



Gabriola Health Care Society
Gabriola Health Care Foundation

Proposed Community Owned
Urgent Care Medical Clinic
and related
Personal Care Facilities



Proposed Urgent Care Medical Clinic and related Personal Care Facilities

Background

The Gabriola Health Care Society was formed in 2006 as a response to a number of ongoing concerns with respect to the provision of community centred quality health care to an ever increasing population. Through numerous meetings with Vancouver Island Health Authority and Ministry of Health officials and independent research, the reasons for our concerns were identified and clarified. It was determined, for example, that “clot buster” drugs could only be available if an urgent care treatment facility was established. An urgent care treatment facility was also a requirement in order for our doctors to receive payment for on-call services from the Medical On-Call Availability Program (MOCAP). An urgent care treatment facility cannot, however, stand alone. Treatment rooms for family practice physicians are a key component of the proposed solutions as outlined in the document “Enhancing Primary Health Care on the Island of Gabriola”¹.

At the outset it was recognized that to design, fund, and construct a facility that would meet the long term needs of the residents of and visitors to Gabriola would take some time. A fundraising campaign to raise sufficient funds to construct an interim facility was therefore launched in 2006. By April 2007 sufficient funds were raised by the community to develop the interim facility at Twin Beaches with four examination rooms and an equipped trauma care room. That facility opened July 2, 2007.

A Primary Health Care community planning process was initiated in May 2008 based upon a Memorandum of Understanding between the Vancouver Island Health Authority (VIHA), the Gabriola Health Care Society (GHCS), the Ministry of Health (MOH) and all the physicians that provide services on Gabriola. At a public workshop the residents of Gabriola recommended the following focuses for action:

- coordination of both preventative and primary health care services,
- improved communication,
- attraction and retention of physicians,
- integration of nurses and nurse practitioners into Primary Health Care on Gabriola, and
- long term planning for integrated services.

The Society continues to invite community comment and dialogue.

¹ See <http://www.ghcs.ca/enhancing.html>

The Society

The Gabriola Health Care Society (GHCS) is a not-for-profit society incorporated in British Columbia. Every Gabriolan over age 18 who agrees with GHCS goals is a member of the Society and is entitled to participate in the election of its directors. (Non-Gabriolans are welcome to join if they wish – contact the Society through its WEB site.) The Society was established as the entity to be responsible for the development of the urgent care medical clinic and, in association with the medical practitioners on the Island and other government and non-government bodies, to assist with the coordination of the community health care services to be delivered on Gabriola.

The Foundation

The Gabriola Health Care Foundation (GHCF) was incorporated as a society in British Columbia on March 28, 2007 and was registered as a charity under the Federal Income Tax Act on April 1, 2008. The Foundation will be responsible for raising the funds necessary for the construction and equipping of the facility.

The charter and bylaws of both the Society and the Foundation are available on our WEB site.²

Community Support

In addition to ongoing meetings between the Society and Ministry of Health and Vancouver Island Health Authority officials, a number of well-attended public meetings have been held. A Town Hall meeting in January 2007 was attended by over 120 people. At a Community Health Care Workshop facilitated by the Ministry of Health at the Community Hall in June 2008, over 80 people participated in a day long series of sessions where concerns about continuous, consistent and coordinated health care on Gabriola were further specified. As a result of that session a document “Primary Health Care on Gabriola Island, Framework for Action” was prepared.³

At the most recently held public meeting, an Open House presentation which provided full documentation of the history of the Society and the Foundation, along with a floor plan and artist's sketch of a proposed permanent facility, over 150 members of the community attended with 74 completing the response forms. All but two of responses were positive, placing a “high” priority to the need for the development of a permanent community-owned urgent care medical clinic . The open house presentation boards and a summary of the comments are included on www.ghcs.ca.⁴

In addition to letters of support and thanks for excellent medical care provided at the Interim Clinic, a further tangible demonstration of community support is that approximately \$400,000 has been raised by the Society and Foundation over the past four years through over 700 donations from over 600 registered donors (names to the end of January, 2010, other than those that requested anonymity, are on the WEB site).⁵ In addition there were a considerable number of others that contributed small amounts of cash and who did not request tax receipts. Promises of donated labour and other services with an estimated value of well in excess of \$100,000 have also been received.

² <http://www.ghcs.ca/society.html>

³ See http://www.ghcs.ca/phc_report/phcrep1_sec18.html

⁴ See http://www.ghcs.ca/2009_com_update.html

⁵ See <http://www.ghcs.ca/donors.html>

Current situation

The interim urgent care medical clinic with related personal care facilities at Twin Beaches, now three years old, is a busy, well-run facility. A large portion of the medical emergencies on the Island are successfully diagnosed and treated locally. Over the past year 87% of the emergencies did not result in a transfer to Nanaimo. The number of patients attending the clinic continues to increase. It is, however, clear that with the increased use of the urgent care treatment room along with the welcome arrival of a new full-time family practice physician, the current site and situation is inadequate. Indeed there have been examples of multiple simultaneous needs with, in one instance, three urgent care patients on site at one time.

Potential solution

While the GHCS continues to elicit comments and opinions from the Community, it is our considered opinion that a permanent community-owned, ecologically friendly, seismically-engineered, and technologically advanced urgent care medical clinic with related personal care facilities will provide a desirable long-term solution to the health care needs of the Gabriola population. It is also our belief that, in addition to the provision of urgent care treatment such a facility should truly serve the broad range of health related issues such as mental health, substance abuse, home care and, of increasing importance, the preventative programmes required to maintain the well-being and good health of island residents.

Health Care Clinic Design Process

The GHCS Building Committee, along with Margot Kemble of Architrave Design, visited the newly renovated Medical Centre on Pender Island and the Anchor Medical Clinic in Nanaimo, and carried out extensive discussions with the doctors and administrative staff in those facilities as well as those practising on Gabriola. From these visits and discussions it was determined that in order to have urgent care treatment available 24 hours a day, 7 days a week, 365 days a year, and to allow for the proper working hours and vacations for the medical staff, a new facility would require space for a minimum of three (3) on-call physicians and associated staff. It would also require a fully equipped and supplied clinic with the appropriate number of examination rooms, an eye diagnostic and treatment area, a blood pressure assessment area, an area for resource materials, a nursing station and a three-bay treatment area, along with the associated facilities necessary for a functioning medical centre. Based upon this information a set of preliminary plans has been drawn up. (A copy of these is attached.) The plans are obviously subject to change to take into account site requirements and other issues that may arise prior to construction. As mentioned previously, initial estimates of the building costs (excluding land) are in the region of \$900,000 to \$1,000,000. No attempt has been made to refine these preliminary numbers as the cost of the structure that is ultimately built will be influenced by the geological condition of the site and our ability to raise a sum of this magnitude.

Raising the capital to build the medical centre would enable the Society to control the financial costs associated with the management of the building and to ensure that Gabriola will be an attractive place for physicians to locate and set up a medical practice. Larger communities can support practices with seven or eight doctors resulting in greatly reduced call out obligations and reduced per physician overhead costs. Gabriola needs to be able to offer an attractive alternative to ensure continuity of medical professionals on the Island.

We fully recognize that the possibility of collecting this amount of money depends upon the will of the Gabriola community. We do note, however, that other Island communities have recognized the need to build their own facilities, tailored to their own specific needs. For example, Pender Island (pop. 2,232) recently completed their new facility after collecting \$1,400,000 and Hornby Island (pop. 1,074) has set a fundraising target of \$500,000 for a new medical facility. Parksville is also planning a new facility and has obtained strong support from their local MLA.

Site, Location and Safety

The present site for the clinic is not desirable in the long run because, for a majority of Gabriolans, the only access is by Taylor Bay Road. If Taylor Bay became blocked as a result of wind, ice or snow storms, as has happened in the recent past, the clinic could not be reached by the emergency vehicles or by medical staff. The preferred choice, among Gabriolans who have attended community meetings is that a permanent facility should be located centrally, preferably within a one-mile radius of the Island's central business area.

The GHCS & GHCF boards, along with local medical practitioners, have also evaluated the options available and have similarly concluded that:

- the most desirable location would be one in an area adjacent to the Village, the first responders, the ambulance garage, and the heliport;
- for the efficient use of the medical practitioners time and medical equipment, it is highly desirable that the personal care facilities and the urgent care treatment room be in an integrated unit on the ground floor of any location;
- there is a need for easy public access, with space for adequate parking and space to provide a certain amount of privacy to patients arriving by ambulance;
- there should be room for expansion of the facility should the need arise in the future;
- having proper zoning in place would be a significant advantage, and
- the location should be on land that the community would feel appropriate.

There are, in other communities, an increasing number of models where dual purpose essential services are being coordinated both for safety and economic reasons. Mayne Island is a recent example.

Methods and Activities Evaluation

The effectiveness and efficiency of the new medical centre will be monitored through a continuous process involving:

1. Collection and monitoring of statistics relating to treatments on the island relative to transportation off-island.
2. Regular community-wide surveys inviting input regarding access to and satisfaction with care provided by the clinic.

Any issues arising from these sources of information will be resolved through a consultative process involving representation from all stakeholder groups.

Sustainability

The new medical centre will be owned by the community through its membership in the Gabriola Health Care Foundation and managed by the Gabriola Health Care Society and the Gabriola Health Care Foundation following the not-for-profit model. The personal care facilities will be leased to the medical practitioners practising in the facility. **The medical practitioners will be responsible for managing their practice, and will be responsible for paying the operating**

costs related to that practice. The expenses of the Society, primarily insurance, property tax, if any, and a reserve for contingencies will be covered by the rent paid by the health care providers who use the facility. We believe, however, that to attract and retain family practitioners in a highly competitive environment the rents charged should be lower than in private facilities in larger centres. This should be possible as the original capital cost will be covered by donations and because the Gabriola Health Care Foundation and the Gabriola Health Care Society are both all-volunteer, not-for-profit organizations.

Fund raising Strategy

Development of a clearly defined fundraising campaign is well underway. Requests for contributions have been sent to certain key foundations, philanthropic organizations, and government bodies. Suppliers of in kind labour and materials are being identified and are being approached. Selected groups of Gabriolans with the ability to make significant donations are being contacted.

1. *Events*

Community events of various types are taking place approximately once a month. While actual fundraising at these events is secondary to raising awareness of the project, the events have generated net income of approximately \$80,000.

2. *In-kind donations*

A well-located parcel of land has been offered to the Foundation. Studies are underway to determine if this land can accommodate the clinic and whether appropriate zoning can be obtained. The appropriateness of the site will be determined by the health care professionals involved, including the ambulance service, and the community.

We have commitments to donate labour, materials, and other services valued at well over \$100,000, (see the last page of this document) and we are continuing to collect commitments from other local businesses for in-kind donations of building materials and services.

3. *Donations from individuals and service groups*

The Gabriola Health Care Foundation is actively engaged in an enthusiastic capital campaign. The spirit of the Gabriola community is strong. Donations from individuals and service clubs are in excess of \$220,000, and efforts in this area are accelerating. Included in this amount is \$25,000 donated by the Gabriola Ambulance Society and \$30,000 from the Gabriola Lions Club. (This is in addition to generous donations that both organizations made toward the construction of the interim clinic.)

4. *Foundations and Corporations*

Foundations and corporations within whose guidelines this project falls are being approached. Over thirty letters or submissions requesting donations have been sent. While a number of requests are still outstanding, results to date are very disappointing as only \$18,000 has been received or promised.

5. *Government Support*

We are also seeking support from the Regional District of Nanaimo and the Federal and Provincial governments; however, given the current financial situation of all levels of government we are not anticipating much support from any of them.

The local health authority, the Vancouver Island Health Authority (“VIHA”) is currently providing equipment and supplies for the urgent care treatment room. VIHA may also occupy some space in the new facility. If so, market value rent would be collected

Conclusion

The Gabriola community is growing and changing, and so are its needs. The Gabriola Health Care Society has achieved important improvements to the level of medical services on the island, but it is now time to take these services to the next level.

Gabriola Island, with a fluctuating population of between 5,000 and 10,000, needs a community-owned, permanent urgent care medical clinic incorporating at least three urgent care treatment rooms as well as examination rooms for at least three physicians and offices for related health care providers.

The community has demonstrated overwhelming support through participation in awareness-building events, individual and service group donations, and in-kind support--especially with regard to donated labour. The leading community organizations are strongly in favour of a new clinic and have donated generously. But we cannot do it alone. This is why we are asking for help to make it happen.

The new medical centre will not only improve the level of care available to the Gabriola Island community, it will result in savings to the provincial health system as the cost of transporting patients from this ferry-dependent community to larger centres for treatment will be significantly reduced.

Gabriola Island, BC
September, 2010

For our complete history please visit our web site at www.ghcs.ca

Members of Our Boards of Directors

Gabriola Health Care Society

- Brenda Fowler – President
- Terry Nimmon, MD – Vice President
- Tracie Der – Secretary
- Harvey Graham, B. Com., C.A. – Treasurer
- Donald Butt, B.Sc Phm., MD
- Nancy Hetherington-Peirce, M.A.
- Kay Holt, B.Sc., M.Sc., M.A.
- Dave Innell

Gabriola Health Care Foundation

- Brenda Fowler – President
- Jill Adamson – Vice-president
- Judith Madsen, B.A. – Secretary
- Harvey Graham, B. Com., C.A. – Treasurer
- Donald Butt, B.Sc, Phm. MD
- Rufus Churcher, Ph.D.
- Chuck Connor
- Tracie Der, Pharmacist
- Judith Graham, B.A., A.O.C.A.
- Bev. Godfrey, B. Ed.
- Kay Holt, B.Sc., M.Sc., M.A.
- Nancy Huot
- Konrad Mauch
- Dallas Smith

Timeline

2010

- Secure necessary funding
- Formalize building requirements
- Apply for zoning changes

2011

- Complete fundraising
- Commence construction of facility

2012

- Complete construction and acquire medical and other equipment for use in the facility
- Lease or otherwise provide the facility and related equipment to physicians, government health agencies and other appropriate users
- Clinic opening

Construction budget

The project architect, who has donated her services, estimates that the total cost of the project will be approximately \$220 per square foot, excluding the cost of land, which we believe will be donated. The projected size of the structure is about 4,300 square feet producing an estimated cost of \$946,000. With a small contingency we arrive at an estimated overall cost of about \$1,000,000, excluding land.

Revenue	Target	Pledged / Received*	Outstanding
Foundations and corporations.	\$ 300,000	\$ 18,000	\$ 282,000
In-kind **	200,000	100,000	100,000
Individuals and service groups	300,000	227,000	73,000
Fundraising events (net)	100,000	78,000	22,000
Government	100,000	0	100,000
Total	\$ 1,000,000	\$ 423,000	\$ 577,000

Expenses	Budget	Spent to date*	Balance
Administration	\$ 15,000	\$ 8,684	\$ 6,316
Fundraising and event costs	20,000	3,456	16,544
Legal	6,000	0	6,000
Design and Planning	48,000	0	48,000
Site Development	55,000	0	55,000
Building Materials	450,000	0	450,000
Labour	250,000	0	250,000
Equipment	50,000	29,000	21,000
Furniture	25,000	0	25,000
Sub-trades	76,000	0	76,000
Misc.	5,000	0	5,000
Total	\$ 1,000,000	\$ 41,140	\$958,860

* All amounts as at September 19, 2010

** See page 10

In-kind donations

To date we have received the following in-kind offers:

- **Arbutus Building Supplies** All building materials that they supply at their cost.
- **Architrave Design Build and the Plenary Design Group** Building design
- **Brian Henning** Surveying and zoning and sub-division applications
- **Cameron Murray and Sonia Baker** Landscaping design
- **Chris Bell** Masonry work
- **Chuck Connor** Project manager
- **Danny Windecker** Well drilling
- **Dave Lorette** Landscaping material
- **Dave Ruckman and Son** Tile installation
- **Dr. Bob Rooks** 4.1 acres of land
- **Jordy Alexander** Construction of foundations
- **John Campbell** Volunteer coordinator
- **Gordon MacDonald** Landscaping machinery and labour
- **Harbour City Drywall** Drywall installation
- **Nelson Thorne** Overseeing building approvals and construction of building from above the footings to ready for roof.
- **Pat Smith** Roof materials
- **Ross Pitt** Plumbing installation
- **Stevo's roofing** Roofing installation
- **Thor Simrose** Installation of septic field
- **Tina Barraclough** Drywall finishing
- **Vivian Williams** Excavation of site ready for foundation
- **Yvon Bombois** Electrical installation

In addition to the above we have the names of at least 30 people who will work on the site as needed.

It is difficult to place a value on the above items. We have recorded them at a nominal value of \$100,000 but the value is no doubt substantially more.