SPECIAL MEETING OF COMMITTEE OF THE WHOLE January 28, 2010

Present: Mayor Phil Roberts, Deputy Mayor Doug Shaffner, Councillors Pat Power, Kathie Fearon, Sherman Hudson, Holger Mueller-Sparenberg, CAO Amery Boyer as recording secretary, and Karen Smith, Site Manager, of the Health Centre.

This special meeting was called to receive information about the Annapolis Royal Health Centre (ACHC) that was deemed to be time-sensitive. Karen Smith presented a Government media release dated September 22, 2009. The provincial government appointed an emergency room advisor, Dr. Ross who has many years of experience and is well aware of the services that are provided and the work that has been done. Dr. Ross visited Digby before Christmas. He visited the Annapolis Valley Health on January 18 and 19, 2010 (the ERs at Valley Regional Hospital, Soldiers Memorial Hospital and ACHC). When visits to all the ERs in the district health authorities are concluded, a final report will be generated. Annapolis Valley Health's understanding is that there will be an impact on the emergency room at the Annapolis Health Centre. What changes will occur are not known at this time. Annapolis Valley Health sees this as an opportunity to use resources in another way that meets the needs of the people in the Health Center's catchment area. The "Outpatients" and "Emergency Room" has three treatment rooms next to the lab plus a nursing station. She referred to a previous PHSOR¹ report that came out in January 2008. This report addressed small and rural emergency services in Nova Scotia.

Subject	Existing State	Possible Future State
Catchment area	East end: Bridgetown	
	West end: Bear River Bridge	
	To the north: Bay of Fundy	
	To the south: Caledonia and area	
	This totals approximately 9,700 people	
Services offered at the Health Centre	OPD/Emergency Department	
	Lab	
	X-Ray	
	Palliative care beds	
	Physiotherapy	
	Occupational Therapy	

¹ Provincial Health Services Operational Review, December 2007

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	Collaborative Practice (doctors and nurse practitioner) Food and Nutrition Services (including Meals on Wheels) Environmental Services (e.g. housekeeping) Annapolis West Health Foundation office Diabetes Centre Cardiac investigation (EKGs) Administration Mental Health Services Addiction Services Public Health Pharmacy Continuing Care Coordinators Central Registry/Switchboard Health Information (charts for outpatients and emergency)	
Visits to Outpatients/Emergency Services	Patient beds Maintenance In fiscal year 2008-9, there were 11,000 plus visits and 2,000 plus scheduled appointments. In fiscal 2009-2010 to the end of the third quarter (December 2009): 7,000 plus visits and 1,000 plus appointments. A 24-hour closure was initiated in May 2009 and a second 24-hour closure began in September 2009.	
CTAS ² statistics	88 to 90% of people presenting at Emergency outpatients department are Level 4 or 5; Level 4 and 5 outpatients could be seen in a doctor's office.	

² Canadian Triage and Acuity Scale

	Level 1: 0.1% (most severe)	
	Level 2: 1.1%	
	Level 3: 10%	
	Soldiers Memorial Hospital in Middleton has 16,000 plus ER visits a year: The bulk of their visits are 4's and 5's but they have a higher percentage of people in Level 3.	
	Western Kings Memorial Health Centre in Berwick has 20,000 visits in its outpatients clinic in a year. They are predominantly Levels 4 and 5. Their hours are: Monday to Thursday 8 am to 10 pm; Fridays 8 am to 6 pm; Sat/Sun/Holidays 10 am to 6 pm)	
	The ER at Valley Regional in Kentville has about 30,000 visits per year.	
Wait times	To see your family physician varies depending on whether your physician works full time or part time; if they also work in the ER; if the patient is willing to see the first available physician rather than their family physician, etc.	
	For ER varies depending on the number of people present, what health problem brings a person to the ER, the size of the ER, etc.	
People without a doctor	8.6% of visits do not identify a family physician (that is up by nearly 5% over the previous fiscal year).	
Access to family doctors (practice)	2 full time: Dr. Barkwell, Dr. Conyers.	Dr. Bonnington will be here in
	Part time: Dr. Hancock (the only female doctor), Dr.	April to take over for Dr. Dill,
	Pecharsky (family physician in another province as	but will be working part time.

	well), Dr. Buchholz (has another full time position in	He will initially concentrate on
	Halifax), Dr. Dill (has been planning to retire for	the practice. Later, in the fall,
	many years). Dr. Barkwell and Dr. Buchholz also	he was expected to migrate to
	have responsibility for two nursing homes.	the Emergency Department.
Emergency Room and Outpatient Room	The Emergency room is currently funded on a 24/7	Possible options:
Department Schedule	basis.	1. Levels 4 & 5 and perhaps Level 3.
	When a doctor is on call during the week (8 am to 8 am the next day) they come to the ER as needed and	2. Emergency room operating X number of hours per day.
	answer phone calls from the ER during that 24-hour	3. Could outpatients be seen
	period. Each physician is on call for one weekend in 5	somewhere other than at
	(8 am on Saturday morning to 8 am on Monday	Outpatients? Could they go
	morning). They are not in the office the next day after	to the doctor's office?
	being on-call.	4. Re-allocation of funding to
	being on-ean.	most important health needs
		5. Other?
Ambulance service	For anywhere in the catchment area, there is a	o. emer.
	schedule of fees. The basic cost is \$134.52 for a one-	
	way ambulance trip from a person's home in the	
	community to an ER (not WCB claim or a motor	
	vehicle collision).	
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Main reasons for going to the Emergency	1. cough	
Department at the Health Center this fiscal	2. back pain	
year.	3. abdominal pain	
	4. lower extremity pain	
	5. prescription request	
	6. sore throat	
	7. urinary tract infection	
	8. localized swelling or redness	
	9. earache	

	10. shortness of breath	
Where patients are coming from	For fiscal year 2008-2009:	
	Annapolis County: 76%	
	Digby: 15%	
	Bridgetown: 2%	
	Elsewhere in NS or Canada: 7%	
	For 2009-2010 (1st two quarters):	
	Annapolis County: 73%	
	Digby: 16%	
	Bridgetown: 2%	
When do patients come?	2009-2010 (3 rd quarter): Most visits occur from 8am	
	to 8pm (88%). For walk-in patients, 93% present	
	during the day over a 13-hour period.	
Doctor remuneration	Doctors receive X dollars per year on an Alternate	If the doctors cannot work in the
	Payment Plan or APP (salaried). The doctors working	Emergency Room, they may not
	on call in the ER receive an hourly fee - \$85 per hour	want to stay. Recruitment may
	– beginning at 8 pm on weekdays until 8 am the next	also be an issue. However,
	morning and for weekend on call coverage.	doctors do enjoy working in a
		Collaborative Practice like the
		one in Annapolis Royal.
Staff of the Health Centre	Almost all employees are unionized.	Any change has the potential to
		impact most departments.

Potential Council action:

- 1. Deal with the rumours
- 2. Letter of support for Annapolis Valley Health Authority position
- 3. Hold a public meeting
- 4. Request that the Health Authority prepare a newsletter

Tamara Gilley is the communications officer for Annapolis Valley Health (all of AVH).

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Action	Signed	Date
Reviewed by Mayor Phil Roberts		
Changes made by CAO		
Posted to website		
Approved at Committee of the Whole,		
February 3, 2010		
Posted to website		