



April 16, 2024

Attention: Honourable Adrianna LaGrange
Alberta Health
10025 Jasper Ave NW
Edmonton, AB T5J 2B8

Attention: Athana Mentzelopoulos, President and CEO
Alberta Health Services (AHS)
Seventh Street Plaza
14th Floor, North Tower
10030-107 Street NW
Edmonton, AB T5J 3E4

Dear Minister Lagrange and Ms. Athana Mentzelopoulos:

Re: Healthcare Crisis for Neonates and Children

Our most vulnerable and frail patients, neonates and children, are at risk. The Neonatal Intensive Care Units (NICU) in the province are in crisis. A safe capacity for units like these is 80-85% occupancy, to allow for emergencies to come in. However, the Edmonton units have been frequently working at 95%-102% capacity (30% of the time in the first three months of 2024); practically, this puts babies at risk. The nurses are caring for too many babies at one time and this results in frail, underweight infants not being able to even eat on time. The semiprivate layout of most NICUs does not allow parents to stay with their babies. Only two out of 69 beds in the outdated Royal Alexander NICU are a single patient room. There are nine care-by-parent rooms, but the bulk of these are semiprivate. One can imagine how difficult it would be for parents to be forced to be away from their baby during this precarious time.

While capacity and workforce are the main drivers for the whole healthcare system crisis, below are some of the main drivers for the neonatal section.

- Studies have suggested that 20-30 beds were needed in 2016. Seven years have passed and there have been no bed increases. Meanwhile, the population has increased resulting in safety concerns, moral distress, and mandatory overtime.
- In 2022 and again in 2023, briefing notes were submitted to Alberta Health sounding the alarm for urgently needed beds, staffing, transport teams, and pediatrics/neonatology teams. These have largely been ignored.



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- The intent to add six new beds in the zone has resulted in net zero new beds. The Sturgeon NICU had six beds open to address the critical need, but because ongoing funding could not be secured, beds were closed at other sites where they were already facing their own capacity issues.
- Lack for Tier 1 support, healthcare providers giving overnight coverage in hospitals, is an issue across the zone and we feel that AHS and Covenant Health need to be held accountable for the crisis. The pay and working conditions offered for clinical assistants is not competitive in comparison with other provinces, work restrictions have been imposed on these providers without consultation, and mechanisms to attract and recruit have been a failure.
- Lack of funding for nurse practitioners is also of concern. Currently only temporary band-aid shifts are made for them instead of creating and filling long-term positions.

These babies have nowhere else to be cared for and we believe the situation has become so critical that deaths of infants may soon follow. Without sufficient healthcare teams, NICU beds cannot be utilized and service disruption is highly likely. Economically, closing beds would result in huge costs of transferring these babies to other hospitals or even other provinces if enough supports are not made available. We are asking that meaningful attention be paid to the province's littlest patients.

Sincerely,

Dr. Manpreet (Mona) Gill
President, Edmonton Zone Medical Staff Association

Dr. Amber Reichert
Neonatologist, Member, Edmonton Zone Medical Staff Association

Cc:
Dr. Paul Parks, President, Alberta Medical Association