

Regional networks transition update

The next steps for the transition of Primary Care Networks to regional networks were unveiled in a town hall held earlier this week.

Hosted by the Ministry of Primary and Preventative Health Services (PPHS), it outlined a plan for seven regions, one of which will be <u>Calgary</u>, to "evolve" from existing PCNs, with "staff, assets and services" continuing into the new structure. Highlights included:

- Regional networks will be established as Provincial Health Corporations that operate "at arm's length from government."
- They will have autonomy over operational decisions that align with their mandate and the flexibility to structure business and clinical teams to meet local needs.
- A board of directors responsible for strategic governance will be established in each region. It will include one-third physicians, one-third other regulated health professionals and one-third public members, as well as at least one Indigenous representative. Boards will be co-led by rural and urban co-chairs.
- A CEO will provide operational leadership for the region. Other key roles will include a medical director and chief financial officer.
- Patient medical homes will continue to deliver primary care services, with support from networks.
- PPHS will define mandates, standards and reporting requirements, while Primary Care Alberta will provide oversight and performance measurement.
- A transition group or committee will be established for each region. PCNs will help support the development of transition plans.

Regional transition meetings with PCNs will be held in August, and legislation to enable the standup of regional networks as legal entities is expected in the fall. Timelines for the operational transition of PCNs to each network are not yet confirmed. In the meantime, it is "business as usual," with a focus on ensuring minimal disruption to services. For more information, please email health.MAPS@gov.ab.ca.

Regional advisory councils: A total of 14 regional advisory councils will allow Albertans to offer a local perspective on improving the healthcare system. Members will include healthcare workers, community leaders, Indigenous and municipal representatives, and others with a strong tie to their region. More information.

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Pathway updates

Updated versions of four pathways have been added to Specialist Link. They are as follows:

- High-risk rectal bleeding pathway for CRC diagnosis
- Iron deficiency anemia (IDA) pathway for CRC diagnosis
- Child and adolescent ovarian cyst pathway
- Knee primary care clinical pathway

Hematology advice for adult patients: The hematology tele-advice line offered through Specialist Link is now called Hematology (adult) to reflect that the service is intended only for adult patients. Questions about pediatric patients should be directed to the Alberta Children's Hospital, via 403-955-7211. Review the <u>updated FAQ</u>.

Lab bulletins: Result delays

Due to an instrumentation upgrade, there is a delay in lab test result reporting for Calgary Zone. Changes at the Clinical Biochemistry Hub Lab mean a typical 24-hour turnaround for routine chemistry and immunoassay tests will now take up to 48 hours.

If possible, please have patients present for outpatient blood work at least 48 hours before results are needed. The delay is expected to last until September 2025. More information.

UTM, VTM collection process changes: Effective Friday, August 1, all samples submitted to labs in expired universal transport medium (UTM) or viral transport medium (VTM) will not be processed. Please check the expiry date. <u>More information</u>.

Anaplasma Phagocytophilum changes: The acceptance criteria for serology and molecular (PCR/NAT) testing for Anaplasma phagocytophilum has changed. More information.

Reminder: Delays in urea breath testing: Alberta Precision Laboratories is temporarily referring all Urea Breath Tests (UBTs) out of province to Dynacare. <u>More information</u>.

Panel conflict resources

New resources are available to help physicians and teams enrolled in the Primary Care Physician Compensation Model (PCPCM) address panel conflicts.

Conflicts can impact the patient's care, and starting in April 2026, it could also impact physician compensation.

The Alberta Medical Association's Accelerating Change Transformation Team (ACTT) has developed a <u>conflict management process</u>, a <u>fax template</u> for communicating with conflicting clinics, a sample telephone script for <u>conflict calls</u> and other tools. <u>More information</u>.

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Measles resources

Measles resources are available to support primary care providers and clinics. They include the following:

- Measles resources for providers document
- Local exposure location information
- Case numbers
- Lab bulletin: <u>Specimen collection pathway</u>
- Printable poster for clinics promoting vaccination
- Measles 101 fact sheet; fact sheet for parents
- Childhood immunization dashboard

When Alberta patients text "measles" to 88111, they'll receive measles information from Health Link, including details on causes, immunization and treatments.

A reminder that all practitioners in the Calgary Zone are advised to consider measles in undervaccinated individuals presenting with a febrile illness. A measles hotline is available at 1-844-944-3434. Physicians can also report suspected and probable cases to the physician reporting line at 1-844-343-0971 (option 1).

Quick links

CPSA annual report

The College of Physicians and Surgeons of Alberta (CPSA) has released its 2024 annual report. Read the report.

Alberta Virtual Pain Program webinars

Providers are invited to attend two-hour virtual webinars to learn more about the latest evidence in chronic pain treatment for adults.

- Friday, September 12, 9–11 a.m. Register.
- Tuesday, October 7, 5–7 p.m. Register.
- Thursday, November 20, 3–5 p.m. Register.
- Tuesday, December 16, noon–2 p.m. Register.

Quality dimensions for health

Health Quality Alberta has released a renewed, evidence-based definition for healthcare quality, marking the first update to this important concept in nearly 20 years. The definition includes seven dimensions of quality: people-centered, accessible and timely, safe, equitable, integrated, effective, and efficient and sustainable. More information.

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Procedures for chest, breast pumps, lactation support

CPSA has identified that physicians and clinic staff could benefit from information regarding the proper use of chest and breast pumps, and lactation support equipment. Review the FAQ.

PPIP webinars

On Wednesday, August 27, from 6–7:30 p.m., the next session in the AMA's Physician Practice Improvement Program (PPIP) series focuses on learning the ins and outs of billing, liability and patient location as part of quality virtual care. Register.

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