TARGET SHOOTER
Lorraine Yedon, a nurse at Northwest Public Health Clinic in Ranchlands, prepares an immunization. The potentially deadly Streptococcus pneumoniae bacterium has been eliminated in children under five, and nearly eradicated in all other age groups thanks to immunizations like this one. This is a major victory for childhood immunization programs – Dr. Otto Vanderkooi, pediatric infectious disease specialist based at Alberta Children’s Hospital.

ON the face of it, budgets might seem boring, but here’s why what we are doing now is so important to our patients, families and communities. There are three essential parts to the budget approved by our Board earlier this month:

• We will spend new dollars on growth.
• We will increase spending to meet increased demand.
• We will find cost-savings and redirect those dollars to where they will have greater impact.

Budgets are all about setting priorities and making choices. We will find $220 million in cost-savings across the health system, which will be redirected to higher priorities. To put it simply, we will move dollars to where they will make a bigger difference.

At the same time, the Board and Senior Management have directed the Zones and program and portfolio leaders to ensure that patient care is not affected.

We are not suggesting it will be easy. It will mean difficult choices, involving programs and services that may have been part of Alberta Health Services for many years. What are those priorities? Why the need to find those cost-savings? Because we are also adding more Continuing Care spaces in Alberta this year at a cost of about $50 million. We will increase investment in operating costs for new facilities, such as the Alberta Children’s Hospital Neonatal Unit, and the new Red Deer cancer facility. We will increase spending on Primary Care and Mental health and Continuing Care by almost 10 per cent. Spending on emergency and other outpatient services will increase by 6.4 per cent. Spending on inpatient acute nursing care services, including medical, surgical, intensive care, obstetrics, pediatrics and mental health, will increase by 4.6 per cent.

And we will spend more in support for the frail elderly, the vulnerable, complex high-needs children and youth, and those at the end of life. I think you will agree we must be there for them. We must do more for the people who need more care. We need more community-based care, and we need to focus more on wellness because, in the end, it’s about taking care of people, and that’s what setting priorities is all about.

In short, we’ll spend more of your health dollars where patients need it most. We’ll do that in part by reducing administration overhead costs by 10 per cent over three years. We are eliminating pay-at-risk for all executives effective April 1, 2013, and commencing a review of executive compensation. You can find more details at www.albertahealthservices.ca/8241.asp. Difficult decisions, yes, but necessary as we change the way health care is provided to make it easier for patients to get what they need when they need it.

– Stephen Lockwood, Board Chair, Alberta Health Services
Walking a gentle winding path, free of distractions and little to worry about can be relaxing and de-stressing. Add soothing light and gentle music and the effect can be deep and lasting.

This was the reported experience of 25 teens and young adults who volunteered to walk and evaluate the ‘projected light labyrinth’ installed in October 2012 at Alberta Children’s Hospital. "Walking a labyrinth is a right-brain activity that can induce a meditative state of mind," says Dr. Philip Behman, Senior Chaplain, Alberta Children's Hospital. "Mindful meditation is ultimately tied to brain health and is a tool to enhance traditional medicine."

Behman explains that labyrinths have been used as tools of meditation and healing for more than 3,500 years. He says a labyrinth is far more than simply a maze that aims to confuse the mind. "As one type of mindful practice, walking a labyrinth can help one de-stress, self-regulate, and clear and calm the mind," he says.

The 25 youth were part of the Child and Youth Advisory Council (CAYAC), whose mandate is to provide a youth perspective for child-health programs and services. After a brief introduction to the labyrinth, the youth entered the labyrinth, following two simple rules: walk slowly, and walk quietly.

Some were invited to carry a small stone or pebble on their journey as a symbol of a problem, a worry, a hope or a prayer. Their responses speak for themselves. “It was extremely calming and therapeutic,” says one participant. “I decided to bring a stone in with me and leave my worries behind.”

Says another: “Even before I walked the labyrinth, I felt a lot more relaxed because of the atmosphere and music. It was nice to have some time to think and deal with my worries more positively.”

A third says physical disabilities were no barrier to the labyrinth: “A very good tool for someone who is worried or stressed. It was pretty easy to do in my wheelchair.”

The labyrinth is currently being used therapeutically with mental health patients at the hospital. It is also open to patients, family, and staff on specially scheduled days.

For more information, please contact Spiritual Care Services at 403.955.7868.

Dr. Philip Behman, Senior Chaplain at Alberta Children’s Hospital, sits in the labyrinth in the hospital chapel. Labyrinths have a history going back 3,500 years, says Behman.
A new cancer centre will be built in Calgary, giving southern Albertans better access to leading-edge cancer care, all within the existing Foothills Medical Centre site.

The facility was announced by Premier Alison Redford and Health Minister Fred Horne in Calgary on March 1.

The new centre will include inpatient beds, the latest advanced cancer diagnostic and treatment technologies, an outpatient facility, and dedicated research space to provide more opportunities for cancer innovation.

Following an extensive planning phase, construction is expected to begin by 2015-2016.

“A new centre will help us better treat the growing number of patients cared for by our cancer doctors, nurses and support staff, and allow them to focus their energies on patient care, treatment and research,” says Dr. Chris Eagle, CEO of Alberta Health Services.

“This is a positive step for cancer treatment in Calgary and southern Alberta. It will ease the burden on patients and those at the frontline of cancer care.”

Cancer is by far the leading cause of premature death in Alberta. Every year, nearly 16,000 Albertans are diagnosed with cancer and more than 5,500 people die from it. Almost half of Alberta’s entire population, 45 per cent, lives in Calgary and southern Alberta. A growing population and improved cancer care that has increased survival rates has created a need for new infrastructure.

“You have high expectations of your health care system. We help meet those expectations by building top-quality facilities that keep us on the frontlines of medicine. In Calgary, plans for a new cancer care centre have been announced. What it means for you is the most up-to-date technologies, staff and research with a focus on your cancer care.”

Premier Alison Redford speaks at the announcement of a new cancer care facility in Calgary.

WE KNOW THE NEED FOR CANCER CARE WILL CONTINUE TO GROW ... THIS STATE-OF-THE-ART FACILITY WILL BE A HUB FOR CANCER CARE FOR CALGARY AND SOUTHERN ALBERTA

— Premier Alison Redford
Story by Greg Harris | Photo by Paul Rotzinger

Thanks to routine childhood immunization, Calgary is among the first cities in the world to record the near eradication of some of the more serious forms of illness caused by a common bacterium. Calgary researchers report seven strains of the bacterium Streptococcus pneumoniae, which can cause serious infections known as Invasive Pneumococcal Disease (IPD), have been wiped out in children under the age of five and nearly eliminated in all other age groups.

"This is a major victory for childhood immunization programs," says Dr. Otto Vanderkooi, a pediatric infectious disease specialist based at Alberta Children’s Hospital and the lead author of a paper published in the Pediatric Infectious Disease Journal this past fall. "This is an organism that continues to cause a million deaths around the world each year."

In its non-invasive form, Streptococcus pneumoniae can cause sinus or ear infections, leading to runny noses and earaches. When it invades an organ or the bloodstream, it can cause pneumonia (infection of the lungs), meningitis (infection of the protective membrane surrounding the brain and spinal cord), sepsis (infection of the bloodstream), osteomyelitis (infection of the bone) and septic arthritis (infection of a joint).

IPD can require up to two weeks hospitalization to control and, in the most severe cases, can be fatal. In 2002, Alberta became the first province in Canada to introduce the 7-valent pneumococcal conjugate vaccine (PCV7), also known as Prevnar, which targets the seven most common and serious subtypes of Streptococcus pneumoniae.

Today, PCV13, which targets 13 subtypes, is in use across the province. Albertans are now fully immunized against those subtypes by their first birthday.

"Although we don’t have the specific research to confirm it, we would expect other areas in Alberta would also be experiencing decreases in the numbers of cases of Invasive Pneumococcal Disease due to routine childhood immunization," says Dr. Judy MacDonald, AHS Medical Officer of Health and a co-author of the paper.

The Calgary Area Streptococcus Pneumoniae Epidemiology Research (CASPER) group, established by Dr. James Kellner, head of pediatrics at the University of Calgary, has been studying IPD and other pneumococcal-related infections since 1998 and is the longest continuous surveillance program of its kind in Canada. Using data collected in the CASPER program, researchers found local cases involving PCV7 subtypes in children between the ages of six months and 23 months fell from 66 cases per 100,000 in 1998-2001, to one case per 100,000 in 2007-2010. Unpublished data from 2011-12 confirm rates in the Calgary area have fallen to zero cases per 100,000 for the same age group.

All other age groups have seen similar sustained declines in IPD caused by vaccine strains, indicating a strong ‘herd effect,’ a phenomenon in which adults and older children who aren’t immunized against PCV7 strains still benefit because vaccine coverage in infants and preschoolers is high.

Alberta’s immunization program for infants and pre-school children is provided free of charge and provides primary immunization against diphtheria, pertussis, tetanus, polio, Haemophilus influenza type B, measles, mumps, rubella, varicella, strains of meningococcus and Streptococcus pneumoniae.

"This is an organism that continues to cause a million deaths around the world each year."

— Dr. Otto Vanderkooi
HEALTH LINK GETS A LINE ON TODDLER’S BIRTH DEFECT

Your Experience.

When you need help, we are there with you. And that is 24 hours a day, seven days a week. Our Health Link line gives expert information and advice to Albertans with questions about their health. Just ask Betty Hildebrand, who called Health Link about a rash on her young daughter, only to discover the problem was serious and needed to be corrected.

A Calgary toddler has returned to full health following surgery to repair a rare, life-threatening heart defect that was diagnosed starting with a call to Health Link Alberta.

Betty Hildebrand called Alberta Health Services’ 24-hour health advice and information line when she noticed a rash appeared on her daughter, Georgia, who had also been struggling with a persistent cough. The mother suspected her one-year-old was teething, but the Health Link Alberta registered nurse thought the symptoms might have suggested something more serious and advised Hildebrand to watch for new symptoms and see a doctor immediately if her daughter’s condition worsened.

When Georgia didn’t get better, they went to a city emergency department, leading to the diagnosis of a serious heart defect. “I don’t even want to think of what would have happened if I hadn’t called Health Link and taken her to the emergency department,” says Hildebrand. “Who knows how long it would have taken to discover the defect.”

Health Link registered nurse Pam Murray spoke to Hildebrand and, through a series of triage questions, identified the baby was showing signs of dehydration and was having trouble breathing. “I knew there had to be something else going on,” says Murray.

That “something else” turned out to be a vascular ring, a condition caused when the aorta (the large artery that takes blood away from the heart) wraps around the trachea (windpipe) and esophagus (food pipe), constricting the flow of air and food.

“It was basically choking her,” says Hildebrand. Georgia quickly recovered following surgery at the Alberta Children’s Hospital in January.

Recently Hildebrand and her daughter met Murray at the Calgary call centre to thank her – a reward not many Health Link Alberta nurses get to experience.

“Heart Link nursing is different than working in a hospital – you don’t see patients get better in a hospital – you don’t see patients get better and go home,” says Murray. “It’s really rewarding to get this kind of feedback. You know your hard work paid off and you were able to make a real difference.”

Hildebrand says she will continue to use Health Link when she has health questions and concerns about her family.

“We don’t walk into life with a handbook for our kids. I’m not a medical person, so I’m thankful that I can call and get that reassurance and advice from a nurse,” she says.

Health Link Alberta offers local numbers in Calgary (403.943.5465), Edmonton (780.408.5465) and a toll-free number (1.866.408.5465) for the rest of the province.

Follow your zone @AHS_YYCZone on Twitter for updates on AHS programs, resources and services.

• Childhood constipation is a common problem that is easily prevented: bit.ly/XDHSTX
• Get the latest on AHS building projects in #yyc: bit.ly/127NGAo
• Did you know a quarter of all young Albertans have used a #tanning bed in the past year? Find out more: #Calgary bit.ly/WS19xR
• Point to where it hurts. Try our symptom-checker: #calgary on bit.ly/WbiKYY
• New tool created by AHS helps kids steer clear of household poisons: www.houseofhorrors.ca

Visit your local Health Care Centre or Hospital? Simply visit www.albertahealthservices.ca/mobile.asp to find out more.

HEALTH CARE LOCTOR

Finding the health care you and your family need when you need it is easier than ever with AHS’ online Health Care Locator. Are you looking for a specific type of program or service? Do you need to find your nearest community health centre or hospital? Simply visit www.albertahealthservices.ca and click on “Find Health Care” to get local information in seconds.

Health Care Services

Download the AHS mobile app for iPhone or Android
• Emergency department wait times
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• More...

www.albertahealthservices.ca/mobile.asp
When the towns of Claresholm and High River pooled statistics, they discovered tight finances mean not all families can afford fitness activities. So, with AHS and foundation support, the towns decided to offer some free public swimming hours. The result? A splash hit!

Story and photos by Kerri Robins

Celebrating all dolphins, mermaids—even sharks! Take the plunge! “I love it here,” says nine-year-old Brityn MacPherson, taking part in Claresholm’s free public swim. “The swinging rope is the best. No wait. I think I like the diving board the best,” says Brityn. Claresholm and High River residents are certainly enjoying some “freestyle” swimming on Saturday or Sunday afternoons from 2-4 p.m. through the Free Public Swim Program in their communities.

Brityn’s mom, Trish MacPherson, has been bringing Brityn and her 10-year-old sister, Madison, to the Claresholm Aquatic Centre since the program began. “The girls love it,” says MacPherson. “It’s great to see them have such a good time with each other and their friends, and they’re completely exhausted after swimming for a couple of hours. “It’s good for the girls to learn independence and follow rules in the pool. It’s a Saturday afternoon well-spent.”

And it’s plain to see that Madison loves the pool as well. “I’m not like swimming lessons where you have to practise,” says Madison. “We just get to play at whatever we want.”

The Free Public Swim Program, promoting healthy physical activities, made debut waves in High River in 2009 and Claresholm in 2011. It was a grassroots initiative that began because research revealed that cost associated with recreational and physical activity was a barrier for some families. It began in Claresholm through the Claresholm Healthy Communities Coalition, and the Calgary Rural Primary Care Network, Alberta Health Services, in High River.

In High River, the pool has seen an overwhelming 114 per cent increase in attendance in the free swim program since it began. Ruth Mueller and Debbie-Layne MacLeod are community development co-ordinators with Alberta Health Services in Claresholm and High River, respectively. Both women are delighted with the program. “Swimming is an active, social sport and the free play is important in allowing kids to be creative,” says Mueller.

MacLeod agrees, adding, “We really see how swimming encourages families to socialize.” The programs are now funded by their community foundations. Both Rene Chartrand, Board Chair, Claresholm District Health Foundation, and Michael Brown, Executive Director, High River District Health Care Foundation, are impressed with local support in donations that help fund the programs.

According to Robertshaw’s mother, the nurse practitioner wasn’t the only person who made her feel comfortable and safe. “She told me the cardiologists and transfer staff were so caring and compassionate,” says Robertshaw. “She appreciated the time that was taken to explain the procedures happening to her as this helped to calm and reassure her.”

“Thank you,” does not seem like the right words to convey the deep appreciation for the care and response to my mother’s medical crisis was very reassuring,” says Robertshaw. “She appreciated the time that was taken to explain the procedures happening to her as this helped to calm and reassure her.”

Palser was discharged and continues her heart medication. “You hear frequently in the media how AHS has long wait times and care is inadequate, but the care and response to my mother’s medical crisis was very reassuring,” says Robertshaw.

“Our partners

HAC MEMBER’S PERSONAL HEALTH JOURNEY

Story and photo by Kristin Bernhard

As a member of the Prairie Mountain Health Advisory Council (HAC), Sandra Robertshaw often hears stories from members in her community about their health care experiences.

Part of her role as a council member is to listen to the feedback from her community about what is working well in health care and what can be improved. After spending three years on the council, suddenly it was Robertshaw’s turn to be on the receiving end of the health care system. “My mother had discomfort in her chest,” says Robertshaw. “Wanting to know what was wrong, she called her family physician to make an appointment, and that is when it all started.”

On describing her symptoms over the phone, Robertshaw’s mom, Susie Palser, was told to go straight to the hospital for evaluation. “When my mother arrived, she was seen in triage. A physician came out, locked her and right away knew what was wrong. He told her she had suffered a heart attack. Then he looked her over again and said, ‘I think you’re having another one right now.’” Palser was taken to emergency where they confirmed that she indeed suffered a heart attack. She was then transported to the Foothills Medical Centre for further testing and treatment. Later, she was brought back to the critical care unit at Rockyview General Hospital.

“My mother told me the nursing care she received was exemplary,” says Robertshaw. “She told me she wasn’t worried throughout her treatment because the nurse practitioner took control and kept her informed throughout the process.”

Participating in some free public swimming hours, the towns decided to offer some free public swimming hours. The result? A splash hit!

“Swimming is a life skill and these kids are learning it through play, activity and quality family time,” says Brown.

For more information on the swim program, please visit www.highriver.ca or www.townofclaresholm.com. For foundation information, visit either www.claresholmanddistricthealthfoundation.com or www.highriverhealthfoundation.ca.
Music therapist Corina Strim leads a drumming ensemble at the Golden Eagle View long-term care unit at the Canmore General Hospital with, from left, residents Gawn Croll, Stanley Wingfield, Brian Gibson and Malcolm Booth. Music therapy has shown to help increase cognitive abilities in Alzheimer patients and provide a sense of community and belonging for seniors in long-term care. The program was made possible with support of the Canmore and Area Health Care Foundation.

Your gifts and donations help support local health care throughout Alberta. Donations of any size, or your gift of time to a cause of your choice, have profound impacts on the local care of patients, their families and your community.

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Be a Champion of Care for your local foundations and the people and programs they support in your community

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- Calgary Health Trust
  Supports: Foothills Hospital | Peter Lougheed Hospital
  Rockyview Hospital | Carewest – Colonel Belcher
  Carewest – Dr. Vernon Fanning Centre | Carewest – George Boyak Centre | Carewest – Glenmore Park | Carewest – Nickle House | Carewest – Royal Park | Carewest – Sarcee
  Carewest – Sarcee Hospice | Carewest – Signal Pointe
- Claresholm and District Health Foundation
  Supports: Claresholm General Hospital
  Willow Creek Continuing Care Centre
- EMS Foundation
- Canmore and Area Health Care Foundation
  Supports: Canmore General Hospital
- High River District Health Care Foundation
- Rosebud Health Foundation
  Supports: Didsbury Health Services | Cremona Community Health Centre
- Sheep River Health Trust
  Supports: Okotoks Health & Wellness Centre | Olfelds Hospital – Black Diamond
- Strathmore District Health Foundation
- Vulcan County Health & Wellness Foundation

www.albertahealthservices.ca/give
Today’s Statistics; Tomorrow’s Cure

Jason Lau, who has a PhD in medical genetics, knows how important it is to have population data, and how rare it is to gather it. When he heard the Tomorrow Project wanted to recruit 50,000 Albertans by December 2013, he had to be a part of it. Its goal is to find out more about the causes of cancer and other health conditions so researchers will be able to develop better strategies to improve our health in the future.

“It’s quite amazing the kind of data that the Tomorrow Project will be able to gather,” says Lau. “The conclusions that can come out of it are second to none.”

The long-term study will follow the health of participants for the next 50 years to gather information on health and lifestyle through surveys and the collection of blood and other specimens. It seeks to learn more about what causes diseases such as cancer, heart disease and other long-term health conditions.

To be eligible to join, you need between the ages of 35-69 and have never been diagnosed with cancer. For more information, please visit www.in4tomorrow.ca or call 1.877.919.9292.

AHS embraces local leadership and zone-based decision-making. Here in Calgary and area, front-line physicians and clinical leaders at every level of the organization have joint planning and decision-making authority with operational leaders, meaning faster decisions closer to where care is provided.

Alberta: Zone by Zone

To find the hospitals, services, facilities and programs in your zone, please visit albertahealthservices.ca/FacilitySearch.

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