

Organization Lobbyist Registration - Semi-Annual Renewal

OL-11780-03 - Semi-Annual Renewal

Status
Active

Registration Information

Registration Number	OL-11780-03
Type of Registration	Semi-Annual Renewal
Initial Filing Date	26-Jun-2020
Official Filing Date	06-Jul-2021

Designated Filer Information

Organization Name	Alberta College of Family Physicians
Designated Filer Name	Sudha Koppula
Position Title	President
Business Address:	
Street	Suite 370, 10403 172 St
City	Edmonton
Province	Alberta
Postal Code	T5S 1K9

Lobbyist Information

Current Lobbyist Information

Please state the name of each individual organization lobbyist who is or will be engaged in lobbying activities on behalf of the organization.

Name	Title
Vishal Bhella	Past President
Terri Potter	Executive Director
Cathy Scrimshaw	Medical Lead, ACFP Collaborative Mentorship Networks
Sudha Koppula	President

Former Lobbyist Information

Please state the name of any individual who was named as a current organization lobbyist in the organization's most recent active registration preceding this return, but who since has ceased to be engaged in lobbying on behalf of the organization.

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Name	Title
Former Public Office Holders	
<p>Has any individual organization lobbyist named in this return become a "former public office holder" within the previous two (2) years?</p> <p>No</p>	
Lobbying MLAs, Executive Council and/or their Staff	
<p>Have any organization lobbyists named in the return lobbied in the previous 6 months, or do any of them expect to lobby in the next 6 months, any MLA or any individual on an MLA's staff?</p> <p>Yes</p> <p>Have any organization lobbyists named in the return lobbied in the previous 6 months, or do any of them expect to lobby in the next 6 months, any member of the Executive Council (includes all Ministers, Associate Ministers and the Premier) or any individual on the staff of a member of the Executive Council?</p> <p>Yes</p>	
Contract for Providing Paid Advice	
<p>Does any lobbyist named in the return hold a contract for providing paid advice to a department or a prescribed Provincial entity?</p> <p>No</p> <p>Does any person associated with a lobbyist named in the return hold a contract for providing paid advice to a department or a prescribed Provincial entity?</p> <p>No</p>	

Organization Information

Organization Information
<p>Does your organization have members?</p> <p>Yes</p> <p>Please provide a general description of the membership of the organization.</p>

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The Alberta College of Family Physicians (ACFP) is a voluntary, professional organization for family physicians, family medicine residents, and medical students in Alberta that is the exclusive voice for family physicians and family medicine in Alberta. It focuses on member services and engagement by supporting family physicians with their continuing professional development (CPD) needs, advocacy, leadership, and primary care research.

Please list all directors of the organization.

Dr. Everett Zdrill
Dr. Vishal Bhella
Dr. Anila Ramaliu
Dr. Douglas Tuck
Dr. Dinesh Witharana
Dr. Noel DaCunha
Dr. Sudha Koppula
Dr. Sonya Lee
Dr. Donna Mumert

Please list all officers of the organization.

Dr. Vishal Bhella
Dr. Noel DaCunha
Dr. Sudha Koppula

Please describe the organization's business or activities.

As the voice of family physicians in Alberta, the ACFP promotes the principles of the profession including being skilled and adaptive clinicians and resources to the community, delivering longitudinal and continuous care across the age and disease spectrum, building trusting relationships and providing care for all Albertans. The ACFP works hard to ensure both the public and government grow in the awareness of the value of family physicians, its vision, and the concrete leadership it provides to support a strong primary care system and implement positive change.

Parent Corporations and Subsidiaries

If your organization is a corporation, does it have any subsidiaries that have a direct interest in the outcome of the organization's lobbying activities?

No

If your organization is a corporation, is it a subsidiary of any other corporation(s)?

Yes

Name of parent corporation

Business address

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College of Family Physicians of Canada

2630 Skymark Avenue, Mississauga, ON L4W 5A4

Funding of Lobbying Activities

Has any individual or organization, during the individual's or organization's financial year that preceded this filing, contributed \$1,000 or more towards your organization's lobbying activities?

No

Government Funding

Has the organization received any funding from any government, government agency or prescribed Provincial entity within the last 12 months?

No

Has the organization requested any funding from any government, government agency or prescribed Provincial entity within the last 12 months?

Yes

Full name of government, government agency or prescribed Provincial entity (no acronyms)

Health Canada (from July-Dec 2020)

Enter amount (numbers only)

\$152,675.36

Lobbying Activity - Previous 6 Months

Description of Lobbying Activities

Subject Matter	Who is Being Lobbied?	Subject Matter Details
Health	Alberta Legislative Assembly Alberta Health	Decision: COVID Vaccine Rollout Discussions, correspondence, and social media chatter continued with high and mid-level government leaders, including MLAs in January 2021 about the potential variability of capacity and willingness within our members to be involved through Alberta's COVID-19 vaccine rollout and the ACFP and its membership's willingness to be partners in the process. The ACFP represents the people who Albertans trust and we need to be able to answer the tough questions that patients have. Family physicians need to be enabled to counsel their patients directly

with the most important messaging and directions on when, where, how, and who should be vaccinated in each phase. Also lobbied about vaccine tracking and how notification for patients who have been vaccinated will be made to their family physicians.

Decision: Negotiations Between Alberta Health and the Alberta Medical Association

We continued to lobby for immediate steps to be taken towards repairing the damaged relationship between the government and family physicians. Trust between government and the AMA, particularly with family physicians has been crushed to the point that it may take significant time to regain what has been lost. Trust is the foundation of all successful relationships and the lack of it in contract negotiations will have a devastating effect on the ability to effectively move forward. The recent loss of service and access to high quality primary and urgent care due to recent budget cuts, many disproportionately targeting primary care has caused clinics to let go of essential employees and resources due to insufficient support for the service levels required. Family physicians are deflated and overwhelmed by recent government decisions.

Program or Policy: Integration of Health and Social Systems

The ACFP continued to lobby for the following: the socioeconomic factors in a person's life affects the resources and tools that they will have to support their health and wellbeing. It is important that the two sectors, both provided by government, should be integrated operationally and strategically. There needs to be work done in community to develop ideas and innovations that can be spread and scaled in the province. Primary Care is positioned to support the local embodiment of this integration however, it should be led by provincial policy and supported by research and innovation programs.

Program or Policy: Building Physician Leadership in Alberta

We lobbied for the need for investment in physician leadership in Alberta, that all high performing systems require high performing leaders. We lobbied for the urgent need to share a clear, compelling vision for

the future of the health care system to build collective action for better care for Albertans.

Program or Policy: Delivery of Support for People Suffering from Substance Use Disorder or Chronic Pain

The opioid crisis remains an active and escalating public health issue that has been shelved in favour of the response to the pandemic. Primary Care is comprehensive and can support the health of a population with a wide range of chronic conditions including substance use disorder. The ACFP continues to support capacity and advocacy efforts to create better health outcomes for those who struggle with substance use or who are at risk of developing addiction. Chronic pain patients can be managed in primary care when there are adequate supports available. The ACFP has a task force that is building a set of recommendations that will build on the opioid response recommendations published in 2017.

Decision: Health Reform in Alberta

We lobbied for the advancement of the quadruple aim optimizing health system performance by simultaneously pursuing four aspects of quality: patient experience of care (including quality and satisfaction), health of populations, reducing the per capita cost of providing healthcare, and healthcare worker experience in providing care. We lobbied for government support, through collaboration with all stakeholders, including family physicians, to advance practice workforce planning and community-based longitudinal patient care. We lobbied for increased effort to build primary care stability and interdisciplinary teams for all communities through the right funding model for rural and urban communities. We lobbied for the integration of health and social systems to optimize resources available and support health and well-being of Albertans with complex and chronic conditions.

Decision: Health Reform in Alberta

The ACFP lobbied for an integrated system response plan for COVID-19 patient care and vaccine rollout and the need for collaboration between public health, primary care, and other community providers; a plan to be in place for mass vaccine rollout that includes the

whole health system; and communication regarding the integrated system response plan to all the partners in the health system.

Decision: Community-based Physicians not Engaged and Supported by the Healthcare System

We lobbied for all supports, services, and resources for all family physicians whether they be located in urban centres or rural communities, emergency departments or clinics, supported by AHS or not, so that in the coming months the risk to patients, providers, and staff in community clinics is minimized and there is a truly collaborative approach to responding to the immediate COVID-19 pandemic and that we learn from this experience so the Alberta health care system is ready for any and all crises to come in the future. We lobbied for engagement and involvement in the vaccine rollout and build awareness of the willingness of family physicians to educate all patients regarding the safety and efficacy of the vaccines, to administer as vaccines become universally available, and to provide compassionate and comprehensive care and follow-up through the pandemic and beyond.

Decision: Negotiations Between Alberta Health and the Alberta Medical Association

We lobbied that Alberta Health reopen their negotiations with the Alberta Medical Association (AMA) to create a renewed physician services agreement that will protect the delivery of sustainable high quality health care to all Albertans, while being responsive to the fiscal challenges faced by the province. Funding framework changes need to be readdressed. The ACFP thanked Minister Shandro when it was announced that a tentative agreement had been reached.

Program or Policy: Implementation of the Patient's Medical Home

We lobbied for the advancement and implementation of the PMH, and ACFP's continued work in the Province and nationally to seek the government's support on how funding might work for team-based care. We advocated for family physicians as leaders at the clinical level and PCN level. The ACFP lobbied

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for support for its members to adapt to change through education, research, and professional development.

Decision: COVID Vaccine Rollout

The ACFP successfully lobbied to have family physicians be advised, in advance, about details of government announcements on COVID-19 updates and the vaccine rollout before details are made public so they could responsibly respond to their patients' questions and be knowledgeable about the next steps. The ACFP also provided to the DMO with questions patients were asking family physicians so the DMO could better understand public needs and concerns. The ACFP also supported via social media the College of Family Physicians of Canada's Statement on role of FPs in vaccination campaign. (<https://www.cfpc.ca/en/family-physicians-are-key-to-canada-s-covid-19-vaccination-rollout>). The ACFP thanked Minister Shandro in early February for acknowledging and agreeing to engage our community-based physicians in the vaccine rollout.

Decision: COVID Vaccine Rollout

Met with Chief Medical Officer, Deputy Minister, Assistant Deputy Minister, and Chief of Staff in March 2021 to advocate for a biweekly call with the Alberta College of Family Physicians to improve on the public awareness of how to navigate through the pandemic and other future crises to ensure all facets of the health care system are connected and working effectively. Discussed where else can family physicians help, how they can use their EMR data to support the triaging of and encouragement to vaccinate and help to make connections within the province where gaps remain.

Decision: Health Reform Focusing on Quality and Sustainability in Alberta

Regarding the overall primary care system, the ACFP continued to offer to work together to advance aligned priorities and encourage all MLAs to reach out to their family physicians and clinic teams in their constituencies to let them know they are supported.

Program or Policy: Public Health Act

ACFP Board members were invited to participate in the Alberta Government's Public Health Act Consultation

Health

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Alberta Health
Premier's Office

and submit direct input or connect with their MLA regarding their concerns and questions.

Program or Policy: Health Professions Act

The ACFP Board provided a detailed response on behalf of family physicians to inform the development of amendments to the Health Professions Act to Improve Regulatory Effectiveness and Efficiency. For each of the 17 proposals, the ACFP stated its support or non-support for each, reasons for its position, other concerns, comments, and qualifications, and ended with a set of general comments.

Program or Policy: Implementation of the Patient's Medical Home

Presented a proposal to Alberta Health re Alberta College of Family Physicians (ACFP) hosted THINK TANK on the Implementation of the Patient's Medical Home (PMH). The PMH model is seen as the desired model for primary care practices in Alberta. ACFP members support this vision. Alberta has made great strides to advance the pillars of the Medical Home becoming one of Canada's leaders in building a high functioning primary care system. Other provinces have looked to us as an example to follow. There remain barriers and challenges to reaching the goal of continuous, comprehensive, team based, equitable, and integrated care in Alberta's communities. We believe that it is possible, but change is needed.

Decision: Health Reform Focusing on Quality and Sustainability on Alberta

The Alberta College of Family Physicians (ACFP) sent a letter to all Members of the Legislative Assembly of Alberta which included a copy of the ACFP's "Where We Stand" (<https://acfp.ca/wp-content/uploads/2020/07/Where-We-Stand-ACFPPositionStatement.pdf>) position statement regarding the overall primary care system. The ACFP offered its willingness to work together to advance aligned priorities. It also encouraged all MLAs to reach out to their family physicians and clinic teams in their constituencies to let them know they are supported.

Decision: Ceased negotiations between Alberta Health and the Alberta Medical Association (AMA)

The College of Family Physicians of Canada and the Alberta College of Family Physicians jointly wrote a letter to Minister Shandro (<https://www.cfpc.ca/en/news-and-events/news-events/news-events/news-releases/2020/cfpc-letter-to-alberta-health-minister-shandro>) about the continued and sustained attack on family physicians and other specialists, and unprecedented unilateral cuts that will reduce the quality and accessibility of health care for the people of Alberta. The letter also stated how family physicians feel devalued, attacked, and concerned for their patients and for the future of their practices, and the essential need for the Government of Alberta to return to the negotiating table with the AMA in good faith and a spirit of collaboration. The link to the letter was also posted on social media.

Financial Benefit or Grant: Implementation of the Patient's Medical Home (PMH)

Met with the Minister to discuss the advancement and implementation of the PMH and Alberta College of Family Physician's (CFPC) continued work in the Province and nationally and asked for the government's support and how funding might work for team-based care. The importance of family physicians as leaders at the clinical level and Primary Care Network (PCN) level was re-stated. The Alberta College of Family Physicians' (ACFP) "Where We Stand" position statement was also shared with the Minister. As changes within the health care system evolve through policy and structure, the ACFP asked for clarification of the government's vision for primary care. The ACFP asked the Minister how it could help to support members to adapt to change through education, research, and professional development. The ACFP also asked if it could provide feedback on Dr. Lee Green's Clinical ARP Design and Promotion Consultation which reported on support of new models of care, delivery of primary care, etc. before it is released publicly. The Minister agreed and ACFP was provided an opportunity to provide confidential feedback to Alberta Health.

Program or Policy: Building Physician Leadership in Alberta

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During two meetings with ADM Leann Wagner, discussed the need for investment in physician leadership in Alberta, that all high performing systems require high performing leaders. We also discussed the urgent need to share a clear, compelling vision for the future of the health care system in order to build collective action for better care for Albertans. We proposed that we could facilitate that discussion as an honest broker. Discussed the Alberta College of Family Physician's potential role in building physician leadership through professional development and medical education approaches. Conversation suggested private entities like Walmart and other large corporations running clinics.

Decision: Health Reform in Alberta

We continue to lobby for the advancement of the quadruple aim optimizing health system performance by simultaneously pursuing four aspects of quality: patient experience of care (including quality and satisfaction), health of populations, reducing the per capita cost of providing healthcare, and healthcare worker experience in providing care. We maintain our concern that there is a physicians' services agreement with the Alberta Medical Association (AMA). Will lobby for government support, through collaboration with all stakeholders, including family physicians, to advance practice workforce planning and community-based longitudinal patient care. Will lobby for increased effort to build primary care stability and interdisciplinary teams for all communities through the right funding model for rural and urban communities. Will lobby for the integration of health and social systems to optimize resources available and support health and well-being of Albertans with complex and chronic conditions.

Decision: Community-based physicians not engaged and supported by the health care system

We continue to lobby for all supports, services, and resources for all family physicians whether they be located in urban centres or rural communities, emergency departments or clinics, supported by Alberta Health Services (AHS) or not, so that in the coming months the risk to patients, providers, and staff in community clinics is minimized and there is

a truly collaborative approach to responding to the immediate COVID-19 pandemic and that we learn from this experience so the Alberta health care system is ready for any and all crises to come in the future. We will lobby for engagement and involvement in the vaccine rollout and build awareness of the willingness of family physicians to educate all patients regarding the safety and efficacy of the vaccines, to administer as vaccines become universally available, and to provide compassionate and comprehensive care and follow-up through the pandemic and beyond.

Decision: Ceased negotiations between Alberta Health and the Alberta Medical Association (AMA)

We continue to lobby that Alberta Health goes back to the negotiation table with the Alberta Medical Association (AMA) to create a renewed physician services agreement that will protect the delivery of sustainable high quality health care to all Albertans, while being responsive to the fiscal challenges faced by the province. Funding framework changes need to be readdressed.

We continue to lobby that immediate steps be taken towards repairing the damaged relationship between the government and family physicians. Trust between government and the AMA, particularly with family physicians has been crushed to the point that it may take significant time to regain what has been lost. Trust is the foundation of all successful relationships and the lack of it in contract negotiations will have a devastating effect on the ability to effectively move forward. The recent loss of service and access to high quality primary and urgent care due to recent budget cuts, many disproportionately targeting primary care has caused clinics to let go of essential employees and resources due to insufficient support for the service levels required. Family physician are deflated and overwhelmed by recent government decisions.

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Please specify all communication techniques that have been or will be used (as applicable).

Arranging one or more meetings, Written communication whether in hard copy or electronic format, Meetings, Telephone Calls, Grassroots communication, Social Media

Lobbying Activity - Next 6 Months

Description of Lobbying Activities

Subject Matter	Who is Being Lobbied?	Subject Matter Details
Health	Provincial Primary Care Network Committee Alberta Legislative Assembly Alberta Health Services Alberta Health	<p>Program or Policy: Program or Policy: Supporting Family Medicine for Pandemic Response and Recovery</p> <p>Discussions to initiate a rapid review and environmental scan with evidence-based colleagues in Alberta and Canada for any emerging development of algorithms, tools, or recommendations on managing multiple respiratory illnesses (including endemic COVID-19) in a primary care setting and develop a resource page linking this message. Committed to contribute at the provincial planning and implementation of working groups to coordinate and collaborate on continuing work, as well as develop, and disseminate multimedia messages on the management of multiple respiratory illnesses in practice to prepare for the upcoming flu season and respond to other family medicine priorities in the pandemic response.</p> <p>Program or Policy: Policy or Program: Alberta's Care Plan for Chronic Pain Patients on Long-Term Opioid Therapy</p> <p>We will continue to collaborate to develop a plan with all supports, services, and resources needed for family physicians to provide comprehensive care to patients living with chronic pain and addiction. The ACFP will follow up with the Associate Minister of Health regarding the opioid response supports to the community and how we can work in partnership with the Collaborative Mentorship Network for Chronic Pain</p>

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Health

Alberta Health
Alberta Legislative
Assembly

and Addiction (CMN), to respond to increased deaths (letters have been sent to Ministers Jason Luan, Tyler Shandro, and Paul Wynnyk, Deputy Minister). The ACFP will also continue to reach out to contacts in Alberta Health Services, Addiction and Mental Health, as well as continue to engage with family practices, community-based providers, Primary Care Networks and Zone partners regarding chronic pain management and substance use capacity building and patient care, anticipating a refocusing back on zone service plans that identified these areas as priority.

Decision: Virtual Care in the Context of the Patient Medical Home

The ACFP will advocate and lobby for the protection of virtual care as a function of the PMH and not something that is offered through corporate models with anonymous family physicians providing their care. Virtual care being offered to Albertans, funded by Alberta Health to support access to care during the COVID-19 pandemic. The government has directly promoted TELUS Babylon, Maple, and other providers who are now promoting their provision of care as “access to the health care system” or “primary care providers”. Funding is currently coming from the physician services budget to ensure that Albertans have access without charge.

Decision: Health Reform in Alberta

We will continue to lobby for the advancement of the quadruple aim optimizing health system performance by simultaneously pursuing four aspects of quality: patient experience of care (including quality and satisfaction), health of populations, reducing the per capita cost of providing healthcare, and healthcare worker experience in providing care. We will continue to lobby for government support, through collaboration with all stakeholders, including family physicians, to advance practice workforce planning and community-based longitudinal patient care. We will continue to lobby for increased effort to build primary care stability and interdisciplinary teams for all communities through the right funding model for rural and urban communities. We will continue to lobby for the

integration of health and social systems to optimize resources available and support health and well-being of Albertans with complex and chronic conditions.

Decision: Negotiations Between Alberta Health and the Alberta Medical Association

We will continue to lobby that Alberta Health and the Alberta Medical Association (AMA) continue their negotiations to create a renewed physician services agreement that will protect the delivery of sustainable high quality health care to all Albertans, while being responsive to the fiscal challenges faced by the province. Funding framework changes need to be readdressed.

Decision: COVID Vaccine Rollout

The ACFP will advocate for the potential variability of capacity and willingness for family physicians to be involved through Alberta's COVID-19 vaccine rollout and future health care crises. Family physicians are on the frontlines of our health care system. They are often the first point of contact for a patient seeking care. The trusting relationships between family physicians and patients as well as the infrastructure of clinical operations throughout the province can be an important contributor to the current vaccination campaign.

Decision: Community-based Physicians not Engaged and Supported by the Healthcare System

We will continue to lobby for all supports, services, and resources for all family physicians whether they be located in urban centres or rural communities, emergency departments or clinics, supported by AHS or not, so that in the coming months the risk to patients, providers, and staff in community clinics is minimized and there is a truly collaborative approach to responding to the immediate COVID-19 pandemic and that we learn from this experience so the Alberta health care system is ready for any and all crises to come in the future. We will continue to lobby for engagement and involvement in the vaccine rollout and build awareness of the willingness of family physicians to educate all patients regarding the safety and efficacy of the vaccines, to administer as vaccines become universally available, and to provide

compassionate and comprehensive care and follow-up through the pandemic and beyond.

Decision: Negotiations Between Alberta Health and the Alberta Medical Association

We will continue to lobby for steps to be taken towards repairing the damaged relationship between the government and family physicians. Trust between government and the AMA, particularly with family physicians has been crushed to the point that it may take significant time to regain what has been lost. Trust is the foundation of all successful relationships and the lack of it in contract negotiations will have a devastating effect on the ability to effectively move forward. The recent loss of service and access to high quality primary and urgent care due to recent budget cuts, many disproportionately targeting primary care continue to cause clinics to let go of essential employees and resources due to insufficient support for the service levels required. Family physicians continue to be deflated and overwhelmed by recent government decisions. Many family physicians have closed their practices.

Decision: Health Reform Focusing on Quality and Sustainability in Alberta

Regarding the overall primary care system, the ACFP will continue to offer to work together to advance aligned priorities and encourage all MLAs to reach out to their family physicians and clinic teams in their constituencies to let them know they are supported and to seek to understand the challenges and barriers that patients in their constituencies have to access equitable comprehensive and compassionate care.

Program or Policy: Delivery of Support for People Suffering from Substance Use Disorders or Chronic Pain

The opioid crisis remains an active and escalating public health issue that has been shelved in favour of the response to the pandemic. Primary Care is comprehensive and can support the health of a population with a wide range of chronic conditions including substance use disorder. ACFP continues to support capacity and advocacy efforts to create better health outcomes for those who struggle with substance

use or who are at risk of developing addiction. Chronic pain patients can be managed in primary care when there are adequate supports available. An ACFP task force continues to work on building a set of recommendations that will build on the opioid response recommendations published in 2017.

Program or Policy: Building Physicians Leadership in Alberta

We will continue to lobby for the need for investment in physician leadership in Alberta, that all high performing systems require high performing leaders. We will continue to lobby for the urgent need to share a clear, compelling vision for the future of the health care system to build collective action for better care for Albertans.

Decision: Health Reform in Alberta

The ACFP lobbied for an integrated system response plan for COVID-19 patient care and vaccine rollout and the need for collaboration between public health, primary care, and other community providers; a plan to be in place for mass vaccine rollout that includes the whole health system; and communication regarding the integrated system response plan to all the partners in the health system.

Program or Policy: Alberta's Care Plan for Chronic Pain Patients on Long-Term Opioid Therapy

Committed to the Collaborative Mentorship Network for Chronic Pain and Addiction (CMN) created in effort to support family physicians to provide comprehensive care to patients living with chronic pain and addiction. Our goal is to reduce unnecessary deaths and demonstrate the importance of investing in prevention and continuity of care with the purpose of reducing costs associated with unmanaged chronic pain and substance use in Alberta. The Alberta College of Family Physicians is seeking an opportunity to meet with the Honourable Jason Luan to discuss ways to collaboratively move this Agreement in Principle into action.

Decision: Community-based Physicians not Engaged and Supported by the Healthcare System

We will continue to lobby for all supports, services, and resources for all family physicians whether they

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be located in urban centres or rural communities, emergency departments or clinics, supported by AHS or not, so there is a truly collaborative approach to responding to the immediate health care crises and that we learn from the COVID experience so the Alberta health care system is ready for any and all crises to come in the future, and family physicians are equipped to provide compassionate and comprehensive care and follow-up through each crisis and beyond.

Program or Policy: Integration of Health and Social Systems

The ACFP will continue to lobby for the following: the socioeconomic factors in a person's life affects the resources and tools that they will have to support their health and wellbeing. It is important that the two sectors, both provided by government, should be integrated operationally and strategically. There needs to be work done in community to develop ideas and innovations that can be spread and scaled in the province. Primary Care is positioned to support the local embodiment of this integration however, it should be led by provincial policy and supported by research and innovation programs.

Communication Techniques

Please specify all communication techniques that have been or will be used (as applicable).

Written communication whether in hard copy or electronic format, Arranging one or more meetings, Social Media, Grassroots communication, Meetings, Telephone Calls

Additional Information (Optional)

Please provide any additional information which you feel was not covered elsewhere in this registration (optional). Information provided is included in the published registration.

Declaration

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Declaration and Certification

I declare that (select only one)

- No lobbyist named in the return holds a contract for providing paid advice to a department or prescribed Provincial entity.

I further declare that (select one for each statement):

Every lobbyist named in the return, and to my knowledge after reasonable inquiry, every person associated with those lobbyists, are not in contravention of section 6 of the *Lobbyists Act* (contracting prohibitions)

- I Declare

Every lobbyist named in the return, and to my knowledge after reasonable inquiry, every person associated with those lobbyists, are not in contravention of section 6.2 of the *Lobbyists Act* (prohibited gifts)

- I Declare

I certify that to the best of my knowledge and belief the information contained in this return is true.

Designated Filer (DF) Name

Sudha Koppula