

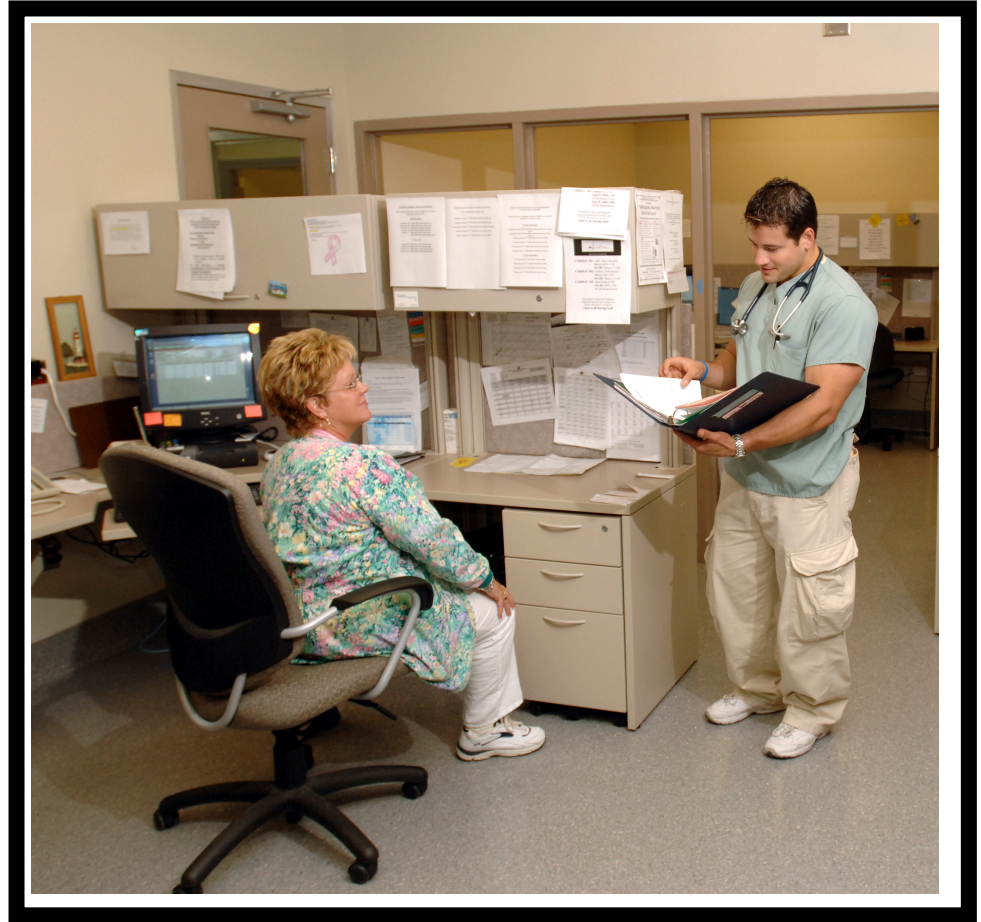


NIAGARA HEALTH SYSTEM
SYSTÈME DE SANTÉ DE NIAGARA
TOGETHER IN EXCELLENCE - LEADERS IN HEALTHCARE

We're still here to care for you

Urgent Care Information Session

Douglas Memorial Site July 15, 2009





Today's Facilitator

- Frank Demizio, Vice President
with site responsibility for Douglas
Memorial





Our Urgent Care Team Leaders

Marcia Ladouceur, RN BScN

- > Registered Nurse 23 years
- > Project Lead & Clinical Manager Emergency Services

Dan Belford, RRT

- > Registered Respiratory Therapist
- > Clinical Manager, Greater Niagara General and Douglas Memorial Emergency Services

Pat Morka, RN

- > Registered Nurse
- > Health Program Director, Emergency Medicine



Q: What services will still be provided at Douglas Memorial Site ?

ANSWER:

- ✓ 24 hour – 7 day a week Urgent Care Centre – walk-in treatment for non-life or limb threatening injuries and illness – September 2009
- ✓ Capacity to treat, stabilize and transfer
- ✓ 40 Complex Continuing Care beds; 6 observation beds
- ✓ Surgical and medical outpatient clinics
- ✓ Lab, x- ray/ultrasound, pharmacy



Q: What is going to happen to the 'H' sign?

ANSWER:

- ✓ The 'H' will stay on the building
- ✓ The NHS is one Hospital with seven entrances and when you present to any of our sites you are in the NHS hospital system
- ✓ Not all sites have identical services so we are educating residents about where they go to access certain specialized services.



Q: Will there still be doctors at Douglas Memorial Site?

ANSWER:

- ✓ YES – same medical staff and nurses that serve in ER will be available in the Urgent Care Centre 24/7
- ✓ Local family physicians will be responsible for the medical care of the complex continuing care patients who are admitted to the 40 beds at Douglas Memorial



Q: Will nurses take care of patients in the Douglas Memorial Urgent Care Centre?

ANSWER:

- ✓ YES - 2 emergency-trained RNs will staff the UCC 24/7 with the physician. They'll have clerical support 16 hours a day
- ✓ Staffing has been determined after reviewing other Ontario UCCs with same number of patient visits
- ✓ We currently see 20,955 patient visits/year at Douglas ER – or approximately 57 per day



Q: What do I do when I am sick?

ANSWER:

- ✓ Think about what it is you need – do you have a minor ailment? Would you go to a Dr.'s office if you could? If you can't, then go to an Urgent Care Centre.
- ✓ Do you think you need admission to hospital? Do you need a specialist? Then go to an Emergency Department.
- ✓ Are you having difficulty breathing, chest pain, symptoms of stroke? Call 911.



Q : I need IV medication, can I still go to Douglas Memorial Site after the changes are made?

ANSWER:

- ✓ Yes - Medical and surgical clinics will still be available for outpatients.
- ✓ Clinics include services for blood transfusions, medication infusion, lumps and bumps, non-urgent specialist consultations.



Q: Is the new St. Catharines hospital being built to replace Douglas Memorial?

ANSWER:

- ✓ NO
- ✓ The new facility being built in west St. Catharines is a regional centre for cancer, cardiac and mental health services and a local acute care hospital to replace the aged St. Catharines General and Ontario Street sites serving the local community of St. Catharines, Thorold and immediate area
- ✓ The new hospital will house 375 in-patient
- ✓ There are 869 in-patient beds across NHS' six sites
- ✓ 46 beds will be at the Douglas site



Q: What kind of care do people get while in ambulance?

ANSWER:

- ✓ All paramedics can provide symptom relief, defibrillate and monitor vital signs. Advanced Care Paramedics can also start IVs, give emergency medications IV, intubate and perform other advanced skills.



Q: What's happened in Port Colborne since the change from ER to UCC?

ANSWER:

- ✓ Port Colborne conversion to UCC on July 6th
- ✓ Residents using UCC and ambulance appropriately – evidence that public education has been effective
- ✓ Patient survey feedback extremely positive



Q: What transportation services are available?

ANSWER:

- ✓ Residents use different modes of transportation to access hospital-based services:
 - **Surgical Appointments and Outpatient Clinic Visits** – Residents use Niagara Specialized Transit, taxi, municipal bus, self/family vehicle
 - **Inpatient Transfers** – This refers to site-to-site transfers of inpatients for their ongoing care or for diagnostic tests or procedures only available at another site. This transportation is provided by the NHS using contracted service providers, such as Ontario Patient Transfer.
- ✓ An integrated regional transit system is long-awaited and NHS is participating in discussions with regional partners.



Q: What about the renovations that have taken place in the ER?
Was that a waste of money?

ANSWER:

- ✓ For many years, we wanted to create better privacy for patients being triaged and registered. Last year, we were able to do this.
- ✓ We've created a private triage space, a big improvement from patients being triaged in the main hall in front of everyone.
- ✓ Now, there's also a private registration area, so patients are no longer sitting in the waiting room when they register.
- ✓ Also, a sound masking system was installed in the ceiling to create more privacy in these areas.
- ✓ The nursing station & physician consult area has been updated and enlarged, creating much better staff workspace and flow.
- ✓ All these changes mean we're using the floorspace better and improving both flow and privacy for patients. This better space will serve our Urgent Care patients well.



Q: Where will patients go by ambulance – will they automatically go to Niagara Falls?

ANSWER:

- ✓ NHS working collaboratively with NEMS to develop patient distribution protocols for appropriate non-emergent patients to be transported via ambulance to the Douglas UCC
- ✓ Acutely ill emergent patients will be taken to the most appropriate ER in the NHS
- ✓ Greater Niagara Site houses the Niagara Stroke Centre – a protocol to redirect ambulance patients with stroke symptoms directly to that centre has been in place for several years



Q: How will the change to Urgent Care at Douglas affect the American summer residents? Can they still go to the UCC? Can they still call 911 and use ambulance?

ANSWER:

- ✓ American residents will not experience any change
- ✓ American residents are welcome to use the UCC in the same manner they accessed the ER at Douglas
- ✓ American residents can continue to call 911 and use ambulance
- ✓ Basically, nothing changes in that American residents have access to 911 when in Canada and will be transported to a Canadian hospital unless they meet criteria involving severe trauma whereby Niagara Emergency Medical Services can request the Base Hospital for permission to bypass the closest Canadian facility and transport directly to Erie County Medical Centre.



Q: What will happen if I go to Urgent Care but my case is an emergency and I should have called 911?

ANSWER:

- ✓ If people self-triage incorrectly and come to Urgent Care with an emergency, we will never turn patients away.
- ✓ We have the capability of stabilizing and transporting patients to another site.
- ✓ We are one hospital with seven entry points to care and we will ensure that you get the right care at the right site.
- ✓ The same doctors and nurses will be there for you, working with the same equipment they currently have in the department.



Q: Is this the only information session?

ANSWER:

- ✓ NO – we will be announcing dates, times and locations for more information sessions
- ✓ We are arranging more sessions – another session at a larger community venue tentatively scheduled for Wed. Sept. 16 -- closer the actual conversion date





NIAGARA HEALTH SYSTEM
SYSTÈME DE SANTÉ DE NIAGARA
TOGETHER IN EXCELLENCE - LEADERS IN HEALTHCARE

Looking for more information?

- ✓ More Info Sessions being booked during summer and into the fall
- ✓ Go to www.niagarahealth.on.ca
- ✓ Fact Sheet and Newsletter handouts today
- ✓ Fill out comment card and provide your email so we can send you *Niagara Health Now* for regular updates