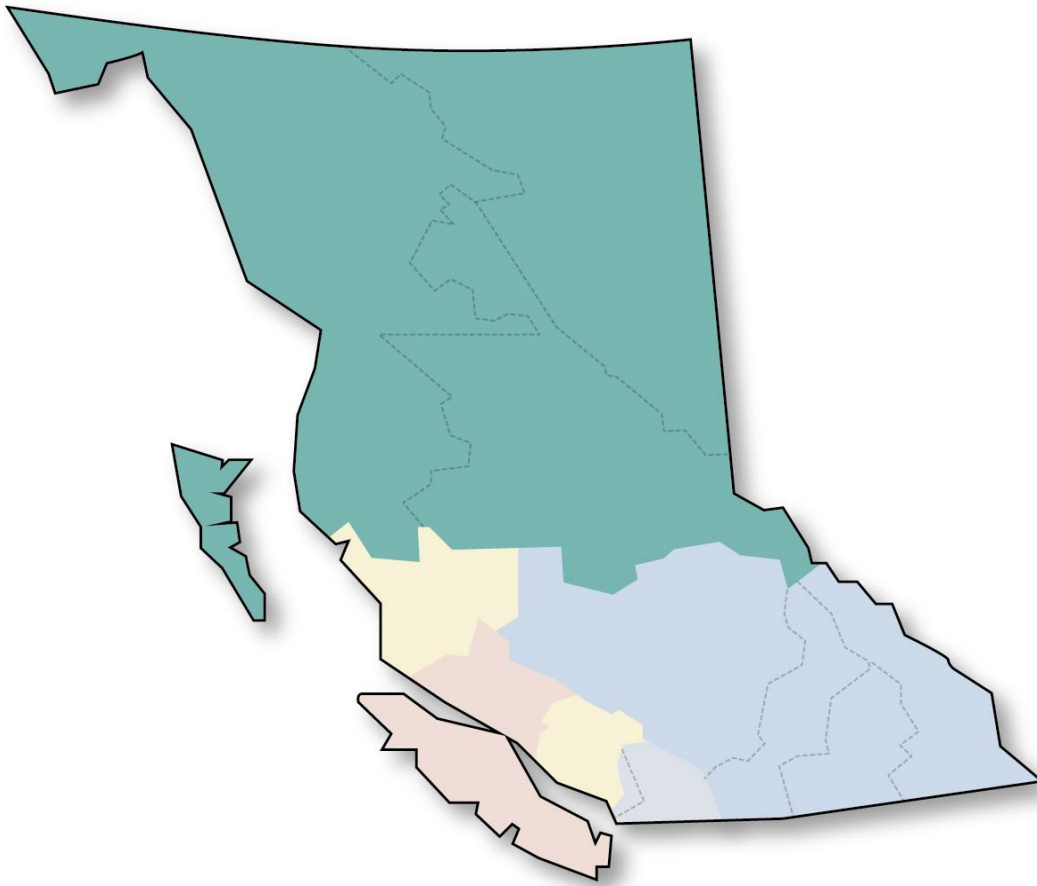


September 2005

**Health Authority
Redesign Accomplishments
A Four-Year Picture**

Northern Health



northern health



NORTHERN HEALTH

Health Service Redesign

British Columbia is planning a health care system where high quality health care is available to everyone – where services are timely, affordable and sustainable, for today and future generations.

Since 2002, when government streamlined 52 health regions with competing or overlapping mandates into six health authorities, the province has been able to maximize the resources available for direct patient care. Five regional health authorities now have responsibility for planning and delivering local health services, such as public health, mental health, residential, home and hospital care. The Provincial Health Services Authority oversees provincial and highly-specialized health services, such as the BC Cancer Agency.



A strong economy and sound fiscal management have enabled the province to increase health care spending by \$3.8 billion between 2001 and 2007. Strategic investments, based on best practices and innovative approaches to local challenges, are improving health authorities' ability to respond to patients' needs. As British Columbia moves forward into the 21st century, lifestyle choices – in nutrition, physical activity, non-smoking and responsible use of alcohol – will be the foundation of keeping our population healthy and our health care system sustainable.

Northern Health

Northern Health provides a full range of health care services to approximately 297,000¹ residents in northern British Columbia. It covers almost two-thirds of B.C., bordered by the Northwest and Yukon Territories, the B.C. interior, Alberta, Alaska and the Pacific Ocean. Northern Health employs 7,000 staff.

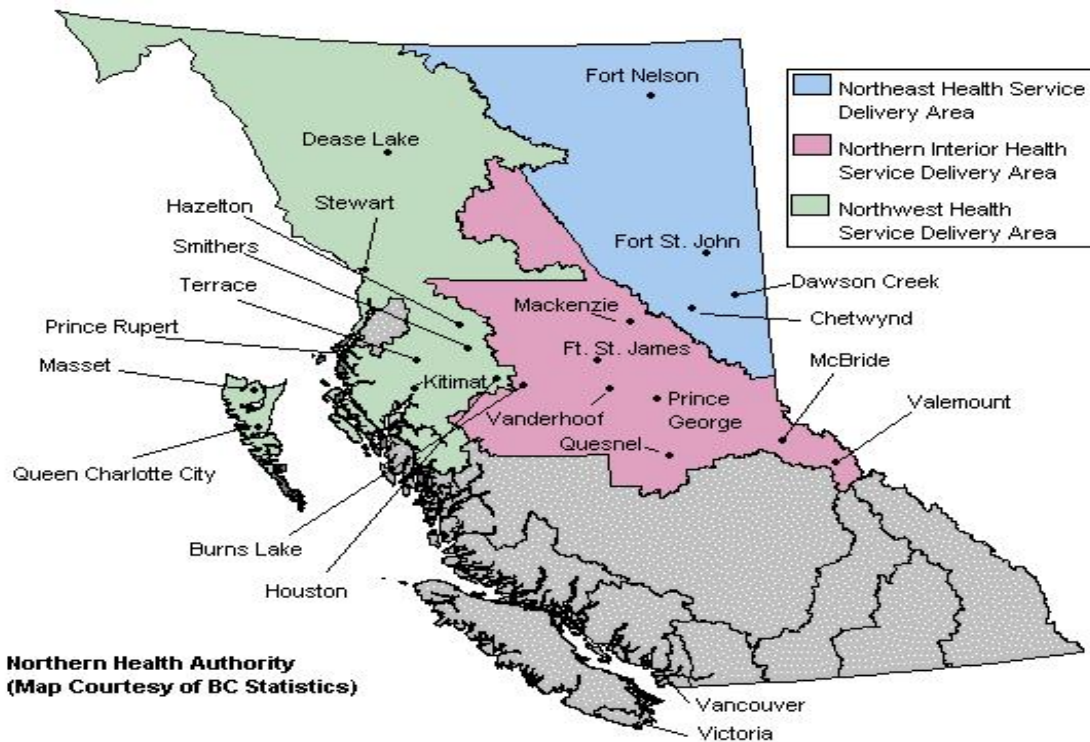
Acute Care Services

Health authorities and the Provincial Health Services Authority are designing a network of acute care that includes centres of excellence for specialized services and community hospitals or treatment centres for basic emergency services.

Northern Health's network of acute care facilities will give residents, including seniors and people with disabilities, better access to acute care services in their own region. This network will guide health authority decision making about capital investment, equipment location and staffing patterns.

Specialized acute services will be consolidated to provide a focus for specialists, along with the professional and technical resources needed to support patient access and quality care. E-health (electronic health) procedures, such as transmitting live photos of a patient's condition to a practitioner at a major health care centre, will be used to bring quality care to those who live at a distance from larger communities.

¹ BC Vital STATS, B.C. Ministry of Management Services, PEOPLE 29 (July 1, 2004).



Delivering Acute Care Services in Northern Health

Northern Health's acute care redesign initiatives include:

- decreasing inappropriate utilization of acute care services;
- increasing access to primary care; and
- supporting improved chronic disease management.

Northern Health has developed and launched a strategic plan to 2008, with the primary goal being an improvement in the health of all northern British Columbians. As part of its strategic plan to 2008:

- Northern Health, through the use of new technologies, program redesign, recruitment initiatives, transportation programs and partnerships with other service providers, will improve service accessibility for residents of this region. Northern residents have asked that this be a strategic priority for their health system.
- Within each health services delivery area, residents will have access to specialized medical care in the areas of obstetrics, pediatrics, general surgery, orthopedic surgery, internal medicine and psychiatry.
- Northern Health will provide access to inpatient hospital care at a greater rate than the provincial average to respond to the poorer health status of our population, but will not exceed 120 per cent of the provincial average, after adjustments for age and movement across health authority boundaries.

Accomplishments since 2001 include:

Medical Technology

- Installed CT scanners at:
 - Dawson Creek and District Hospital;
 - Prince George Regional Hospital; and
 - Prince Rupert Regional Hospital.

- Ordering new CT scanners in 2006 for:
 - Mills Memorial Hospital in Terrace; and
 - GR Baker Memorial Hospital in Quesnel.
- Installed a MRI at Prince George Regional Hospital in 2003/04.

Regional Initiatives

- Began consolidation of services to provide a network of hospital care.
- Co-ordinated specialist services in the northwest and northeastern health service delivery areas.
- Assigned small community hospital status to Chetwynd and Fort. St. James hospitals, with acute care, emergency and diagnostic services.
- Implementing telehealth – tests done to date include echocardiogram consultation, use of an electronic stethoscope and long distance fetal ultrasound. Patients in northwestern B.C. are now receiving collaborative care from local physicians and Lower Mainland specialists via video link.
- Videoconferencing technology is available in Prince Rupert, Terrace, Kitimat, Smithers, Fort St. John, Dawson Creek, Fort Nelson and Prince George.
- Increasing access to diagnostic care by adding a permanent MRI in Prince George.
- The Ministry of Health has invested \$2.2 million in 2004/05 and \$2.2 million in 2005/06 to assist with costs related to the return of patients to northern B.C., planned in association with the new Northern Medical Program.
- Completed changes to laboratory and diagnostic imaging services in the northeast and northern interior. Changes are underway in the northwest (sites in Kitimat and Smithers are retaining microbiology processing capacity).
- Developed regional physician recruitment plan. Since Northern Health was formed, general practitioners and specialists in orthopaedics, internal medicine, pathology, psychiatry, obstetrics/gynecology, emergency, paediatrics and radiology have moved to Prince George. Recruitment for internal medicine; psychiatry; ear, nose and throat; and anaesthesiology specialists continues.
- Hired 33 of 38 registered nursing graduates from the University of Northern British Columbia (UNBC) in 2004 and 49 of 58 graduates from UNBC in 2005.
- With the BC Cancer Agency, developed a joint cancer care strategy designed to enhance the provincial cancer control program for northern patients. The strategy focuses on improved prevention, early detection, treatment and palliative care.
- Partnered with UNBC and University of British Columbia in opening the new Northern Medical Program facility at UNBC. The first physician graduate class is expected in 2008. The new medical school will increase the number of physician graduates as part of the government's \$134 million strategy to increase medical school seats in B.C.

Northwest

- Installed digital imaging upgrades in Prince Rupert and new X-ray units in Hazelton.
- Upgrading Bulkley Valley District Hospital in Smithers and Prince Rupert Regional Hospital:
 - The emergency/radiology renovations at Bulkley Valley District Hospital will increase the physical space and layout of the departments, providing more patient privacy and more effective working space.
 - The \$2.2 million project at Prince Rupert Regional Hospital will relocate the existing ambulatory day care from the second floor to the main level, into space adjacent to the operating room and recovery room, and also redesign the emergency room and intensive care unit to provide a modernized care environment.
- The \$1.3 million northwest renal dialysis expansion has been in operation for two years in Terrace, with patients no longer having to travel to Prince George for treatment.

- Undertaking significant renovations to Mills Memorial Hospital in Terrace to move the intensive care unit next to the emergency room. The move will provide a better working environment and improve patient care.
- Developing a functional space plan for Queen Charlotte City. A new facility is in planning for Masset.

Northern Interior

- Moved to a digital radiology system at GR Baker Hospital in Quesnel. The Cariboo-Chilcotin regional hospital district and the ministry shared the costs. The new system allows physicians to transmit X-rays using a secure electronic network to specialists for consultations. This will save money through the elimination of film, processing and courier costs.
- Redesigned Mackenzie Hospital and Health Centre to provide a range of health services at one site, along with offices for the community's four doctors.
- Completed significant renovations as part of a \$50 million redevelopment of Prince George Regional Hospital. This includes new cancer treatment facilities, a larger intensive care unit, improved emergency room, enhanced hemodialysis space and modernized patient rooms.
- Work will begin shortly on a \$12 million improvement to maternal-child care at Prince George Regional Hospital, which will provide state-of-the-art maternity, newborn and paediatric facilities.
- Improving patient care through new video conferencing and remote medical equipment.
- Completed Northern Health's \$50,000 installation of telehealth equipment in McBride Hospital and the Valemount Health Centre.
- Installed new X-ray units in Vanderhoof and Burns Lake.
- Prince George Regional Hospital is now hosting the hospital pharmacy residency program in partnership with the University of British Columbia and the Canadian Society of Hospital Pharmacists. The program provides pharmacy graduates with a year of enhanced training so they can more effectively use their skills in a hospital. Pharmacists are key health professionals whose skills are in high demand in B.C. health facilities, especially in rural and remote regions. The Prince George program is the only hospital pharmacy residency program outside of the Lower Mainland.

Northeast

- A new walk-in endoscopy program at Fort St. John Hospital and Health Centre reduced the wait list from 45 patients in March 2002 to zero within one month.
- Completed a \$1.41 million renovation in 2004 at Chetwynd Hospital and Health Centre. Renovations included the relocation of acute care, rebuilding labour and delivery areas, palliative care and trauma units, a new \$215,000 X-ray room and moving community health services under one roof.
- A new \$120,000 bone mineral densitometer now operating at Dawson Creek and District Hospital is providing early detection of osteoporosis.

Mental Health and Addiction Services

British Columbia is reforming mental health and addiction services to improve the health and functioning of people with mental disorders and/or problematic substance use, their families and the communities in which they live. Mental health reform will:

- encourage the use of best practices based on reviews from other Canadian institutions and around the world;
- bring together community supports to better serve clients; and
- provide provincial tertiary services for those who require hospital or specialized care.

The recent alignment of addiction services with mental health services offers new opportunities for improving access and responsiveness of care.

Mental Health and Addiction Services in Northern Health

Northern Health's mental health and addictions plan focused on:

- shifting to an early intervention approach;
- decreasing alternate level of care (ALC) days;
- improving the continuity of care across sectors;
- redesigning alcohol and drug programs; and
- developing capacity for tertiary services.

Accomplishments since 2001 include:

Regional Initiatives

- Northern Health has spent considerable time putting structures in place to improve mental health and addictions services, including the emergency RN program, telehealth, SYNAPSE and the community response unit.
- Approved an addiction plan in 2003. An early intervention plan has also been implemented.
- Completed 42 beds in the Riverview redevelopment project.
- Improving health information technology: a total of \$2.65 million in funding has been dedicated to new information technology to support mental health and home and community care clients.

Northwest

- Working to expand services for people with a serious and persistent mental illness through the development of the Seven Sisters 20-bed mental health facility in Terrace. The facility opened in March 2005.
- Began patient transfers from Riverview Hospital to Bulkley Lodge in Smithers.

Northern Interior

- The size of Iris House in Prince George has been doubled, providing 20 additional beds for people with serious and persistent mental illness. The expansion was completed in April 2003.
- A new drop-in centre opened in Prince George to provide group addiction programs, vocational support and an informal social network.

Northeast

- Providing more mental health beds in Fort St. John and adding geriatric mental health resources at the North Peace Care Centre.

Home and Community Care

Seniors and people with disabilities want to live as independently as possible, for as long as possible. Today's seniors are healthier and living longer than ever before. They want more choices for housing and care that respect their independence.

As British Columbia's population grows and ages, health authorities are modernizing home and community care services to:

- provide clients living at home with services that enable them to remain independent and in their own homes;
- reduce wait times for residential care – average waits are now 60 to 90 days, compared to up to a year or more in past;
- make residential care available to seniors and people with disabilities with the most complex health care needs;

- provide affordable living options, such as assisted living and supportive housing, for independent clients; and
- provide sensitive, compassionate end-of-life care.

The province is adding 2,762 new care beds and units by December 2006 and will meet its commitment to develop 5,000 new care spaces by 2008. They include a mix of residential care beds and independent living options.

New residential care beds are being developed where needed and outdated residential care facilities upgraded to meet modern care standards for British Columbians who require 24/7 professional nursing care. To respond to the demand for more choices, new independent living options are also being created. Assisted living units are being developed for seniors who can direct their own care and supportive housing units with home support for seniors who need a lower level of care. Home care and home support services are being enhanced across the province for seniors who live at home.

Research and feedback from seniors' care experts, and seniors themselves, support B.C.'s approach – today's seniors want options besides traditional nursing homes as they age. These changes will ensure care services for seniors and people with disabilities are sustainable, value consumers' needs and expectations and provide the right care in the right setting.

Home and Community Care Services in Northern Health

As part Northern Health's strategic plan to 2008, people assessed as being at risk of losing their capacity to live independently will have timely access to home support services and home care nursing in their place of residence. They will also be able to access additional support services within their community. Communities will be organized into "clusters," with residents in each cluster having access to residential care beds and independent living units, consistent with their assessed needs.

Northern Health is redesigning home and community care services to promote independence and self-care by providing an increasing range of community alternatives. Northern Health's goals for change are focused on patient care and include improvements to:

- complex care in residential facilities;
- independent living units; and
- community services enhancements, including palliative care and day care centres.

Accomplishments since 2001 include:

Regional Initiatives

- Improved health information technology: a total of \$2.65 million in funding has been dedicated to new information technology to support mental health and home and community care clients.
- Implemented a regional home and community care plan in 2003/04, setting targets for complex care beds, independent living units and the addition of new community services.

Northwest

- Opened McConnell Estate Supportive Living Complex in Terrace, a 22-unit project for physically-challenged seniors and adults.
- Increased funding to enhance services at adult day centres in Terrace and Prince Rupert and develop a new adult day centre in Kitimat.
- Began design work on the replacement to Acropolis Manor in Prince Rupert.

Northern Interior

- Opened Laurier Manor, Prince George's first independent housing development with support for seniors.
- Completed work on a 50-bed, \$7.5 million replacement for Omineca Lodge in Vanderhoof, scheduled to open in fall 2005.

- Increased funding to expand and enhance services at Rainbow Adult Day Centre in Prince George.
- Held a groundbreaking for a new assisted living housing complex in Burns Lake in August 2005.
- Opened Prince George Regional Hospital's new geriatric day hospital in 2005, offering seniors better access to specialists in geriatric health conditions. This will help seniors more effectively deal with health issues they may face as they age.
- Design work is taking place on a replacement to Baker Lodge in Quesnel.

Northeast

- Opened Rotary Manor, a new 44-bed (42 residential care and two respite care) facility in Dawson Creek.
- Completing planning for residential care and assisted living services for Pouce Coupé.
- Increased funding to expand and enhance adult day centre services at Fort St. John's North Peace Care Centre and Rotary Manor Adult Day Centre in Dawson Creek.

Primary Health Care Services

Primary health care is the foundation of the health system. Primary health care is where the majority of British Columbians receive their care in any year. General practitioners most often provide the care and are the gatekeepers to networks of other health care services, specialist care and community resources.

British Columbia health authorities have received \$48 million of a \$73.5 million allocation from Health Canada's primary health care transition fund. Northern Health's portion of these funds is \$4.7 million over a four-year period. Nisga'a will receive \$0.53 million for the same period.

The fund has been used to initiate the renewal and sustainability of the province's primary health care system. Renewal will improve appropriate patient access to care, achieve optimal patient health outcomes and enhance health care practitioners' professional satisfaction.

Over the past four years, health authorities have focused on:

- working with family practitioners to develop modern primary health care delivery models and networks;
- improvements in chronic disease management by using structured collaboratives, technology-enabled decision support and patient registries;
- the development of standards for electronic medical summaries and the electronic chronic disease management toolkit;
- an increase in the application of evidence-based prevention in primary health care, based upon the principles of the Canadian Task Force on Preventive Health Care; and
- training patient leaders, who then teach self-management to other patients who live with chronic conditions.

Designing Primary Care Services in Northern Health

Northern Health primary health care initiatives focus on:

- increasing access to primary health care through health centres;
- establishing a specialized health centre in Prince George to serve vulnerable people with multiple health needs; and
- improving the quality of primary health care through staff education and training, public education and applied technology to support the co-ordination of patient care.

Accomplishments since 2001 include:

Regional Initiatives

- As part of the organization's strategic plan to 2008, Northern Health will enhance the prevention and management of chronic diseases, especially diabetes, through active partnerships with physicians and application of a chronic disease management model.
- Partnered with the Healthy Heart Society of BC to establish a number of regional chronic disease management initiatives. Objectives include: reducing rates of cardiovascular disease, fighting diabetes and congestive heart failure and promoting cardiac rehabilitation and smoking cessation programs. Initial projects will take place in Haida Gwaii, Prince Rupert, Terrace, Smithers, Quesnel, Fort St. John/Dawson Creek and Prince George.
- Developed a chronic disease prevention and management network.
- Involved health care providers in a diabetes collaborative to improve the quality of care.
- Invested \$1 million annually for community-based aboriginal health improvement projects.

Northwest

- Integrated health services in both Masset and Kitimat.
- Opened Houston Health Care Centre on weekends.
- Developing a new \$1.4 million, six-station renal dialysis unit at Mills Memorial Hospital in Terrace. The new unit will allow renal patients to receive care closer to home.

Northern Interior

- Developed the new \$1.2 million Southside Health and Wellness Centre at Grassy Plains (south of Burns Lake), in conjunction with area First Nations. The centre will focus on health promotion and disease prevention.
- Integrating health services in both Quesnel and Southside.

Population Health

Effective health promotion, disease prevention and public health services are vital to a population's well-being. British Columbia is striving to improve public health care and lead the way in healthy living and physical fitness in North America.

Health authorities are participating with the Ministry of Health in defining a core set of prevention and protection programs government will provide. The project will also identify best practices that support population health and wellness. Consultations beginning in 2002/03 have resulted in government developing a list of priorities for protection and prevention programs.

Population health focuses on improving people's health through prevention of disease, injury and disability. Prevention is key to the health system's sustainability. Public health services protect the public from health or safety risks to their self, food, water and environment.

Public Health Care Services in Northern Health

Key initiatives include:

- Northern Health has participated in the development of a public health core programs discussion paper and participates on a provincial advisory committee.
- As part of the organization's strategic plan to 2008:
 - Northern Health will support a comprehensive tobacco reduction strategy to address the single greatest cause of preventable illness – tobacco use;

- Northern Health is working towards a downward trend in potential years of life lost due to motor vehicle crashes. A key component of this is a conference scheduled for October 2005 to discuss ways to reduce the number and severity of motor vehicle crashes in the north;
- Northern Health will increase the proportion of its operating budget spent on population health, public health, mental health, addictions and home care services each year during the plan period;
- Northern Health will strengthen its role and partnerships in programs directed to support health at all stages of life. Northern Health will develop programs and strategies to work in partnership with communities in areas such as injury reduction, child health, seniors' health, mental health and addictions, chronic disease management, palliative care, health promotion and disease prevention.
- Community consultation involving more than 80 aboriginal communities, bands, tribal councils and organizations has been completed. An aboriginal health services plan was completed in May 2003.

Corporate Support Services

Accomplishments since 2001 include:

- Implemented a new medical supply purchasing model, resulting in savings that flowed directly to patient care.
- Reducing purchasing costs by \$630,000 a year, money that is being reinvested in direct services for patients, clients and residents, through a partnership with a national group purchasing organization.
- Implemented standard practices for human resource management, materials management, laundry, housekeeping and food services, plant/energy/property, finance and payroll.
- Implemented a regional mentoring program to help support and retain young nurses.
- Developing a regionwide clinical information system. Benefits include faster delivery of results of clinical tests to physicians and increased availability of patient information by patients.
- Introduced an integrated workplace health and safety strategy, reducing workplace injuries and resulting in fewer sick days.

Health Care Professionals

- Northern Health had 308 general practitioners and 102 specialists in 2003/04.²
- Northern Health continues to actively recruit physicians and specialists to ensure quality patient care for northern British Columbians. Since 2001, the health authority has recruited the following medical staff:

	2001/02	2002/03	2003/04
General practitioners	311	313	308
Medical/surgical specialists	99	103	102
Psychiatrists	15	16	13

² MSP Information Resource Manual Fee-For-Service Payment Statistics 2003/2004, Information Resource Management, Knowledge Management and Technology, B.C. Ministry of Health Services; Population Extrapolation for Organizational Planning with Less Error 29 (PEOPLE 29), BC Stats, B.C. Ministry of Management Services.

GENERAL CONTACTS

BC HealthGuide / BC NurseLine <http://www.bchealthguide.org>

1 866 215-4700 Toll-free in B.C.

1 866 889-4700 Deaf and hearing impaired, toll-free in B.C.

604 215-4700 In Greater Vancouver

Dial-a-Dietician www.dialadietitian.org

1 800 667-3438 Toll-free in B.C.

604 732-9191 In Greater Vancouver

BC Smoker's Helpline www.healthservices.gov.bc.ca/tobctrl/reduction.html#help

1 877 455-2233

Please note the Ministry of Health website address will be changing to: www.health.gov.bc.ca. If you are unable to locate the above websites, please try the new address.

HEALTH AUTHORITY CONTACTS

Local Contacts:

Region/Local Area	Name	Position	Phone
Northeast	Larry Tokarchuk	Chief Operating Officer	262-5297
South Peace	Karen Davis	Health Service Administrator	782-8501
North Peace/Liard	Lee Hall	Health Service Administrator	262-5200
Home and Community Care: All Northeast sites	Ruby Johnson	Area Director of Home and Community Care	263-6067
Northern Interior	Michael McMillan	Chief Operating Officer	565-2113
Prince George	Vacant: Recruitment underway	Health Service Administrator	
Mackenzie	Barb Crook	Site Manager	997-3263
Robson Valley	Charles Taylor	Health Service Administrator	569-2251
Quesnel	Fraser Bell	Health Service Administrator	992-0617
Lakes/Omineca (Vanderhoof, Fraser Lake, Fort St. James, Burns Lake)	Jim Vaillancourt	Health Service Administrator	567-2211
Home and Community Care: All Northern Interior sites	Val Waymark	Area Director of Home and Community Care	649-7560
Northwest	Suzanne Johnston	Chief Operating Officer	624-2171
Houston, Smithers, Hazelton, Dease Lake	Andrew McLetchie	Health Service Administrator	847-6202
Kitimat, Stewart, Terrace	Rowena Holoien	Health Service Administrator	638-4021
Prince Rupert/Queen Charlotte Islands	Sue Beckermann	Health Service Administrator	624-2171

Region/Local Area	Name	Position	Phone
Home and Community Care: All Northwest sites	Ken Richards	Area Director of Home and Community Care	638-2223

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The numbers in this document reflect the latest available data as of printing.

Please note data changes daily as the planning and delivery
 of health care services progresses.