

**Annapolis Valley
Partnering for Better Health**

PRELIMINARY CASE FOR SUPPORT

History of Caring

Residents of the Annapolis Valley have long understood the value of caring for one another. The quality of health care and wide range of services offered in our community to residents of Annapolis and Kings Counties and Western Nova Scotia has been outstanding. In 1992, the Valley Regional Hospital was built with help from the community so care could be provided closer to home.

Today, Valley Regional Hospital, one of six Annapolis Valley Health facilities, serves over 85,000 residents as the regional referral centre for the Annapolis Valley. The number rises to 115,000 residents, including Western Nova Scotia, when orthopedic, urology, and vascular surgery are included.

Today, with the growing and aging population of the area served by Annapolis Valley Health, the District is hard pressed to continue meeting the growing needs of the community. The facilities of the hospital are increasingly strained, and there is no proper hospice for meeting the palliative care needs of many persons nearing the end of their lives.

To meet these expanding needs, Valley Regional Hospital Foundation and Valley Hospice Foundation have formed a unique partnership to improve health care – whether celebrating the entry into the world of a new Annapolis Valley resident or seeking comfort as a beloved family member nears death.

Our Challenges

Valley Regional Hospital urgently needs additional space and the means to configure the existing space to ensure patients receive the best care possible.

The Emergency Department at Valley Regional Hospital is physically stretched to the limit making it difficult for staff to offer care while ensuring patient confidentiality. Health care personnel currently provide quality health care within restricted physical limitations.

There is a critical and immediate need for additional space for acute care. Patients can sometimes wait several days for a bed. Surgeries are capped due to a lack of inpatient beds.

Many seniors admitted to the Medical Unit at VRH have multiple chronic illnesses or need an alternate level of care. This need is increasing as Baby Boomers enter their senior years. The Medical Unit beds at VRH and one family room are stretched over two floors. The design, developed by necessity as beds were added, makes it difficult for staff to effectively and efficiently deliver services to patients. Patients do not have sufficient private space to meet with families or friends.

Many people faced with a life limiting illness do not have the support necessary to stay at home. They desperately need the type of support provided in a Hospice, where the focus is on end of life care. People caring for loved ones who choose and are able to die at home urgently need support, training and resource material so they can continue to provide care.

To cope effectively with these challenges, more physical space is needed and the existing space must be wisely. A Hospice must be built and outfitted and the necessary tools added. We have focused the *Partnering for Better Health* Campaign on meeting these challenges.

Comprehensive Plan

Annapolis Valley Health identified these challenges in 2003 through a comprehensive planning process. The first step was to identify emerging trends and requirements. The second was to identify the necessary physical resources to effectively deliver necessary health care services required by the residents of Kings and Annapolis Counties and Western Nova Scotia.

All plans have been carefully analyzed and approved by the Annapolis Valley District Health Authority. Input has been sought from all partners including the Department of Health, Valley Regional Hospital Foundation, Valley Hospice Foundation, as well as community health boards and health care foundations and auxiliaries.

The Plan is to enlarge the physical space to the Emergency Room and add an additional 21 beds. The timing allows for the reconfiguration of existing space so patients receive the best care possible. Every step taken in health care has a direct impact on other areas.

At the same time that planning was taking place for AVH, Hospice Foundation members were working toward developing a Hospice. Through meetings with AVH staff and Hospice Foundation members, an agreement to facilitate the development of a hospice that fits well with the comprehensive plan was reached.

Right Steps in the Right Direction

To free up space at VRH, some services had to be moved to another location. ***Mental Health and Addiction Services*** were relocated to AVH Chipman, in the Annapolis Valley Regional Industrial Park. The move allowed purpose built space providing individual and group therapy rooms.

Administrative and support staff relocated from Valley Regional occupy the balance of AVH Chipman. This has resulted in a more efficient working relationship among staff with no increase in staff complement.

These moves have freed up more than 35,000 square feet at Valley Regional Hospital allowing for a 50% expansion to the Emergency Department , addition of 21 beds, and relocation of Ambulatory and Medical Services for greater patient comfort and confidentiality.

Enlarged Emergency Department

The Emergency Department is the front door to any hospital and certainly one which should be at the cutting edge of emergency healthcare, technology, and staffing. The space and available tools in the emergency department at Valley Regional have outgrown their ability to meet modern standards of patient care and confidentiality. The Emergency Department will be enlarged by 50% so patients can receive more efficient care.

Flow of patient information is critical in the Emergency Department to ensure quick and easy access to patient diagnosis. An Emergency Room Information System will provide up-to-the minute data to track and serve patients, reflect the severity of their health problem, as well as protect patient confidentiality.

An automated medication delivery system will ensure patient safety and accurate distribution of medication. Time saved through this system will allow staff to focus on their priority – their patients.

Currently, there are two stationary cardiac monitors and three mobile units. A Cardiac Monitoring System will be updated and expanded providing five units in the critical care area; three in the trauma room and two mobile units to help deliver the care patients need at the time they need it.

In a hospital, prevention and patient safety is paramount. The Emergency Department will also be equipped with two up to date isolation rooms to deal with infection control diseases. When plans for Valley Regional were drawn up in 1985, health officials thought that with access to modern antibiotics, isolation rooms were a thing of the past. As recent experiences such as SARS have shown, the ability for hospital personnel to isolate a patient is a key part of ensuring the health of the community.

Addition of 21 Beds

Currently, one-third of our district medical beds are occupied by patients requiring an alternate level of care. Through this campaign, funding will provide an increase of 10 medical beds at VRH. Eight beds currently used for palliative care patients will be relocated to the new Hospice.

There will be an increase of 11 surgical care beds allowing patients faster access to surgery. The overall increase in surgeries will have a positive impact on patients waiting for hip and joint replacements.

Impact on Medical Unit Services

Currently, medical care beds are spread over two floors in the medical, obstetrics and day surgery units. Relocation of these services will mean that all medical care beds will be placed in one area and include two additional family rooms to meet specific needs of patients and their families in a timely and confidential manner. The unit will include family-centered, transitional and acute care areas as well as isolation rooms to deal with infection control diseases. The medical unit will include an integral link to the Hospice facilitating the provision of palliative care for patients, without impacting the focus on serving the needs of other patients admitted to the medical unit.

Hospice

Currently in Canada, only 15 to 20 per cent of dying patients have access to hospice or palliative care services at the end of their lives. More than 75 per cent of Canadians die in acute care hospitals or long-term care facilities. There is presently no free standing Hospice in the Maritime Provinces.

These figures reflect the fact that while the majority of people with a life- limiting illness choose to be cared for at home, there will always be patients unable to do so. To provide the best care possible closest to home, an 8-bedroom Hospice, linked to the hospital, will be built, outfitted and furnished.

A Hospice is more than a building; it is a philosophy. The focus is on care rather than cure. The addition of a Hospice will provide direct care and dignity to dying patients. The Hospice will help people complete their final journey peacefully, with their pain and symptoms controlled, surrounded by family and friends, caring volunteers, and specially trained health care professionals.

While the Hospice will serve eight patients directly at any one time, people choosing and able to die at home and their caregivers will receive support and training as well. Families coping with grief will be assisted throughout the bereavement period. The Hospice will become a centre of education and support to families, health professionals and the public in issues around dying and bereavement.

The Hospice will be approximately 7500 square feet, and will be specifically designed to serve Hospice palliative patients and their loved ones in a peaceful, comfortable, home-like environment. The overall design of the Hospice will resemble a home with a separate entrance and landscaped gardens.

The link to the Hospital enables patients to receive support services from members of the health care team – social worker, physio and occupational therapists, psychologists and chaplain.

The Hospice will be divided into sections with a bedroom area, common areas and a section for support staff. The bedroom area will include eight private bedrooms with ensuite washrooms. To ensure the Hospice looks and feels as much like a home as possible, medical equipment will be readily available but concealed.

All homes have a common area where family can gather. The Hospice will have a common area that includes a kitchen and living room. For children, there will be a child's play area in one corner of the living room. The living room will also have comfortable seating, artwork, music and resource materials.

Those involved in the process of dying have a variety of physical, spiritual, emotional and social needs. A quiet room for reflection will be important to help bring peace of mind to patients and their families. The hospice will provide the support where the focus is on end of life care.

"The Valley Hospice is a project very close to my heart. I know from personal experience how exhausting, both physically and emotionally, it can be to care for loved ones in their last months.

The Hospice will be a blessing. for many families."

Mrs. Thelma Smith

Making It Happen

Valley Regional Hospital Foundation and Valley Hospice Foundation have formed a partnership and are embarking on a capital campaign to raise the \$8 million required to build the Hospice, renovate the hospital, purchase and renovate AVH Chipman, add capital equipment, and cover capital campaigns costs.

- \$16 million is the total required to build the Hospice, renovate Valley Regional Hospital, purchase capital equipment and purchase and renovate AVH Chipman.

Breakdown:

- \$11 million is required for renovations with the province of Nova Scotia paying 75% or \$8.25 million and the community required to raise 25% or \$2.75 million.
- \$1 million in capital equipment expenditures will equip the Emergency Room as well as other areas of the hospital.
- \$4 million will be required to build and equip the Hospice.

The Campaign will raise \$4 million for the Hospice to cover all costs of building and equipping the Hospice. Once the Hospice is built, Annapolis Valley Health will be responsible for staffing and other ongoing annual operational and maintenance expenses as the Hospice becomes an integral part of the palliative care program. Should the building and equipment costs not be somewhat less than \$ 4 million, any remaining funds will be used to set up an endowment fund for specialized palliative care services such as art and music therapy which are above and beyond what the province provides.

Conclusion

Our community takes enormous pride in our ability to help one another in times of need. There can be no need more acute than when someone in your family requires health care.

Knowing that Valley Regional Hospital will continue to be there, providing quality health care is one reason why many people are proud to call Annapolis Valley their home. The establishment of the Hospice has taken years of planning and hard work, but above all, the vision to see what was required and the fortitude to move ahead to ensure the need was met.

Quite simply, members of our community care about one another.

*“One of the marks of a civilized society is that it takes care of its most vulnerable members.
The modifications to the hospital and the addition of the Hospice are significant steps in this process.”*

*Dr. Jim Perkin
Past President of Acadia University
Past Chair Valley Hospice Foundation
Honorary Member Valley Regional Hospital Foundation*

FACT SHEET

Residents of Annapolis Valley will benefit from the changes through:

- An 8 bed Hospice linked to the hospital to complete an integrated palliative care program for the people of Annapolis Valley.
- Emergency Room enlarged by 50% so patients receive improved care. Staff will be equipped with these necessary tools:
 - a) A computerized information system to provide up-to-the minute data to track and serve patients, reflect the severity of their health problems, as well as protect patient confidentiality.
 - b) An updated and expanded cardiac monitoring system to help deliver the care patients need the time they need it.
 - c) An automated medication delivery system to ensure patient safety and timely distribution of proper medications.
- Addition of 21 beds, including 11 surgical care beds and 10 medical beds.
- Additional surgeries performed annually.
- Enhanced Ambulatory and Medical Care Services to reflect current best health care practices.
- Support and education of families, health professionals and the public in issues around dying and bereavement.
- 35,000 square feet has been freed up at VRH through moving Addictions and Mental Healthy Services and administrative and support staff offsite to AVH Chipman.
- Mental Health and Addictions Services have purpose-built space with group and individual therapy rooms.

Services presently offered at Valley Regional Hospital

Medicine
Surgery
Maternal and Child Care
Intensive Care
Diagnostic Imaging

Ambulatory
Emergency
Satellite Medical Oncology
Mental Health Services
Orthopedics

Urology
Diabetes Education Program
Vascular Surgery
Cardiac Rehabilitation Program