



PCA Workforce Transfer Frequently Asked Questions

FAQs have been prepared for employees identified to transfer from Alberta Health Services to Primary Care Alberta, effective February 1, 2025. This document is intended to supplement union-AHS FAQs found on the [Primary Care Alberta](http://www.primarycarealberta.ca) website.

- [AUPE Auxiliary Nursing Care \(ANC\)](#) FAQs
- [AUPE General Support Services \(GSS\)](#) FAQs
- [Health Sciences Association of Alberta \(HSAA\)](#) FAQs
- [United Nurses of Alberta \(UNA\)](#) FAQs

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Overview

1. What is the timing of the transfer to Primary Care Alberta (PCA)?

- PCA was formally established as a provincial health agency under the *Provincial Health Agencies Act* on November 18, 2024.
- As PCA becomes operational on February 1, 2025, 1,350 positions have been identified to transfer from Alberta Health Services to Primary Care Alberta to support PCA operations.
 - **December 3, 2024:** Affected AHS staff were notified of the intent to transfer their position from AHS to PCA on February 1, 2025.
 - **Starting December 9, 2024:** Affected AHS staff receive a formal transfer notice with detailed information and next steps.
 - **February 1, 2025:** First day for staff who transfer to PCA.
- Some individuals have accepted temporary assignments to form the PCA Executive Transition Team as of November 2024.

2. What is Primary Care Alberta?

- PCA is one of the four planned provincial health agencies in Alberta designed to focus on four priority areas: primary care, acute care, continuing care, and mental health and addiction.
- PCA is the new provincial health agency responsible for primary care across the province. It is a made-in-Alberta solution to ensure Albertans can access the primary health services they rely on every day, throughout every stage of life and in every corner of the province.
- We know our current health care system makes it difficult to access the primary care Albertans need, like family doctors. That's why PCA has been created to solely focus on primary care, something that has never before been done in Alberta.
- PCA will create a modern, more responsive and unified health care system that prioritizes patients, empowers front-line health care professionals and gives Albertans improved access to key primary care services so they can avoid visiting the emergency department or be over-reliant on acute care service.

3. What will change operationally on day 1 of Primary Care Alberta?

- The transfer of identified staff from AHS to PCA is effective February 1, 2025, and will largely be business as usual.
- The day-to-day work of staff transferring to PCA will remain unchanged after the transfer. Work settings will not change because of this transfer.
- PCA has secured corporate and clinical support services from AHS through formal agreements (referred to as Transition Services Agreements) and the priority is to maintain operations without disrupting services.
- You will still use the same clinical and corporate systems and processes to do your job, including Connect Care, e-People and facility access.



- One change you will notice is that staff and physician emails will change to reflect the name of the new organization (firstname.lastname@primarycarealberta.ca).
- You are encouraged to share your new email address with regular contacts in advance of the change to ensure.
- Should you face any barriers or issues accessing these services, please contact your leaders.

Transfer Details

4. Why is this happening now?

- We are at a critical time when it comes to health care in Alberta.
- Alberta's government is taking significant action to improve the delivery of primary care in the province. That's why PCA has been created to solely focus on primary care, something that has never been done before in Alberta.
- As PCA works toward an operational date of February 1, 2025, staffing the agency is part of the work underway to refocus Alberta's health care system to prioritize patients and empower front-line health providers.
- As part of the refocusing initiative, AHS will become a service delivery provider and continue to play a strong role in operating its 90+ hospitals, with a renewed focus on shorter wait times, and supporting high-quality hospital care for patients in communities across Alberta.

5. Why is this happening so fast?

- It is important that the right people are in the right places to continue the momentum toward building a health care system that prioritizes the needs of Albertans.
- Albertans need and deserve a system that works for them and prioritizes their needs, whether these needs are finding a primary care provider, getting urgent care without long wait times, or accessing the best continuing care options and supports within appropriate timelines.
- While the transfer itself may seem sudden for some, the intent to make this change was shared through various channels (e.g., town halls) since this work was announced in November 2023.

6. When will the transfer be complete?

- Affected staff will transfer to PCA on February 1, 2025.
- It's important to ensure staff feel supported as the transfer from AHS to PCA occurs and affected staff settle into new teams to continue their important work.



7. Will more staff be moving?

- Staff transfers mark important steps toward supporting the efforts to refocus Alberta's health care system.
- As we continue to establish provincial health agencies within priority sectors, appropriate resources will move from AHS to better align and support these areas.
- We are committed to implementing these changes in a transparent and coordinated manner to make these transfers as smooth as possible.

Affected Positions

8. What positions have been selected to move?

- Approximately 1,350 staff have been identified to transfer from AHS to Primary Care Alberta effective February 1, 2025.
- Programs, functions, and positions identified for transfer include Health Link 811, AHS staff who work in Primary Care Networks and select primary care clinics that are owned and operated by AHS, Provincial Midwifery Services, Facilitated Access to Surgical Treatment (FAST) program, some parts of Virtual Care, Access and Navigation (V-CAN) and the Primary Health Care provincial program.

9. Are all positions from each function/team identified for transfer moving to Primary Care Alberta?

- No, not all positions from each program and function identified for transfer will move to Primary Care Alberta.
- Positions were identified based on alignment with the responsibilities shifting to Primary Care Alberta to support the newly established provincial health agency.
- Areas where not all positions have been selected for transfer include:
 - Primary Care Networks: AHS staff who currently provide support to Primary Care Networks have been identified for transfer to Primary Care Alberta.
 - Primary care clinics: AHS staff who work in select primary care clinics that are owned and operated by AHS have been identified for transfer to Primary Care Alberta.
 - Facilitated Access to Specialized Treatment (FAST): The majority of FAST staff will transfer to PCA as part of their work to support patients in accessing specialist or surgical treatment. This work primarily occurs in the primary care sector until the patient is transferred to the care of the specialist or surgeon. Positions within this program not identified for transfer include roles supporting specialist or surgical bookings which will remain at AHS as an acute care function.
 - Health Link 811: The majority of Health Link 811 staff will transfer to PCA. Positions not identified for transfer that will remain with AHS includes positions that support Interpretation and Translation Services and some that support Analytics.



- V-CAN: Some teams and positions from the Virtual Care Access and Navigation have been identified for transfer to PCA. Those include some Virtual Health positions that will provide virtual care support to the primary care sector. Other positions in the Virtual Health program not identified for transfer will remain with AHS to continue to support acute care services.
- RAAPID (Referral, Access, Advice, Placement, Information, and Destination) and PADIS (Poison & Drug Information Service) will remain with AHS.

10. Why were these staff members selected to move?

- Refocusing is about creating a more effective health care system and putting people in the right places to deliver better care for Albertans.
- The positions identified for transfer currently within AHS are now more suitably aligned to Primary Care Alberta as the organization has been established to solely focus on primary care services to oversee the governance, coordination and delivery of primary health care across the province.

11. If jobs don't change, why is the move needed?

- This shift is part of a larger plan to refocus and fully integrate the health care system in Alberta.
- AHS will continue to play a strong role in operating its 90+ hospitals, with a renewed focus on shorter wait times, and supporting high-quality hospital care for patients in communities across Alberta.
- As a result, the Government of Alberta is working to ensure that every role within the health care system contributes effectively to shared goals of improving care to Albertans.

12. What if staff don't want to move?

- This will be addressed in the joint union/AHS FAQ.

13. [NEW] What does the Primary Care Alberta transfer mean for unionized AHS employees identified to transfer?

- AHS has concluded Letters of Understanding with United Nurses of Alberta (UNA), Health Sciences Association of Alberta (HSAA) and Alberta Union of Provincial Employees (AUPE) regarding the transfer of employees to provincial health agencies including Primary Care Alberta.
- Affected staff can find more details in the following documents:
 - [AHS/UNA Letter of Understanding](#)
 - [AHS/UNA Supplemental FAQ](#)
 - [AHS/HSAA Letter of Understanding](#)
 - [AHS/HSAA Supplemental FAQ](#)



- [AHS/AUPE ANC Letter of Understanding](#)
 - [AHS/AUPE ANC Supplemental FAQ](#)
- [AHS/AUPE GSS Letter of Understanding](#)
 - [AHS/AUPE GSS Supplemental FAQ](#)
- For staff in the Alberta Union of Nurse Practitioners (AUNP) bargaining unit, their transfer from AHS to Primary Care Alberta is a successorship, which means the current terms and conditions of employment and collective agreement will continue to apply.
 - Affected AUNP employees would have received a transfer notice between December 9-11. If you did not receive a transfer notice, your position has not been identified to transition to Primary Care Alberta.
- For all other AHS staff who have not received a notice of transfer to Primary Care Alberta, you will continue to work for AHS under the current leadership and will continue to work in your current role and at your assigned sites, including Primary Care Alberta sites.

14. Will union employees be given the opportunity to accept or decline the transfer?

- UNA, HSAA, AUPE ANC, and AUPE GSS have each reached agreements with AHS to deal with these scenarios. Joint union/AHS FAQs will address this.

15. [NEW] Can AUPE and HSAA employees select a temporary vacancy if they opt to remain employed with AHS?

- No. AUPE and HSAA employees can only select a regular vacancy as an option on their preference reply. Additional information can be found in Letters of Understanding and joint union/AHS FAQs.

16. [NEW] Will employees under the AUNP collective agreement be given the opportunity to accept or decline the transfer?

- No. AUNP employees are not provided the option to accept or decline the transfer. The transfer of employees in the AUNP bargaining unit from AHS to Primary Care Alberta is a successorship.

17. Will there be an open competition for possible vacant positions?

- Any vacancies identified to be filled will be posted per applicable collective agreement provisions, allowing all interested candidates the opportunity to apply in a fair and transparent process.



18. Has the union been involved in these moves?

- Yes. All applicable unions have been involved and informed in the transfer process and Letters of Understanding have been established for transfers to Primary Care Alberta for UNA, HSAA and AUPE.

19. [UPDATED] What does this transfer mean for staff members who hold more than one position?

- We know some staff hold multiple roles within AHS, and they may report to other areas than that of their primary position.
- Between February 1, 2025 and the payroll transfer date (to be determined), there will be no impact if you hold positions with multiple employers (Primary Care Alberta and AHS).
- Please see question 26 for reference of “payroll transfer date”
- UNA, HSAA, AUPE ANC, and AUPE GSS have each reached agreements with AHS to deal with these scenarios. Please see union/AHS FAQs for more information.

20. How much time are people given to respond to the transfer notice?

- Transfer notices will be issued starting December 9, 2024.
- UNA affected staff have until December 20, 2024 to respond to the options outlined in their transfer notice.
- HSAA and AUPE affected staff have until December 16, 2024 to respond to the options outlined in their transfer notice.

21. [UPDATED] What about staff who are on leave or are away (medical, maternity, etc.) during the transfer?

- Affected staff who are on leave or away will not receive an email with a transfer notice until after they have advised AHS that they are ready to return to work, or are declared fit to return to work. If you have received a transfer notice in error, while on a leave of absence, please disregard. A new transfer notice will be provided to you upon your readiness to return to work.

22. What happens to casual employees?

- UNA, HSAA, AUPE ANC, and AUPE GSS have each reached agreements with AHS to deal with these scenarios. Joint union/AHS FAQs address this.

23. How are affected staff being updated?

- Recognizing that change is never easy, Primary Care Alberta and AHS want to make sure staff feel respected, informed, and heard during this process.
- We know this transfer affects staff directly involved, but also the wider AHS community.



- As such, Primary Care Alberta and AHS are committed to providing regular updates and clear communication to all AHS staff. The goal is to keep everyone informed as the transfer progresses, ensuring transparency and support for all employees.
- Alberta Health Services and Primary Care Alberta are working closely with applicable unions to ensure a smooth transfer process for staff.

24. [UPDATED] What is being done to support staff during the transfer?

- Change can evoke feelings of uncertainty. The well-being of you and your colleagues is the top priority of AHS and Primary Care Alberta.
- AHS, Primary Care Alberta and applicable unions will be available to provide guidance and support throughout the transfer process.
- Resources are available to support you through the transfer. For the most up to date resources, including transition agreement FAQs, workforce transfer FAQs, and fact sheets, please visit the [Primary Care Alberta](#) website.
- You are also encouraged to have conversations with your manager, HR, and your union about specific and personal questions.
- You can also contact EFAP for support at 1-877-273-3134 | [homeweb.ca](#)
- In addition, you can send HR questions to transition.HR@ahs.ca and questions about Primary Care Alberta to ask@primarycarealberta.ca.

25. [NEW] What are PCA reporting structures going to look like for managers and staff?

- We are in the process of finalizing organizational charts for PCA and will have more information to provide in January. Staff transferring to PCA will be provided with this information prior to February 1, 2025.

Human Resources, Pay and Benefits

- Staff transferring from AHS to PCA can expect a smooth transition including continuity of pay, benefits, pension, standard hours, vacation entitlement, seniority, union affiliation, work location and clinical and corporate systems and processes. Existing banks remain in place.
- The day-to-day work of staff transferring will be the same the day after the transfer as it was the day before.
- Transfer from Alberta Health Services to Primary Care Alberta is a successorship under legislation which means the current terms and conditions of employment and collective agreement will continue to apply.



26. [NEW] What is the difference between operational day 1 and the payroll transfer date?

- February 1, 2025 is operational day 1 for Primary Care Alberta. This marks the point at which identified functions, and oversights and delivery of those functions, transfer into Primary Care Alberta. This includes positions transferring from AHS to Primary Care Alberta. February 1, 2025 is the day transferring AHS employees become Primary Care Alberta employees.
- Payroll transfer date is the date that Primary Care Alberta is established as a separate entity in e-People, marking the implementation of the Primary Care Alberta payroll system and HR and pay transactions. The payroll transfer date has not been determined for Primary Care Alberta.

27. [NEW] What impact will the transfer to Primary Care Alberta have on employment-related areas like pension and benefits?

- This transfer from AHS to Primary Care Alberta as an employer will not result in changes to any Terms and Conditions of Employment including pay, benefits, pension, standard hours, vacation entitlement and union affiliation. Staff's existing banks will remain in place.
- See detailed questions below (questions 28-31) for more information.

28. Will affected staff lose pay?

- No. Your pay will remain the same as it is now.
- You are not required to take any action or next steps to ensure a smooth continuation of pay.

29. Will affected staff lose benefits?

- No. Your benefits will be maintained, including anniversary dates and provider.
- You are not required to take any action or next steps to ensure a smooth continuation of benefits.

30. Will affected staff lose pension?

- No. Your pension will be maintained with the same provider.
- You are not required to take any action or next steps to ensure a smooth continuation of pension.

31. Will affected staff lose seniority?

- No. The start date, length of service, and seniority date will not change for staff transferring. You will carry your length of service with you and will not be forced to start over on your transfer day.



32. What if I hold a regular position (union or non-unionized) but I'm currently temporarily assigned to another position and one of my positions is transferring to Primary Care Alberta?

- UNA, HSAA, AUPE ANC, and AUPE GSS have each reached agreements with AHS to deal with these scenarios. Joint union/AHS FAQs will address this.

33. As an employee transferring to PCA, if I apply to Recovery Alberta, Alberta Health Services or future provincial health agencies, will I have to apply as an external candidate and will my seniority be affected?

- UNA, HSAA, AUPE ANC, and AUPE GSS have each reached agreements with AHS to deal with these scenarios. Joint union/AHS FAQs will address this.

34. [NEW] Following the February 1, 2025 staff transfer, how will the ongoing administration of employment provisions be managed for current NUEEs who apply on and are offered a new position with either AHS or Primary Care Alberta?

- For the period between February 1, 2025 (initial transfer date) and the Payroll Transfer Date (to be determined), a NUEE who accepts an offer of employer from AHS to Primary Care Alberta (or vice versa) will be treated as an internal hire. All current banks and entitlements remain in place and port with the employee, and employment will be deemed continuous. Items to be ported include:
 - Vacation entitlement/accrual date
 - Banked Overtime (if applicable)
 - Earned vacation bank
 - Banked Stat/Floater Stat
 - Earned Sick Bank/Salary Continuance
 - Personal Leave Days
 - Date of Hire

35. Will staff be required to relocate?

- AHS employees who transfer to PCA are not required to relocate to another city or town.

36. If I am a new employee on probation with AHS, will my probationary period continue when I transfer to PCA?

- UNA, HSAA, AUPE ANC, and AUPE GSS have each reached agreements with AHS to deal with these scenarios. Joint union/AHS FAQs will address this.



37. I am currently being accommodated and my position has been identified to transfer to PCA. Will my accommodation continue?

- Yes. Accommodations currently in place will continue after transfer to PCA. Accommodations will continue to be guided by the Workplace Accommodation Policy and Workplace Accommodation Process Guide.

38. Will my vacation time be honored once I transfer to PCA?

- Yes. Primary Care Alberta intends to honour any previous pre-approved vacation. There may be extenuating circumstances where vacation may need to be reviewed but these will be addressed at an individual or department level. All provisions of collective agreements and the AHS Vacation Policy will be applied.

39. Will my remote-hybrid work arrangement continue?

- Yes. The Remote-Hybrid Work Arrangement policy will apply to Primary Care Alberta.

Operations

40. Which organization will pay for different types of patient care, or support services?

- There is currently no need to implement any billing between organizations. Corporate and clinical support services are handled through formal agreements (such as, but not limited to, Transition Services Agreements, Cooperation Agreements, etc.), which will allow the continuation of services currently performed.

41. [UPDATED] If we run into challenges between AHS and PCA after the launch on February 1, 2025, what do I do? How do I escalate questions from the front line, 24/7?

- Questions arising from frontline staff should be escalated using existing channels.

42. How will PCA deal with patient feedback or complaints?

- The Patient Relations Department in AHS will continue to provide services to Primary Care Alberta through a transition services agreement. This includes the operations and directly working with patients and families through the patient relations intake process, commendation management and concerns management.

Physicians and Clinics

- Whether Alberta Health Services retains operations, or operations shift to Primary Care Alberta, all acute care and primary care services currently offered at Alberta Health Services or Primary Care Alberta-operated clinics will be maintained.



43. How do primary care health programs, services, physicians and staff fit into PCA?

- While there are no immediate impacts, over time, Primary Care Alberta will help streamline process and coordinate services so providers can focus on caring for Albertans.
- Primary Care Alberta will not assume ownership or management of existing independent family practices, set compensation for primary care practitioners or direct physicians on how they organize clinics or provide care.
- As needed, Primary Care Alberta will establish cooperation agreements with AHS to ensure that staff can be shared between sectors and that operations can be maintained.

44. What does this change mean for physicians?

- Most physicians working in primary care clinics will not experience any operational changes with the transfer to PCA on February 1, 2025. Their work will not change.
- For physicians who currently work in an AHS clinic (including a virtual clinic) that will transfer to Primary Care Alberta, no action is required aside from continuing to provide the great patient care they always have.
- Clinic staff employed by AHS will be employed by Primary Care Alberta effective February 1, 2025. The only change staff will experience is conversion of their AHS email address to a Primary Care Alberta email address. Otherwise, operations, processes and systems will remain the same.
- For physicians with contracts that include primary care functions, the contents of their contract will likely not change. All AHS contracts are in review to determine next steps, and more information will be shared once available.
- Additional details:
 - AHS-granted **Medical Staff appointment and clinical privileges** will continue to apply. Primary Care Alberta will be adopting the AHS Medical Staff Bylaws. Physicians do not need to apply for Primary Care Alberta privileges and none of the existing privileges are being removed.
 - Physicians paid by **billing Alberta Health for fee for service** will continue to do that just as they always have.
 - Physicians in **a clinical ARP with payments coming from AHS** will continue to receive those payments. The terms of the clinical ARP (scope of services, funding rates, etc.) have not changed.
 - AHS continues to provide corporate services to Primary Care Alberta. This includes finance services. **If AHS has been making payments to physicians** for work done in primary care clinics, these will continue to the same bank account and appearing from AHS as they already are. If physicians wish to change their banking information, they can continue to contact AHS Accounts Payable just as they always have.



- **Physicians will continue to have the same access to Connect Care and any other IT resources** they currently do. They will still have an AHS IT provided email inbox. Usernames and passwords do not change. If staff have a remote token, they will continue to have that remote token.
- For physicians who park at an AHS site, nothing changes. **They can continue to park just as they have been already.**

45. What will change for clinic staff on day 1 with PCA?

- On February 1, 2025, clinic staff will not experience any significant changes beyond their AHS email address becoming a PCA email address. January 31, 2025 and February 1, 2025 will largely look the same.
- Staff will continue to access corporate and clinical support services through AHS.
- There may be changes in reporting structures for teams where their senior leader is staying with AHS or where there is somewhat of a functional split. In these cases, staff will be supported with information and resources.

46. What happens to clinic contracts during the transfer to PCA?

- As part of the preparation for PCA operational day 1, clinic contracts will be reviewed to identify contract assignments from Alberta Health Services to Primary Care Alberta.
- Most terms and conditions of contracts will not change as part of this transition. In many cases, PCA will take on the responsibilities in the contract that were formerly AHS'.

47. Is clinic funding impacted through the transfer to PCA?

- All existing funding and resource-sharing arrangements will remain in place. PCA will replace AHS in these agreements.

48. What is happening with the East Edmonton Clinic?

- Clinic operations at the East Edmonton Health Centre are not changing.
- Whether AHS retains operation, or operations shift to Primary Care Alberta, all acute care and primary care services currently offered at the East Edmonton Health Centre will be maintained.

Primary Care Networks

49. Are PCN staff affected by the transfer to PCA?

- AHS staff identified for transfer to Primary Care Alberta who currently provide support to PCNs will continue day-to-day operations and business as usual with no disruption to work throughout the transfer.



- In cases where agreements exist between AHS and PCNs, agreements will be maintained whether they are transferred to Primary Care Alberta or maintained by AHS. Agreements will be updated to reflect PCA.

50. What happens to PCNs in the transfer to PCA?

- PCN governance will be transferred from AHS to Primary Care Alberta.
- This includes replacing AHS representation on PCN boards with PCA representation. AHS will continue to be consulted to ensure appropriate representation from other sectors to foster integration across the system.
- Once established, new Regional Primary Health Care Networks (RPHCNs) will become a distinct legal entity accountable to PCA.
- Alberta Health and PCA will continue to work with PCNs to inform the design of RPHCNs, and to develop transition plans of how PCNs to RPHCNs will occur. Our expectation is that RPHCNs will build from existing PCNs and will continue to provide essential primary health care services and supports to patient medical homes in their geographic area.
- RPHCNs will focus on meeting the needs of all patients in the area, both attached and unattached.

51. How will PCA work with PCNs moving forward?

- Services and supports provided by PCNs now, and RPHCNs in the future, remain at the heart of how we will ensure Albertans get what they need from a primary health care system.
- Primary Care Alberta is committed to ongoing conversations and sharing the latest information, when appropriate, with PCNs. This includes looking into more consistent and formal ways to work together and ensure everyone has the most up to date information moving forward.

Provincial Midwifery Program

52. How will the transfer to PCA affect midwifery staff?

- The Provincial Midwifery Services team will continue to provide support to midwives and midwifery practices throughout the transfer to PCA.
- PCA will work collaboratively with midwives in the coming months to facilitate a smooth transition through these changes.

53. Who will provide the administrative and operational support needed regarding appointments, clinical privileges, integration of midwifery services within acute care, quality and patient safety, student support services and funding?

- Midwives in Alberta will experience no changes in operational and corporate support. Midwifery staff appointments, privileges, issue and concern resolutions, and billing will



transfer to Primary Care Alberta. Other corporate support such as legal, finance, medical affairs, etc. will continue to be provided by AHS through a Transition Service Agreement.

54. What happens to midwifery clinic contracts with AHS during the transfer to PCA?

- Any existing contracts will stay in place with AHS.

Health Link 811

55. Will Health Link 811 services be disrupted during the transfer from AHS to PCA?

- No. Public access to Health Link 811 services will not change. Albertans will still be able to access service throughout the transfer for non-urgent health care support, advice or guidance.
- Responsibility for Health Link 811 is moving from AHS to Primary Care Alberta as part of Primary Care Alberta's mandate to be the front door of the health system.
- Primary Care Alberta will work closely with all provincial health agencies and service providers to maintain connections between professionals that deliver hands on care.

Health Corridors

56. How do the new health corridors impact Primary Care Alberta?

- Seven new integrated health corridors are being established to support seamless patient journeys: North-West, North-East, Edmonton, Central, Calgary, South-West, and South-East. This change helps government gain a better regional understanding of the health system, determine current gaps, inform investments, and ensure decisions reflect the changing needs of Albertans.
- While the system is moving to the new corridors, AHS will retain its zones for organizational purposes during the transfer. Existing zones will ensure its services reflect priorities for the zones. Health and AHS will work to align the new expectations on corridors as AHS evolves to its new role as a service provider in the coming year.
- Primary Care Alberta was established to improve primary care access, with a strategic approach of addressing this need on a corridor-by-corridor basis.
- Alignment with the new corridors will be an important consideration in the design and implementation of RPHCNs. Discussions with PCNs and other primary care leaders will address this subject in further detail.
- More information can be found online here: [Health corridors map search | Alberta.ca](#)



Information and Technology

57. Will staff be required to obtain new equipment (laptops, cell phones, badges)?

- Staff members who currently use equipment or devices will retain them, but they will receive a new email address (firstname.lastname@primarycarealberta.ca).

58. Will emails change?

- Yes. As of February 1, 2025, staff transferring to Primary Care Alberta will have their email addresses reflect the name of the new organization: (firstname.lastname@primarycarealberta.ca).
- Any emails sent to your albertahealthservices.ca/ahs.ca address following the transfer will continue to be directed to your Primary Care Alberta inbox.
- Your email account and set-up will not change, and you will still have access to all existing emails and folders.
- Regardless of the automatic direction of emails from your AHS account to your PCA inbox, you are encouraged to share your new email address with regular contacts to promote transparency and ensure continuity of communication and service.

59. [NEW] How do Primary Care Alberta staff log into their devices and email?

- Staff will continue logging into devices and emails as they always have.
- Staff who transfer to Primary Care Alberta will be provided with additional information prior to February 1, 2025 if there are any changes.

60. Will we still use the same systems and tools that we do now?

- All the clinical and corporate systems currently in place to support staff, clinicians and our patients will continue to exist in their current form following the transfer to PCA. This includes Connect Care, HR systems (such as e-People), financial systems, and IT and EFAP services.
- Access to AHS network accounts will stay the same, including your username, password, MyLearningLink and access to shared drives. All medical affairs functions will continue uninterrupted with the same support medical staff currently receive from all corporate and clinical operations.

61. How will I access Zoom after the transfer?

- Zoom users that sign in with SSO will be able to sign in without issue and can change their own email address in their profile. The generic accounts that are changing to ask@primarycarealberta.ca will need to submit tickets through the IT portal to have their email addresses changed and will receive automatic notification when the change is done. There should be no impact to accounts as the only change will be the sign-in address.



62. Will Connect Care access be impacted by this transfer?

- There will be no impact to Connect Care throughout the transfer to PCA.

Updates and Communication

63. I missed the town halls and announcement on PCA. Are they available online?

- The town halls were recorded and are available at alberta.ca/shape-the-way.

64. How will health information sharing be managed going forward?

- Health information as it relates to patient care can flow between Primary Care Alberta and AHS physicians and staff so long as it is treated securely in keeping with the *Health Information Act*.
- As PCA and AHS are independent legal entities, non-clinical information should not be shared unless it is authorized and/or publicly available. If you're unsure whether specific information can be communicated, please discuss with a medical or operational leader before sharing.

65. What can we share with our patients, clients and the public?

- The key point we want our clients and patients to know is that they will continue to receive high-quality care from their care team.
- We will be here for them, as we are now.
- Patients and clients can still access their usual treatment services, the same way that they always have.

About Primary Care Alberta

66. Who is accountable for primary health care in Alberta under the new structure?

- The Government of Alberta Ministry of Health sets policy and direction to achieve a sustainable and accountable health system.
- Primary Care Alberta will oversee the coordination and delivery of primary health care services across the province. Improved access to primary care will help Albertans avoid visiting the emergency department and reduce pressure on hospitals.
- Primary Care Alberta, and other provincial health agencies, are accountable to the Ministry of Health.
- This unified health care system will rely on the oversight of Alberta Health in areas such as integration, patient pathways, capital planning, and other areas that affect all of health care service delivery in the province.
- This improved governance will help the Government of Alberta better direct critical resources to the front lines to support workers and improve patient care.



67. Why are acute and primary care services being set up as a separate entities?

- The creation of Acute Care Alberta (ACA) and Primary Care Alberta will mean a greater focus and improved visibility for acute and primary care services. This reflects a strong commitment by the Government of Alberta to these vital areas of service.
- Alberta is refocusing the health care system with the goal of prioritizing patients and empowering front-line professionals. This refocus will result in the creation of dedicated health organizations, two of which are Acute Care Alberta and Primary Care Alberta.

68. What is the first task at hand for Primary Care Alberta?

- Primary Care Alberta will begin to develop a governance framework for primary care, and work with stakeholders in the primary care community as it begins its work.
- The agency will also be working to implement supports to reduce administrative burdens in clinics and develop patient and family navigation tools.
- includes identifying specific functions and areas of focus aligned to Primary Care Alberta.

69. Will this change the way Albertans access primary care services?

- No. Where or how Albertans access primary health care services will not change.
- Patients will still go to a family doctor, walk-in clinic or other primary care provider for checkups and help with general health concerns.

70. How will PCA benefit Albertans and service providers?

- Primary Care Alberta will coordinate and deliver primary health care services across the province to give Albertans improved access to key primary care services so they can avoid visiting the emergency department or be over-reliant on acute care services.
- PCA will be tasked with ensuring every Albertan can be attached to a primary care provider and will help ensure Albertans and their families have access to high-quality services that support their day-to-day health needs through every stage of life.
- Over time, the agency will improve access to primary care services enabling providers to focus on health care delivery in a more modern, responsive, and unified health system.
- Primary Care Alberta will focus on achieving key outcomes, including:
 - ensuring every Albertan will be attached to a primary care provider team
 - supporting an integrated team of health professionals to provide comprehensive primary care, including family physicians, nurse practitioners and pharmacists, that has appropriate access to patient health information
 - providing timely access to high-quality primary care services, including after-hours, specifically in rural and remote areas in Alberta
 - improving access to virtual and digital health service



- Additional PCA priorities include:
 - Incentivizing care models to improve patient experience and health outcomes.
 - Setting primary care standards so Albertans have consistent services and the system is held accountable.
 - Developing models that reduce the burden of chronic disease on patients and the health care system.
 - Enabling physicians to lead their peers through change through engagement and leadership opportunities.
 - Providing tools to primary care providers, such as enhancing the current Find a Doctor website and e-Referral, to streamline processes for both providers and patients.

71. Timeline-wise, when exactly do you hope Albertans will start to see real change in their primary care?

- It will take time to build capacity in the system.
- Primary Care Alberta became a legal entity as of November 18, 2024, with the goal of having more Albertans' attached to a primary care provider.
- The transformation is ongoing, with efforts to improve access to primary care delivery in underserved communities, specifically rural and remote areas.
- PCA will be working with Alberta Health and AHS over the coming months to fully establish its operational responsibilities.
- Change has already started with the implementation of the MAPS recommendations such as: improving supports for vulnerable Albertans by investing \$30 million into four community health centres, creating a task force with the Alberta Medical Association to provide recommendations on a new payment model for family doctors, and establishing the PCN Nurse Practitioner Support Program.
- In Year 1, primary health care in Alberta will continue to improve and provide Albertans with additional attachment and access to primary health care.
- In Year 2, the organization will see continued improvements in the primary health care system in Alberta.

Engagement

72. The refocus initiative has done many engagement sessions with health care professionals – what are the top concerns that have been voiced?

- Many health professionals attended the first round of public engagement sessions from January through April 2024. Their concerns are included in the public feedback that Alberta's government received.



- A comprehensive [What We Heard report](#) is available at alberta.ca/lead-the-way. The top themes that government heard from Albertans included:
 - access to care
 - ongoing communication and transparency
 - supporting and sustaining the health care workforce
 - unique needs in rural, remote and Indigenous communities
 - local decision-making and empowerment
 - accountability of the health care system
 - system integration and coordination

73. How have those concerns been addressed in the stand up of the provincial health agencies?

- The stand up of the provincial health agencies provides the framework for clear accountabilities in the provision of health care to Albertans. It will take time for these frameworks to be implemented, but their establishment is a major step in the right direction.
- For instance, before the stand up of Primary Care Alberta, there was no direct accountability for ensure Albertans have access to primary care services.
- Primary Care Alberta is now specifically responsible for an unattached patient strategy – essentially creating a path to addressing the access challenges that currently exist.

74. What was the mood of Albertans during engagement sessions? (Are they looking forward to the refocus being fully operational or are they skeptical?)

- Throughout the duration of all 65 in-person public engagement sessions, the participants expressed gratitude for the process, for being heard and for having a place to provide feedback.
- While some were skeptical at first, they expressed the process was helpful for their understanding.

75. How can I stay up to date with refocusing news?

- Engaging with health care professionals, patients and all Albertans is vital to refocus the health care system. The input, experiences and feedback Alberta’s government gathers will help create a more effective and efficient health care system.
- A second round of in-person public engagement is planned for winter/spring 2025 to share information and receive feedback about the refocusing work. Details on future sessions will be posted on alberta.ca/leadtheway.
- Those interested in keeping up to date on the health system refocusing work and new engagement opportunities can also sign up for an e-newsletter at alberta.ca/health-care-refocusing-newsletter.



- Questions about refocusing the health care system can be submitted directly to Alberta Health online here: [Refocusing health care in Alberta | Alberta Online Engagement](#)

Refocusing Health Care Initiative

76. What is the status of the refocusing health care initiative?

- Since announcing plans to refocus Alberta's health care system in November 2023, significant progress has been made in several key areas.
- Under Alberta's refocused health care system, four fully integrated provincial health agencies will be created to oversee the priority sectors of primary care, acute care, continuing care, and mental health and addiction.
- Two of the provincial health agencies, Recovery Alberta and Primary Care Alberta, have been established with input from more than 30,000 health care professionals and Albertans.
- **Primary Care Alberta** is the provincial health agency responsible for overseeing the coordination and delivery of primary health care services across the province. It is a legal entity under the leadership of CEO Kim Simmonds as of November 18, 2024 and will work to implement its mandates, develop operational plans and set vision and mission. Goals include:
 - Increasing Albertans' attachment to a care provider team through new models of care
 - Increasing after-hours services
 - Improving access to virtual and digital health services
 - Improving access to primary care delivery in underserved communities, specifically rural and remote areas
 - You can learn more by visiting primarycarealberta.ca.
- **Acute Care Alberta** is the provincial health agency responsible for acute care and will be a legal entity in early 2025, and begin operating in spring 2025. It will work closely with acute care providers to speed up access to quality-care and achieve key outcomes including:
 - Shorter wait times for emergency departments and surgeries.
 - Lower emergency medical services response time.
 - Higher-quality care across the province and enhanced access to care in rural areas.
 - The Acute Care Provincial Health Agency Executive Transition Team has been established to support standing up Acute Care Alberta.
- **Recovery Alberta** is the provincial health agency responsible for recovery-oriented mental health and addiction services and correctional health services. It is operational as of September 1, 2024. Services are available through this provincial health agency. You can learn more by visiting recoveryalberta.ca. Recovery Alberta will focus on:
 - Ensuring every Albertan struggling with the disease of addiction and/or mental health challenges is supported in their pursuit of recovery.



- Providing Albertans with access to a full continuum of recovery-oriented supports that help them improve overall well-being and sustain recovery.
- Improving mental health and addiction care for Albertans by further expanding access to treatment and recovery supports across Alberta.
- The **Centre of Recovery Excellence, CoRE** began operations in June 2024 and is leading recovery excellence by informing best practices, conducting program evaluation and analyzing data to support the development of objective and practical policy. CoRE's mission is to empower recovery through data and analysis with a focus on:
 - Research and evaluation
 - Data and analytics
 - Expert advice
 - Guidance and leadership collaboration
- The department of Mental Health and Addiction and Recovery Alberta will work closely with CoRE to advance the mental health and addiction system in Alberta.
- The Ministry of Health is working with the Ministry of Seniors, Community and Social Services towards the **standing up of the new continuing care provincial health agency**. The new continuing care provincial health agency will provide provincial oversight and coordination of continuing care service delivery. This will renew patient focus and create equitable, consistent and timely access to continuing care services. All operators, including Covenant Health, will continue to deliver services under contract with the new agency. The continuing care provincial health agency will ensure:
 - Equitable, consistent and timely access to continuing care services.
 - Increased number of beds to meet the needs of Albertans with a focus on equitable access across the province.
 - Improved team-based cross-sector care leveraging other health and social service.
 - The agency will continue the work to add more continuing care spaces, attract and retain health care workers, advance innovative solutions and support you as you choose where and how you'd like to live.