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# Modernizing Alberta's Primary Health Care System (MAPS)

2-Year Implementation Plan



**Modernizing Alberta's Primary Health Care System** | Alberta Health

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## OVERVIEW

The 2-Year Implementation Plan is the result of the Government of Alberta's Modernizing Alberta's Primary Health Care System (MAPS) initiative.

MAPS was established to strengthen and improve primary health care in Alberta and ensure all Albertans have access to timely and appropriate primary health care.

The purpose of this plan is to outline the next series of actions that will stabilize and strengthen primary health care in Alberta over the next two years. The actions identified in this plan provide a clear path forward and are aligned with the overall goal of modernizing the province's primary health care system.



MAPS is expected to have wide-ranging impacts on service delivery, funding, governance, and accountability mechanisms across Alberta. As a result, MAPS will be implemented in stages.

Within the MAPS final reports, the MAPS Strategic Advisory Panel and Indigenous Primary Health Care Advisory Panel outlined recommendations for the province to consider, including recommendations for strategic shifts that describe how the system could evolve over the next decade.

Grounded in this work, the 2-Year Implementation Plan establishes a realistic plan to move forward on panel recommendations and the insights of the many stakeholders who participated in the MAPS initiative. This approach recognizes that not all of the changes proposed can be actioned at once, and that some of the recommendations require longer-term, systemic change.

Evolving the primary health care system will require sustained, co-ordinated efforts over a period of years. The 2-Year Implementation Plan establishes a systematic approach to pursue this work, recognizing that further planning will be required after the identified actions are achieved.

## Scope

The scope of the implementation plan is from April 2024 through the next two provincial fiscal years, ending in March 2026. The 2-Year Implementation Plan includes:

- The approach taken to prioritize actions.
- Leadership structure for the transformation process.
- A series of actions that will be initiated by the province during the two year period, organized according to seven areas of focus.

A separate Alberta Indigenous Primary Health Care "The Way Forward" has been developed independently and contains inherently different types of recommendations. However, the values, vision, and overall hope for the future are very much aligned. Both reports speak to an imperative to advance equity and eliminate racism from health care, and collectively acknowledge that success on this front would represent an important advancement of reconciliation with Indigenous Peoples in Alberta.

## Rural considerations

Recognizing that services and programs are sometimes designed at a provincial level and do not always reflect the unique needs of Alberta's rural and remote communities, the final reports outlined rural and remote considerations that informed actions in the implementation plan. The entire system of primary health care in rural and remote areas needs to be designed to bridge gaps and remove barriers facing patients and care providers. Recognition is needed that planning and decision-making should happen in local communities. These factors will be considered as detailed plans are created for each activity in the implementation plan.



## PRIMARY HEALTH CARE VISION

Albertans expect their primary health care system to be there for them and their loved ones throughout their life journey – at the right time, in the right place, by the right provider, and with the right information.

**The MAPS vision is simple:** When primary health care works, people and families are connected with trusted health workers and support systems. There is consistent and equitable access to health services.

Based on the overarching outcomes for primary care in Alberta, the MAPS initiative was created to deliver improved outcomes and cost-effective care to all Albertans. It also aims to strengthen how the broader health system supports and is oriented around primary health care providers, patients, and caregivers.

The MAPS Strategic Advisory Panel developed 11 recommendations to refocus the primary health care system. These recommendations are the government's guideposts for action to create more access to primary care. The next two years are critical in beginning the work that needs to happen to lay the foundation for the longer-term improvements that will focus the system on community-based primary health care.

### **Achieving the vision for primary care requires:**

- Shifts that better enable integrated care with connections to non-health sectors.
- Increasing capacity for quality improvement and innovation.
- Increasing community involvement.
- Advancing the elimination of racism.
- Strengthening accountability.
- Creating an environment where primary care providers thrive and recruitment is enhanced.

## **Strengthening Alberta's primary health care system is based on five outcomes:**

### **1. Access**

All Albertans have access to timely, appropriate primary health care services from a regular provider or team. Care options are flexible and reflect individual and population health needs.

### **2. Integration**

Every Albertan has a health home that provides primary health care services and seamless transitions to other health, social and community services. Co-ordination and communication between providers and organizations is promoted and facilitated by service planning and the provincial governance structure.

### **3. Albertans as partners**

Albertans and their social support networks are meaningful partners in achieving their health and wellness goals. Health services are proactive, recognize and address underlying influences on health outcomes, and respect individual needs and preferences.

### **4. Quality**

Albertans receive high-quality services from an accountable, innovative, and sustainable primary health care system. Health service delivery is evidence informed, follows best practices, and uses resources efficiently.

### **5. Culturally safe and appropriate care**

First Nations, Métis and Inuit persons and all Albertans have access to high-quality, culturally safe care that is free of racism, and is designed and delivered in a manner that respects their unique health care needs.



## BACKGROUND

### MAPS overview

The MAPS initiative was launched in September 2022 to recommend ways to address the challenge of access to high-quality primary health care and achieve a primary health care-oriented health system over the long-term. Advisory panels were convened to provide advice on modernizing the existing health system, including a Strategic Advisory Panel, an International Expert Panel, and an Indigenous Primary Health Care Advisory Panel.

MAPS stakeholder engagement included more than 25 organizations, 122 stakeholders from across public and patient groups, health care partners, government, and social and community organizations. More than 25 panel meetings occurred. Additionally, public focus groups were organized by Imagine Citizens Network; a rural engagement session with more than 100 participants was held; and an Innovation Forum with 125 attendees from across Alberta was convened.

Two MAPS final reports were provided to Alberta Health on March 31, 2023, outlining recommendations for the province to consider, including recommendations for strategic shifts that describe how the system could evolve over the next decade. The MAPS Strategic Advisory Panel Final Report emphasized access to team-based care, integration between primary health care and community care, and the foundations of a co-ordinated and accountable primary health care system.

In the Indigenous Advisory Panel's final report, 22 recommendations were outlined under five themes:

- reflecting recommendations to improve health equity for Indigenous peoples
- addressing Indigenous racism in health care
- actions to build a culturally safe primary health care system and strengthen the Indigenous workforce
- create system innovation and support community capacity
- Indigenous ownership, stewardship, design, and delivery of health care services.

As included in the Premier's 2023 Mandate Letter and the public announcement on Oct. 18, 2023, Alberta Health has committed to continuing the work of the MAPS initiative.

### Health system refocusing

The MAPS initiative is part of a larger refocusing initiative by the Alberta government to prioritize patient care and empower front-line health care workers. A transformation is taking place to create a single provincial health care system with four specialized areas of focus managed by sector-specific health organizations, including primary care, acute care, continuing care, and mental health and addiction.

Establishing a provincial primary care organization is consistent with the governance recommendations from the MAPS report. The overarching mandate of the organization will be to deliver on the following outcomes:

- Provide provincial oversight and co-ordination of primary care service delivery.
- Ensure every Albertan is attached to a family physician, nurse practitioner, or primary care provider.
- Ensure Albertans have timely access to high-quality primary care services including after-hours no matter where they live.
- Ensure accountability for all publicly funded providers and clinics.
- Support Alberta Health in determining alternative payment models.

### Designing and implementing the MAPS 2-year plan

Engagement has been ongoing with health care partners, including Indigenous communities, to help address some of the immediate priorities, identified through the work of the MAPS panels. Following the release of the MAPS reports, over 50 stakeholder engagement sessions took place in November and December of 2023.

These sessions allowed stakeholders to ask questions, express their priorities and provide advice on the relevant MAPS recommendations. This has ensured that stakeholder input has informed the MAPS 2-Year Implementation Plan. In addition, Indigenous stakeholders continue to be engaged in implementing recommendations from the Indigenous Advisory Panel.

Primary health care stakeholders have made it clear they desire a role in co-creating the future of the system. Throughout the implementation of the MAPS recommendations, stakeholders will have a voice and be active partners with Alberta Health in building the future primary health care system.

## Foundation for success

Engagement with health care stakeholders to develop the MAPS 2-Year Implementation Plan returned several important considerations for communicating and managing change in this complex stakeholder landscape:

- Prioritizing stabilization efforts to strengthen the foundation for change.
- Increasing confidence through trust and transparency.
- Investing in change management and agile communications to achieve goals faster.
- Establishing strong governance and accountability for measurable outcomes.
- Empowering the workforce through engagement and strategies to improve recruitment and retention.
- Focusing on team-based excellence to achieve patient-centered care.
- Advancing Indigenous health equity through cultural safety and close collaboration with the Indigenous Primary Health Care Implementation Advisory Panel.

## Leadership structures

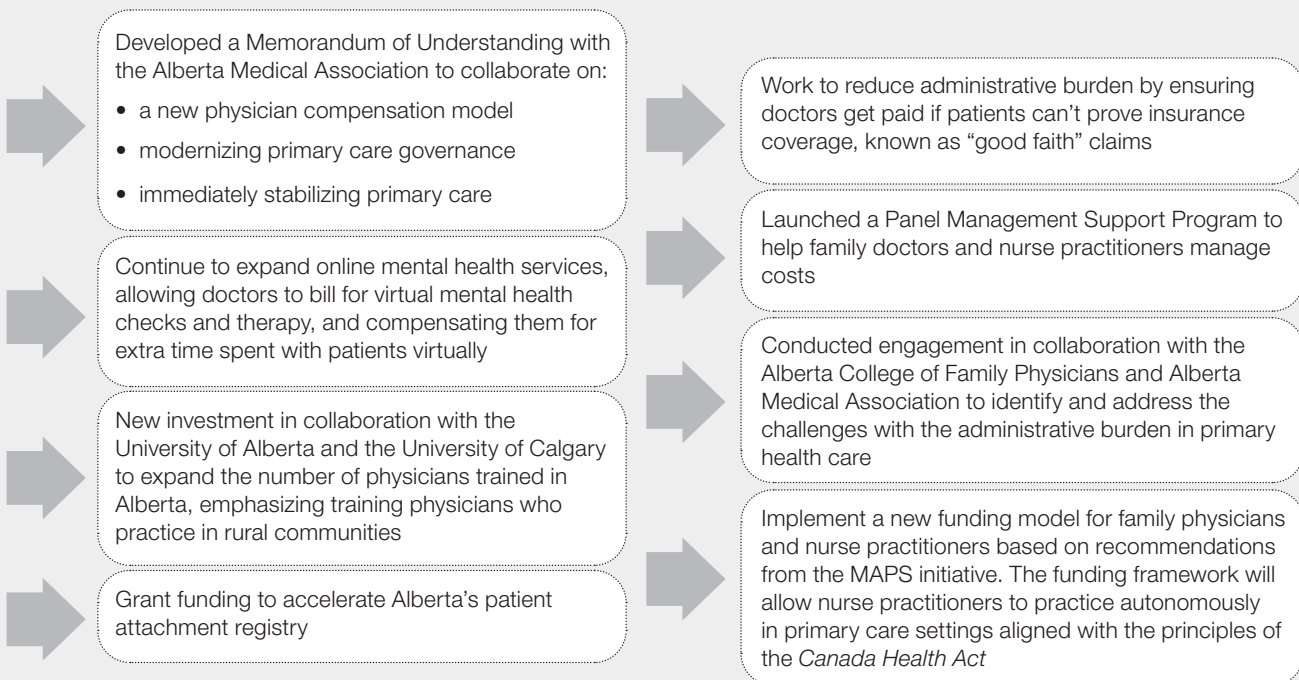
To enable implementation of MAPS, there must be co-ordination and alignment with broader efforts to refocus Alberta's health care system. It is important that a structure be established that engages clinical and administrative leaders in shaping the future of primary health care in Alberta. Stakeholders want to be involved in this capacity and believe existing structures should be leveraged where possible.

Key elements of the MAPS implementation structure include:

- The Provincial Primary Care Network Committee—will have its mandate adjusted and members added to become the Primary Health Care Advisory Committee, focusing primarily on MAPS implementation.
- Zone Primary Care Network Committees—will continue to exist and fill a critical role in advancing zonal initiatives to meet both provincial and local priorities.
- Working groups—will be established that are accountable to the Primary Health Care Advisory Committee and dedicated to advancing key aspects of MAPS, including advising on the design and implementation of Regional Primary Health Care Networks.

## IMMEDIATE ACTIONS

Upon receiving the MAPS panel reports, the Alberta government began work to move forward with the recommendations and vision for the future of the system. These actions included several immediate steps to address long-standing challenges faced by Albertans, particularly Indigenous people seeking access to primary care. Immediate actions that are already completed or currently underway focus on addressing pressing issues, fostering collaborations with essential partners, and laying the essential legal, governance, and workforce groundwork required to position the system for success in the future.



## TAKING ACTION: A PRINCIPLED APPROACH

In addition to input received from health system stakeholders, a set of principles was established to help guide which actions to prioritize in the MAPS 2-Year Implementation Plan. Priority actions reflect these principles.

### 5 Guiding Principles

1

**Address urgent issues to stabilize the current system and prepare for change**

Refers to the actions needed to resolve immediate and critical problems within a system, organization, or context, aiming to prevent further deterioration and create a stable environment. Simultaneously, it involves supporting an ability to make future changes or improvements to ensure a smooth transition into a more sustainable and effective state.

2

**Foster partnerships with key stakeholders in primary health care**

Involves actively cultivating collaborative relationships and alliances with essential individuals, organizations, or groups that play a significant role in primary health care. These stakeholders could include health care providers, community organizations, government agencies, and others. The goal is to work together to enhance the quality and accessibility of primary health care services.

3

**Establish necessary foundations aligned with broader health system transformation**

Early actions will need to create a solid foundation encompassing legal frameworks, governance structures, and a well-trained workforce that are in alignment with the larger objectives of transforming the health care system. It involves setting up the necessary rules, regulations, and infrastructure to facilitate and support the desired changes in the health care system.

4

**Honour previous commitments, such as those in the Alberta Medical Association–Alberta Health Agreement or public announcements**

Certain actions are needed to fulfill promises and obligations made in prior agreements, contracts, or public declarations, such as agreements with medical associations or public commitments made by governmental or institutional bodies. It involves upholding the commitments and obligations, ensuring accountability and trustworthiness.

5

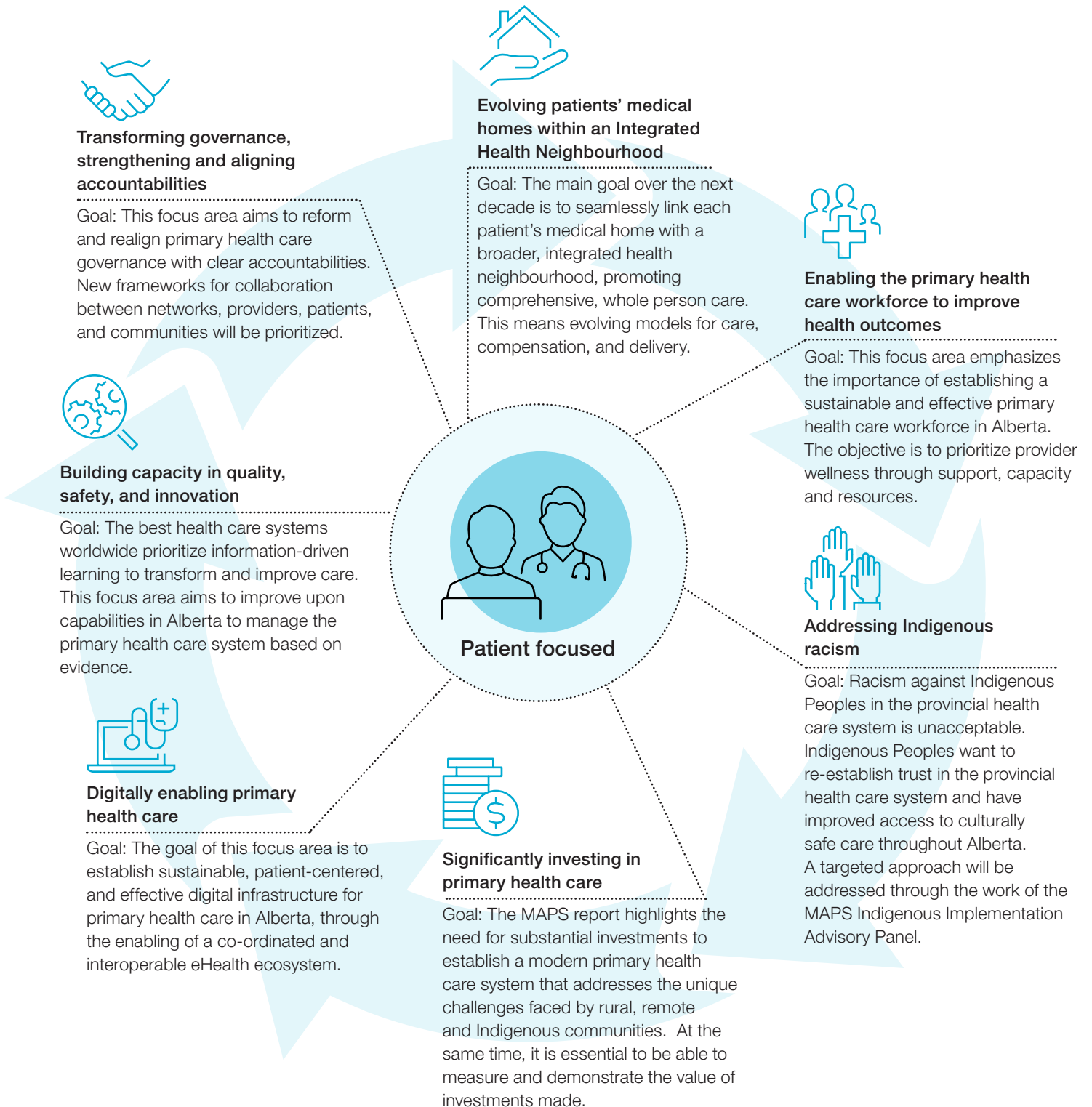
**Strive to ensure sufficient funding**

Focusing on actions that will contribute to ensuring there is an adequate and sustainable source of financial resources available.



## Key focus areas

The MAPS initiative identified actions within seven key areas of focus. These focus areas are mutually reinforcing and interdependent, and will become the foundation for the future state of Alberta's primary health care system as envisioned through MAPS.



## Key focus areas – actions and key milestones

Each focus area is supported by a series of actions planned for implementation over the next two years. Each fiscal year is divided into four quarters: **Quarter 1 runs May to June;** **Quarter 2 is from July to September;** **Quarter 3 is from October to December;** **Quarter 4 runs January to March.**



### Transforming governance, strengthening and aligning accountabilities

**1.1** Create a provincial organization and Regional Primary Health Care Networks (RPHCNs) to provide oversight and leadership to primary health care in Alberta.

**1.1.1** Stand up the new Provincial Health Care Organization (PCO).

**1.1.2** Design the RPHCN to plan and co-ordinate primary health care services for the population within their respective geographic boundaries.

**1.1.3** Develop an accountability framework for achieving key performance indicators which clarify roles, responsibilities, and expectations across Alberta Health, PCO, RPHCN, clinics and providers.

#### 1.1 Expected milestones

- **Q1** 2024-25: Legislation updated to enable new primary health care organizations.
- **Q3** 2024-25: Complete policy to inform parameter (size, location, services) of the new RPHCNs.
- **Q3** 2024-25: PCO is established.
- **Q4** 2024-25: Complete plan for transitioning from current Primary Care Networks to the RPHCNs.

**1.2** Develop primary health care standards that define the minimum requirements for the primary health care system.

**1.2.1** Define a core set of primary care services that Albertans can expect to receive.

**1.2.2** Design team-based care standards that promote a collaborative approach to health care delivery and define effective configurations and ratios of health care professionals.

**1.2.3** Develop primary health care access guidelines and metrics to support a consistent and achievable level of service delivery across the province.

#### 1.2 Expected milestones

- **Q3** 2024-25: Policy to inform standards on core basket of services developed.
- **Q3** 2024-25: Policy to inform team based care standards developed.
- **Q4** 2025-26: Standards on access to services developed.



### Evolving patients' medical homes within an Integrated Health Neighborhood

**2.1** Develop an Integrated Health Neighbourhood (IHN) Policy Framework which sets out a series of goals and objectives to seamlessly link each patient's medical home with a broader IHN, promoting comprehensive, whole person care.

#### 2.1 Expected milestones

- **Q4** 2024-25: IHN framework developed.
- **Q1** 2025-26: Determine transition plans to establish IHNs (including policy development and change management).

**2.2** Expand the delivery of integrated health, community, and social services to address the needs of underserved populations.

#### 2.2 Expected milestones

- **Q1** 2024-25: Execute new grant funding to invest in new and existing Community Health Centres.

**2.3** Expand programs that support patients as they transition between the medical home, specialty care and back.

**2.3.1** Expand specialty access services, both geographically and across surgical and medical specialties

**2.3.2** Continue to implement the Facilitated Access to Specialized Treatment (FAST) program.

**2.3.3** Implement provincial shared services that enable effective care transitions, including the Provincial Pathways Unit.

### 2.3 Expected milestones

- **Q1** 2024-25: Establish a leadership structure that enables co-design and shared decision-making processes between acute care and primary care.
- **Q2** 2024-25: Implement a non-urgent specialty advice telephone service for all rural areas.
- **Q2** 2024-25: Fully implement FAST among 10 surgical specialties, including availability of clinical pathways on Alberta's Pathway Hub.



### Enabling the primary health care workforce to improve health outcomes

#### 3.1 Develop a primary health care workforce strategy.

**3.1.1** Increase available training spaces within undergraduate, residency, and physician assistant programs.

**3.1.2** Develop initiatives targeting the recruitment and training of additional health care professionals to work in primary health care teams, including administrative team members.

#### 3.1 Expected milestones

- **Q1** 2024-25: Establish a multi-stakeholder workforce committee.
- **Q1** 2024-25: Refreshed Health Workforce Strategy.
- **Q2** 2024-25: International Medical Graduate expansion begins.
- **Q3** 2024-25: Expansion of available spots within undergraduate and residency programs.
- **Q3** 2024-25: Creation of a physician assistant program.
- **Q2** 2026-27: Canadian resident expansion begins.

**3.2** Develop and implement initiatives to reduce the administrative burden that physicians currently face.

#### 3.2 Expected milestones

- **Q1** 2024-25: The Supporting Comprehensive Primary Care Task Force to present their final report to the Minister of Health, including recommendations on alleviating administrative burden and stabilization measures.
- **Q2** 2024-25: Complete feasibility assessment of all short- and medium-term recommendations from the Decreasing Administrative Burden Report.



### Building capacity in quality, safety, and innovation

**4.1** Develop more robust data and analytics platforms and infrastructure.

**4.1.1** Expand use of the Health Quality Council of Alberta (HQCA) Primary Care Panel Reports as a critical tool to enable practice-level quality improvements.

**4.1.2** Develop a quality and outcomes framework that includes population-level measures and indicators related to health equity and social determinants.

#### 4.1 Expected milestones

- **Q2** 2024-25: Panel reports sent from HQCA to all primary care providers.
- **Q1** 2025-26: Design quality and outcomes framework in line with primary health care standards and accountability framework.

**4.2** Establish a dedicated primary health care innovation fund, to facilitate improvement and accelerate adoption of innovation in the Patient's Medical Home.

#### 4.2 Expected milestones

- **Q1** 2025-26: Announcement of first round of successful applicants.

**4.3** Establish a common patient and provider feedback platform and processes so timely patient experience information can support ongoing learning and quality improvement across the primary health care team.

#### 4.3 Expected Milestones

- **Q1** 2024-25: Initiate Imagine Citizens Care Opinion pilot.



## Digitally enabling primary health care

**5.1** Upgrade and expand the Alberta Find a Doctor platform to connect Albertans with physicians and nurse practitioners.

### 5.1 Expected milestones

- **Q1** 2024-25: Grant funding for collaboration with Zone PCN Committee to enhance Alberta Find a Doctor.
- **Q1** 2025-26: Develop plan for future delivery of the website service.

**5.2** Set up a program to ensure that Electronic Medical Record (EMR) systems used by health care providers in Alberta meet the province's standards for sharing health information.

### 5.2 Expected milestones

- **Q1** 2024-25: Commencement of planning on EMR program.
- **Q1** 2025-2026: EMR program implementation begins.

**5.3** Speed up the expansion of a secure “health information highway” for health care providers to easily communicate, and access and share patient information.

**5.3.1** Set up an online service for health care providers to easily create and track referrals, and for patients to check their status.

**5.3.2** Optimize the electronic delivery of test results and hospital reports from Connect Care to health care providers in the community.

**5.3.3** Introduce online ordering for health care providers to request tests electronically, beginning with lab tests.

### 5.3 Expected milestones

- **Q1** 2024-25: Commencement of planning on electronic lab ordering.
- **Q2** 2024-25: First round of improvements made to electronic results delivery service for Connect Care.
- **Q4** 2024-25: First EMR vendor is able to submit referral requests electronically.
- **Q1** 2025-26: Second round of improvements made to electronic results delivery service.
- **Q1** 2025-26: First EMR vendor is able to electronically order lab tests. Plan for diagnostic imaging eOrdering with target dates.

**5.4** Improve patients' ability to access their health information electronically through MyHealth Records.

### 5.4 Expected milestones

- **Q4** 2024-25: Operative procedures and investigation data incorporated in MyHealth Records.
- **Q4** Q4 2024-25: Referral notifications incorporated in MyHealth Records.



## Significantly investing in primary health care

**6.1** Dedicated primary care investment plan that ties defined investments to specific outcomes for people, communities, and providers.

**6.1.1** Develop a funding strategy for primary health care that considers provincial and regional budget needs, including a review of the current PCN per capita funding methodology.

**6.1.2** Develop a comprehensive care or new compensation model that supports sustainable team-based care.

**6.1.3** Develop and implement a Panel Management Support Program to help offset costs of maintaining and growing a panel of patients.

**6.1.4** Implement a nurse practitioner funding model to bring greater capacity into the system.

**6.1.5** Investment of stimulus funding for team-based care to enable the recruitment and deployment of non-physician staff.



### 6.1 Expected milestones

- **Q1** 2024-25: Final recommendation on a new compensation model.
- **Q1** 2024-25: Develop process to administer Panel Management Support Program payments to nurse practitioners.
- **Q1** 2024-25: Administer funding to Alberta Medical Association to administer quarterly Panel Management Support Program payments to physicians.
- **Q1** 2024-25: Launch nurse practitioner program.

**6.2** Develop a MAPS Evaluation Framework and public reporting of results, with additional investment contingent on demonstrating progress and outcomes.

### 6.2 Expected milestones

- **Q2** 2024-25: Define the Evaluation Framework's objectives and outcomes.
- **Q4** 2025-26: Initiate program evaluation.



### Addressing Indigenous racism

A separate Alberta Indigenous primary health care “The Way Forward” has been developed independently and contains recommendations and actions related to the focus area of addressing Indigenous racism.





## MOVING FORWARD

MAPS implementation will be overseen by Alberta Health, working closely with key primary health care partners. As new primary health care organizations are put in place, leadership to achieve system changes will evolve.

The MAPS initiative will continue to prioritize engagement and involvement of stakeholders in primary health care, health care staff, Indigenous communities, and the lived experience of Albertans.

Further planning and actions will be required as implementation unfolds.

## Impact

The MAPS 2-Year Implementation Plan represents only a part of a long-term commitment to strengthen primary health care in Alberta. It is important, however, to identify expected benefits from these implementation efforts.

Based on the scope of activity identified over the coming two years, MAPS implementation is expected to deliver the following benefits toward each of the province's five outcomes of primary health care transformation:

| OUTCOME                              | EXPECTED BENEFITS  |
|--------------------------------------|--|
| Access                               | <ul style="list-style-type: none"> <li>Enhancements to the Central Patient Attachment Registry and the Alberta Find a Doctor website will help more Albertans get attached to a regular primary care provider.</li> <li>New delivery models such as nurse practitioner-run clinics will increase access to primary care, particularly in rural areas.</li> <li>Compensation models will encourage attachment for all Albertans.</li> </ul>                               |
| Integration                          | <ul style="list-style-type: none"> <li>Enhancements in the integration and interoperability of Electronic Medical Records will make it easier for providers to have timely access to health information.</li> <li>There will be expanded use of electronic referrals, along with progress towards electronic prescription functionality and online ordering for lab tests, which will improve provider efficiency.</li> </ul>  |
| Quality                              | <ul style="list-style-type: none"> <li>Evidence driven standards will help define a high-quality system.</li> <li>An evaluation framework will be established to measure and report on progress in primary health care.</li> <li>Primary health care data and reporting will be integrated to enable meaningful reporting on the system.</li> <li>Team-based care models will be enhanced so Albertans receive care by the right provider in the right place.</li> </ul> |
| Albertans as partners                | <ul style="list-style-type: none"> <li>Local decision-making will be strengthened through a regional delivery structure.</li> <li>Patients will have improved access to their health information via MyHealth Records.</li> <li>Determining how our primary health care approach and the patient's medical home can incorporate a broader range of partners, including social and health supports.</li> </ul>  |
| Culturally safe and appropriate care | <ul style="list-style-type: none"> <li>Actions focused on strengthening the capability of the health system for culturally safe and appropriate care are being planned and overseen in parallel, with leadership from the Indigenous Implementation Panel. As such, expected benefits under this outcome are not included here.</li> </ul>   |