

The Evolution of Structures Supporting Primary and Specialty Care Transformation in Alberta

Since 2003 the AMA, along with several other system partners, has been supporting the transformation of primary care delivery. The current path began with the development of structures leading to the formation of Primary Care Networks, the first of which launched in 2005. PCNs are groups of doctors working collaboratively with teams of health care professionals, such as nurses, dietitians and pharmacists; these health care providers work together to meet primary health care needs in their communities. More recently PCN's have evolved to support member physicians in implementing changes (toward PMH) into practice.

Between 2005 and 2014, Alberta saw the development of 41 PCNs with almost 4000 physician members and 1,100 allied health professionals, providing services to more than 3.4 million Albertans. The initial priorities for PCNs included:

- increasing access to primary care
- providing 24/7 access to appropriate health care services
- increased emphasis on health promotion and care of complex patients
- improved coordination and integration with other health care services
- optimizing the use of multi-disciplinary teams

The initial years of PCNs saw significant advancements for patients, providers and the system in areas such as increasing the number of multi-disciplinary team members and enhanced primary care services within and outside of family practices. In 2011, the College of Family Physicians of Canada released their position paper, [A Vision for Canada: Family Practice – The Patient's Medical Home](#); physician and system leaders agreed that in Alberta we should aspire to this vision. In 2014, leaders worked on developing new structures, activities, and objectives for PCNs to become the change management vehicles for this PMH transformation.

In 2017, the PCN Objectives were refreshed to:

1. Accountable and Effective Governance
2. Health Needs of Community and Population
3. Patient's Medical Home
4. Strong Partnerships and Transitions of Care

The foundations to achieve these new objectives were well laid through the first several years of operations. Around 2014 PCNs began to invest in their workforce of change agents. Physician champions, practice facilitators, EMR specialists, and panel managers were hired and deployed to achieve provincial goals for paneling and preventive screening. The intention was to build this resource within



PCNs to support member practices through repeated cycles of improvement over time to implement best practices associated with PMH, Population Health Need, and Strong Partnerships and Transitions of Care.

With these key human resources being hired and deployed for PCN level priorities around PMH, looking ahead to achieving system integration (i.e. Strong Partnerships & Transitions of Care objective) and population health (i.e. Health Needs of Community and Population) for all Albertans required an additional structure to align 41 PCNs provincially.

In 2017 following the release of the new PCN objectives, PCN physician members voted overwhelmingly to the creation of new committees aligning PCNs to the Alberta Health Services zone structure. The purpose of the Committees (five in total) are to align planning across PCNs in their zone, create and implement a zone-wide service plan, and optimize service delivery for populations within each zone. While PCNs continue to focus their efforts on implementing the PMH at the practice level and accountable and effective governance, the Zonal Committees exist to enable the strong partnerships and transitions of care and addressing the health needs of the population.

Later in 2017, Alberta Health Services launched a customized [Strategic Clinical Network](#) called the [Primary Health Care Integration Network](#). The PHCIN works closely with several key partners, including patient/family advisors, AHS zones and provincial programs, Primary Care Networks (PCNs), the Primary Care Alliance, other SCNs, Alberta Health, and academic partners to improve transitions of care at every level. The Network will support integration priorities as they are identified by primary care within the zones, led by the zonal committees.

Ultimately, the priorities of the zonal committees will pass down to the PCN level and then to the practice level for implementation. This work will require the workforce of change agents, with a common vision, goal, and above all, set of skills to transform the Alberta primary care system and support the optimization of its health neighborhood.