

Hospitals cut beds, staff

By **TIM FORAN**
Metroland Media Group

Halton Healthcare Services (HHS) is cutting 23 beds from its three hospitals, including almost a quarter of the complex continuing care beds in its system, a decision that will also result in the elimination or redeployment of staff.

The corporation is cutting five of its 20 complex continuing care (CCC) beds at Georgetown Hospital.

HHS will cut five of its 25 CCC beds from Milton District Hospital and two full-time and two part-time registered practical nurses in that department, said Allan Halls, the COO of Milton District Hospital.

CUPE has been notified of the bed reduction and the hospital will sit down with the union to identify opportunities to redeploy or reassign the nurses to other vacancies within the corporation, he added.

Halls said HHS will also eliminate five CCC beds at Oakville-Trafalgar Memorial Hospital, which had 21 CCC beds in 2008/09, according to the corporation's website.

HHS will also cut eight acute care beds at Oakville-Trafalgar, said Halls. The hospital had 262 acute care beds in 2008/09, according to HHS's website.

Across the three sites at HHS, the reductions in beds will save HHS \$1.3 million on an annual basis, said Halls.

"Ultimately the bed reductions will assist in the hospital corporation's efforts to get to a balanced budget," Halls explained.

CCC beds accommodate sicker patients often suffering from chronic conditions who are in hospital for many months at a time, even until death. Acute care beds, on the other hand, are used for obstetrics, intensive care unit, and general medical/surgical patients who are typically in hospital less than a week.

Halls said the reduced usage of the CCC beds is due to the efforts of the Mississauga-Halton Local Health Integration Network (LHIN), the provincial agency that co-ordinates hospital and community health services in the southwestern GTA,

Halton Healthcare Services 2008/09 figures for Georgetown Hospital

Complex Continuing Care Beds.....	20
Admissions.....	19
Patient Days.....	6,696
Acute Care Beds.....	33
Admissions.....	3,243
Patient Days.....	11,524

to reduce the amount of "appropriate/alternative level of care" (ALC) patients staying in hospital beds. ALC generally describes older patients suffering from chronic conditions or dying.

The goal is to find alternative health services that can accommodate them including Home First—services brought to the home—as well as palliative care initiatives, convalescent and restore programs, and working with the Mississauga-Halton Community Care Access Centre to let these patients access available long-term care beds, said Halls.

"The key is to make sure those alternatives are out there," he said.

At its March 25 board meeting in Oakville, LHIN CEO Bill MacLeod outlined to the board of directors the agency's recommended 2010-11 plan for Aging at Home investments to decrease the amount of days in hospital spent by ALC patients and manage at risk seniors in their homes. MacLeod's memo to the board said the LHIN has sent the plan to the Province's Ministry of Health and Long-Term Care for review, with an answer expected next month.

By law, hospitals such as HHS must present the Province with a balanced budget.

"You're told what you can spend (by the Province), your community tells what it needs and your hands are tied to how to meet it (the need)," said Milton councillor Cindy Lunau, the Town's representative on HHS's board of directors. "So it's tough."

The board of directors of HHS next meet publicly Thursday, April 8 at 3 p.m. at Oakville-Trafalgar Memorial Hospital, Lawson Building boardroom, according to Lunau.



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