

Annapolis Valley Health.
 Community Meeting-Annapolis Community Health
 Desmond Pierce Memorial Hall-Theatre 2, Annapolis Basin Conference Center.
 April 26, 2010

	Presenter	Presentation
1	Dave Logie	<u>Welcome & Introduction of Panel</u> <ul style="list-style-type: none"> • Janet Knox, President and CEO, AVH • Nancy Bird, Vice Chair, Friends of ACHC. • Dr. Lynne Harrigan, VP Medicine, AVH • Dr. John Ross, Provincial Advisor, Emergency Care • Wendy Knowlton, Chair, ACHB (late)
2	Dave Logie	<ul style="list-style-type: none"> • Role of AVDHA
3	Janet Knox	<ul style="list-style-type: none"> • Reviewed challenges r ACHC • Underscored AVH's commitment to ACHC • Reviewed findings of community meetings.
4	Dr. Lynne Harrigan	<ul style="list-style-type: none"> • Outlined Physician Recruitment Activities • Highlighted Physician Recruitment Challenges
5	Nancy Bird	Friends of ACHC Standing in for Wayne Boucher, Chair, <ul style="list-style-type: none"> • Closing or curtailing ER service at ACHC would be placing 10,000 citizens in an inequitable position • Seek commitment from AVH and DOH to expand to full service capability
6	Wendy Knowlton	Annapolis Community Health Board - Role of CHB <ul style="list-style-type: none"> • Discussed role of CHB members: <ul style="list-style-type: none"> • volunteers not employees of AVH • work closely with AVH • Access to be a concern for us all
7	Dr. John Ross	<ul style="list-style-type: none"> • Elaborated on role as representative voice of community to the Minister and the Deputy Minister • Reviewed his information collection process. • Reviewed ER Standards and goals. • Announced Interim Report Launch • New ER report coming this summer.

8. Questions for the Panel Moderated by Tricia Cochrane, VP Community Health & Continuing Care – started at 1900 hrs

	Questioner	Commentary / Question	Respondants
1	Art White, Friends of ACHC	Q. Is this offer [incentive wages, perhaps accommodations to doctors from Dartmouth (to SMH) and from AVH to Digby] made to ACHC to the same extent? If not, why not? Q. There is a difference in the way they are paid?	Janet Knox Dr. Lynne Harrigan Dr. John Ross Discussed the different factors and policies that affect this current practice. Outlined what AVH controls and what the current system owns in relation to the trends taking place around ER staffing.
2	Wayne Currie, Steering Committee member, Friends of ACHC; Vice Chair, AWHF	Q. Janet, your intention to continue to support 24/7 ER?	Janet Knox ACHC ER will stay open as is for now. No plans to close.
3	Eric Wilford no affiliation specified	Q. What are you going to do to open up the schools to train more doctors and nurses?	Dr. Lynne Harrigan Outlined Doctor education in NS and strategies to recruit medical students. Dr. John Ross Discussed special requirements and listed factors that present a greater need for focus—specialty fields and wider access to specialty care.
4	Burton Leathers, No affiliation specified	Q. In larger centers more services. In rural areas a single point of delivery. How do policies reflect this?	Dr. Lynne Harrigan <ul style="list-style-type: none"> Outlined the changing face of medical practice from a recruitment standpoint. Example: More doctors are attracted to collaborative practices. Janet Knox <ul style="list-style-type: none"> Outlined the picture of service and how patient's point of entry currently works for ACHC. Dr. John Ross <ul style="list-style-type: none"> Outlined the current concerns of doctors in addressing ER Care.

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5	Bill Knowlton , Speaking on my own [Vice-Chair, ACHB]	Q. If we could go to AVH and ask : What can this community do to help with the situation?	-----
6	Paul Paquette [unattached patient]	Q. Newcomer to province; access to healthcare not available to me. I must burden ER; only access to obtain my prescriptions. I do not want to access the Nova Scotia health care by having my third stroke. How do I obtain ongoing care?	Dr. John Ross <ul style="list-style-type: none"> • Outlined the role in primary health care to address this issue.
7	Wayne MacDonald , Steering Committee member, Friends of ACHC [Secretary, AWHF]	This question was prepared by the Steering Committee. Q. What is the future of these two ERs? Comment on whether both will be open 24 hours? Eight to 10 p.m.? Closing one or the other? These are the choices on the table. What are the options?	Dr. John Ross <ul style="list-style-type: none"> • Outlined other strategies and services in place for the region to access emergency care. • Presented options for the community if hours were shorted.
8	Gerri Costa No affiliation specified	Q. Have you looked at the impact on economics of the town should we loose our ER, pharmacy, etc.?	Dr. John Ross <ul style="list-style-type: none"> • Outlined the priorities being on right services for best outcomes and that the Minister is interested in working towards making the right decisions.
9	Phil Roberts , Member of the Steering Committee, friends of ACHC. Mayor, Town of	<ul style="list-style-type: none"> • Copies of online petition [boxes brought to stage]; 958; each one from a separate individual <p>Q. Dr. Bonnington was determined to come to Nova Scotia, but it would have been far easier to go to British</p>	Dr. Lynne Harrigan <ul style="list-style-type: none"> • Outlined factors that contribute to this and work to amend issue.

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	Annapolis Royal	<p>Columbia or Alberta. Something is going on with the College of Physicians and Surgeons of Nova Scotia which needs to be investigated if we are going to attract out of country physicians.</p> <p>Q. When you and Dave met with the Steering Committee you stated there would only be one hospital in the basin area. If there are two now, how is this done without closing one?</p>	<p>Janet Knox</p> <ul style="list-style-type: none"> • There is no decision on this and no information to report.
10	David Tinker Lives in Granville Ferry	<p>Before I retired, I agreed to design and taught in the preclinical program at the University of Toronto (PBL - Problem-Based Learning)</p> <p>I have three scenarios for you, patient based; in all immediate intervention required.</p> <p><u>Scenario One:</u></p> <ul style="list-style-type: none"> • three-year-old female child with severe cough and fever • gets worse at night • Taken in morning to hospital. • Seen by doctor. <p><u>Scenario Two:</u></p> <ul style="list-style-type: none"> • Over two days, increased irritating and itchy rash. • Goes in the morning to the hospital. • Diagnosis: shingles. <p><u>Scenario Three:</u></p> <ul style="list-style-type: none"> • Elderly woman. • During night, feeling of confusion and malaise. 	<p>Dr. John Ross</p> <p>Responded to each scenario with ER alternatives for those in the region.</p>

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		<ul style="list-style-type: none"> • Her daughter sees her in the morning and decides she better take her to see a doctor. • Only the last one is life-threatening-a silent MI <p>Q. In an ideal world, where should these three people go?</p>	
11	Patrick McQuade, Counselor for District 6, Municipality of Annapolis County	Q. Who is driving the system and to which court do we appeal?	<p>Dave Logie</p> <ul style="list-style-type: none"> • Decisions are mixed across a variety of parties.
12	Roseanne Peach, Friends of ACHC and other groups	Q. Our doctors put in a petition for another NP. DOH turned them down... offered Office Nurse. Were you aware? Part of AVH budget or DOH budget? Another NP may have helped in our ER.	<p>Dr. Lynne Harrigan</p> <ul style="list-style-type: none"> • Outlined the rationale of the province in implementing stroke program and need for specialty care. <p>Tricia Cochrane</p> <ul style="list-style-type: none"> • Outlined current staffing complement for AVH's Nurse Practitioners.
13	Brenda Cameron Payzant graduate 1967 [Unattached patient?]	Q. Are you prepared to have the patient care first, not get tangled up in the complexities? Keep all ERs open?	<p>Janet Knox</p> <p>Yes.</p>
14	Peter Newton, Warden, Annapolis County; taxpayer; member of Friends of	Q. When are we going to receive a plan to work with you on? Will help you push it forward.	<p>Janet Knox</p> <ul style="list-style-type: none"> • Elaborated on the processes of change management and strategic planning. Outlined that AVH's commitment is to focus on patient, their family and their community

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	ACHC		
15	Linda Moffat, Granville Center [unattached patient]	Q. Our ER is the first entry for unschedulable medical crises which deals with people who are unable to have a family doctor like me; serves as only access to medicine. Are you able to deal with all these functions in your deliberations?	Dr. John Ross <ul style="list-style-type: none"> • Yes
16	Clark Morris, Lower Clarence [partner is Marian Ward, Secretary, ACHB]	Q. We had a friend who was afraid to call an ambulance; heard it was \$500-\$1000. Where do you go for information? How much do transfers cost?	Dr. John Ross <ul style="list-style-type: none"> • Explained current EHS system and relation to Canada Health Act. • Established that Emergency Care depends on community, geography, data - right care, right place, right time
17	John Littlefair, Clementsport	Q. If you don't have a doctor, can you go to a nurse practitioner? I don't know how a Nurse Practitioner works.	Dr. John Ross <ul style="list-style-type: none"> • Mentioned scope of practice and Model of Care... • DOH and DHAs reviewing model of care.
18	Bill Vroom [wife is RN at ACHC]	Q. You're running a business? With Annapolis covering so much, how much is Digby losing out of their budget?	Dave Logie <ul style="list-style-type: none"> • AVH submits a Business Plan to DOH each year
19	Larry Powell Noted he lived outside catchment area [newspaper reporter for The Spectator]	Anecdote <ul style="list-style-type: none"> • My mother-in-law in Bear River called my brother-in-law, who in turn called my wife, in Lawrencetown. • They took her to Digby but it was closed • They went to Soldiers, and she was admitted; her oxygen level was 75% • the next day or the day after she had to go to Valley Regional Hospital for a CT Scan-they found she had a blood clot 	Steve Hemenway, member Board of Directors, AVH (came from audience to stage) Cost of ambulance: <ul style="list-style-type: none"> • Outlined the different factors that might contribute to cost of ambulance and its variance. • Dispelled myths about extremes of ambulance expenses.

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		<ul style="list-style-type: none">• We got this frantic phone call [from her] from Soldiers-"here goes my life's savings..." [for the cost of the ambulance trip to Valley]• she asked us to drive parallel, so we could take her home [from Valley after the CT Scan] <p>Q. How often does this happen?</p>	

	Topic	Presentation
8	Tricia Cochrane	Question and Answer Session <ul style="list-style-type: none"> • Concluded at 2035 hrs • All those with questions had an opportunity for microphone access
9	Janet Knox	Next Steps <ul style="list-style-type: none"> • We need to have a goal focused in our heads. • We are committed in this community. • This will not be the end of our conversations. • Our goal must be, together, help our citizens be and stay healthy. • Need to recruit who we need to have here • We continue to work with our team at ACHC to enhance delivery of service and to create best access. • We need to find multiple ways to talk. • CHB soon giving Community Health Plan • Thank you very much for your support of our Health Center
10	Adjournment	The meeting was adjourned at 2036 hours.