

Did you watch the Alberta UCP announcement on healthcare? As usual, it is not what you think it is. AHS is certainly dysfunctional and needs to be seriously re-evaluated at every level. Never has this been more apparent since the response to COVID pushed a system already in crisis onto life support. But this announcement does nothing to address the acute failings. In fact, the UCP's strategy was a minefield of misinformation and false promises. Another government reshuffle costing millions and achieving nothing but confusion. Adding more layers of bureaucracy in the fallacy of 'safety' will be a death knoll to the entire organization (and Alberta).

In my opinion, (based on a preponderance of evidence I have amassed, known to the Premier, Justice Minister(s), Health Minister(s) and so many more), this is not about breaking up AHS (their plan does not do that). It is more about hiding the crimes of the last 4 years while pushing a perception of a 'Brave New World'.

This allegedly sets up four NEW distinct but disparate organisations covering multiple disciplines where there isn't such a clear separation in these areas of healthcare. The first of these new 'organizations/ministries' (Continuing Care Organization) is not expected to be operational until Spring 2024. When did you last see a government project on time or on budget? The main 'Organization' (Acute Care Organization) i.e. (AHS/Covenant Health) is not expected until the end of 2024 (at the earliest). In fact, the 'promise' is a two-year project (which takes us to the end of 2025 and very close to another election).

So how would this 'new' structure work?

Let us take an elderly early-stage dementia patient. If they are in a Capital Care facility, which department covers their daily care, primary care (doctor), emergency care needs (onsite paramedic for IV or other on-site services), mental health needs, lab work or medical imaging (CT, X-Ray etc.)? Ask those same questions about a young amputee that as a result of bad pain management ended addicted to drink or drugs and is in a long-term care facility? Also, who bills who? Currently Long-Term Care (LTC) is covered part by the resident and part by Alberta Health. How will this work moving forward? The promise is only that you won't pay for a doctor or acute care... nothing about Long Term Care etc.

It also sets up 12 'new' Health Advisory Councils, and a 'new' Indigenous Health Council. We already have all of those. This, in reality, is just a renaming of existing organisations. The Indigenous Health Council was called the Wisdom Council (supported by The Indigenous Wellness Core that was effectively shut down over the Deena Hinshaw debacle in mid 2023 that still has no real answers).

Everything that was suggested in the announcement can be done today (and always could) under the authority of the Health Minister and the Provincial Health Act. In fact, it is the legal obligation of the Health Minister to have been doing this (and more) all along.

This plan will save money though with the government running things... won't it? They did such a good job buying PPE (40 million masks for McDonalds et al.) and the fake Turkish Tylenol (another \$80 million fiasco which no one has answered for).

Danielle Smith confirmed in the announcement that AHS is the largest provider of services and will continue to provide those services - but now as a CONTRACTOR. This is a specific admission that up to this point AHS was a direct report to Alberta Health. This 'new' position creates a separation from the Alberta Health Minister to allow the government to use the defence they tried during COVID when asked for Disclosure of information. Now AHS will truly be a Third-Party making Disclosure an impossible task (contrary to the Provincial Health Act expectations). This will be the same for ALL of Health Care now, so good luck ever getting to the truth as this change happens. THIS IS BY DESIGN.

Part of AHS assets is the new Norwood facility (Gene Zwozdesky Center) - the largest construction project by Capital Care and AHS in recent history - DURING THE 'PANDEMIC'! This one location is set up to provide Long Term Care, Acute Care, Specialist Primary Care Services, Lab services and Mental Health Care (dementia patients etc). The plan would put this one location under four new organisations as a private Third Party 'contract service provider' (not subject to government disclosure). Wash and repeat for many other locations.

AHS will still exist doing the same things but now specifically as an external contractor to create a firewall for the government. Alberta Precision Labs (APL) was just handed all the private labs in Alberta. Did you know AHS OWNS APL? AHS also owns Capital Care and Carewest (Continuing/Long Term Care). The other main service provider is owned by the Catholic Church (Covenant Health) who run similar services to AHS (including Acute Care Hospitals).

If there is an issue, who do you call?

AHS was selling Capital Care in 2019 and then switched to building the new Norwood building which has become the Capital Care HQ.

Most of the avoidable deaths in the last 4 years happened in Care Homes. Now the Alberta Government is going to not only bury the bodies (even as they continue to pile up), but they will also be cheered on as heroes as they do it.

<https://dksdata.com/ExcessDeaths>

How does this align with buying all the private labs in Alberta and giving them to AHS (APL is a wholly owned subsidiary of AHS) for millions just a couple of months ago? Sadly, people will not see through any of this because it doesn't impact them and they will not do any research of their False 'Profits' and 'Saviours'.

<https://dksdata.com/Care>

All of this will just ensure more corrupt people become richer as more money passes behind the scenes. Covering up crimes for them and ensuring the next wave of deaths continue behind closed doors.

<https://dksdata.com/Care>

What has Danielle achieved since she was elected? Not said she has done, but actually achieved in relation to her election promises? 80 million unaccounted for fake Tylenol that is now flushed down the toilet (if even delivered). Bought up Dynalife and gave it to AHS, expanded AHS Care Home facilities then 'selling' them/putting them at 'arms length' (for another loss) just to eradicate the data.

The intention is clear in the words she uses over and over. Pushing care at home even when it is not appropriate. This is making it impossible for people to get into a Care Home which will have many resorting to MAID. Since Danielle was elected, they have changed the entrance to Long Term Care to be a two person lift which increases the staffing requirements (on paper) and 'more money' to the 'new' private companies. Kenney had already put in a process to replace AHS staff who were let go with his arrangement with the Philippine government that Danielle has double downed on. Where are the grants and concessions for those healthcare workers who held the line and lost everything as a result? Many of them left just because of masks making their job impossible way before vaccines (something that everyone seems to have forgotten now).

We don't need more reshuffles. We need arrests - on BOTH sides of the aisle. The crimes now being hidden were known all along by both sides of our elected government and nothing was done (or will be done) to address those crimes. Why? Because they are ALL in it together.

Having watched the announcement and dug further (and back to what I know and have evidence of), this is clearly all to protect those who were a party to the crimes, from what they did and will continue to do.

The one thing we had over them was the government was in charge and AHS etc. was NOT a Third Party. With the changes they have just announced, they have made ALL of 'healthcare' contract organizations and Third Parties for Disclosure (without changing the organisations themselves, just adding more government 'Organisations' and government bloat at the top). These new 'Organisations' will be just as unaccountable to the public as the Office of the Auditor General who has already lied to protect this government. Nothing changes but a layer of protection for the government and during the shuffle they will 'lose' all the evidence. It's pitiful to watch. The evidence against this (and the previous) government (and opposition) is unsurmountable. Our Premier is a saviour who pushed the REP and masks in her business

during COVID, ignored the plight of those in Care Homes and pushed the most dangerous vaccine on desperate healthcare workers in 2021. She broke every election promise and is helping to cover up the crimes of those who came before. A Health Minister who is now a hero but was the Education Minister masking children and isolating them for over two years (not AHS). The Justice Minister was Children's Services Minister during COVID, and we have reports from foster parents who were told to vaccinate the children, or they would have them taken from them. THAT WAS NOT AHS. THIS WAS THE GOVERNMENT. Look at the Ministers and then look back at how many are from COVID from the start. They were hated only a short time ago and now they are heroes. Sigh.

And now the Alberta Government lies about vaccines that are demonstrably worse than ever as pharmacies cash in to the tune of millions pushing almost all the vaccines into the arms of Albertans in the most dangerous way possible.

<https://dksdata.com/BenefactBulletins>

All while the reported injuries and deaths are 'rewritten' and Albertan Excess Deaths are one of the worst in Canada or in fact the world.

<https://dksdata.com/ExcessDeaths>

<https://dksdata.com/ONSDATA>

When you scratch the just the surface, it is obvious what is happening.

And where are we today?

My mother in law's building has two units on outbreak now (main floor) and her unit has two isolation carts for people locked in their room. These appear to be new admissions to the Center (but that isn't confirmed yet). Karen doesn't recognize the names so its likely that's another 2 dead on her mums' unit who have now been replaced with another two unwitting victims. And we are back to the tape on the floor as we saw for those isolated in their rooms for weeks starting in 2020.

<https://dksdata.com/Care>

Lastly, the "Secretariat" (The Impossible True Story...). This will be the government behemoth that is designed to fail as its namesake did for policing a decade ago. Those who worked with me at API3 will understand this point.

We haven't moved forward, and we won't. Welcome to the New Normal – Death by Design. Keep cheering it on. And whatever you do, don't look behind the curtain.

After writing this piece, Covenant Health shared a prewritten statement with staff. It confirms all of the above (but with a typical 'positive' spin).

Government of Alberta announcement on health system restructuring - November 8, 2023

November 10, 2023

Frequently asked questions

1. Why is the Government making these changes now?

Today's announcement from the provincial government sets out a new direction to improve our health care system and address pressures on our system. Their goal is a refocused health care system that will improve health outcomes for Albertans and empower health care workers to deliver quality care across the province.

There certainly will be more details to come as plans for implementation are developed, but from our initial understanding and impression, this announcement seems bold and balanced and most importantly focused on patients and community.

2. Is Covenant Health supportive of these changes?

Yes. This is a positive step for areas that have been under considerable pressure for some time now and aligns with where we see needs and where we can add value to the system. We are encouraged by the commitment in this announcement to engaging and listening.

We are an organization founded on compassionate care and hope. That's what we have always offered and it's what we lean into today. Compassionate care for the people and communities we serve and hope that this system reform will provide opportunities for us to move forward with our ambitious agenda of advancing innovative approaches for improving health and health care. We have considerable wisdom that we can contribute to this provincial framework for better outcomes.

3. Does Government understand the role that Covenant Health plays within the system?

Yes and we are committed to working with Government and our partners from different areas of the health system as we navigate this new approach together. While the direction is set, much of how the system can be improved will be informed by consultation and engagement. We welcome the commitment in this announcement to seek advice from patients, healthcare providers and the community.

4. What is the impact of these changes for Covenant Health?

Covenant Health will continue to offer services in the areas of acute care, mental health and addictions, and continuing care in communities across Alberta. Under the new structure, Covenant Health will no longer be contracted and funded through agreements with AHS. It will transition to have direct relationships with the new organizations.

5. What does this mean for the relationships we have people who work at AHS?

Many of us have worked closely with our partners at AHS. It's too early to know all the details of what the refocusing will mean for AHS staff and how their roles will change, but we intend to work closely with them throughout the transition. **Certainly, the continuing role of both AHS and Covenant Health in both acute care, mental health and addictions, and continuing care means we will continue to work in partnership to provide the best possible care for the people we serve.**

6. When can we anticipate seeing changes?

The Government of Alberta has laid out a timeline for this work, which can be viewed here. As you can see from the timeline, it is a methodical process that will allow for time to listen and engage.

7. How will this improve patient outcomes/wait times?

There won't be any immediate changes in the system. **This is the first step in a consultative process over the next 18 to 24 months**, which will start by focusing on five areas: **secretariat, acute care, primary care, continuing care and mental health and addiction**. **Part of the secretariat role will be to act as an agency focused on shared services including procurement, IT services as well being a single source for information management for the entire health system in the province.**

The long-term goal is to drive excellence in acute care and move mental health and addiction, seniors care and primary care out of the acute care setting into the appropriate care settings based on unique individual patient needs.

As Covenant Health, we have many opportunities to be engaged in this process. It is important for each of us, not only those in leadership positions, to participate in the process as we reimagine health care in Alberta.

Covenant Health has always been a beacon of compassionate care. During this period of system reform, which will inevitably bring uncertainty, our top priority and our primary focus remains caring for our patients, residents and each other.

8. What will happen to AHS?

From what we understand today, AHS will transition from a regional health authority to a service provider in the same way that Covenant Health is now.

9. What is the role of the newly announced Board?

The AHS Board will become a transition board as the new system is built.

10. What will happen to the Covenant Board?

At this time, we don't anticipate any changes for the Covenant Board.

11. Does this Impact any of our operations?

Today's announcement from the provincial government sets out a new direction. There certainly will be more details to come as plans for implementation are developed. We'll comment on specifics of how the framework will impact operations after completing a detailed review to assess the implications for Covenant Health.

12. How does this change our reporting structure?

There will be changes to our reporting. Based on our operations we will report into the newly appointed acute, continuing care, addictions and mental health boards.

13. How can I participate in the Government town halls?

Information is available here on when the sessions are being held, and how to register, as well as recordings of previous town halls.

14. Where can I find more information?

We are committed to keeping everyone informed as we learn more. Updates will be provided as new information is available.

If you have further questions, please speak with your manager or email the Office of the CEO (Covenant) OfficeoftheCEO@covenanthealth.ca.