

October 13, 2020

Mr. David Harrigan  
Director of Labour Relations  
United Nurses of Alberta  
700, 11150 Jasper Avenue NW  
Edmonton, AB T5K 0L1

Dear David;

This letter is to advise that today the Government of Alberta will be making an announcement on a number of initiatives from the AHS Review implementation plan that will be proceeding that may impact the AHS workforce and specifically the Direct Nursing bargaining unit. We are writing to provide additional disclosure in accordance with our legal obligations.

In our November 29, 2019 letter to you, we had previously noted the AHS Review as follows:

*AHS Review:*

*Ernst & Young has been contracted by the Government of Alberta to conduct a comprehensive review of all AHS, AHS Subsidiaries and Alberta Health operations from back office functions to the frontline. This work is expected to be completed in December 2019 and recommendations presented to the Government of Alberta shortly thereafter. There is the potential a number of initiatives may come from the recommendations to Government that AHS will have to review and/or implement. More detail will be coming to AHS in the coming months. Plans will be disclosed as soon as possible.*

The report by Ernst & Young that was publicly released on February 3, 2020 contained recommendations and opportunities to assist AHS in achieving greater value for healthcare dollars spent in Alberta. It recommended the development of an implementation plan by AHS to set out an achievable plan towards greater health system sustainability. The implementation plan was initially due May 15, 2020 but work was delayed and impacted by the onset of the COVID-19 pandemic. The implementation plan due date was changed to August 13, 2020 and AHS has been working with the Government of Alberta since to identify initiatives to proceed. With today's announcement by the Minister of Health, AHS now has approval to proceed with certain initiatives.

We are providing as much information as is available at this time. The impacted workforce numbers provided below are estimates based on projected implementation plans. We will continue to disclose additional information as implementation work proceeds in accordance with AHS' legal obligations.

All initiatives will be implemented in accordance with legal and legislated obligations. In some cases, it may be 3 to 10 years before these initiatives are fully implemented.

The following initiative will be proceeding and is an opportunity identified to address savings and efficiencies in the health care system, and/or changes in services to better serve patients and families:

- Chartered Surgical Facility procedure expansion – estimated impact 15 FTE (20 headcount)

In addition, we wanted to note that there are no plans at this time to proceed with these previously disclosed initiatives and will advise you if this changes:

- Outsourcing home care services
- Reconfiguring services at smaller sites
- Closing acute care beds as continuing care beds open
- Reducing clinic visits in all Zones by targeting those that could move to non-hospital facilities.

With the Letter of Understanding between AHS and UNA expiring on October 15, 2020, Operational Best Practice (OBP) implementation will continue in accordance with all processes available under the current collective agreement with estimated FTE impact remaining at the previously disclosed 500 FTE (610 headcount). This will include a review and optimization of AHS learning that is estimated to impact 35 FTE of clinical nurse educators (35 headcount), as well as surgical volume increase and operating room optimization that is estimated to impact 20 FTE (20 headcount).

If an initiative is not addressed in this letter, but was previously disclosed in our November 29, 2019 letter it is proceeding in accordance with AHS' collective agreement obligations.

As noted in our November 29, 2019 letter it is still anticipated that there may yet be other initiatives identified through our usual management and review of our operations and any workforce impacts will be disclosed as required and implemented in accordance with AHS' collective agreement obligations.

Please note that any of the above estimated FTE impacts may include those employed by Covenant Health. Additional information will be provided by Covenant Health in due course if applicable. We agree to provide additional clarity on this piece when known as the initiatives proceed.

We would welcome the opportunity to meet at your earliest convenience to discuss these initiatives in more detail. Please let me know of your availability to do so.

Sincerely,



Lee McEwen  
Executive Director  
Negotiations and Labour Relations