



Privatization of Health Care in Alberta

In the News:

Lakeview Recovery Community in Gunn, AB

The Alberta government has opened the Lakeview Recovery Community in Gunn, a new facility for addiction treatment that operates under a private model. While it has 75 treatment beds and aims to support up to 300 individuals annually, critics highlight that this represents a shift from public healthcare to privatization. The facility was developed by renovating a previously government-owned center, the McCullough Centre, which was closed for repairs and handed over to a private operator, ROSC Solutions Group Inc.

This move reflects a broader ideological agenda to privatize healthcare in Alberta, compromising the integrity of public services. Addiction care should remain part of the public healthcare system, not outsourced to private entities motivated by profit. Such changes threaten transparency and accountability, leaving vulnerable Albertans at risk in the face of a growing drug crisis.

Airdrie AB, Primary Care Clinic

On September 12, 2024, the Alberta government approved a controversial project to build a primary care clinic and a second urgent care center in Airdrie, the largest city in Alberta without a hospital.

Earlier this year, the government paused renovations on the existing urgent care center to review a proposal involving One Health, a private partner. After public outcry, renovations resumed, but soon after, the government granted One Health \$85,000 to develop a business plan for the new facility. The details of this plan remain undisclosed.

There are concerns that Airdrie is becoming a test case for a for-profit healthcare model and how services will be delivered and funded. Over 650,000 Albertans need a family doctor, and the shift towards private facilities exacerbates the existing staffing crisis by drawing healthcare workers away from the public system. Currently, urgent care is administered by AHS, but under the new model, it could fall under a newly established primary care organization. It has been argued that urgent care would be better integrated within a primary care setting than in standalone facilities lacking comprehensive support. While Airdrie needs more healthcare services, past experiences with private healthcare models have often failed to deliver on quality and cost efficiency. Funding and oversight are essential to guarantee that healthcare services remain affordable and effective.

Concerns of Privatization

- **Profit Over Care:** Treatments may prioritize company profits, leading to ineffective care.
- **Inadequate Training:** Staff may lack proper training and best practice, creating risks to patient safety.
- **Job Instability:** Non-unionized staff experience high turnover due to low pay and benefits, affecting service quality.
- **Lack of Accountability:** There is often insufficient oversight and outcome statistics for treatments.
- **Financial Risks:** Private corporations may fail, potentially requiring government bailouts.
- **Barriers to Access:** Privatization can replace public services with private options that may charge fees, limiting access.
- **Higher Costs:** Patients often face increased out-of-pocket expenses for services.
- **Reduced Accessibility:** Marginalized communities may struggle to access necessary services as private providers prioritize profit.
- **Quality Concerns:** Profit motives can compromise care quality, leading to cost-cutting that affects patient outcomes.
- **Fragmented Care:** Patients may need help navigating a disjointed healthcare system with multiple providers.
- **Workforce Impact:** Job security and conditions for healthcare professionals may deteriorate in private settings.
- **Longer Wait Times:** Increased demand for public facilities can lead to longer wait times for essential services.
- **Erosion of Trust:** Growing privatization can diminish public trust in the healthcare system.
- **Funding Shifts:** Resources may be diverted from public healthcare, undermining its ability to meet community needs. This could also create a two-tier healthcare system in which public healthcare facilities become disadvantaged and overcrowded.

Resources:

<https://www.cbc.ca/news/canada/calgary/alberta-air-drie-one-health-ahs-urgent-care-1.7297676>

<https://www.aupe.org/news/news-and-updates/media-release-premier-smiths-plans-jeopardize-health-care-services>

<https://globalnews.ca/news/10079801/albertans-experts-public-health-restructuring->

<https://mulpress.mcmaster.ca/hro-ors/article/view/5744/4628>

<https://your.alberta.ca/health/widgets/172134/faqs>