# Emergency Strategic Clinical Network

# Transformational Roadmap 2022-2025





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This Transformational Roadmap has been prepared by the Emergency Strategic Clinical Network (ESCN)

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The Emergency Strategic Clinical Network would like to recognize that our work takes place on historical and contemporary Indigenous lands, including the territories of Treaty 6, Treaty 7 & Treaty 8 and the homeland of the Métis Nation of Alberta and 8 Métis Settlements. We also acknowledge the many Indigenous communities that have been forged in urban centres across Alberta.









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# A message from our Leadership Team

Over the next three years, the focus of the Emergency Strategic Clinical Network™ (ESCN), in collaboration with Emergency Operations, will be evolving to address the challenges and changes facing emergency care providers within our provincial healthcare system. Emergency Departments (EDs) and Urgent Care Centres (UCCs) across the province are experiencing significant pressures and challenges as we care for our patients.

This Transformational Roadmap (TRM) affirms the strategic directions for our network, developed after extensive consultation in 2018 and again in 2022. It reflects updated priorities from the emergency community and our partners. We believe this TRM will continue to support Alberta Health Services (AHS) in providing a patient focused, quality health system that is accessible and sustainable for all patients and families. It is built on the successes achieved by the considerable efforts of emergency care staff and physicians; the input from patients and families; the contributions of our researchers and AHS support teams: including partnerships with 103 EDs, six UCCs, Emergency Medical Services (EMS) and other stakeholders.

Over the past several years, in addition to the leadership shown in the harmonization of provincial policies, guidelines and protocols related to emergency care, and ensuring that staff and physicians had access to consistent training and standardized measurement and outcomes, the ESCN established and led the COVID 19 Expert Working Group. This group provided a single point of contact for the emergency community for all pandemic related challenges related to emergency care. The ESCN also led innovations in research and stakeholder collaboration including the rollout of Prevention of Harassment and Violence strategies in partnership with Workplace Health and Safety. The ESCN team looks forward to working with patients and families to ensure that top quality care is accessible and driven by evidence and compassion.

ESCN leaders continue to partner with First Nations and Métis organizations on projects that address the emergency care of First Nations, and Métis patients. We continue to advance our understanding about the experience and care of First Nations and Métis patients in EDs/UCCs and we are committed to translating learnings into actions that address systemic and institutional racism and thus improve care and outcomes for First Nations and Métis people.

We, the ESCN, extend sincere appreciation to all staff, physicians, and leaders in our EDs/UCCs for their commitment and dedication to patient care delivery. Additionally, we sincerely thank our Patient and Family Advisors, Core Committee and other ESCN committee

and working group members for their contributions to moving the work of the ESCN forward. The ESCN team, through this TRM, is dedicated to our mission of supporting quality patient and family-centered emergency care driven by education, innovation, and practice-changing research through collaboration with Alberta's emergency care community.





Dr. Brian Holroyd Brian R. Holroyd, MD, MBA Senior Medical Director, Emergency Strategic Clinical Network

Sherri Kashuba Senior Provincial Director, Emergency and Critical Care Strategic Clinical Networks

#### Introduction

The Emergency SCN Transformational Road Map 2022 - 2025 outlines the strategic directions, priorities, and outcomes for the ESCN that will help the network achieve its vision. The ESCN TRM is aligned with the Alberta Health Services Health and Business Plan and Quadruple Aim principles.

The 2022 - 2025 TRM continues to build on the strong foundation and successes which have been created through the dedicated efforts of the ESCN team, its partners, emergency care staff and physicians, patients, and their families.

The ESCN will focus on evidence informed practice, integration, innovation, and commitment to partnerships to move this work forward. The TRM builds on the commitment of the emergency community and the significant work already underway to improve emergency care in Alberta. Although the TRM is based on current state there is a recognition that emerging issues and priorities can shift and the ESCN is ready to respond rapidly so the emergency community are equipped to meet these challenges.

### What is the Emergency Strategic Clinical Network?

The ESCN is a group of healthcare professionals working together with patient and family advisors from across the province to improve emergency services in Alberta. We seek to enhance the patient and family journey through emergency care from the time they seek care until the time the patient is discharged or admitted. We continue to look for new ways to make the best use of our resources, improve access to emergency care and make sure all patients receive high quality care in all of Alberta's emergency departments and urgent care centres (ED/UCC).

#### Mission and Vision

**Vision** To build an inclusive network that supports the advancement of evidence-informed emergency care for all.

**Mission** To support quality patient and family-centered emergency care driven by education, innovation, and practice-changing research through collaboration.

#### **Guiding Principles**

The ESCN is a group of provincial healthcare professionals, and patients and family advisors working together. Our work is guided by the following principles:



**Accountability:** We work to contribute towards the AHS Vision and Mission.

People-centered care: We are working with patients and families to improve their journey through emergency care from the time they seek care until the time they are discharged or admitted to hospital.

Responsibility: We continue to look for new ways to make the best use of our resources, improve access to emergency care, support our people and make sure all patients receive high-quality care.

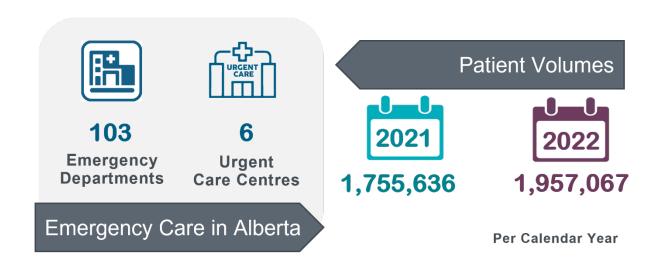
We strive to develop internal and external resources that support patient-centered care and meet the needs of diverse patient population groups.

Innovation: We work to continually improve patient and family focused emergency care by enabling research and innovation to develop solutions to address emergency care concerns, prepare for tomorrow's challenges and create new and improved services and treatments for emergency patients.

Communication: We will ensure clear two-way communication with our community. It is essential to our work because it will allow us to not only share information, but also to receive feedback and strive for continuous quality improvement.

# The Context for Planning

The ESCN has laid the groundwork and will build on the foundational work it has led since it was formed in 2014. Over the next three years the ESCN will continue work already underway and explore additional areas of work determined through stakeholder engagement. The COVID 19 pandemic and other trends have influenced the ESCN's response in planning for the future. Changes in the healthcare system, high demand exceeding resources, and challenges with sustainability due to competing priorities have reinforced the need to be flexible and responsive to succeed as a leader in emergency care in the province. Below is a snapshot of emergency care in Alberta.



ED patient volumes continue to increase. Similarly, EDs have seen an increase in admitted inpatients occupying ED care spaces (Emergency Inpatients or EIPs). Using the accessible data at 17 sites across the province, for the first 6 months of 2022, there were more than 30,000 EIPs, which is 36.17 % higher than the same period in 2021. In the 2021/22 fiscal year, there were 1,030,192 patient hours spent in EDs which is an 11.30% increase from 2020/21. The pressure of EIPs and other health system demands continue to influence bed capacity and patient flow impacting the emergency community and influence the priority work ahead for the ESCN.

#### **Strategic Alignment**

The AHS Health Plan 2022 - 2025 and Business Plan 2022 - 2023<sup>1</sup> is a commitment to Albertans to improve:

- Patient and family experiences,
- Patient and population health outcomes,
- The experience and safety of our people, and
- Financial health and value for money.

The ESCN's work is guided by these four organizational goals. Working in partnership with key stakeholders and providers the ESCN will contribute to AHS' vision through the work described in this TRM. These strategies guide the ESCN's efforts to sustain safe, high-quality emergency care.

Building on past and current work the revised TRM reflects changes that focus the work of the ESCN in response to the needs of patients and families and the broader emergency community.

# **ESCN Strategic Directions 2022 - 2025**



# Strategic Direction # 1 - Respond to the Needs of our Patient Population

**Priority: Patient and Family Experience** 

Currently the Health Quality Council of Alberta (HQCA) surveys patients about their experience at the 16 busiest emergency departments in the province. This survey data combined with AHS' ED data are important tools that inform the work of the ESCN and our operations colleagues to analyze and validate the patient experience, delivery of care and wait time in EDs/UCCs.

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<sup>&</sup>lt;sup>1</sup> Alberta Health Services, Health Plan & Business Plan 2017 – 2020. The full report can be viewed at: http://www.albertahealthservices.ca/about/page13365.aspx

The survey provides a voice for patients to share the quality of their care and their experiences in the emergency environment. The ESCN is using this data, updated quarterly, to focus on improving the patient and family experience.

A key part of the patient experience can be determined by communication with staff and physicians. In previous HQCA emergency patient experience surveys, communication by healthcare providers was one of the most important aspects of determining patients' overall ratings of care<sup>2</sup>.

#### **Objective:**

• To improve patients' and families' experiences by improving provider/patient communication, and quality patient care.

#### Actions:

- Develop strategies to improve communication with operations and our patients and families.
- Collaborate with system partners to develop documents, guidelines, policies, and educational programs that support our frontline teams in providing evidencebased quality patient care.

#### **Expected Outcomes:**

- Improve patient experience in the emergency environment.
- Spread awareness and acknowledge Indigenous land and communities.
- Decrease the stigma related to patients with addiction and mental health presentations.

<sup>&</sup>lt;sup>2</sup> HQCA Focus on Health Care - https://focus.hqca.ca/emergencydepartments

- Improve communication in the emergency environment using information design strategies.
- Support emergency staff and physicians in communication techniques that facilitate care of patients and family members.



# Strategic Direction # 2 - Partner as Innovators and Problem Solvers

Priority # 1: Opioid Crisis, Addictions and Mental Health

In response to the opioid crisis the ESCN has established a provincially coordinated Buprenorphine/Naloxone (Suboxone®) opioid agonist treatment (OAT) for patients presenting to EDs and UCCs with Opioid Use Disorders (OUD) in Alberta. This includes patient pathways that include sustainable transitions to community and primary healthcare providers and services.

The ESCN will continue to collaborate with provincial and zone Addictions and Mental Health (AMH) partners to address possible inequities because of system capacity issues.

#### **Objective:**

 Develop strategies to improve care and health outcomes for patients experiencing mental health and substance use challenges, in partnership with the addictions and mental health community, operations and our patients and families.

#### Action:

 Support provincial and zone operational and medical leaders as new Opioid Use Disorder (ODP) clinics are expanded throughout the province.

#### **Expected Outcomes:**

By focusing on the opioid crisis in Alberta, the ESCN will build upon the existing opioid agonist treatment program in ED/UCC to:

- Contribute to Clinical Knowledge and Content Management (CKCM) pathway development for acute/chronic pain management relevant to ED patient care.
- Develop education materials for both emergency patients and healthcare providers.
- Integrate ED/UCC care with other opioid crisis response initiatives provincially, to improve integration across the care continuum.
- Facilitate patient transitions into community services.

#### **Priority # 2: Patient Flow**

Safe, efficient, and timely patient flow, through the acute care sector, is a system wide challenge requiring the collaboration of all system stakeholders to remedy<sup>3</sup> <sup>4</sup>. Recognizing the need for shared accountability for this system wide issue, the ESCN will explore Pan SCN opportunities to collaborate broadly with operational and medical leaders, system partners and patients and families to develop strategies to address access block at key points along the patient journey. These efforts include the Alberta Surgical Initiative (ASI), Acute Care Bundle Improvement, avoidable admission, and Patient Movement Improvement work. Improvements to patient access across the system aim to ensure patients receive the care they need in the most appropriate space. Specifically, within acute care hospitals, the efficient flow of Emergency Inpatients to the appropriate inpatient care space contributes to ED stretcher availability for the next incoming emergency patient, whether ambulatory or by EMS.

#### **Objective:**

 Support safe and efficient patient flow from arrival to the ED/UCC to discharge home or admission to a hospital.

#### Action:

 Support operational and medical leadership in implementing innovative solutions to improve patient transfer of care at key access points throughout the patient journey.

<sup>&</sup>lt;sup>3</sup> Kelen GD, Wolfe R, D'Onofrio G, Mills AM, Diercks D, Stern SA, Wadman MC, Sokolove PE, Emergency department crowding: The canary in the health care system. NEJM Catalyst, Commentary. February 2021. DOI: 10.1056/CAT.21.0217.

<sup>&</sup>lt;sup>4</sup> Rutherford PA, Anderson A, Kotagal UR, Luther K, Provost LP, Ryckman FC, Taylor J. Achieving Hospital-wide Patient Flow (Second Edition). IHI White Paper. Boston, Massachusetts: Institute for Healthcare Improvement; 2020. (Available at www.ihi.org)

#### **Expected Outcome:**

 Safe, efficient, and timely patient flow at key access points within the system allowing EDs/UCCs to focus their expertise on providing emergency care to undifferentiated (physician assessment has not occurred or is in progress) patients.

#### **Priority # 3: EMS to ED Transfer of Care (EMS Offload)**

Appropriate use of limited clinical resources is a key objective of the ESCN. The ESCN will continue to collaborate with each AHS zone and EMS to facilitate the safe transfer of patients from EMS to the ED/UCC. Currently there are many challenges and variables that impact patient transfer across the system. The ESCN will work with operations to co-design local solutions.

#### **Objective:**

 Collaborate with our EMS partners to ensure timely transfer of care to our ED/UCCs enabling EMS practitioners to be available for community response.

#### **Action:**

 Share and support development of evidence-based clinical governance documents and activities across the province to address safe and timely EMS to ED/UCC transfer of care.

#### **Expected Outcome:**

 Safe, efficient, and timely transfer of care from EMS to ED/UCC allowing EMS practitioners to return to the community and respond to the next emergency call.

#### Priority # 4: Advancing Provincial Electronic Medical Record (EMR) - Connect Care

AHS' information management system is the bridge between information, healthcare teams, patients, and families. Connect Care is a common clinical information system directly impacting everyone providing patient care within AHS, transforming patient care across the system.

The ESCN will continue to contribute to the work to standardize clinical content that supports best practice and evidence-informed clinical knowledge for all ED/UCCs as Connect Care continues to be launched in more sites throughout the province.

#### **Objective:**

• Contribute to the development and implementation of CKCM topics.

#### **Action:**

• Engage in the Connect Care deployment and provide expertise in building best practice and evidence-informed clinical care.

#### **Expected Outcomes:**

- Improve and standardize workflows with a focus on patient care.
- Support the design, build, testing, implementation, standardization and continuously improve Connect Care content that supports clinicians and established workflows.

#### **Priority # 5: Resource Stewardship**

As part of the Quadruple Aim, the ESCN aims to ensure appropriate allocation of resources that results in high-value, effective, evidence-based care for ED/UCC patients. Diagnostic Imaging (DI) services are used to diagnose disease, establish relevant treatments, and monitor therapy response, accounting for a significant amount of healthcare spending. Concerns have been raised that some DI tests are unnecessary for patient treatment. *Choosing Wisely* is a provincial and national initiative that identifies frequently overused tests and treatments that are not supported by scientific evidence and may expose patients to harm. The ESCN is supporting the implementation of elements of the *Choosing Wisely* initiative in Alberta EDs/UCCs.

#### Objective:

Improve appropriate use of diagnostic imaging in EDs/UCCs.

#### **Actions:**

• Support implementation of Choosing Wisely in EDs/UCCs,

#### **Expected Outcomes:**

- Appropriate use of common diagnostic imaging tests.
- Optimize appropriate use of CT scans in EDs/UCCs.
- Decrease the variation between EDs/UCCs in CT scan ordering practices.
- Foster a culture of collaborative provincial quality improvement.



### **Strategic Direction #3 - Support our People**

Priority # 1: Workforce Safety

The ESCN will continue to work with Workplace Health and Safety (WHS), managers, staff, and physicians to foster an environment that is conducive for safe quality care. To that end, the ESCN aims to understand the situations and circumstances that deter from this goal (safety, violence etc.). The ESCN will collaborate with teams to develop options for improving their safety when caring for patients and families and to minimize worker and environmental risks. This includes the implementation of the Prevention of Harassment and Violence Program in collaboration with WHS.

#### Objective:

Collaborate in the development of solutions to improve worker safety in EDs/UCCs.

#### Action:

 Partner with WHS and operational leaders to implement the Prevention of Harassment and Violence Program in EDs/UCCs provincially.

#### **Expected Outcomes:**

- Staff feel safe in the workplace.
- Broader worker knowledge and insight into navigating hazardous environments and situations.

#### **Priority # 2: Worker Retention**

The ESCN recognizes that the core business of managing worker retention resides with ED/UCC operations. To support operations the ESCN will contribute to retention efforts by engaging with Health Professions Strategy and Practice (HPSP) and the Workforce Sustainability Taskforce to advance Scope of Practice changes in ED/UCC. Similarly, the ESCN will support retention efforts through its partnership with WHS in the provincial implementation of the Prevention of Harassment and Violence Program. This program aims to assist workers to proactively identify and minimize safety risk in their work environments which may help them feel safe to come to work. Providing support to workers in a variety of ways increases retention rates, confidence and competence, and the ability to provide high quality emergency care to patients. <sup>5</sup> 6 7

#### **Objective:**

Support ED/UCC operations by contributing to ED/UCC retention efforts.

#### **Actions:**

- Share and socialize the workforce retention strategy developed by the AHS Workforce Sustainability Taskforce through the various forums within the ESCN.
- Support the advancement of the scope practice of Licensed Practical Nurses and other healthcare professionals in EDs/UCCs.
- Implement the Prevention of Harassment and Violence Program in EDs/UCCS in collaboration with WHS and ED/UCC operations.

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<sup>&</sup>lt;sup>5</sup> Jackson, D., Clare, J., & Mannix, J. (2002). Who would want to be a nurse? Violence in the workplace—A factor in recruitment and retention. *Journal of Nursing Management*, 10, 13–20.

<sup>&</sup>lt;sup>6</sup> Wieck, K. L., Dols, J., & Landrum, P. (2010). Retention priorities for the intergenerational nurse workforce. *Nursing Forum*, *45*(1), 7–17. https://doi.org/10.1111/j.1744-6198.2009.00159.x

<sup>&</sup>lt;sup>7</sup> Zaheer, S., Ginsburg, L., Wong, H.J., Thomson, K., Bain, L., & Wulffhart, Z. (2019). Turnover intention of hospital staff in Ontario, Canada: Exploring the role of frontline supervisors, teamwork, and mindful organizing. *Human Resources for Health, 17*, Article 66. https://doi.org/10.1186/s12960-019-0404-2

• Explore other provincial and national jurisdictions for opportunities to inform retention strategies.

#### **Expected Outcome:**

Increased staff retention in EDs/UCCs.

#### **Priority # 3: Education**

Within the emergency environment changes are continual and occur rapidly; as a result, there is a constant demand to address the learning needs of health care providers. It is critical to ensure providers deliver current, evidence-based care and can work to their full scope of practice. This requires the mobilization of multiple strategies to deliver training and education related to clinical pathways, emerging knowledge topics, and competencies across multiple sites within a large, diverse geographic landscape.

#### Objective:

 ED/UCC staff across the province receive consistent training and education pertinent to their scope of practice to increase knowledge and build confidence and competence in the delivery of emergency care.

#### Action:

• Partner with Health Professions Strategy and Practice (HPSP) ensuring standardization of competencies and learning materials.

#### **Expected Outcome**

 An educational program that enables ED/UCC staff confidence and competence to provide emergency care to all patients.



# Strategic Direction # 4 - Health System Research and Innovation

**Priority # 1: Develop Research to Support Clinical Practice** 

Research is a foundational element necessary for the success of the ESCN; the Scientific Office plays a crucial role in moving the ESCN strategies and priorities forward. Through research, the Scientific Office positions the ESCN as a key contributor to emergency medicine research and supports translation of best evidence into practice in EDs/UCCs throughout the province.

The ESCN, through its Scientific Office conducts, sponsors and promotes high impact research and capacity-building opportunities that align with the ESCN's strategic priorities. Aiming to address the health service needs of individuals who visit Alberta's EDs and UCCs, it conducts and disseminates research within the healthcare system. The focus is on improving quality of care and translation of knowledge through partnerships.

#### **Objectives:**

- To build a diverse and inclusive network that supports the advancement of evidenceinformed emergency care.
- To support patient and family-centered emergency care driven by education, innovation, quality improvement, and practice-changing research through collaboration. Specifically, to build emergency department research capacity, advance and disseminate research knowledge, and engage and build partnerships for research, quality improvement and innovation.

#### **Actions:**

Advance AHS as a learning health system by:

- Building Capacity: Develop emergency department research skills through mentorship across the many disciplines that practice in EDs, including for graduate trainees. As well as, providing research resources and fostering a research culture.
- Advancing and Disseminating Research Knowledge: By engaging in high quality research studies, obtaining research funding, completing publications, and presenting at conferences and other knowledge translation venues.
- Engaging and Building Partnerships for Research and Innovation: Engage the ESCN Research Advisory Board (RAB), build the ESCN research community, support cross-

SCN collaboration, and collaborate with national and international Emergency Medicine researchers.

#### **Expected Outcomes:**

- Completed research projects that have relevance to patients, families, and the emergency care community, both ESCN and Pan SCN.
- Students and mentees trained or educated in Emergency Medicine research skills.
- Rigorous projects financially supported.
- Publication of scholarly manuscripts.
- Researchers engaged in Emergency Department research.
- Research that positively influences quality patient outcomes, and patient and family experience.



# Strategic Direction # 5 - Advancing Equity, Diversity, and Inclusion (EDI)

Priority # 1: Document and Address Disparities in Emergency Care

Emergency care has an important role as a point of access for all those who face barriers to healthcare. Yet, emergency care is not immune to social issues of inequity, discrimination, and racism.

Research in Alberta and other jurisdictions documents inequity and discrimination in emergency care related to demographics including gender, age, race, and sexuality for processes including access, wait times, triage, analgesia, diagnostics, and treatments.

Income level, substance use, and housing status are factors that are known to impact emergency care utilization and are commonly stigmatized. Other forms of diversity including ability, national or ethnic origin, residency, citizenship, religion, and marital status are also recognized and protected within the Canadian Charter of Rights and Freedoms. Leaders in emergency care are committed to understanding the way these factors may impact emergency care.

A focus on equity, diversity and inclusion will allow emergency providers to better serve the population of Alberta and those who rely most on EDs/UCCs. We will be better able to recognize and address gaps in our awareness, thinking and planning in support of patients facing marginalization and strategic directions one through four.

#### **Actions:**

- Through expression of interest processes recruit diverse representation to various ESCN committees and forums.
- Seek opportunities to collect and analyze data related to disparities in emergency care
  including those related to the care of patients and families, and to the recruitment and
  retention of staff, leaders, and patient advisors.
- Factor equity, diversity, and inclusion into all ESCN projects and activities.

#### **Expected Outcomes:**

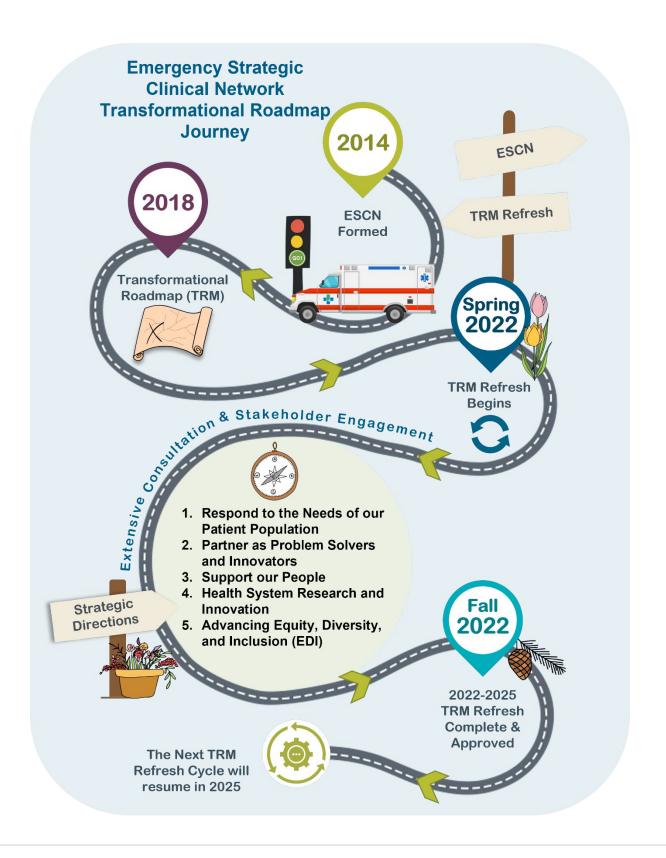
- The ESCN better reflects the diversity of residents of Alberta in the make up its staff,
   Core Committee and patient and family advisors.
- The ESCN is a leader in advancing EDI within AHS, the province, and nationally.
- EDs/UCCs are equipped to provide better care for patients and families facing barriers to care.
- EDs/UCCs provide safer, more inclusive, and equitable working environments for staff and physicians.

### **Next Steps**

The ESCN 2022 - 2025 TRM outlines the priorities, objectives, actions and expected outcomes across five strategic areas. To ensure that the ESCN is achieving its objectives as outlined in the TRM a process for oversight, development of action plans, an annual review process, measurement of the plan, and final evaluation at the end of the third year will then lead into the next cycle of the ESCN TRM refresh.

TRM 2022 - 2025

# Appendix 1 - Development of the 2022 - 2025 ESCN TRM



# **Appendix 2 - Stakeholder Engagement**

Between April and September 2022 stakeholder groups and opportunities to engage them were identified. In total, 17 engagement sessions were held, information from these meetings was themed, and an engagement report produced.

The ESCN would like to thank the following stakeholders who contributed to the development of the 2022 - 2025 ESCN Transformational Roadmap.

ESCN Stakeholders		
Alberta Health		
Clinical Support Services	<ul> <li>Infection Prevention Control</li> <li>Provincial Pharmacy Services</li> <li>Poison and Drug Information Services (PADIS)</li> <li>Connect Care Leadership</li> <li>Allied Health – Respiratory Therapy</li> <li>Allied Health - HPSP</li> </ul>	
Emergency Care – zones, sites/programs/operations	<ul> <li>Emergency Senior Operations Leadership Committee</li> <li>ESCN Operational Leadership Forum</li> <li>ESCN/ASAP Leadership Touch Base Meeting</li> <li>EMS</li> </ul>	
ESCN Research Advisory Committee		
Patient and Family Advisors	<ul> <li>Patient Engagement Reference Group (PERG)</li> <li>Youth Advisory Councils (AMH/Stollery Children's Hospital and Alberta Children's Hospital)</li> </ul>	
Strategic Clinical Networks/Provincial Programs	<ul><li>Indigenous Wellness Core</li><li>AMH Core Committee</li><li>Primary Health Care Integration Network</li></ul>	

TRM 2022 - 2025

# **Appendix 3 - Our Patient Advisors**

The ESCN thanks our patient advisors for their ongoing commitment to improving patient and family experience receiving care in Alberta's EDs/UCCs.





Marisa Vigna Patient & Family Advisor

As the intersection of most healthcare services, and the gateway to the healthcare system for many, I believe emergency departments/urgent care centres play a pivotal part in patient and family experiences and sustainability for healthcare in our province. I am honoured to be a part of the ESCN, as a patient and family advisor, where I have the opportunity to positively impact the broad spectrum of emergency care that occurs in Alberta. I enjoy being part of a team where every member holds a unique role and area of expertise that is valued. Knowing that my voice and lived experience is making a tangible difference, allows me to continue to be passionate about my involvement with the ESCN.



For the past nine years, I have had the privilege and opportunity to work with the ESCN. My personal commitment is to represent the voice of the patient to ensure access to quality care in a timely manner. As a citizen and taxpayer to promote the best use of resources to deliver patient care in an efficient and effective manner. I appreciate the expertise of the team and their unwavering commitment to patients.



John Brick Patient & Family Advisor



Our TRM has just five areas of focus, and yes, the patient is one of them. As one of the Patient and Family Advisors, I am so pleased to be able to sit at this table; partnering in developing ideas for patient outcome improvement. Alberta's emergency and urgent care locations are a lynch-pin in all health delivery."



Gloria Wilkinson Patient & Family Advisor