

DISTRICT OF CHETWYND

Medical Health Clinic

and

Community Wellness Centre

Proposal to the Northern Development Initiative Trust

May 2014

EXECUTIVE SUMMARY:

The District of Chetwynd is applying to the Northern Development Initiative Trust for a grant of \$250,000.00 and to the Municipal Finance Authority for a loan of \$1,250,000.00 to construct a new medical clinic for the community. The community will invest \$100,000.00 directly in to this project.

The District faces two key issues:

- 1) Recruitment and retention of Physicians, and
- 2) Neutral investment interest from the private sector in making major investments in the community. *(The recent announcement by Walter Energy – Canadian Operations, of three regional mine operational curtailments, has put a further damper on private sector development interest in Chetwynd).*

In building a medical clinic the District hopes to secure effective and sustainable medical services for the community of Chetwynd, which includes a significant First Nations population located in the immediate vicinity. The facility will provide more efficient access to medical services, shorter patient wait times, create an environment conducive to attracting new Physicians and establish an identifiable and accessible health education and wellness awareness centre.

Chetwynd Medical Clinic Proposal

THE COMMUNITY:

Chetwynd is located in the foothills of the eastern slope of the Rocky Mountains, at the junction of Highways 97 and 29, and is the western entrance to the energetic Peace River country. Chetwynd is located 310 km north of Prince George, and 102 km west of Dawson Creek and as such, is the natural transportation hub of the Peace River area. The community has a population of approximately 3,000 people for a total trading area of about 7,000 people. Chetwynd was first known as Little Prairie when settlers arrived in the early 1900s. The name of the community was later changed to “Chetwynd”, after Ralph Chetwynd, a Provincial Highways Minister, around the same time the Pacific Great East Railway first came to the community. Chetwynd was incorporated as a Village in 1962. In 1983 the municipality was reincorporated as a District Municipality. Additionally, the community serves as a commercial and service centre to a significant First Nations population from the West Moberly First Nation and Saulneau First Nation communities located immediately to the west.

Chetwynd is a service centre for a diverse range of industries – logging, sawmilling and pulping, oil and gas production, transportation, mining, wind farms, ranching, farming and tourism. Businesses located in Chetwynd have access to bulk water, a selection of heavy industrial, light industrial and commercial properties centrally located close to an airport, rail and major highways. Chetwynd is home to a booming and diverse range of industrial activity, and supports a large non-resident industrial workforce. Recreational opportunities are abundant. For these reasons, the quality of life is high in Chetwynd and demands on health care services are equally high.

THE ISSUE:

Like many communities in rural and Northern British Columbia, Chetwynd struggles to attract and retain Physicians. Chetwynd is currently served by four (4) medical practitioners; however, two (2) Physicians have given notice of their plans to retire/relocate in fifteen (15) months. Competition from other communities in BC and Canada has made the prospect of replacing these Physicians bleak at this time.

As well as concern about the actual number of Physicians, the facilities in which they practice are antiquated and inefficient. (The Physicians currently operate from a former RCMP station which has been converted several times over the past fifty plus years for a variety of uses.)

CURRENT SITUATION:

The Physicians in Chetwynd currently operate from an aged, inefficient building (a former RCMP police station). The building is old, poorly laid out for medical office purposes and does not allow the Physicians to practice their profession in an effective manner. In addition, the facility is less than conducive for attracting new medical practitioners to the community.

The present medical clinic allows only one examining room per Physician. This limits the number of patients that can be seen in a day. In addition, Physicians are forced to greet each patient, then wait while the patient prepares for their appointment, and then wait again while the patient prepares to leave their appointment.

Four Physicians in Chetwynd currently serve an effective population of 7,000 (including a significant transient non-resident industrial workforce). Two of the four Physicians have given notice of their intent to retire/relocate within the next fifteen months.

Once the two Physicians have retired/relocated, the two remaining Physicians will be responsible for an area population of 7,000. This could lead to such a heavy workload that the community could lose more Physicians. Additionally, *“There is evidence that the quality of care, access to services, and continuity of care delivered decreases when family physicians care for too large a number of patients. Large patient loads have been linked to a decreased availability of emergent care, reduced number of yearly visits, shorter consultation times, lower continuity, fewer preventative care services, lower quality individual health promotion, lower quality disease management, and a decline in comprehensiveness of care”* (source: The College of Family Physicians of Canada “Panel Size”, September 2012).

The recent announcement of three (3) regional mining operation curtailments by Walter Energy has put a damper on private sector interest in development opportunities in Chetwynd.

TRANSIENT WORKFORCE:

Jobs exceed residents in Chetwynd. That is, Chetwynd supports between 300 and 500 additional industrial workers who live in camps or temporary lodging facilities immediately outside of the community. While their numbers are not included in census reporting, their presence is felt by service providers, retailers and emergency services personnel in Chetwynd.

INTENDED OUTCOMES:

The District of Chetwynd has been working directly with the Physicians and Northern Health to find solutions to the current problem. A Joint Health Review Committee has been formed to address issues such as physician attraction/retention, facility improvements, enhanced health services, general health services and roles and responsibilities of each of the parties.

It is not a usual (or prescribed) role for a municipality to directly contribute to or be part of health facility planning or funding. The District of Chetwynd, however, finds itself in the unenviable position of having to get involved, or suffering the consequences of decreased medical services in the community.

The intended outcome of this Council Initiative is to create a new, efficient, cost effective Medical Clinic and Community Wellness Centre.

Such facility will be used to improve the delivery of Health Care Services for the residents and guests of the community of Chetwynd and will be used in an aggressive medical practitioner attraction campaign.

The ultimate goal is to create effective, sustainable, health services for the community of Chetwynd.

Chetwynd's Vision Statement

Chetwynd exists in order that area residents have sustainable opportunities for
Security, Health, Safety and Prosperity
in surroundings that display the best of our natural environment.

THE PLAN:

The District of Chetwynd owns certain lands that can be subdivided and serviced to support a new medical health clinic (see attached Exhibits “A” and “B”).

The concept of a building which meets the needs of practicing Physicians while achieving the design goals of the District through its Development Permit Guidelines has been considered (see example below).

The facility would be constructed based on a model of four (4) practicing Physicians. The Physicians in Chetwynd would independently lease space in the new clinic from the municipality in a turn-key style operation, but would share costs for staffing as per their existing operating model.



(for reference purposes only)

PUBLIC PROCESS:

In order to confirm this development proposal, initial “Approval in Principle” will be sought from the Northern Development Initiative Trust (NDIT) for grant funding assistance, and the Ministry of Community, Sport and Cultural Development for borrowing approval.

Two separate ‘Community Conversations’ will be held, as it is in fact the voters of Chetwynd who will make the final determination whether to borrow or not, and more specifically, whether this project will move forward.

One evening meeting (Open House) will be held and one afternoon meeting to reach as many residents as possible. In addition, the information will be posted on the District’s web site and Facebook page.

THE FACILITY:

The facility would be constructed on District-owned lands adjacent to an institutional and residential mix area. The current location is also close to the community’s downtown.

The clinic would house medical offices, exam rooms and a waiting/reception area. A community wellness centre would be co-located in a general space, where health education, group learning and patient out services could be conducted. Mental Health services and Public Health services would be relocated from their current locations at the Chetwynd Hospital. Additionally, with the cooperation of Northern Health, traveling health care providers could hold various health services, educational seminars and out-patient services in the wellness room, advancing Northern Health’s Primary Health Care model.

HEALTH STATISTICS 2012/13

Chetwynd's population is approximately 3,100 with a total trading area of about 7,000 people. Chetwynd is a medical service centre for two established First Nation reserves and three First Nations communities. In addition, as a result of significant industrial activity in the region, the Physicians attend to a diverse non-resident and transient population. Chetwynd is the first major community north of Prince George and the "Pine Pass". Its proximity to the Pine Pass has proven the community's value as an emergency response centre on many occasions.

Chetwynd Hospital and Health Centre

• Acute Discharges / death	279
• Acute in-patient admissions	281
• Acute in-patient days (excl. ALC)	1,234
• ALC days total	158
• <i>Emergency visits (excl. E/R)</i>	<i>10,009</i>
• Lab Tests (excl. Respiratory)	119,366
• Medical Imaging Tests	3,665

Chetwynd Medical Clinic

• Total pre-book appointments	12,672
• Total walk-in appointments	9,504

FINANCING MODEL:

This project is based on a project budget of \$1.6 million for a building which would be approximately 6,000 square feet in size, and be designed for a future expansion.

Proposed Costs:

Building (6000 sq. ft.)	\$1,440,000
Servicing / Landscaping	100,000
Design / Contingency	60,000
Total	<u>\$1,600,000</u>

Proposed Revenues:

Community Investment (direct)	\$100,000
Community Investment (through borrowing)	1,250,000
NDIT Grant	250,000
Total	<u>\$1,600,000</u>

THE ASK:

The District of Chetwynd is requesting the Northern Development Initiative Trust to approve a grant of \$250,000.00 under its Economic Diversification Infrastructure program, for the construction of a new Medical Clinic and Wellness Centre in Chetwynd.

The community will also invest \$100,000.00 directly in to the project, and borrow up to \$1,250,000.00 through the Municipal Finance Authority of British Columbia.