



April 27, 2011



The Prairie North RHA Board held its regular monthly meeting April 27, 2011 in Lloydminster. Board members are pleased to share the following:

Presentation - Dementia Care and New PNHR Behaviour Management & Dementia Unit

- √ Prairie North Health Region and all of society are facing ever greater challenges in dealing with the rising tide of dementia and care of individuals suffering from the disease. In an effort to better understand dementia and dementia care, as well as the ethical considerations around caring for individuals with dementia, PNHR Board members heard presentations from Beverly Greenwood, Provincial Northern Behaviour Management Consultant based in PNHR; Joanne Bracken, CEO of the Alzheimer Society of Saskatchewan; Joan Zimmer, PNHR Director of Continuing Care; and Jim Walls, PNHR Director of Social Work.
- √ Greenwood explained that many types and degrees of dementia exist and each individual is different in terms of his/her dementia. In PNHR, 70% to nearly 100% of residents in each of the 13 long-term care (LTC) homes have some level of cognitive impairment. She stressed that staff need to know how to care for people with dementia and must know the person behind the dementia.
- √ Bracken advised that Alzheimer's is the most common form of dementia. In Saskatchewan, 10 new cases of dementia occur each day. Within a generation - by 2038 - that number will more than double to over 20 new cases per day. More than 17,000 SK residents are currently living with dementia. By 2038, the number will climb to over 28,000, equalling 2.3% of the population. While the number of LTC beds is expected to grow across Canada, the system will still be short 157,000 beds by 2038. More people with dementia are being and will continue to be cared for at home, usually by spouses or other family members. These caregivers need support too, said Bracken adding that a national dementia strategy is necessary to address the "Rising Tide."
- √ Zimmer explained that with the aim to provide safe, quality care to all persons in PNHR long-term care facilities, the Region has established a specialized Behaviour Management and Dementia Unit at Battlefords District Care Centre (BDCC). The program will assess, stabilize, and develop care plans for individuals who are deemed to require the specialized service. Once clients are stabilized and their condition improves, they will return to their home facility. The maximum length of stay on the unit is expected to be no more than six months. The unit consists of two wards accommodating a total of 29 clients. Renovations have been completed, specialized training is being provided to staff, and additional staff are being recruited.
- √ Walls emphasized that the ethics of dementia care and the ethics of all care are no different. The question of ethics is: "all things considered, what is the right thing to do?" Everyone, including the dementia client, is a person with inherent rights. Walls said the health system has to build capacity to care for those with dementia wherever the clients are, not just in a single location. He added that staff need to be taught and supported in dementia care. The environment, he stressed, must be appropriate and safe.
- √ Board Chairperson Bonnie O'Grady expressed appreciation for the extremely informative presentations that will help Board members better understand the issue of dementia care and help plan for the future.

Primary Health Care Review - Lloydminster

- √ Prairie North Regional Health Authority has formally accepted the report and recommendations of the Primary Health Care Review for Lloydminster. The review was commissioned by PNRH in collaboration with the Lloydminster Region Health Foundation which has unanimously endorsed the report.
- √ PNRH CEO David Fan highlighted the major findings and recommendations of the review. The review determined that Lloydminster currently requires at least nine physicians to bring the family physician-to-resident ratio to the recommended guideline of one doctor for every 1,500 people. The community presently has 19 doctors and needs to increase that number to at least 28. The Lloydminster and area population is expected to grow rapidly through the next decade. Coupled with the community's young population and lower health status scores in several key areas, a projected 35 more physicians will be required by 2030. The Review's stakeholder consultation process identified access to family physicians, access to mental health services, access to chronic disease management services, and access to after-hours care as the most pressing primary health care issues that need to be addressed.
- √ The report recommends:
 - × Development and implementation of a family physician recruitment strategy to address the short and longer term needs for family physicians in Lloydminster;
 - × Establishment of a Primary Health Care centre on each side of the Saskatchewan/Alberta border. The Sask. site would be aligned with the Saskatchewan Primary Care Model; the Alberta site based on the Alberta Primary Care Model;
 - × Development of a shared vision, service mandate, service delivery model and accountability framework for PHC in Lloydminster;
 - × Action to address issues related to Lloydminster's unique status as a border city, with the view to ensuring timely equitable access to PHC services; and
 - × Development and implementation of mechanisms and processes to effectively engage and communicate with key internal and external stakeholders.
- √ Fan stated that recruitment and retention of physicians is the immediate priority. The community has lost six family physicians in the past year, and six have been recruited to replace them. However, lag time between the departures and arrivals contributes to the physician shortage, and there are still not enough family physicians in Lloydminster. Fan added that while prior thinking focused on developing a single hybrid Primary Health Care model for Lloydminster, building on the separate Alberta and Saskatchewan systems makes sense and would be more achievable in the near term.
- √ PNRHA Board members agreed that the key is to move forward through the review project's Steering Committee, in collaboration with Alberta Health Services and the Saskatchewan and Alberta Ministries of Health, to action the recommendations. Copies of the report will be provided to the two Ministries.

Presentation - Occupational Health & Safety

- √ The injury rate of workers in health care is over 1.5 times the average injury rate for all workers in Saskatchewan, according to the Ministry of Labour Relations and Workplace Safety. For that reason, health care is a focus of Occupational Health and Safety (OH&S). Board members received education on their roles and responsibilities under the OH&S Act, in supervision and safety in health care. The presentation was made by Elke Churchman, Legal Counsel for the Ministry and Maxine Hauth, Occupational Health Officer with OH&S.
- √ Churchman stressed that as the employer, the PNRHA Board and Administration are responsible to ensure the health, safety and welfare at work of all their workers. The Board and Administration are responsible to make sure that their employees are following the OH&S Act and that all work is sufficiently and competently supervised. Board members were encouraged to inform themselves about the Act and their responsibilities under it.

Ophthalmology Services in PNHR

- √ CEO David Fan provided information about ophthalmology services in PNHR, in response to a newspaper article. He advised that PNHR does not employ, hire, or fire the physicians who provide ophthalmology services in the Region. Physicians generally apply for privileges to practice in the health region, and to access the Region's facilities and resources, including Operating Room (OR) time. As a health region, the fundamental question was whether PNHR has the authority to allocate its resources to the best of its ability. Fan said it was necessary for PNHR to go to court to determine if the Region has that right. Fan noted that two of the largest Saskatchewan health regions - Saskatoon and Regina Qu'Appelle - sided with PNHR by seeking intervenor status in the Court proceedings, as the question to be determined has huge implications for all.
- √ Fan explained that what prompted the Court matter and the question of allocation of resources was PNHR's decision in 2007 to support a resident ophthalmologist for the Region and reduce the visiting cataract surgery services of two non-resident ophthalmologists, one each from Edmonton and Saskatoon. The specialists provided only visiting cataract surgical services to Lloydminster and North Battleford. Fan explained that prior to 2007, PNHR had a full-time resident ophthalmologist in The Battlefords. The specialist did not perform cataract surgeries. The health districts that preceded PNHR had granted privileges to the visiting specialists to do cataract surgeries at Lloydminster and Battlefords Union Hospitals respectively.
- √ When the resident ophthalmologist in PNHR retired in 2007, the Health Region had the opportunity to recruit a Canadian-trained ophthalmologist to provide a full range of eye specialty services to Prairie North. That full range of services includes cataract surgery, after hour on-call services, and visiting clinics to other locations in PNHR. The question was whether to support a full-time, comprehensive ophthalmology service for the Region, or split the most lucrative part of the service (cataracts) with visiting specialists. Fan commented that the visiting ophthalmologists provided good services over the years, but that the Region had to weigh the overall benefits of full-service-resident versus single-service-visiting ophthalmology services.
- √ In consultation with Medical staff in The Battlefords and Lloydminster, decision was made to recruit the full-service resident ophthalmologist and reallocate the majority of the surgical time and resources to the resident surgeon. Fan said Medical staff members favoured full-time resident ophthalmology services over visiting services. The visiting ophthalmologists objected to the decision, leading to the eventual Court ruling supporting PNHR's position. Fan added the dilemma over resident versus visiting service applies to any specialty.

Board Meetings

- √ All regular meetings are open to the public. Upcoming PNRHA Board meetings are as follows. *Please note change in location for the August 31 meeting. The meeting was to be held in Lloydminster, but has been moved to Meadow Lake.*

√ Wed. May 25/11	North Battleford	Battlefords Union Hospital
√ Wed. June 29/11	North Battleford	Battlefords Union Hospital
√ -----	<i>No July Meeting</i>	-----
√ Wed. Aug. 31/11	Meadow Lake	Northwest Health Facility
√ Wed. Sept. 28/11	Turtleford	To be determined

How to Reach Us

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