do it, too, and it relates to supporting mental health."

The team painted rocks and hid them around the hospital grounds for staff, patients and residents to enjoy.

"This way, people who maybe aren't as mobile around the community can still enjoy the rocks," O'Quinn says.

"We all know art therapy works. Painting

Our words

"With the busy lifestyles we lead, it can be a challenge for people to feel like they can make healthy lifestyle choices. But it's really not that hard. By changing how you commute to and from work, you're increasing your chances of meeting the recommended 150 minutes of moderate- to vigorous-intensity aerobic physical activity per week."

—Graham Matsalla, AHS health promotion facilitator, on the Energize Your Commute Week, which ran in August. He's pictured at right, commuting to work



"I love to ride horses. I love dogs, too. The bigger the better. I have had Great Danes most of my life but right now I am enjoying a wonderful Sheepadoodle. It's a great, shaggy dog that doesn't shed and has a great personality. I like to say I use four-legged therapy to get through any issues with the two-leggeds in my life."

—Thora Eyford, senior lead, Talent Management Strategies Society

We are constantly learning

Every day, healthcare is evolving. At AHS, we evolve with it, so delivering new knowledge is key. For this emergency department, learning is delivered round the clock

Bringing relevant, interesting and convenient education to emergency department (ED) nurses is no picnic in the park. Yet it's a challenge clinical educators at Foothills Medical Centre in Calgary not only embraced, but overcame by creating hands-on education stations nurses can access around the clock in their fast-paced environment.

"We had to figure out a way to do it for our 280 nurses who are working 24 hours a day, seven days a week—and we're not always there—so we needed to ensure these education stations are easy to follow and that people could do them on their own without getting frustrated," says Sara Nosworthy, a registered nurse and now adult trauma coordinator at Foothills.

She and her fellow RNs—Jennifer Jordan, now a quality improvement nurse,

and Jennifer Evangelista, a clinical nurse educator—put their heads together in 2017 to drastically rethink the traditional classroom model. Their journey paid off.

What they came up with were self-directed education stations—each offering an opportunity or simulation to keep skills sharp and polished—that can be completed in 15 minutes or less right in the ED during downtime.

"This is a new and innovative way," Evangelista says. "It also allows us to target our night staff, our weekend workers and those who work straight evenings when we're not available as educators."

The stations are set up in the ED for easy access by staff and are rotated every six to eight weeks. Each station highlights systems and skills in which ED nurses are required to be competent. Completion of

an education station is confirmed through a five-question online exam.

To date, eight stations have been created, covering skills and topics in areas such as access (implanted ports), cardiac (recognizing and treating dysrhythmias), trauma (thoracotomy use), respiratory (ventilator management, inline suctioning), pediatrics (medication calculation and administration) and neuro (identifying and managing stroke patients)—to name a few.

A big upside to this 24/7 module approach is it has freed up time during the nurses' traditional annual education day for other subjects and simulations, where a group approach is more effective.

"I really enjoy the fact that we're able to incorporate simulation more into our annual education," Evangelista says. "I think that truly is how staff are learning."

Our words

"Wearing pyjamas to work made me feel vulnerable—and that I wasn't equipped to do my job. So I understand why our patients lack motivation wearing their pyjamas all day. If we can help patients get back to their normal routine as quickly as possible, including getting up and out of bed, this can lead to a quicker recovery."

—Tricia Sware-Bilawchuk, transition unit manager at Leduc Community Hospital who, with fellow staffers, wore PJs for a day to better understand her patients

"I love to be connected to the latest science about a variety of nutrition topics and am challenged to translate that science into nutrition information that patients can use to make positive changes in their lives. We're lucky in AHS to have the knowledge and resources we do here. Everyone is always willing to share their expertise."

—Holly Bell, Health Link and outpatient dietitian, pictured at right





Sara Nosworthy, left, Jennifer Evangelista and Jennifer Jordan are the RNs and driving force behind a fresh, 24/7 approach to accessible education and keeping skills sharp for the busy emergency department nurses at Foothills Medical Centre.

“Whenever we’re planning a new service, it’s vitally important that we co-design it with our patients and families who have lived and experienced addiction and mental illness. In the planning of this initiative, we’ve had an extremely dynamic group of people advising us and guiding us.”

—Mark Snaterse, executive director, AHS Addiction and Mental Health, on Access 24/7 a ‘front door’ that provides patients with round-the-clock access to addiction and mental health services at the Royal Alexandra Hospital in Edmonton

“Our culture is very much one of, ‘Let’s refer it to a specialist’—but that’s not always what’s best for the patient or the healthcare system. With these pathways, we have the tools and support to provide optimal patient care in a more timely and efficient manner.”

—Dr. Christine Luelo, on the success of Enhanced Primary Care Pathways, which allow patients with non-urgent gastrointestinal issues to receive timely care from their family doctor, while patients with urgent symptoms can be quickly referred to a specialist. The result is non-urgent wait-list times have dropped by 98 per cent

EDUCATION HELPS US IMPROVE OUR WORK AND OUR LIVES

President’s Speaker Series

These are discussions led by international experts and innovators in healthcare with AHS leaders, physicians, clinicians, staff and partners on a variety of topics.

Telehealth

This videoconference technology enables our workforce to connect across the province and helps us deliver information on health-related services.

Certificate programs

Certified instructors deliver a variety of courses such as basic and advanced cardiac life support, and neonatal resuscitation to specific groups of staff.

MyLearningLink

This is a 24/7 online learning and content management system that provides a single point of access to AHS learning opportunities on a variety of provincial or zone-specific topics.

Clinical educators

Healthcare providers are supported in their professional development with learning opportunities provided by clinical educators, certificate course instructors and clinical practice leads.

Simulation training

eSIM (educate, simulate, innovate, motivate) uses simulation to give healthcare teams the opportunity to practise a wide range of medical procedures on high-tech adult and child simulator mannequins, which breathe, blink, talk, and have pulses and vital signs.

Professional development fund

This fund provides AHS employees with monetary support in a wide variety of educational opportunities—from post-secondary diplomas, degrees and certificates to conferences, workshops and group learning initiatives.

We continuously improve

Ultimately, the goal of innovation and research is to improve the health and well-being of our patients and our communities. In this case, an innovative program ‘virtually’ reduces pain and eases anxiety in patients—and benefits staff, as well

In a Canadian first, patients undergoing wound care at the Rockyview General Hospital in Calgary are using a virtual-reality program to ease pain and anxiety.

Using one of two Samsung Gear headsets, wound-care patients are transported into an immersive, three-dimensional environment that includes a virtual lakeside campground, a prehistoric landscape with dinosaurs, and a tranquil ocean to swim with dolphins.

Graydon Cuthbertson used the therapy three times after having multiple surgeries involving his calves. “It’s a godsend,” says the 47-year-old Calgary man. “Even with painkillers, the first time I had wound care after my surgery, the pain was excruciating. But with virtual reality, I got through the next

treatment with flying colours.

“I was focused on what I was seeing and hearing, and not thinking at all about how painful it might be. It was awesome.”

While virtual reality has been used in clinical settings around the world for a variety of therapeutic and relaxation purposes, Rockyview is the first hospital in Canada to employ it for wound care.

During the research phase at the hospital, patients receiving wound care were asked to rate their level of discomfort and overall experience—using surveys administered before and after virtual-reality therapy. Patient discomfort included ratings of pain, nausea and anxiety, while measures of patient experience included feelings about future treatments and

overall impression.

The results were impressive: all patients who used virtual reality found it helpful. Patients reported a 75 per cent reduction in patient discomfort with a 31 per cent improvement in overall patient experience.

Unlike conventional pain and anxiety-reduction therapies such as painkillers or sedatives, no side effects were reported by patients who used virtual-reality therapy. While the program is not intended to replace pharmaceutical interventions, it’s anticipated virtual reality can be widely used as a complementary therapy.

“Rockyview’s virtual reality program illustrates how AHS employs innovative technology to improve patient care,” says Christopher Burnie, allied health manager

Our words

“This is where the size of AHS really helps us. A rare event at a small site of health authority might happen once every several years—but within a province, we see that rare event more frequently, so we can recognize the event sooner and take steps to correct it.”

—Dr. Verna Yiu, AHS president and CEO, on the Reporting and Learning System for Patient Safety that creates an organizational memory that informs decisions regarding patient safety

“We know that hospital-at-home services have been shown to reduce visits to emergency departments and provide flexibility during crises or surge situations. It’s like a virtual inpatient unit that allows eligible patients to receive the same kind of care and treatment they would in a hospital, but within the comfort of their own homes.”

—Dr. Michelle Grinman, general internal medicine specialist at Rockyview General Hospital and originator of the Complex Care Hub in Calgary Zone, which cares for patients at home

“AHS wants Albertans to be more involved in their own health and wellness and we need to give them the tools to do that. Today, Albertans have limited access to their health information, but soon they will have an unprecedented level of interaction with their health system and health information.”

—Dr. Rob Hayward, AHS chief medical information officer, on Connect Care, a common clinical information system, whereby health information will move with the patient from site to site and from service to service



Physiotherapists Jaclyn Frank, left, and Jane Crosley, help patient Graydon Cuthbertson take his mind off a painful wound-care procedure by using a virtual-reality headset.

at the hospital. “Technology has always played an important role in healthcare, but this is particularly exciting in that we can make a really positive impact on a patient’s experience without having to invest in

something costly or complex.

“Interestingly, wound-care staff described lower levels of distress while they delivered treatment because they know their patients are much more comfortable.”

“Research shows patients may forget up to 80 per cent of healthcare information discussed at clinic visits. This app allows patients to record their clinic conversations and later share those with trusted family and friends and other members of their care teams, to help communicate information and reduce misunderstandings.”

—Mauro Chies, AHS vice president of Cancer Control and Clinical Support Services, on the My Care Conversations app

“We have patients with lesions or malformations in the brain that may have previously required open surgery and in-hospital stays—but now, many patients are able to walk in for Gamma Knife treatment and be home the same day in time for dinner with their families.”

—Dr. Keith Aronyk, neurosurgeon and co-director of the Gamma Knife unit at the University of Alberta Hospital in Edmonton. Gamma Knife surgery is non-invasive and replaces a scalpel with beams of gamma rays that are guided with surgical precision

INNOVATIONS HELP US DO OUR JOBS BETTER

Connect Care

New to AHS, Connect Care is the bridge between information, healthcare teams, patients—and the future. Through a common provincial clinical information system, Connect Care will allow the healthcare team, including patients, to have consistent information across the province and throughout the care journey. This will impact everyone who provides care within AHS, the non-clinical areas that support the front line, and will transform how we provide care.

New provincial lab services

All lab services in Alberta were consolidated into one provincial wholly-owned subsidiary in December 2018. The new lab structure is improving patient care and streamlining services and decisions. It will also increase opportunities for cost-savings and maximize economies of scale.

e-People

This centralized resource is available online to all employees. It supports Human Resources functions such as payroll, HR administration, time entry and approval, as well as pension and benefits administration.

“Being able to speak with someone who has already gone through a transplant or dialysis will be very helpful for patients. Clinical staff can describe what surgery will be like, or how medications will work, but when it’s patient-to-patient, they may identify better.”

—Sandi Vanderzee, director of Alberta Kidney Care – North, on the Kidney One on One Program, a partnership with the Kidney Foundation of Canada, Alberta Kidney Care – North, and the University of Alberta

We pursue excellence

What is excellence? We believe it's being the best you can be, striving for the best results and breaking new ground in healthcare. For one Alberta woman, AHS' push to excellence has cured what was once deemed the incurable

Revée Agyepong of Edmonton is looking forward to trying her hand at a few things that others take for granted, such as sports—and even letting herself get a little bit dehydrated in the process.

As someone who has lived her entire life with sickle-cell disease, the 26-year-old has had to take care to drink lots of water, or risk touching off a sickle-cell crisis that might lead to the emergency department.

She's one of the first adult patients in Canada to be successfully treated for sickle-cell disease with transplanted stem cells.

"I'm still not sure if I fully believe it," she says. "My whole life has revolved around sickle cells and now I feel like a new person. I'm so blessed."

Agyepong underwent the procedure at Calgary's Tom Baker Cancer Centre late last year with donor cells from her older sister, Stephanie Amoah. Today, Agyepong's blood tests confirm she is essentially cured.

Sickle-cell disease is an inherited disorder in which blood cells change into a semi-circular 'sickle' shape and block blood vessels. It varies in severity from patient to patient but every organ is potentially at risk.

In Agyepong's case, she has experienced chronic bone and joint pain, irregular heartbeat, kidney stones and shortness of breath. She has had her gall bladder removed and her spleen no longer functions.

To manage her illness, she has been on several medications and, for the past several years, has undergone a red blood cell exchange every eight weeks. The exchange is a three-hour transfusion process in which two litres of donor blood is exchanged to reduce the amount of sickle cells she has. Despite these efforts, she wound up in the emergency department five times in the seven months leading up to her transplant.

Dr. Andrew Daly, who leads Alberta's bone marrow transplant program out of the Tom Baker Cancer Centre, oversaw Agyepong's stem cell transplant.

"She met all the necessary criteria in terms of being able to tolerate a transplant but, most important, she had a sibling who

Our words

"Falls shouldn't be accepted as a normal part of aging. Prevention is essential in helping seniors remain independent and maintain a high quality of life. Decorating walkers is a fun way to encourage independence and continued mobility in a safe way."

—Emily Post, lead for Practice Development in Continuing Care, on *Walkers Gone Wild*, an AHS initiative at continuing care sites across the province. At right, residents of Mackenzie Place in Grande Prairie show off their newly decorated 'wheels'



"We've shown that nurse-led treatments take between 35-40 minutes, while physician-led interventions take an average of 130 minutes."

—Allison Hunter, clinical nurse specialist at Alberta Children's Hospital who, with colleagues Carol Yuen and Shantel Dayment, took part in the AHS Research Challenge in a project that found when the thin lines of tubing that deliver medicines to the main heart vein become blocked, nurses can often clear the blockage much quicker than waiting for an attending physician. They are preparing a paper for publication



Sickle-cell patient Revée Agyepong, right, poses just prior to her transplant of donated stem cells from her sister Stephanie Amoah. Revée is one of the first adult patients in Canada to be successfully treated for sickle-cell disease with transplanted stem cells.

was a 100 per cent match.”

Dr. Bruce Ritchie, Agyepong’s longtime hematologist in Edmonton, hails the transplant as a breakthrough for adult sickle-cell patients.

“This is great news and has led to a big change in how we practice,” Richie says.

“We are now trying to move ahead with transplants for other suitable patients with matched sibling donors.”

WORKING TO BE THE BEST IN HEALTHCARE

Strategic Clinical Networks (SCNs)

AHS continues to develop networks of people who are knowledgeable about specific areas of health, challenging them to find new and innovative ways of delivering care that will provide better quality, better outcomes and better value. To date, there are 16 SCNs focusing on a range of conditions from cancer to addiction and mental health.

Research challenge

This is a professional development opportunity for nurses, allied health professionals and other care providers to increase knowledge and skills to access, conduct and apply best-practice research. In it, teams work together for two years to design and conduct a small-scale study.

“This is a great collaboration of therapies focusing on common goals for participating patients. It involves guitar, piano and recorded songs with movement, instruments and tons of fun.”

—Music therapist Sherryl Sewepagaham, on *Movers and Shakers*, a new music therapy program at Edmonton’s Royal Alexandra Hospital. She’s pictured at right, centre, with inpatients Annie Dequian and Georgia Henderson



“If a person is using a cellphone or a tablet, the layout will adjust and respond to the device. We closely studied how and where people use Insite—and we know that staff and physicians use it differently when delivering front-line care, compared to how staff and physicians use it in corporate or administrative roles.”

—Kass Rafih, executive director of Online and Creative Services, on the redesign of Insite, the AHS intranet. More than 900 volunteers and 9,500 AHS staff members took part in a survey to guide the redesign

We're in our communities

We believe that, where possible, people heal best in their own homes. So AHS is bringing care closer to home with programs such as Community Paramedic, which helped keep a Grande Prairie senior in her own bed and out of the hospital

Some days feel worse than others for 79-year-old Audrey Merlo, who lives with a chronic condition and is prone to infections. But one of the worst in memory came in early April when she didn't feel well enough to make it to either her doctor or the emergency department. Naturally, her family grew worried.

"Our daughter Laura just happened to have a doctor's appointment for herself that same day and offered it to me, but I told her, 'No. I can't get out of the house to get there,'" says Audrey, who lives with her husband, Licio (Lee) about 10 minutes outside of Grande Prairie.

So, at her appointment later that day, Laura raised her concerns about her mother with Dr. Brianne Hudson, who is also Audrey's physician.

"When we learned of Audrey's health concerns, we were going to try to make space for her at the clinic," says Hudson. "But Audrey said she didn't feel well enough to get here. We advised her to go the emergency department, and again, she said she didn't feel well enough."

Hudson called Alberta Health Services (AHS) Emergency Medical Services and connected with the Community Paramedic program, which improves access to medical care for seniors and vulnerable people who don't always need to go to hospital, or who cannot be taken there.

That same day, within hours, AHS community paramedic John Rogers showed up at Audrey's house.

"John showed up and got an IV going, checked my heart rate, and did some

bloodwork and a urinalysis," says Audrey.

Before Rogers arrived, he reviewed her medical history. While at Audrey's home, Rogers called Hudson to consult and give an update on her condition. He then wrote two prescriptions for medication, as per Hudson's advice.

"It's a really interesting program," says Hudson. "In Audrey's case, it saved her a trip to the hospital and it saved an open bed in the emergency department. I think there are a lot of positives."

As for Audrey, she says she's thankful for the home visit. "That same afternoon I was already feeling better."

"The biggest value in the program is being able to treat people in their homes instead of taking them to the hospital," says Rogers.

Our words

"I think you can do fall prevention more effectively when you see people in their home. The rehabilitation is about getting them to a place where they're able to do things that they haven't been able to do—even before their fracture."

—Jessica Richardson, AHS physiotherapist, on the AHS Hip Fracture Home-Based Rehabilitation program in Grande Prairie. She's pictured at left, with physio assistant Madison Soderquist, doing a balance check with hip-fracture patient Frank Shultz during a session in his home



"I've always been an advocate for mentorship—it's important to have someone there as a sounding board. Big Brothers Big Sisters works with a lot of vulnerable students who wouldn't have the same exposure to healthcare options. This partnership allowed us to tap into students while they're in school and help them consider a career in healthcare."

—Leona Small, advisor with AHS Talent Management, on a pilot partnership between AHS and Big Brothers Big Sisters of Grande Prairie and Area, where kids can shadow an AHS staff member for a day



Audrey and Licio (Lee) Merlo pay thanks to AHS community paramedic John Rogers, left, after he came to help Audrey in her home near Grande Prairie.

“We wanted to think of ways we could touch people. People were very open to the idea of donating things—and we thought this would be another great way to help the community.”

— Trina Wetter, a Glenrose Rehabilitation Hospital speech pathologist, who helped form a partnership between the hospital and BigSteelBox, a moving and storage company. Big SteelBox parked a seven-metre box outside the hospital, where staff filled it with winter clothing donations

“I followed up on a rental unit that had an extreme bug and cockroach infestation. I contacted the Language Line and an interpreter spoke Oromo with the tenant and English to myself.”



— Public health inspector Darrell Prokopishin, with AHS Environmental Public Health, on working in Brooks, which has a large population of immigrants, refugees and temporary foreign workers

WE ARE IN COMMUNITIES AROUND THE PROVINCE

ENHANCING CARE IN THE COMMUNITY

AHS has created a new plan known as Enhancing Care in the Community in which care is provided in a person's home or community to the greatest extent possible, reserving emergency departments and hospital care to address needs that cannot be met closer to home.

HEALTH ADVISORY COUNCILS

There are 12 Health Advisory Councils (HACs) across the province comprised of voluntary members who support the strategic direction of AHS by getting local feedback from community members on what is working well in the health system and areas in need of improvement.

PROVINCIAL ADVISORY COUNCILS

There are four Provincial Advisory Councils (PACs), including Addiction and Mental Health, Cancer, Seniors and Continuing Care, and Sexual Orientation & Gender Identity & Expression. PACs are made up of volunteers, subject matter experts and leaders. They consider and provide evidence-based suggestions to AHS, identify existing and emerging issues, and advise on ways to improve quality, access and sustainability of services.

THE WISDOM COUNCIL

The Wisdom Council provides guidance and recommendations on health service delivery, program design and evaluation for Indigenous Peoples in Alberta.

AHS FOUNDATIONS AND TRUSTS

AHS partners with 69 foundations and trusts in Alberta, whose work makes a significant impact on local health delivery by funding needs, programs, renovations, research and education.

AHS UNITED WAY CAMPAIGN

This campaign occurs each fall and offers employees, physicians and volunteers an opportunity to raise funds to help families in Alberta.

We help beyond our borders

At AHS, we care for Albertans, we care for Canadians, and we care for the world. You'll find our medical staff, employees and volunteers making a difference in the lives of people near and far—and finding deep fulfillment in the work

It's been 18 years since Dr. Marc Moreau, based out of the Stollery Children's Hospital in Edmonton, and his wife Barb along with a small core group, founded the Canadian Association of Medical Teams Abroad (CAMTA), a medical charity near and dear to their hearts.

Each year it brings a team of 100 healthcare professionals, students, general lay people, translators and logistics people to Quito, Ecuador, for two weeks to perform life-changing orthopedic surgeries for adults and children.

Lining up patients, medical personnel

and donated supplies—not to mention getting the logistics right for such a hefty team—is a year-round job, but the personal rewards are beyond priceless.

"It's very fulfilling. You get as much out of this as the people you help, but in very different ways," says Moreau. "They get a new hip, or a child gets his foot straightened out, and you get the satisfaction of working with a group of like-minded individuals and doing good things for people. It stimulates you to want to come back. Many of our team members have come with us many times, for years and years."

The CAMTA team roster boasts adult and pediatric orthopedic surgeons, anesthetists, family medicine doctors, respiratory therapists, physiotherapists, operating room, recovery room and ward nurses, residents, nursing and medical students, lay people, general students and translators who work with local hospital staff.

CAMTA has made a tremendous impact on the lives of the less fortunate. To date, medical teams have notched up 18 successful missions and performed more than 1,200 surgeries and directly benefited more than 7,800 patients and family

Our words

"Stress has an important and significant impact on how people function and the contributions it makes to illness and recovery. It's just terrific when we are able to use technology to improve function and outcome in our patients."

—Jim Raso, senior consultant,
Research & Technology Development at the
Glenrose Rehabilitation Hospital, on using the
Computer-Assisted Rehabilitation Environment
system to help patients with post traumatic
stress disorder. Patients step into the unit and
walk on a treadmill toward the stimulus—sounds
and images that may remind them of events
that brought on traumatic memories. A therapist
guides them and asks a series of questions as
the soldier or veteran confronts these memories





Edmonton pediatric orthopedic surgeon Dr. Marc Moreau shares some quality time with a young patient in Quito, Ecuador. Moreau's medical charity CAMTA (Canadian Association of Medical Teams Abroad) has performed more than 1,200 life-changing surgeries for people in need, often giving adults the ability to work and provide for their families and giving children the ability to walk and play.

members ranging in age from two months to 87 years.

CAMTA also inspires volunteers to pursue careers in medical fields,

promotes humanitarianism and provides an atmosphere where healthcare professionals can discuss different methods of resolving problems.

"People don't really have an understanding of amputation and the challenges of daily living. This play will really broaden the public's exposure to the world of disability."

—Isabel Henderson, senior operating officer of the Glenrose Rehabilitation Hospital and consultant for playwright Liane Faulder on her production of *Walk*, a play about a Canadian soldier who loses his legs in Afghanistan, but finds the real battle begins when he returns home. At left, Joelle Prefontaine, left, and Ben Proulx appear in *Walk* at the Edmonton Fringe Festival



WE MAY BE A PROVINCIAL HEALTHCARE ORGANIZATION, BUT WE HAVE A WORLD VIEW

We support the Canadian Armed Forces

AHS staff in the Reserve Force of the Canadian Armed Forces enjoy the flexibility of AHS, which gives them time off for courses, field exercises and overseas deployments to grow their careers and military expertise. Current Reserve Force members have seen action in Afghanistan, the Golan Heights, Bosnia-Herzegovina and Egypt, along with peacetime training exercises around the world.

Our physicians and staff volunteer around the world

Quietly and without fanfare, many AHS employees and physicians volunteer their skills and time to work with humanitarian organizations such as Médecins Sans Frontières (Doctors Without Borders) and the World Health Organization, both of which deliver medical aid to people worldwide.

We celebrate our people

Great people make a great healthcare system. It's as simple as that. But there's nothing simple about the passion for healthcare held by each and every person working for AHS. Meet an award-winning nurse who goes above and beyond for kids with Cystic Fibrosis

Registered nurse Amanda Jober's relentless fight for children who live with Cystic Fibrosis has won an Outstanding Healthcare Provider Award from Cystic Fibrosis Canada—an honour she says only motivates her more to go above and beyond for her patients.

"I really love what I do," says Jober, who works in the Cystic Fibrosis (CF) Clinic at Stollery Children's Hospital in Edmonton. "I love helping families and making things easier for them."

As one of five winners for Western Canada and Prairies Region, Jober invests herself in her patients' lives beyond the hospital and rejoices in their academic successes and other accomplishments. She also comforts children as they brave

sometimes scary changes. With the help of a CF dietitian, she sewed a G-tube—a gastronomy feeding tube—into a doll to help quell the fears of a young patient as she prepped for surgery.

"I want kids to know that CF does not define you. You're a person with CF—and we're going to help you manage that so you can lead a normal life," says Jober.

She also puts her writing skills to use to gather more support for CF care at the Stollery. After writing several grants to build a playground in her neighbourhood, Jober began writing a grant to purchase steam sterilizers for CF equipment.

With the help of CF Canada and Air Canada, 30 steam sterilizers—which help to minimize infections—were bought

for patients to take home for their own personal use.

Sandy Stevens and her daughter Laura have nothing but praise for Jober, who has accompanied Laura on her CF journey for about four years.

To express their gratitude, they nominated her for the Outstanding Healthcare Provider Award.

"Laura's journey has been rocky, but Amanda has been there through the worst of it," says Sandy. "She came in and said, 'What can I do for you? I am here for you.'"

Laura, now 12, values Jober's advice, and often asks, "What does Amanda think?"

"As parents, we go through so much fear and worry and we are supposed to be strong for our kids," says Sandy, "but

Our words

"It's totally a committed group approach, including the pharmacists and physicians. This award really is a reflection of the excellent care provided every day by our front-line staff."

—Cheryl Klassen, care manager for the Hythe Continuing Care Centre, which was ranked the top facility in the North Zone by the Health Quality Council of Alberta

"It's such a pleasure working with our team and creating something we find out, rurally, that we need. It's just taken off from there."

—Alaina Gamache, cheering the Speech and Language Screen for Adults (SALSA) team—based in Cold Lake, Radway and Bonnyville—for winning a SPIRIT Award of Excellence for innovation. It developed a screening tool to quickly identify post-stroke patients who require a speech language pathology assessment for communication. Gamache is pictured at right with team members Cindy Pruden (via Skype) and Todd Farrell





Registered nurse Amanda Jober has been recognized for her passion in fighting Cystic Fibrosis and providing comfort and support to her patients and their families at Stollery Children's Hospital in Edmonton.

Amanda gives us a break and tells us it's OK. She's my rock."

As Jober juggles her Cystic Fibrosis work with the demands of raising her own family, her commitment to bettering the

lives of children with CF remains strong.

"The kids are so honest, real and strong," says Jober. "I hope they know there's a team fighting for them just as much as they're fighting for themselves."



"Here at AHS, we have a lot to be proud of with the first sites going live with Connect Care in 2019. Alberta is emerging as a leader in digital healthcare, both here in Canada and around the world."

—Penny Rae, AHS chief information officer, on being recognized as one of Canada's 10 Women Leaders in Digital Health for 2018 by Digital Health Canada. Her leadership in the development of a single provincial clinical information system for AHS led to the award

"Like last year, we've created a series of Valentine's Day-inspired e-cards for you to share your thoughts and appreciation for your colleagues across our organization. Valentine's Day is a chance for you to recognize the relationships that encourage and motivate you every day."

—Colleen Turner, vice president Community Engagement and Communications

WE CELEBRATE THE AMAZING WORK OUR PEOPLE DO, EACH AND EVERY DAY

President's Excellence Awards

Every year, the President's Excellence Awards recognize AHS employees, physicians and teams who demonstrate innovation, collaboration and patient focus, and who exemplify the AHS values of compassion, accountability, respect, excellence and safety.

Doc of the week

This online feature on the AHS external website showcases the people, faces and stories of physicians caring for patients across the province.

Great Teams Great Care

Each year, AHS celebrates exceptional teams that provide excellent patient- and family-centred care. Winners are judged on creativity, representation of team members, how the team defines its purpose, and how it lives the AHS values.

SPIRIT Award of Excellence

SPIRIT recognizes significant and outstanding work within departments and programs at the zone level.

SPIRIT photography contest

E-card and print card collections are created from photos submitted by employees, physicians and volunteers and selected through employee voting. Categories include health, healthy eating, safety, nature, landscapes and wildlife, flowers, seasons and travel.



Together, we do amazing things every day

We proudly deliver quality healthcare services and programs to Albertans every day. Learn more about us at ahs.ca



Healthy Albertans.
Healthy Communities.
Together.

