

VIHA report touts limiting surgeries

Gulf Islands Driftwood

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Limiting Lady Minto Hospital's surgical services and redirecting money to seniors and mental health needs is the main thrust of the Salt Spring Island Health Review released last Thursday.

The document, almost nine months in the making by the Vancouver Island Health Authority, was created in response to closure of the hospital's operating room in the summer of 2008.

"I think it very accurately reflects the views of the majority of Salt Spring Island stakeholders and puts both clarity and definition to many of the issues that have been a concern to many residents and health care workers," said hospital chief of staff Dr. Shane Barclay on Monday.

The 27-page report recommends ceasing surgery procedures that require a full operating room at Lady Minto, while maintaining endoscopies through use of visiting specialists. It notes that medical and surgical endoscopies formed more than 70 per cent of the surgeon's 383 cases in fiscal 2006/07 through June of 2008.

If the recommendations are accepted, the operating room would be "repurposed . . . for other functions that need additional high-quality space."

Those include expanding the emergency department; creating a private room for families to gather in times of need; expanding lab and medical imaging space; and having dedicated space for private psychiatric patient interviews.

Besides reinstating the endoscopy service, VIHA recommends shifting operating-room funds towards establishing mental health nursing at the hospital, and to services that will keep seniors healthy and in their homes for as long as possible and improve their rehabilitative success when they're hospitalized.

Grant Hollett is the study's author and director of VIHA's planning and community engagement department, who along with his assistant Brendan Mather consulted with 16 different stakeholder groups, ranging from hospital staff to physicians to the Seniors Wellness Program and Salt Spring Community Services. They found most groups did not believe the operating room was indispensable.

"Nearly all stakeholders were willing to consider limiting or eliminating surgery at the hospital, as long as the resources previously used to fund it were redirected to improve and enhance other services locally," the report states.

Rob Grant, executive director of Salt Spring Community Services, said he was very encouraged to see the mental health-related recommendations regarding Lady Minto.

"[Hospital staff] have been amazing at handling the very difficult mental health admissions without adequate resources," he said. "Hopefully new resources will be brought in to actually meet the needs that they are facing."

Grant said he was also encouraged by comments "about building our community capacity to better support our aging population. This review sets the stage for some good planning in that area."

Stakeholders did, however, feel strongly that endoscopy services should be maintained at the hospital, "pointing out that travelling off the island after undertaking the pre-procedure preparation for certain endoscopy procedures would be very uncomfortable and challenging."

The Save Our Surgery committee did not agree with limiting or eliminating surgery, and said in a written response Monday that the review “is clearly driven by and more concerned with the bottom line than with the many ramifications of the decision to discontinue surgery at Lady Minto Hospital. It makes no attempt to quantify the resulting actual costs to island residents and the less easily quantifiable social and inevitable family disruptions when an island resident is transferred elsewhere for surgery which could easily be performed at LMH. These referrals are made to other hospitals that are already understaffed and overburdened in their attempt to serve their own constituents.”

Using Lady Minto Hospital to reduce the wait times for endoscopies experienced in other VIHA-area hospitals is mentioned as a possibility in the report.

The SOS group commended the work of mental health groups to achieve an increase in service, but stressed “these needs and the obvious priority need for a fully functioning operating room are not mutually exclusive. A minor increased allocation from the VIHA budget would see a satisfactory solution to both deficits and better meet the needs of the community.”

The review is full of data on Salt Spring’s health status, demographics and what the hospital is currently used for, and an assessment of health service gaps on the island. It also recommends several possible ways to address chronic hospital staffing challenges.

In the long term, the report recommends replacement of Lady Minto with “an integrated hub of hospital and community services potentially including an attached health care clinic, outpatient services and community services.

Hollett told the Driftwood he has VIHA executive support for most recommendations and some preliminary planning has already been done.

He also said closing the operating room to everything except endoscopies after a \$2.7 million renovation was completed in 2004 did not mean going ahead with the project was a bad decision in 2001.

“They were caught in a transition period and made the best decision they could at the time. Even if they were going to keep a foot in [surgery] they really needed to do it.”

“The good news,” he added, “is that we will be able to use that great space.”

VIHA: http://www.viha.ca/about_viha/news/publications/ssi_health_review.htm for the full Salt Spring Island Health Review online.

A public meeting to discuss the report is in the works and will be announced as soon as the details are finalized.