

## Riverview Manor Aging at Home

An Open House was held at Riverview Manor in Rainy River on 26 October, 2010. Those in attendance were impressed by the facility, particularly the partially- and fully-modified apartments. Our Housing staff was on hand to provide tours and answer questions regarding tenancy. Reporters from the local newspapers were present, resulting in an excellent article in the *Rainy River Record* and positive comments in the *West End Weekly*. Overall, it was a great day to show off our new accommodations for those challenged with physical disabilities. Well done!

Once again, I have been contacted by the Northwest Local Health Integrated Network (NWLHIN) regarding the Proposal for on-site personal support staff at Riverview Manor; it was simply reiterated that the Proposal is being assessed by their Review Team and we should be notified of a decision "within the month".

## Non-Emergent Transfers

I have been contacted by Wayne Woods, Riverside Health Care Facilities Inc, to inform us that they will be placing an ad in the local newspaper(s) regarding the recent changes to non-emergent transfers. In speaking with Dan McCormick, Health Services Manager, the system appears to be working well.

Non-emergent transfers are an issue right across the Province and obviously alternatives are being explored. An interesting article was recently forwarded to us regarding non-emergent transfers in North Bay. In that city, the hospital is using a revamped ambulance van donated by their DSSAB, as a "community transfer vehicle". I am attaching the article at the end of this Report for reference.

## Board Members

Sadly, we must bid farewell to Linda Armstrong, the representative for Dawson who has served on our Board, and our Ontario Works Committee as Chair, since inception. Linda

was an excellent advocate for her community and always considered the best interests of our clients. Her dedication and genuine interest in the services provided by the RRDSSAB will be greatly missed by the staff. Best Wishes, Linda!

## Human Resources

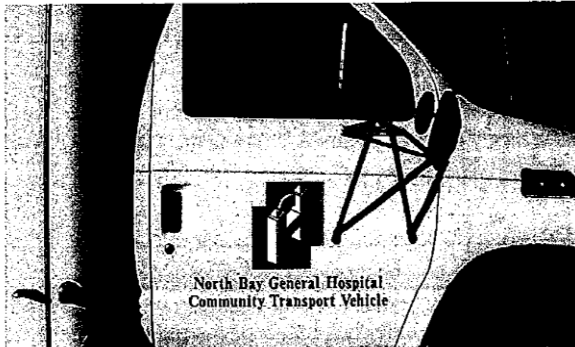
The following Human Resource activity has taken place since last reported:

Name	Title	Status	Start/Effective Date
Marcia Broughton	Paramedic	Casual	27 Sept/10
Kirt Pfeifer	Paramedic	Casual	27 Sept/10

Respectfully Submitted,  
/d Dittaro

## Ambulance or Not?

by Kathy Stackelberg, Public Relations Officer



### **Community Transfer Vehicle helps reduce wait times in the ER.**

It will be common to see non-urgent stretcher patients at NBGH transferred into a 'non-ambulance' to go home, starting this month. The hospital has revamped an older ambulance van into a Community Transfer Vehicle, thanks to funding from the northeast LHIN. It will be operated by NBGH in conjunction with the DSSAB (District Social Services Administration Board) as a pilot project until the end of March, when it will be assessed.

NBGH received funding from the North East LHIN to hire drivers (one full-time and three part-time) and decommission the old ambulance. The funding is Conditional Funding Dollars, earmarked to reduce Emergency Room wait times and reduce Alternate Level of Care (ALC) days.

NBGH Medicine Care Centre VP, Nancy Jacko, says this initiative will help reduce wait times in the ER because it will improve the overall patient flow. "The paramedic's first priority is to emergency patients so the non-urgent transfer patients often end up backlogging the ER or inpatient units. Someone waiting for a non-urgent transfer could wait in the ER or the inpatient units for up to eight hours," says Jacko. "Also some nursing homes require the transfers to arrive by 2 p.m. (due to staffing issues) so if we miss that time we have to keep the patient at the hospital until the next day." Jacko points out this all puts added stress on the

emergency department and the inpatient units as nurses must care for the non-urgent stretcher patients waiting for their transfer. "The benefit of having a Community Transfer Vehicle is that we will be able to move these patients out of the hospital much quicker, so they can be more comfortable where they are supposed to be, whether that's at home, a retirement home or in a nursing home."

Jacko emphasizes a patient moved with a Community Transfer Vehicle is stable but can't sit in a regular vehicle, get in or out, is too weak to walk, or needs to lie down. "This is the type of patient who could normally go home with family or in a taxi, but for physical reasons is unable to do so." Patients will not be charged for the service.

"This initiative has always been one we felt would help us reduce wait times in the ER but we never had money to undertake this type of project," says Jacko. "So we are very excited to get this underway."

The Manager of Emergency Medical Services, Jim Stewart says an older ambulance van donated by the District Social Services Board has been redesigned with all the emergency lights, sirens, radio and any medical equipment removed. While the drivers do not require medical expertise, they must have valid standard First Aid/CPR.

Many hospitals currently offer non-urgent stretcher transfers, quite often using private companies. However, NBGH will keep the service in-house using the CACC (Central Ambulance Communications Centre) as the service that fields requests for the vehicle. Patient information will go from the hospital nursing staff to the Ambulance Dispatch where it will be determined if the person can be transferred with the community transfer vehicle, or requires an ambulance.

Instrumental to the success of this project are Jim Stewart and Nancy Jacko, as well as Marc Picard of CACC, Ann Loyst of the ER and Jean-Guy Belzile from the DSSAB.