

Good evening and thank you to everyone that is coming out today to discuss issues of importance to our community. I apologize that I am unable to attend, but I did want to provide this statement to ensure you all had a chance to hear from me.

When I ran here, I ran because Livingstone-Macleod is my home. I care deeply about this area, and always want to see the best for it. I think that the characteristics of this riding as well as the heart of the people within it perfectly encapsulate so much of what makes Alberta a great place to live, work and raise a family. We are fortunate to call this corner of the province home, the best of Alberta is on display here.

Because of that, I am passionate about being a strong advocate for this area. I want to encourage you to reach out to my office and book a meeting if you want to discuss any issue, including the ones to be discussed today. My job is to bring your views and concerns to the Legislature and I take that role very seriously.

I've met with a large number of physicians regarding some of the current issues with the AMA agreement and I appreciate the feedback I've gotten. I've been in constant, ongoing discussions with the Health Minister's Office, as have many of my rural colleagues, regarding the new physician funding framework. I have learned that this is a complex issue, and continue to work to have a better understanding of the process, negotiations and the relationship between Alberta Health, AHS and the AMA and how that affects care here in rural Alberta.

I want to address some of the concerns I've heard the past couple weeks from constituents.

Any rumours of particular facility closures can be dismissed as just that: rumors. There is no planning underway for significant changes to any of our health facilities here in Livingstone-McLeod. The report done by Ernst & Young on the AHS Review does not recommend changes in Pincher Creek or any other specific site, and Minister Shandro has directed AHS and his Ministry that there are to be no hospital closures.

The EY report does note that a number of smaller hospitals have low patient volumes, especially in emergency and obstetrics, *according to AHS's own existing standard for patient safety*. The report recommends AHS continue to assess those services and make changes as required, as they do now.

AHS's mid-May implementation plan is not going to include announcements of changes at specific facilities. The timeline for any such changes would be much longer, and if there are changes contemplated, the staff and doctors, the community, and the local MLA will all be involved.

Thank you all for listening and taking the time to be here this evening.

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