



GENERAL BOARD MEETING
Wednesday, March 30, 2011
QUESTIONS & ANSWERS

Submitted by: Peter M Simkin, Parksville resident

Q I understand VIHA is taking over operation of the ambulance in this area. How will this affect the delivery of pre-hospital care in Parksville, especially in the areas of staffing levels, training levels of on car personnel and number of cars in Parksville. Thank you for this opportunity.

The Provincial Health Services Authority (PHSA) has had responsibility for overseeing the operations of BC Ambulance Service (BCAS) since last year, when this function was transferred from the provincial government to PHSA. BCAS will continue to be the provincial provider of ambulance services. VIHA is not taking over responsibility for the operation of ambulance services.

BCAS works closely with all the health authorities, including VIHA, and other local stakeholders, to continuously improve their services to best meet local/regional needs. When possible and appropriate, VIHA uses other transportation providers to provide non medical transfers; i.e. those transfers that do not require a patient to be monitored or treated during their transport. Please contact BCAS directly to find out if they have any plans to make changes to staffing or services in Parksville.

Submitted by: Paul Kyba, North Qualicum Beach Homeowners' Association

Q Why did the VIHA Board select Stanford Place Holdings Ltd. over the local Arrowsmith Society as the successful applicant in response to its Request for Proposals for a health centre in Oceanside?

A The detailed requirements that the Vancouver Island Health Authority was seeking from Request for Proposal (RFP) submissions for the Oceanside Urgent Care/Primary Care Centre were clearly outlined in the original RFP, as were the evaluation criteria and scoring methodology VIHA would use to evaluate the proposals received. These service requirements and evaluation criteria can still be viewed as the RFP is still available on the BC Bid website (www.bcbid.gov.bc.ca) where all closed RFPs remain publicly accessible. In accordance with VIHA's Fair Business Policy and the evaluation criteria outlined in the RFP, the proposals VIHA received were evaluated and scored as outlined in the RFP, and this resulted in Stanford Holdings being named the preferred proponent.

Q What is the term of the contract that is being negotiated with Stanford Place Holdings Ltd. and what is the cost benefit of committing public funds in this way over a long period?

A Negotiations are still underway with the preferred proponent, and to date no contract term has been finalized. The benefit of this project to taxpayers is that Oceanside residents will receive a brand-new accessible and integrated facility that will offer publicly-funded health care services in a manner that minimizes the capital expense that would otherwise be carried by the public sector.

Q Will the urgent care services in the new health centre be managed by VIHA or Stanford Place Holdings Ltd.?

A Urgent care services will be provided by the physicians who will be working at the centre. They will manage the care provided to the patients who present at the urgent care centre for treatment.

Q Does the Ahmon Group have an ongoing role in the new health centre?

A The Ahmon Group may or may not have an ongoing role in the new centre pending finalization of negotiations.

Q Will Stanford Place Holdings Ltd. be prohibited from including private user-pay health services in the Oceanside health centre as a condition of its long-term contract with VIHA?

A We anticipate a variety of services will be located in the Urgent Care/Primary Care Centre. All medically necessary services will continue to be publicly funded and available at no cost to patients, as they are currently in VIHA and BC. We also anticipate other health-related services (such as pharmacy, physiotherapy etc.) may co-locate in the facility. Many of these services are user-pay, or covered through private health insurance plans, and they would be welcomed into the new centre as vital components of the overall continuum of health care services.

Q Has the VIHA Board approved a multi-year budget for the Oceanside health centre, along with a business plan and/or a service plan and when will these documents be available to the public?

A At this time, no final contract has been signed and the business or service plan has not yet been finalized. Once a final contract is signed and the business plan documents are completed, VIHA will make them publicly available, subject to Freedom of Information and Protection of Privacy Act (FIPPA) criteria .

Q What additional ongoing operational funding, if any, will VIHA provide to Stanford Place Holdings Ltd., beyond the lease costs for existing local programs identified in the R.F.P.? If there is no additional VIHA funding for the Oceanside health centre, where will the necessary operational funding come from?

A As the business/service model has not been finalized, no decisions have been made with regards to operational funding. As you are likely aware, VIHA has committed to consolidating existing and available leases we currently have in the community into the new Urgent Care/Primary Care Centre. VIHA operational priorities and the associated funding undergo a review and budget approval process annually, and budgets are always changing in response to shifting needs and available resources.

Q

When will funding for VIHA's primary care Integrated Health Network in Oceanside terminate? Why are there only 180 patients enrolled in this Health Network? Is it intended that the Network will be extended and expanded in Oceanside and, if so, how much will VIHA invest in this?

A

Integrated Health Networks play an important role in the provision of health care services and supports to patients in communities throughout Vancouver Island, including Oceanside. These networks improve quality of care and quality of life for patients and clients by linking patients, family physicians, primary care providers (e.g. registered nurses, registered dieticians, social workers) and community services to create coordinated care that is focused on the needs of patients with chronic health conditions.

VIHA is pleased to report there are currently 1,118 patients receiving services in the Parksville/Qualicum Beach region, and that the team providing services to these patients includes 10 physicians, two registered nurses, one registered dietician, one social worker and one medical office assistant. The Integrated Health Network community services include: exercise programs; counseling; a self management program for Chronic Obstructive Pulmonary Disease (COPD); and exercise programs that serve patients who have a heart condition, such as the Take Heart Program.

Integrated Health Networks are a co-funded model, with health authorities and the province sharing the costs. The provincial government has announced financial support to expand the ability of patients to access primary care health services. There are no plans for the funding to end, although with the development of a local Division of Family Practice, there may be some refinements to the target populations served, based on agreed to priorities.

Q

Which "health disciplines" will be included in the multi-disciplinary primary health care team and will any of these be new to Oceanside? How will this team be managed or coordinated?

A

Health Services to be included in the primary health care team include Public Health Services, Chronic Disease Management, Diabetes Education, Rehab, Home and Community Care, Mental Health and Addictions, diagnostics and others. These services are generally all available currently in Oceanside, but through a variety of different locations and program points. The goal of the Primary Care/Urgent Care Centre (the Centre) is to bring these services together under one roof, and, through the support of enhanced electronic medical records, provide integrated, co-ordinated care to patients. We anticipate that Nurse Practitioners will also be part of the multidisciplinary team at the Centre. The most significant new service for Oceanside residents will be the Urgent Care Centre, which will provide urgent and semi-urgent care, without appointments being required, from approximately 7:30 am to 10:30 pm. It is anticipated this will divert some 10,000 visits by Oceanside residents to Nanaimo Regional General Hospital each year.

Q Is VIHA prepared to pay salaries or sessional fees to physicians and other eligible health practitioners in the Oceanside health centre in order that they can effectively/efficiently deal with both primary health care and urgent care needs? If not, why not?

A Physician service payments are covered by agreements between the Ministry of Health and the BC Medical Association, and it is anticipated that the number of Oceanside residents seen through the Primary Care/Urgent Care Centre will generate sufficient revenue to make the model work. Non-physician staff working in the integrated service delivery model will be employees of the centre; as mentioned above, the contractual relationships between VIHA and the proponent for the management of the centre are yet to be finalized.

Q What is the relationship between the Oceanside Division of Family Practice and the health centre?

A At this point, there is no formal relationship, however it is anticipated that some members of the Division of Family Practice may wish to participate in either providing urgent or primary care at the centre.

Q Is it intended that Stanford Place Holdings Ltd. will request property tax exemption for the health centre?

A That is a decision to be made by Stanford Place Holdings. However, if an exemption were to be applied for and accepted, it would result in lower lease costs to physicians or other medical providers at the Centre, and thereby might encourage some of these professionals to locate their service at the centre.

Q Is it expected that financing will be requested from the Regional District of Nanaimo for this project?

A Funding from the Regional District of Nanaimo is not anticipated at this time. However, in previous conversations, the Regional District of Nanaimo has indicated its possible willingness to assist financially or otherwise.

Submitted by: Brenda Hill, BC Nurses Union

Q BC has an aging nursing population, statistically older than other provinces. How many RN's are over fifty-five years old in VIHA? What number is expected to retire in the next 5 years?

A Approximately 1,500 RNs (11% of the workforce) in VIHA are over the age of 55. Given the elimination of mandatory retirement at age 65, and the uncertain economy of the last few years, it is difficult to anticipate the retirement expectations of our nursing workforce. That said, just over 600 RNs in VIHA are currently aged 60 and over, and could be expected to leave VIHA within the next 5 years.

Q **Has there been a survey of nurses in specialty areas, such as critical care, of retirement plans for the next two to five years? Has there been an assessment of recruitment needs for specialty trained nurses in the next two to five years? Are there plans to provide funded courses to train nurses already working in VIHA?**

A Managers are encouraged to discuss future work and retirement plans with staff on a regular basis; this ongoing communication between front line staff and managers provides senior leadership and human resource planners with an overview of longer term staffing requirements. In addition, staff supply and demand projections are done annually and are used by the VIHA Executive, Human Resources, Professional Practice (with input from Care Delivery Model Redesign) and other key stakeholders, including program managers, who validate the information. Data is available for individual professions, programs and service delivery areas. The data will be refreshed at the end of March 2011. A more detailed review will follow, which is anticipated to result in the development of targeted recruitment and retention strategies for prioritized and challenging professional groups, programs and geographies. VIHA allocates funding on an annual basis to support priority continuing education for RNs, including those working in critical care, emergency, intensive care, rural and other practice areas requiring post graduate education.

Q **Given that needs assessment change, as in Alberta where last year the government stated there was no nursing shortage and this year there is talk of recruitment from other provinces, how is this assessment done in VIHA?**

A VIHA's Human Resources Department is currently developing a recruitment and retention strategy that includes an examination of the nursing workforce. This review includes a particular focus on specialty-trained nurses, including rural, operating, post anesthetic, emergency, intensive care, psychiatric intensive care and cardio-vascular nurses. Recruitment and retention strategy options will be presented as part of this process.

Q **BCNU is hearing from new grads and current BSN students that they have grave concerns for current and future job opportunities in VIHA. What initiatives do you have to keep Vancouver Island BSN graduates here?**

A It is recognized that the Registered Nurse (RN) workforce in BC, including VIHA, is aging and nearing retirement. While it is difficult to predict actual retirement rates, particularly given changing economic conditions, we can safely anticipate significant retirements over the next decade. This reality will present significant opportunities for new and recent nursing graduates. The Ministry of Health and the Ministry of Advanced Education, post secondary education facilities and the health authorities in BC meet regularly to anticipate the future needs for health care human resources, and plans are developed accordingly. VIHA's New Grad Hire Program is an ongoing initiative that has been extremely successful for new grads on Vancouver Island. The program is being maintained and funded next year at the same level as it was last year. In 2010 the program resulted in 88 new RN grads being hired into temporary full time positions and an additional 71 new grads hired as casual employees.

Q Given the cost of training BSN students to BC is there discussion with the provincial government on initiatives to keep BC graduates from seeking jobs outside of BC?

A VIHA and all the other health authorities in BC are in regular and ongoing contact with the Ministry of Health on a variety of topics affecting the nursing workforce in BC. We are not aware of any provincially-planned priority strategies with regards to initiatives involving BSN graduates only.

Q There is low morale and distress among BSN students. Will VIHA executives meet with BSN students to discuss and develop future plans to retain nurses on Vancouver Island?

A Senior VIHA staff, including members of the VIHA executive, meet regularly with students from the various colleges and universities. These meetings cover a variety of topics for students interested in future opportunities within VIHA. At our most recent meetings with 3rd and 4th year students at Vancouver Island University, Camosun College and the University of Victoria, we found that students are looking forward to graduating and to the careers that VIHA has to offer.