NEW BRUNSWICK HOSPITAL SYSTEM

MASTER PLAN '97

CONTENTS

Introduction
Background & Purpose
Region Hospital Corporation Role - Master Plan Review
Changes to the Plan
Programs Other Than Hospital Services
Beds
Dr. og av de Cypresign Compagning Hoggymer Cyromae
PROGRAM SERVICE CATEGORIES - HOSPITAL SYSTEM
Primary Care
Secondary Care
Tertiary Care Program Establishment Process
Centres of Expertise
Centres of Expertise
MODES AND LEVELS OF SERVICE DELIVERY - HOSPITAL SYSTEM
GENERAL ORGANIZATION OF THE HOSPITAL SYSTEM
System Integration Advantages
Mental Health Services Division
Physician Resource Planning
Rehabilitation Services Plan
Long Term Care Plan
Ambulance Services
Telecare
Provincial Overview
Regional Overview
Inter-facility Relationships
ROLE OUTLINES - INDIVIDUAL HOSPITALS
REGION 1 HOSPITAL CORPORATION (SOUTHEAST)
Southeast Healthcare Corporation /
Corporation des Soins de Santé du Sud-Est
REGION 1 HOSPITAL CORPORATION (BEAUSÉJOUR)
Beauséjour Hospital Corporation /
Corporation hospitalière Beauséjour
REGION 2 HOSPITAL CORPORATION
Atlantic Health Sciences Corporation /
Corporation des sciences de santé de l'Atlantique
REGION 3 HOSPITAL CORPORATION
Region 3 Hospital Corporation /
Corporation hospitalière de la région 3
Contents (Cont'd)

REGION 4 HOSPITAL CORPORATION	
Region 4 Hospital Corporation /	
Corporation hospitalière de la région 4	63
REGION 5 HOSPITAL CORPORATION	
Restigouche Health Services Corporation /	
Corporation de services de santé du Restigouche	73
REGION 6 HOSPITAL CORPORATION	
NOR'EAST Health Network /	
Réseau Santé NOR'EST	83
REGION 7 HOSPITAL CORPORATION	
Region 7 Hospital Corporation /	
Corporation hospitalière de la région 7	93
Appendix "A"	
Map of New Brunswick Health Regions:	
Region Hospital Corporation Facility Locations	103
Appendix "B"	
Map of New Brunswick Health Regions:	
Extra-Mural Program Service Delivery Unit Locations	105

INTRODUCTION

Background & Purpose

In 1992, a comprehensive reform of the New Brunswick hospital system was undertaken. Basic documents, the most important being a new Hospital Act and Regulation, reorganized a system of multiple independent, self-contained hospital corporations into eight Region Hospital Corporations, each having full management authority over all facilities located geographically within the region.

"Master Plan '92" was a key companion document outlining the Province's strategy for distribution of resources for delivery of hospital services. It detailed by facility the approved beds by type, and the programs of care authorized to be delivered at each site. The present version continues the tradition of evolution in the Hospital System Master Plan (HSMP) to meet the changing shape of the hospital system.

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Although the services available within the Province are generally of an acceptable standard, improved distribution and access are required, as well as some rationalization of existing services in order to achieve a coordinated, complementary network that makes the best use of available resources. This can only be accomplished through a structured plan that defines the specific roles of region hospital corporations and their component facilities and community-based programs within the overall system, distributes services as equitably as is clinically and operationally feasible, and recognizes the particular linguistic needs of the Province's population.

The intention of this Plan is not to limit the development of the hospital system, but rather to ensure that in the future it evolves in an organized, complementary, and equitable fashion, while also helping to ensure the optimum use of all available resources. Improved coordination and balance are key objectives of the Plan.

The Plan also serves as a basic reference point in determining funding priorities for the hospital system at both the Departmental and Region Hospital Corporation levels.

While the Plan establishes objectives for service development in relation to each region hospital corporation,

it does not set priorities or a specific time for achieving them. These will continue to be dependent on the availability of resources, including the necessary medical specialists, as well as the funds for other professionals, support staff, supplies, equipment, new construction, and renovations. However, the Department recognizes the importance of working with individual region hospital corporations in relation to the development of programs that are included in their role definitions.

Region Hospital Corporation Role - Master Plan Review

The Hospital System Master Plan (HSMP) continues to be the major strategic expression of the Department's vision for the shape of the hospital system; as such, the Department retains authority for the detail of program direction found in it. Master Plan '92 represented a total reform of the system, and of necessity was prepared at the Provincial level. The Region Hospital Corporations (RHCs) are now organizationally mature and have assumed a leadership role in their own right within their Regions. Accordingly, this version of the HSMP was prepared in consultation with the RHCs at the draft stage. Also, the degree of detail for bed distribution has been greatly reduced, with maximum allowable bed totals for the entire region substituted for facility-specific totals by type.

Changes to the Plan

The Plan is viewed as dynamic between major updates (one reason why a loose-leaf format has been chosen). While the Region Hospital Corporations are responsible for implementing the Plan, the Department recognizes that situations evolve, and that system improvements can be achieved by changes to the Plan. A Region Hospital Corporation may propose a change to a detail or details of the Plan as it affects that Corporation, if it would result in a system improvement, all things considered. Because the Plan concept is endorsed by Government, the authority to make or approve changes to the detailed content of the Plan is reserved to the Minister of Health and Community Services.

Programs Other Than Hospital Services

The mandate of Hospital Services Branch in program delivery is clearly influenced by the legislative authority and policy based on it to designated entitled/insured services that are within the scope of the term "hospital services". These find expression in the Plan in some detail. The Branch is obligated to ensure that the principal focus of Region Hospital Corporation activity continues to be effective delivery of approved hospital services - whether or not they are entitled/insured by legislation.

From time to time, Region Hospital Corporations propose to engage in activities which are health-related, but delivered by other agencies of government or which are not established government concerns. Examples could include public health-type education/prevention initiatives, mass diagnostic screening programs, new training and educational programs, clinical research, etc. All such initiatives should in the first instance be directed to the Department, which is responsible to the Government for the use that is made of Provincially owned or funded assets and for ensuring that hospital services programs are not compromised by RHC participation in other ventures, however worthy. Hospital Services will advise on the appropriateness of using hospital resources for the venture.

If the proposal is one that falls within an established program mandate elsewhere in government, the Department or Agency concerned may choose to develop and fund a program with the RHC.

Partnerships with other organizations must not dilute the hospital service aims of the Corporation, nor divert resources intended for hospital services. In the specific case of revenue-generating programs, RHCs must abide by the standing policy on these activities (Bulletin FN1011 "Additional Revenue Sources").

Beds

In the past, the Department has specified by hospital facility the "Approved Beds" by type. This approach was necessary for its time, but has disadvantages in the regionalized context. In this version of the HSMP, a Maximum Allowable Beds (MAB) total is given for each Region. Within this total, the RHCs may allocate beds to facilities to meet operational needs and priorities, as necessary.

Some qualifications and explanations are necessary. The MAB for Region is actually (as will be seen in the following table) a formula calculation of a new approved level of bed resource, but it is not differentiated by facility. The former concept of "Approved Beds", a doubtful measure even at the facility level, loses any useful meaning when aggregated to the Region level. Although bed numbers by facility are no longer allocated in the HSMP, bed types to be maintained to some level in a facility

are shown in qualitative (yes or no) detail for each RHC. Additionally, on a region-wide basis, percentages of beds by type are to be maintained within the following limits:

BEDS

	Maximum Allowable Beds Per 1,000 Service Population						
Acute: M & S, OBS, Paed	3.45	77%					
Short Term Psychiatry	.25	5%					
SUB-TOTAL	3.70	82%					
Restorative	.80	18%					
TOTAL	4.50	100%					

Please note that, at the Region level, allowable short-term psychiatric bed levels are individually determined by the Mental Health Services Division in contract with the RHCs, not by formula calculation of the above standard against Service Population.

Some statistical artifacts are to be expected as a result of using this approach. The industry frequently calculates indexes of activity or performances "per approved bed". MAB totals are less than the former individual / facility "Approved Bed" totals; so the value of any statistical measure dependent on "Approved Beds" changes, even though the actual activity level may not.

PROGRAM SERVICE CATEGORIES - HOSPITAL SYSTEM

For Plan purposes, hospital system programs are divided into three general categories of complexity/resource intensity, distributed to allow the system to be as equitable as is clinically and financially feasible.

Primary Care

Consists of basic curative care (including simple diagnostic procedures and treatment, as well as the referral of more complex cases to a facility rendering a more sophisticated level of care), basic restorative care, preventive care, and essential health education required at the point of entry to the system or during a patient's hospitalization.

Primary care in the hospital system is delivered in all facilities. However, in the existing network of smaller facilities formerly designated community hospitals, a variety of program mixes has developed. The integration of the former Health Service Centres into the RHC system provides substantial region backup to these primary care physician office facilities in medically underserviced areas. Several smaller facilities now offer ambulatory care only with bed capacity converted to 4 stretcher, 48 hour holding and observation units. In the McAdam facility, this level of primary care delivery has been integrated with a formalized Interdisciplinary Team/Shared Practice (IT/SP) concept, and was the site for the initial test of IT/SP. (It is recognized that various informal clinical working relationships similar to the IT/SP concept have existed for some time in the hospital system.) Services included are primary care services (emergency, interim assessment, ambulatory clinics, diagnostic, assessment / monitoring, and education). Health promotion / disease prevention services are also provided if needed and feasible. In this service delivery concept, nurses act as initial contact (triage) and health professions other than MDs assess and intervene for certain presenting conditions, subject to agreed protocols, thus extending the availability of hospital services to the community served beyond what would be available for patients entering the system exclusively through physician referral. The IT/SP delivery approach has met with enough success and acceptance in the McAdam setting that the Department is extending the concept to three other small hospital facilities: Grand Manan, St. Quentin, and Lamèque. The exact place of this concept in the overall strategy for future service design

and delivery is still being assessed. This version of the HSMP does not, therefore, call for introducing the IT/SP concept in other small hospital facilities in the Province at this time.

The St. Joseph's facility in Saint John is the site for a program with a different approach to facilitating first access to health care through non-traditional community outreach. This part of the St. Joseph's facility, operating under the title of Community Health Centre, provides a variety of programs aimed at assisting an inner-city population with socio-economic, health and access problems significantly different from the general population to recognize and take advantage of personal opportunities for health improvement. "Health" in the St. Joseph's CHC program context is viewed in the World Health Organization perspective, a broader definition than the traditional active treatment role of hospitals. St. Joseph's CHC is not a provider of primary care in the form of direct diagnostic and treatment service, and linkages with other service providers in the area, such as DHCS regional offices (FCSS, MHS, Public Health) are important to assure role and service compatibility and avoid unnecessary duplication. This program's contribution to achieving the Province's overall health objectives remains to be determined. At this time, it is not intended that similar programs be introduced throughout the system.

Secondary Care

Consists of specialized care requiring more sophisticated and complicated diagnostic procedures and treatment than is provided at the primary care level. For the most part this level of care will be found in larger facilities and to a limited extent in smaller facilities where officially approved and justified by the population served. Examples: General Internal Medicine and General Surgery, Anaesthesia, General Rehabilitation with full complement of rehabilitation services. The services formerly termed "Elevated Secondary Care" are now included with this category. They consisted generally of specialized care requiring sophisticated and complicated diagnostic procedures and treatment found only in larger regional hospital facilities, where adequate population and the special human and technical resources are available to ensure continuing program viability. Examples: Pulmonary and Vascular Surgery, Plastic Surgery, Nuclear Medicine, Physiatry, Geriatrics (with dedicated Restorative Care beds), and Acute Psychiatry.

Tertiary Care

Consists of highly specialized care, or unusually expensive treatment or diagnostic modalities. The decision to offer a tertiary service in the Province, and its subsequent placement in one or more of our institutions is a matter of provincial health strategy. Such decisions nearly always require extensive feasibility study and explicit government commitment. Tertiary services will be found only in a few designated centres, which will be responsible to provide these services when necessary for a large portion of the population of the Province. These are Radiotherapy, Neurosurgery, Oncology (including Paediatric Oncology), Renal Dialysis, Neonatal Intensive Care, Cardiac Surgery, Psychiatric Care (Long-term), and Tertiary Rehabilitation.

Since both complex secondary and tertiary care usually serve the needs of large parts of the Province's population, the need for service in both official languages will be given particular consideration in their placement and development.

Tertiary Care Program Establishment Process

Given the system structure and cost implications of these services, decision-making follows a specific process. It involves a formal application to the Minister by a Region Hospital Corporation Board, which is then reviewed by the Department before the Minister makes a decision. Further information may be sought from the RHC, and one or more meetings between DHCS and RHC personnel may be required as part of this review process. Depending on the implications, the Minister may choose to seek formal Cabinet approval. Alternately, the Department may request proposals from one or more RHCs for development of a particular tertiary service.

Centres of Expertise

While it is not a concept that lends itself to definition in program terms that are as precise as others in the Plan, there is a place for designated Centres of Expertise in the Province's strategy for the hospital system.

The characteristics of a Centre of Expertise include: 1) a collection of clinical skills in a field that is closely related to an existing or planned tertiary service; 2) a developed space and equipment base for program operations recognized as such by the host RHC; 3) a coherent, well-defined and consistently articulated

vision of the purpose and aims of the centre, including an inventory of resources and expertise and a catalogue of the conditions in which the centre holds itself out to be expert; 4) a "track record" of above-average success in managing successful outcomes for those conditions; 5) developed and sustained or increasing volume of referrals from physicians in other areas of the Province.

The trust of referring physicians and other professionals is the key ingredient in the creation and maintenance of a Centre of Expertise. However, encouragement of a Centre of Expertise can be extended by the Department in some ways, although it should be understood that the Department does not commit itself to maintaining the viability of a Centre of Expertise. The proof of a Centre of Expertise is the referrals it gets for consistently excellent work. This situation is recognized in the design of the funding distribution method. A casemix which is more complex and resource-intensive as a result of Centre of Expertise development results in a heavier resource weight in the following year, and hence funding is positively affected.

Modes and Levels of Service Delivery - Hospital System

Any of the service categories noted above may be delivered, where feasible, on an in-patient, day patient, emergency patient or out-patient basis; or on an in-home basis through the NB Extra-Mural Program operated by each RHC. Through the Community Rehabilitation Resources Pool, rehabilitation services are also provided to clients in schools (Support Services to Education) and nursing homes. The modes of service delivery should be determined by their clinical effectiveness and the resources available. Substitution of ambulatory service for in-patient service is encouraged where demonstrably more cost-effective and clinically appropriate.

Care in the three categories described (primary, secondary, tertiary) will be delivered when approved in accordance with "Hospital Standards", a joint Department/New Brunswick Healthcare Association project, which prescribes the resources considered necessary and achievable to operate at a particular service.

GENERAL ORGANIZATION OF THE HOSPITAL SYSTEM

As noted previously, a major re-organization of the hospital system took place in 1992. The former hierarchical network of thirty-two Community, District, Regional and Specialty Hospitals, and Health

Service Centres, was replaced by eight Region Hospital Corporations. These corporations manage all hospital facilities and extra-mural programs within a defined geographic area as a unified organization operating on multiple sites. The geographic area corresponds to the boundaries of the Province's Health Regions, in use for many years for health planning purposes.

Until 1996, the NB Extra-Mural Hospital was responsible for managing the extra-mural (in-home) care services across the Province. These programs, and also the programs and facilities of the former Alcoholism and Drug Dependency Commission, have been assigned to the Region Hospital Corporations. The former Mental Health Commission is now organized as a distinct operating division of the Department. The Mental Health Services Division contracts with RHCs for clinical services delivery, while support and administrative functions are funded by the Hospital Services program. The RHCs deliver and manage the in-patient acute care and tertiary services through this contractual arrangement.

System Integration Advantages

This devolution of general management authority for these programs to the RHCs continues the horizontal and vertical system integration commenced in the 1992 reforms. It is emphasized, however, that the Department is committed to retaining the program consistency, quality and balance developed by the predecessor organizations, and will employ program guidelines/ directions to RHCs where deemed necessary to ensure this.

A number of benefits have been and continue to be realized from these changes. With the direct access to and authority over a wide range of service levels and delivery methods provided by an integrated organization, establishing a logical continuum of care between facilities and beyond hospital walls within a region is made easier. Duplicate services provided to the same population are able to be rationalized optimally without the complications of inter-organizational competition. Economies of scale are realized more easily. Quality improvement and standardization of approach benefit from a larger pool of experience and wider communication among peers. The Plan is intended to take advantage of these features of RHC organization by providing some intermediate term targets for each region hospital corporation in many of these areas.

Mental Health Services Division

In 1990, all mental health concerns formerly administered through various branches of the Department were

integrated organizationally so far as possible and placed under the jurisdiction of the Mental Health Commission. As noted above, the Commission itself was integrated with the Department in 1996 as the Mental Health Services Division (MHSD). While the Institutional Services Division (ISD), via the RHCs, now has overall responsibility for the administration of the Province's two psychiatric hospitals, as well as the acute psychiatric units in regional hospitals, the Mental Health Services Division has responsibility for the direct care programs in these facilities and setting priorities for direct care resources assigned to them. The two Divisions collaborate to ensure that short and long-range planning for all institutional aspects of mental health is compatible with the rest of the hospital system and with the government's ten-year plan for Mental Health.

Physician Resource Planning

A key factor in hospital system utilization has been and remains the distribution of physician resources. The Province has adopted a Physician Resource Plan and monitors its implementation through the Physician Resources Advisory Committee. RHCs are partners in the implementation with considerable latitude to influence its success. They are also financially accountable for physician resource recruitment results which exceed the parameters of the plan. The Department and the RHCs have a common interest in ensuring that physician resource distribution and programs of care are and continue to be compatible with each other.

Rehabilitation Services Plan

The Rehabilitation Services Plan (RSP), released in 1994, was developed to "systematically guide the development of a coordinated regionalized system of institutional and community based rehabilitation services to meet the changing needs of New Brunswickers". For the purposes of the RSP, providers of rehabilitation services refers to audiologists, occupational therapists, physiotherapists and speech language pathologists. Rehabilitation services will be available in hospital facilities for in-patients and out-patients, and in the community through the Extra Mural Program (Community Rehabilitation Resource Pool). The RSP focuses on the organization and use of rehabilitation personnel, equipment and facilities to achieve the best use of available resources. Organizationally, the RHC's will have general management responsibility for ensuring the overall provision of rehabilitation services through professional staff serving clients within facilities (in-patients, out-patients)or in the community through the Pool. The community mandate includes service to the nursing home sector and Support Services to Education, as well as the traditional in-home focus of the Extra-Mural Program.

Long Term Care Plan

The hospital system is an integral partner with other Department divisions and agencies in the implementation of the Long Term Care Plan, a comprehensive Department strategy aimed at uniting and co-ordinating existing long term care services into an appropriate continuum of care to achieve or maintain the well-being of New Brunswickers requiring long term care services. The facilities provide acute and extended/restorative care when required. The extra-mural programs provide certain aspects of home health support services. EMP staff are also provide major portions of the interdisciplinary assessment and reassessment service.

Ambulance Services

Ambulance service policy and regulation is a Department responsibility, including partial funding of the ambulance system, through the Ambulance Services Branch. Individual hospital corporations are also in some cases ambulance operators. In its pre-hospital care concerns, the hospital system maintains close links and continuing clinical liaison with ambulance operators as an essential part of the spectrum of acute care.

Telecare

Telecare is an innovative extension of the hospital system to the community at large, whereby New Brunswickers are able to obtain advice by telephone from experienced nurses when they are uncertain whether or not a particular condition should be seen in a hospital emergency department. The Telecare service is able to assess the criticality of the caller's problem through skilled questioning and reference

to standardized computer applications, and advise the caller what to do. The service is offered Provincewide.

Provincial Overview

The Province is divided into seven health regions. These regional boundaries are shown in Appendix "A".

Although it is impractical to plan for each region to be completely self-sufficient beyond primary services, each region hospital corporation should have a network within its boundaries that will allow the referral of patients to the care level required, if available within that region. This network will extend beyond the region to elsewhere in the Province, if the services required are not available in that region or when the patient chooses to seek services beyond his or her own region.

Further, this network will extend beyond the boundaries of the Province when specialized services are required which are not available or reasonably accessible within the Province.

Regional Overview

In most regions, there will be a network of facilities which will include a large facility and one or more smaller facilities, depending on geographic size and population distribution. These latter facilities will be responsible for delivering primary services and some secondary services depending on the size of the immediate population served, geographic distance from the larger facility, and the linguistic composition of the region. Community services will be delivered by the Service Delivery Unit network of the Extra-Mural Program. Regional Addiction Services are delivered for the most part in separate facilities. A network of subsidized physicians' offices (formerly Health Service Centres) delivers physician services to medically underserved areas.

Inter-facility Relationships

It is expected that for the most part, primary services required by a patient will be obtained at the facility closest to that patient's residence, regardless of facility size. This desirable objective is dependent on the existence of a critical mass of activity and skills sufficient to ensure safe and cost-effective program delivery. Most secondary services will usually be available to the residents of a region through the largest

facility. However, a few such secondary services may be approved and available through smaller facilities where distance from the larger facility, clinical feasibility, and other factors justify this approach. As previously noted, the more complex secondary and tertiary services will only be available in specific facilities where appropriate resources, service population, and geographic location justify and support their clinical and economic viability. At the same time, the department will review RHC proposals for the distribution of bed types through the region for balance

and fairness. The efficiencies from concentrating acute resources in larger centres must be weighed against the needs of smaller centres for reasonable access to these services.

Not all tertiary services are available within the Province. Patients requiring such services will be referred to other provinces when possible or to other jurisdictions when necessary.

Referral networks and on-going communications must be established and maintained with available community services and other hospitals within the system if patients are to reach that point in the overall network which can best address their individual needs. All levels are expected to foster and maintain good working relationships with other facilities in the region to which they refer patients or receive referrals. This is described in "Hospital Standards" as active, formalized relationships with other hospitals in the area as appropriate for communication, education, consultation, referral, transfer, and transport. Even though this effectively means internal RHC communications for the most part, there is still considerable intercorporation referral activity requiring active attention in order to assure optimal patient care.

ROLE OUTLINES - INDIVIDUAL HOSPITALS

Each region hospital corporation and its component facilities is an important and integral part of the comprehensive delivery system - one that emphasizes compatibility and coordination within and among RHCs. In order that the system can provide the most effective and equitable hospital services to all citizens within the resources available, it is imperative that each region hospital corporation plan and operate within its designated role, in cooperation with the other components of the overall system.

Flexibility In Service Location

A "U" appears in the program tables wherever it is settled Department policy at this time that a service is to be offered at a particular location (although, as before, an "U" does not imply any particular level of program depth or hours of coverage). As described above under "Changes to the Plan", an RHC is free to propose changes to the distribution of these services at any time.

* * *

REGION 1 HOSPITAL CORPORATION (SOUTH-EAST)

South-East Healthcare Corporation / Corporation des Soins de Santé du Sud-Est

MAXIMUM ALLOWABLE BEDS REGION 1 HOSPITAL CORPORATION (SOUTH-EAST)

BED TYPE		MAXIMUM
Acute	- M & S, OBS, Paeds	422
	- Short-term Psychiatry	27
SUB-TOTAL ACUTE		449
RESTORATIVE		98
Addictions	- Detoxification	18
	- Short-term Treatment	0
	- Long-term Residential	0
SUB-TOTAL ADDICT	IONS	18
Total Non-tertian	RY	565
TERTIARY BEDS	- Oncology	13
	- Cardiac Surgery / SICU	0
	- Neurosurgery / SICU	27
	- Tertiary Psychiatry	6
	- Tertiary Rehabilitation	0
TOTAL TERTIARY		46
GRAND TOTAL		611

1995/96 Service Population (Health Region 1)	122,357
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Note: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan* '92.

INTRAMURAL SERVICES

Facility Location Key: cit = City

sac = Sackville alb = Albert pti = Petitcodiac rex = Rexton

add = Addiction Services (Mapleton Road, Moncton)

				F	ACILIT	Y		
PRIMARY SERVICES	cit	sac	alb	pti	rex	add		
G P Medicine	U	U	U	U	U			
G P Paediatrics	U	U						
Low-Risk, Non-Surgical Obstetrics	U	U						
Restorative Care	U	U						
Nursing	U	U						
ECG	U	U	U	U				
Respiratory Therapy	U	U						
Occupational Therapy	U	U						
Physiotherapy	U	U	U					
Pharmacy Services	U	U						
Clinical Nutrition	U	U	U					

Facility Location Key: cit = City

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				F	ACILIT	Y		
SECONDARY SERVICES	cit	sac	alb	pti	rex	add		
General Internal Medicine	U	U						
General Surgery	U	U						
G P Anaesthesia		U						
Specialty Anaesthesia	U							
Psychiatry	U							
Orthopaedics	U							
Otolaryngology	U							
Specialty Paediatrics	U							
Specialty Obstetrics and Gynaecology	U							
Respirology	U							
Medical Oncology	U							
Gastroenterology	U							
Ophthalmology	U							
Urology	U							
Concentrated Care		U						
Addictions - Detoxification						U		
Addictions - Short-term Treatment								
Addictions - Long-term Residential								

Facility Location Key: cit = City

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add = Addiction Services (Mapleton Road, Moncton)

				F	'ACILIT	Υ		
SECONDARY SERVICES - 2	cit	sac	alb	pti	rex	add		
EEG	U							
Audiology	U							
Speech Language Pathology	U							
Psychology	U							
Social Work	U							
Clinical Engineering	U							
Recreational Therapy	U							
Cardiac Intensive Care	U							
Surgical Intensive Care	U							
Plastic Surgery	U							
Neurology	U							
Haematology	U							
Physiatry	U							
Thoracic and Vascular Surgery	U							
Dermatology	U							
Rheumatology	U							
Geriatrics	U							
Specialty Cardiology	U							
Endocrinology	U							
EMG	U							
Lithotripsy	U							

Facility Location Key: cit = City

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add = Addiction Services (Mapleton Road, Moncton)

_					F	ACILIT	Ϋ́		
LABORATORY	Y SERVICES	cit	sac	alb	pti	rex	add		
Primary: Speci	men Collection			U	U				
	Clinical Chemistry	U	U						
	Haematology	U	U						
Secondary:	Transfusion Services	U	U						
	Surgical Pathology	U							
	Autopsy Pathology	U							
	Cytopathology	U							
	Cytogenetics								
	Microbiology	U							

Facility Location Key: cit = City

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		FACILITY										
IMAGING SERVICES		cit	sac	alb	pti	rex	add					
Primary: General Radiography		U	C	C								
Secondary: Diagnostic Ultras - Abdominal	ound	U	C									
- Cardiac		U										
- Ophthalmologic	al	U										
- Neurological		U										
Gastrointestinal R	adiology	U	Ù									
Mammography		U										
Diagnostic Nucle vivo)	ar Medicine (in	U										
Nuclear Cardiolog	gy	U										
CT Scanning		U										
MRI		U										

Facility Location Key: cit = City

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add = Addiction Services (Mapleton Road, Moncton)

T. 6				F	'ACILIT	Y		
TERTIARY SERVICES	cit	sac	alb	pti	rex	add		
Cardiac Surgery								
Neurosurgery / Neuro Intensive Care	U							
Oncology	U							
Renal Dialysis								
Neonatal Intensive Care	J							
Tertiary Rehabilitation								
Long-term Psychiatric Care								

Facility Location Key: cit = City

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add = Addiction Services (Mapleton Road, Moncton)

		FACILITY										
Ambulatory S	SERVICES	cit	sac	alb	pti	rex	add					
Emergency:	Ø	U										
Emergency:	First Aid, Stabilization, Referral		U	U								
Outpatient Clinic	s	U	U									
Day Care:	Medical	U	U									
	Psychiatry	U										
Day Surgery		U	U									
Addictions:	Assessment and Referral						U					
	Out-patient Counselling						U					
	Aftercare/Relapse Prevention						U					
	Community Prevention/ Education	1					U					
Visiting Specialty	y Clinics	U	U	U								
Breast Cancer Sc	reening											
Physicians' Offic	e			U	U	U						
48 Hour Holding	& Observation (4-stretcher)			U								

Ø Under review system-wide

EXTRAMURAL SERVICES

Facility Location Key: dri = Driscoll Unit

tan = Tantramar Sub-unit, Driscoll Unit

ND F	Palliative Oxygen Ing-term Care: General Chronic Care Oxygen Consultation Education Short-term Treatment Immunity Rehabilitation Physiotherapy Source Pool: Occupational Therapy Speech Lang. Pathology		S	ERVICE	DELIVE	ry Uni	TS	
NB EXTRA-MURAL PROGRAM		dri	tan					
Acute Care:	General Acute Care	U	U					
	Palliative	U	U					
	Oxygen	U	U					
Long-term Care:	General Chronic Care	υ	U					
	Oxygen	U	U					
Community Resource:	Consultation	U	U					
	Education	U	U					
	Short-term Treatment	U	U					
Community Rehabilitation Phys Resource Pool:	siotherapy	U	U					
	Occupational Therapy	U	U					
	Speech Lang. Pathology	U	U					
Support Services to Education		U	U					
	7							

REGION 1 HOSPITAL CORPORATION (BEAUSÉJOUR)

Beauséjour Hospital Corporation / Corporation hospitalière Beauséjour

MAXIMUM ALLOWABLE BEDS REGION 1 HOSPITAL CORPORATION (BEAUSÉJOUR)

BED TYPE		MAXIMUM
Acute	- M & S, OBS, Paeds	296
	- Short-term Psychiatry	20
SUB-TOTAL ACUTE		316
RESTORATIVE		69
Addictions	- Detoxification	0
	- Short-term Treatment	0
	- Long-term Residential	0
SUB-TOTAL ADDICT	TIONS	0
Total Non-tertial	RY	385
TERTIARY BEDS	- Oncology	25
	- Cardiac Surgery / SICU	0
	- Neurosurgery / SICU	0
	- Tertiary Psychiatry	0
	- Tertiary Rehabilitation	0
TOTAL TERTIARY		25
GRAND TOTAL		410

1995/96 Service Population (Health Region 1)	85,782
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NOTE: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan '92*.

INTRAMURAL SERVICES

Facility Location Key: dum = Dumont

stk = Ste. Anne de Kent

she = Shediac

P				F	ACILIT	Ϋ́		
PRIMARY SERVICES	dum	stk	she					
G P Medicine	U	U	U					
G P Paediatrics	U							
Low-Risk, Non-Surgical Obstetrics	U							
Restorative Care	U	U						
Nursing	U	U						
ECG	U	U						
Respiratory Therapy	U							
Occupational Therapy	U							
Physiotherapy	U	U						
Pharmacy Services	U	U						
Clinical Nutrition	U	U						

Facility Location Key: dum = Dumont

stk = Ste. Anne de Kent

she = Shediac

				F	ACILIT	ΓY				
SECONDARY SERVICES	dum	stk	she							
General Internal Medicine	U	U								
General Surgery	U									
G P Anaesthesia										
Specialty Anaesthesia	U									
Psychiatry	U									
Orthopaedics	U									
Otolaryngology	U									
Specialty Paediatrics	U									
Specialty Obstetrics and Gynaecology	U									
Respirology	U									
Medical Oncology	U									
Gastroenterology	U									
Ophthalmology	U									
Urology	U									
Concentrated Care										
Addictions - Detoxification										
Addictions - Short-term Treatment										
Addictions - Long-term Residential										

Facility Location Key: dum = Dumont

stk = Ste. Anne de Kent

she = Shediac

				F	ACILIT	ГΥ				
SECONDARY SERVICES - 2	dum	stk	she							
EEG	U									
Audiology	U									
Speech Language Pathology	U									
Psychology	U									
Social Work	U	U								
Clinical Engineering	U									
Recreational Therapy	U									
Cardiac Intensive Care	U									
Surgical Intensive Care	U									
Plastic Surgery	U									
Neurology	U									
Haematology	U									
Physiatry	U									
Thoracic and Vascular Surgery	U									
Dermatology	U									
Rheumatology	U									
Geriatrics	U									
Specialty Cardiology	U									
Endocrinology	U									
EMG	U									
Lithotripsy										

Facility Location Key: dum = Dumont

stk = Ste. Anne de Kent

she = Shediac

_	_				F	'ACILIT	Ϋ́		
LABORATORY	Y SERVICES	dum	stk	she					
Primary: Speci	men Collection			U					
	Clinical Chemistry	U	U						
	Haematology	U	U						
Secondary:	Transfusion Services	U							
	Surgical Pathology	U							
	Autopsy Pathology	U							
	Cytopathology	U							
	Cytogenetics								
	Microbiology	U							

Facility Location Key: dum = Dumont

stk = Ste. Anne de Kent

she = Shediac

IMAGING SERVICES					F	ACILIT	Ϋ́		
MAGING SERV	VICES	dum	stk	she					
Primary: Gener	ral Radiography	J	J						
Secondary:	Diagnostic Ultrasound - Abdominal	J	J						
	- Cardiac	U							
	- Ophthalmological	U							
	- Neurological	U							
	Gastrointestinal Radiology	U	Ù						
	Mammography	U							
	Diagnostic Nuclear Medicine (in vivo)	U							
	Nuclear Cardiology	U							
	CT Scanning	U							
	MRI								

Facility Location Key: dum = Dumont

stk = Ste. Anne de Kent

she = Shediac

The second secon				F	ACILIT	Ϋ́						
TERTIARY SERVICES	dum	stk	she									
Cardiac Surgery												
Neurosurgery / Neuro Intensive Care												
Oncology	U											
Renal Dialysis	U											
Neonatal Intensive Care												
Tertiary Rehabilitation												
Long-term Psychiatric Care												

Facility Location Key: dum = Dumont

stk = Ste. Anne de Kent

she = Shediac

					F	ACILIT	ΣΥ		
AMBULATORY	SERVICES	dum	stk	she					
Emergency:	Ø	U	U						
Emergency:	First Aid, Stabilization, Referral								
Outpatient Clin	ics	U	U						
Day Care:	Medical	U							
	Psychiatry	U							
Day Surgery		U	U						
Addictions:	Assessment and Referral								
	Out-patient Counselling								
	Aftercare/Relapse Prevention								
	Community Prevention/ Education								
Visiting Special	lty Clinics	U	U						
Breast Cancer S	Screening	U							
Physicians' Off	ice			U					
48 Hour Holdin	ng & Observation (4-stretcher)								

Ø Under review system-wide.

EXTRAMURAL SERVICES

Facility Location Key: bbu = Blanche Bourgeois Unit

shu = Shediac Unit ksu = Kent Sub-unit

			S	ERVICE	DELIVI	ERY UN	ITS	
NB Extra-mural Progra	AM	bbu	shu	ksu		П		
Acute Care:	General Acute Care	U	U	U				
	Palliative	U	U	U				
	Oxygen	U	U	U				
Long-term Care:	General Chronic Care	U	U	U				
	Oxygen	U	U	U				
Community Resource:	Consultation	U	U	U				
	Education	U	U	U				
	Short-term Treatment	U	U	U				
Community Rehabilitation P Resource Pool:	hysiotherapy	U	U	U				
	Occupational Therapy	U	U	υ				
	Speech Lang. Pathology	U	U	U				
Support Services to Education		U	U	U				
								1

REGION 2 HOSPITAL CORPORATION

Atlantic Health Sciences Corporation / Corporation des sciences de santé de l'Atlantique

MAXIMUM ALLOWABLE BEDS REGION 2 HOSPITAL CORPORATION

BED TYPE		MAXIMUM
Acute	- M & S, OBS, Paeds	671
	- Short-term Psychiatry	39
SUB-TOTAL ACUTE		710
RESTORATIVE		156
Addictions	- Detoxification	20
	- Short-term Treatment	30
	- Long-term Residential	40
SUB-TOTAL ADDICT	IONS	90
Total Non-tertian	RY	956
TERTIARY BEDS	- Oncology	40
	- Cardiac Surgery / SICU	26
	- Neurosurgery / SICU	19
	- Tertiary Psychiatry	50
	- Tertiary Rehabilitation	0
TOTAL TERTIARY		135
		<u> </u>
GRAND TOTAL		1,091

1995/96 Service Population (Health Region 2)	194,392
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NOTE: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan '92*.

INTRAMURAL SERVICES

Facility Location Key: mvl = Millidgeville grm = Grand Manan

bhb = Black's Harbour

PRIMARY SERVICES G P Medicine G P Paediatrics Low-Risk, Non-Surgical Obstetrics Restorative Care Nursing ECG Respiratory Therapy Occupational Therapy				F	ACILIT	Y			
PRIMARY SERVICES	mvl	sjo	SSX	sst	bhb	grm	cam	dri	sba
G P Medicine	U		U	U	U	U	U	٦	
G P Paediatrics	U		U	J		U			
Low-Risk, Non-Surgical Obstetrics	U		U	U					
Restorative Care	U	U	U	U		U			C
Nursing	U	U	U	U	U	U			U
ECG	U	U	U	U	U	U	U	J	U
Respiratory Therapy	U	U	U	U					
Occupational Therapy	U	U	U	U					U
Physiotherapy	U	U	U	U	U	U			J
Pharmacy Services	U	U	U	U	U	U			U
Clinical Nutrition	U	U	U	U	U	U			U

Facility Location Key: mvl = Millidgeville grm = Grand Manan

sjo= St. Joseph's (SJ)cam= Campobellossx= Sussexdri= Deer Islandsst= St. Stephensba= South Bay

bhb = Black's Harbour

General Surgery G P Anaesthesia Specialty Anaesthesia Psychiatry Orthopaedics Otolaryngology Specialty Paediatrics Specialty Obstetrics and Gynaecology Respirology Medical Oncology Gastroenterology Ophthalmology				F	ACILIT	Ϋ́			
SECONDARY SERVICES	mlv	sjo	SSX	sst	bhb	grm	cam	dri	sba
General Internal Medicine	U		U	U					
General Surgery	U	U	U	U					
G P Anaesthesia		U	U	U					
Specialty Anaesthesia	U	U							
Psychiatry	U								U
Orthopaedics	U								
Otolaryngology	U								
Specialty Paediatrics	U								
Specialty Obstetrics and Gynaecology	U								
Respirology	U								
Medical Oncology	U								
Gastroenterology	U								
Ophthalmology	U	U							
Urology	U								
Concentrated Care				U					
Addictions - Detoxification									U
Addictions - Short-term Treatment									U
Addictions - Long-term Residential									U¹

¹Lonewater

Facility Location Key: mvl = Millidgeville grm = Grand Manan

sjo= St. Joseph's (SJ)cam= Campobellossx= Sussexdri= Deer Islandsst= St. Stephensba= South Bay

bhb = Black's Harbour

				F	ACILIT	Ϋ́			
SECONDARY SERVICES - 2	mvl	sjo	SSX	sst	bhb	grm	cam	dri	sba
EEG	U								
Audiology	U		U						
Speech Language Pathology	U	U	U	U					U
Psychology	U								U
Social Work	U	U	U	U					U
Clinical Engineering	U								
Recreational Therapy	U	U							U
Cardiac Intensive Care	U								
Surgical Intensive Care	U								
Plastic Surgery	U								
Neurology	U								
Haematology	U								
Physiatry	U								
Thoracic and Vascular Surgery	U								
Dermatology	U								
Rheumatology	U								
Geriatrics		U							
Specialty Cardiology	U								
Endocrinology	U								
EMG	U								
Lithotripsy		U							

Facility Location Key: mvl = Millidgeville grm = Grand Manan

sjo= St. Joseph's (SJ)cam= Campobellossx= Sussexdri= Deer Islandsst= St. Stephensba= South Bay

bhb = Black's Harbour

					F	ACILIT	'V			
LABORATORY	SERVICES									
		mvl	sjo	SSX	sst	bhb	grm	cam	dri	sba
Primary: Speci	men Collection	U	U	U	U	U	U	U	U	U
	Clinical Chemistry	U	U	U	U					
	Haematology	U	U	U	U					
Secondary:	Transfusion Services	U		U	U					
	Surgical Pathology	U								
	Autopsy Pathology	U								
	Cytopathology	U								
	Cytogenetics	Ø								
	Microbiology	U								

Ø Under review.

Facility Location Key: mvl = Millidgeville grm = Grand Manan

sjo= St. Joseph's (SJ)cam= Campobellossx= Sussexdri= Deer Islandsst= St. Stephensba= South Bay

bhb = Black's Harbour

					F	ACILIT	Ϋ́			
IMAGING SER	VICES	mvl	sjo	SSX	sst	bhb	grm	cam	dri	sba
Primary: Gene	ral Radiography	U	U	U	U	U	U			
Secondary:	Diagnostic Ultrasound - Abdominal	U		U	U					
	- Cardiac	U								
	- Ophthalmological	U								
	- Neurological	U								
	Gastrointestinal Radiology	U	Ù	U	U	/				
	Mammography	U	U	U	U					
	Diagnostic Nuclear Medicine (in vivo)	U								
	Nuclear Cardiology	U								
	CT Scanning	U								
	MRI	J								

Facility Location Key: mvl = Millidgeville grm = Grand Manan

sjo= St. Joseph's (SJ)cam= Campobellossx= Sussexdri= Deer Islandsst= St. Stephensba= South Bay

bhb = Black's Harbour

Tertiary Services				F	ACILIT	Y			
TERTIARY SERVICES	mvl	sjo	SSX	sst	bhb	grm	cam	dri	sba
Cardiac Surgery	U								
Neurosurgery / Neuro Intensive Care	U								
Oncology	U								
Renal Dialysis	U								
Neonatal Intensive Care	U								
Tertiary Rehabilitation	U								
Long-term Psychiatric Care									כ

Facility Location Key: mvl = Millidgeville grm = Grand Manan

sjo= St. Joseph's (SJ)cam= Campobellossx= Sussexdri= Deer Islandsst= St. Stephensba= South Bay

bhb = Black's Harbour

					F	ACILIT	Ϋ́			
Ambulatory	Services	mvl	sjo	SSX	sst	bhb	grm	cam	dri	sba
Emergency:	Ø	U	U	U	U					
Emergency:	First Aid, Stabilization, Referral					U				
Outpatient Clini	cs	U	U	U	U					
Day Care:	Medical	U	J	U	U					
	Psychiatry									
Day Surgery		U	U	U	U					
Addictions:	Assessment and Referral									U
	Out-patient Counselling									U
	Aftercare/Relapse Prevention									U
	Community Prevention/ Education									U
Visiting Special	ty Clinics	U	U	U	U					
Breast Cancer S	creening		U	U	U					
Physicians' Offi	ice							U	U	
48 Hour Holdin	g & Observation (4-stretcher)					U				

Ø Under review system-wide.

EXTRAMURAL SERVICES

Facility Location Key: ssx = Sussex Unit

kva = Kennebecasis Valley Unit

stj = Saint John Unit sst = St. Stephen Unit

ech = Eastern Charlotte Office, St. Stephen Unit grm = Grand Manan Office. St. Stephen Unit cam = Campobello Office, St. Stephen Unit

AID Frame A grap to Drogo and the			SEF	RVICE I	DELIVE	ery Ui	NITS	
NB Extra-mural Program		ssx	kva	stj	sst	ech	grm	cam
Acute Care:	General Acute Care	U	U	U	U	U	U	U
	Palliative	U	U	U	U	U	U	U
	Oxygen	U	U	J	U	U	U	U
Long-term Care:	General Chronic Care	U	U	U	U	U	U	U
	Oxygen	U	U	U	U	U	U	υ
Community Resource:	Consultation	U	U	U	U	U	U	U
	Education	U	U	U	U	U	U	U
	Short-term Treatment	U	U	U	U	U	U	U
Community Rehabilitation Physics Resource Pool:	iotherapy	U	U	U	U	U	U	U
	Occupational Therapy	U	U	U	U	U	U	U
	Speech Lang. Pathology	U	U	U	U	U	U	U
Support Services to Education		U	U	U	U	U	U	υ

REGION 3 HOSPITAL CORPORATION

Region 3 Hospital Corporation / Corporation hospitalière de la région 3

MAXIMUM ALLOWABLE BEDS REGION 3 HOSPITAL CORPORATION

BED TYPE		MAXIMUM
ACUTE	- M & S, OBS, Paeds	567
	- Short-term Psychiatry	35
SUB-TOTAL ACUTE		602
RESTORATIVE		132
Addictions	- Detoxification	16
	- Short-term Treatment	0
	- Long-term Residential	0
SUB-TOTAL ADDICT	TIONS	16
Total Non-tertian	RY	750
TERTIARY BEDS	- Oncology	0
	- Cardiac Surgery / SICU	0
	- Neurosurgery / SICU	0
	- Tertiary Psychiatry	0
	- Tertiary Rehabilitation	20
TOTAL TERTIARY		20
GRAND TOTAL		770

1995/96 Service Population (Health Region 3)	164,425
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NOTE: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan '92*.

INTRAMURAL SERVICES

Facility Location Key: dec = Chalmers (F'ton) min = Minto

 $oro \hspace{0.5cm} = \hspace{0.5cm} Oromocto \hspace{0.5cm} bat \hspace{0.5cm} = \hspace{0.5cm} Bath$

woo= Woodstockper= Perth-Andoverhar= Harveypla= Plaster Rock

mca = McAdam

				F	ACILIT	Y			
PRIMARY SERVICES	dec	oro	woo	har	mca	min	bat	per	pla
G P Medicine	υ	U	C	U	U	U	U	U	C
G P Paediatrics	U	U	U				U	U	U
Low-Risk, Non-Surgical Obstetrics	U		U					U	
Restorative Care	U	U	U				U	J	U
Nursing	U	U	U	U	J		U	J	J
ECG	U	U	U	U	כ	U	U	J	J
Respiratory Therapy	U	U	U				U	J	
Occupational Therapy	U	U	U				U	J	
Physiotherapy	U	U	U	U	J	U	U	J	J
Pharmacy Services	U	U	U				U	כ	٦
Clinical Nutrition	U	U	U	U	J	U	U	J	כ

Facility Location Key: cas = Stan Cassidy Centre for Rehabilitation (F'ton)

vhc = Victoria Health Centre (F'ton)

frj = Fredericton Junction

sta = Stanley doa = Doaktown chi = Chipman boi = Boiestown

P Medicine P Paediatrics ow-Risk, Non-Surgical bstetrics estorative Care ursing CG espiratory Therapy ccupational Therapy hysiotherapy harmacy Services	FACILITY										
PRIMARY SERVICES	cas	vhc	frj	sta	chi	doa	boi				
G P Medicine		U	U	U	U	U	U				
G P Paediatrics											
Low-Risk, Non-Surgical Obstetrics											
Restorative Care		U									
Nursi ng	U	U									
ECG			U	U	U	U	U				
Respi ratory Therapy		U									
Occupational Therapy	U	U									
Physi otherapy	U	U									
Pharmacy Services	U	U									
Clinical Nutrition	U	U		U							

Facility Location Key: dec = Chalmers (F'ton) min = Minto oro = Oromocto bat = Bath

woo= Woodstockper= Perth-Andoverhar= Harveypla= Plaster Rock

mca = McAdam

				F	ACILIT	Y			
SECONDARY SERVICES	dec	oro	woo	har	mca	min	bat	per	pla
General Internal Medicine	U	U	U					U	
General Surgery	U	U	U					U	
G P Anaesthesia	U	U	U					U	
Specialty Anaesthesia	U								
Psychiatry	U								
Orthopaedics	U								
Otolaryngology	U								
Specialty Paediatrics	U								
Specialty Obstetrics and Gynaecology	U								
Respirology	U								
Medical Oncology	U								
Gastroenterology	U								
Ophthalmology	U		U						
Urology	U								
Concentrated Care		U	U					U	
Addictions - Detoxification									
Addictions - Short-term Treatment									
Addictions - Long-term Residential									

Facility Location Key: cas = Stan Cassidy Centre for Rehabilitation (F'ton)

vhc = Victoria Health Centre (F'ton)

frj = Fredericton Junction

sta = Stanley doa = Doaktown chi = Chipman boi = Boiestown

	Surgery esthesia y Anaesthesia ry edics gology y Paediatrics								
Space of the Space				F	ACILIT	Ϋ́			
General Internal Medicine General Surgery G P Anaesthesia Specialty Anaesthesia Psychiatry Orthopaedics Otolaryngology Specialty Paediatrics Specialty Obstetrics and Gynaecology Respirology Medical Oncology Gastroenterology Ophthalmology	cas	vhc	frj	sta	chi	doa	boi		
General Internal Medicine									
General Surgery									
G P Anaesthesia									
Specialty Anaesthesia									
Psychiatry									
Orthopaedics									
Otolaryngology									
Specialty Paediatrics									
Specialty Obstetrics and Gynaecology									
Respirology									
Medical Oncology									
Gastroenterology									
Ophthalmology									
Urology									
Concentrated Care									
Addictions - Detoxification		U							
Addictions - Short-term Treatment									
Addictions - Long-term Residential									
							_	_	

Facility Location Key: dec = Chalmers (F'ton) min = Minto oro = Oromocto bat = Bath

woo= Woodstockper= Perth-Andoverhar= Harveypla= Plaster Rock

mca = McAdam

				F	ACILIT	Ϋ́			
SECONDARY SERVICES - 2	dec	oro	woo	har	mca	min	bat	per	pla
EEG	U								
Audiology	U		U						
Speech Language Pathology	U	U	U					U	
Psychology	U								
Social Work	U	U	U					U	
Clinical Engineering	U								
Recreational Therapy	U								
Cardiac Intensive Care	U								
Surgical Intensive Care	U								
Plastic Surgery	U								
Neurology	U								
Haematology	U								
Physiatry	U								
Thoracic and Vascular Surgery	U								
Dermatology	U								
Rheumatology	U								
Geriatrics									
Specialty Cardiology									
Endocrinology									
EMG	U								
Lithotripsy	U								

Facility Location Key: cas = Stan Cassidy Centre for Rehabilitation (F'ton)

vhc = Victoria Health Centre (F'ton)

frj = Fredericton Junction

sta = Stanley doa = Doaktown chi = Chipman boi = Boiestown

				F	ACILIT	Y		
SECONDARY SERVICES - 2	cas	vhc	frj	sta	chi	doa	boi	
EEG								
Audiology								
Speech Language Pathology	U	U						
Psychology	U							
Social Work	U	U						
Clinical Engineering								
Recreational Therapy	U	U						
Cardiac Intensive Care								
Surgical Intensive Care								
Plastic Surgery								
Neurology								
Haematology								
Physiatry	U							
Thoracic and Vascular Surgery								
Dermatology								
Rheumatology								
Geriatrics								
Specialty Cardiology								
Endocrinology								
EMG	U							
Lithotripsy								

Facility Location Key: dec = Chalmers (F'ton) min = Minto oro = Oromocto bat = Bath

woo = Woodstock per = Perth-Andover har = Harvey pla = Plaster Rock

mca = McAdam

					F	ACILIT	'Y			
Laboratory	SERVICES	dec	oro	woo	har	mca	min	bat	per	pla
Primary: Speci	men Collection				U	U				
	Clinical Chemistry	U	U	U			U	U	U	U
	Haematology	U	U	U			U	U	U	U
Secondary:	Transfusion Services	U							U	
	Surgical Pathology	U								
	Autopsy Pathology	U								
	Cytopathology	U								
	Cytogenetics	Ø								
	Microbiology	U								

Ø Under review.

Facility Location Key: cas = Stan Cassidy Centre for Rehabilitation (F'ton)

vhc = Victoria Health Centre (F'ton)

frj = Fredericton Junction

sta = Stanley doa = Doaktown chi = Chipman boi = Boiestown

Laboration	Convege				F	ACILIT	Y		
LABORATORY	SERVICES	cas	vhc	frj	sta	chi	doa	boi	
Primary: Specia	men Collection	υ	U	U	U	U	U	U	
	Clinical Chemistry								
	Haematology								
Secondary:	Transfusion Services								
	Surgical Pathology								
	Autopsy Pathology								
	Cytopathology								
	Cytogenetics								
	Microbiology								

Facility Location Key: dec = Chalmers (F'ton) min = Minto oro = Oromocto bat = Bath

woo = Woodstock per = Perth-Andover har = Harvey pla = Plaster Rock

mca = McAdam

- ~					F	ACILIT	Y			
IMAGING SER	VICES	dec	oro	woo	har	mca	min	bat	per	pla
Primary: Gene	ral Radiography	כ	U	U	J		U	U	U	U
Secondary:	Diagnostic Ultrasound - Abdominal	J	U	U				U	U	U
	- Cardiac	U								
	- Ophthalmological									
	- Neurological	U								
	Gastrointestinal Radiology	U	Ù	U				U	U	U
	Mammography	U	U	U					U	
	Diagnostic Nuclear Medicine (in vivo)	U								
	Nuclear Cardiology	U								
	CT Scanning	J								
	MRI*	U								
7										

^{*}Orthopaedic

Facility Location Key: cas = Stan Cassidy Centre for Rehabilitation (F'ton)

vhc = Victoria Health Centre (F'ton)

frj = Fredericton Junction

sta = Stanley doa = Doaktown chi = Chipman boi = Boiestown

_					F	'ACILIT	Ϋ́		
IMAGING SER	VICES	cas	vhc	frj	sta	chi	doa	boi	
Primary: Gene	ral Radiography						C		
Secondary:	Diagnostic Ultrasound - Abdominal								
	- Cardiac								
	- Ophthalmological								
	- Neurological								
	Gastrointestinal Radiology					/			
	Mammography								
	Diagnostic Nuclear Medicine (in vivo)								
	Nuclear Cardiology								
	CT Scanning								
	MRI								

Facility Location Key: dec = Chalmers (F'ton) min = Minto oro = Oromocto bat = Bath

woo = Woodstock per = Perth-Andover har = Harvey pla = Plaster Rock

mca = McAdam

			F	ACILIT	Y			
rdiac Surgery eurosurgery / Neuro Intensive Care acology nal Dialysis conatal Intensive Care utiary Rehabilitation	har	mca	min	bat	per	pla		
Cardiac Surgery								
Neurosurgery / Neuro Intensive Care								
Oncology								
Renal Dialysis								
Neonatal Intensive Care	U							
Tertiary Rehabilitation								
Long-term Psychiatric Care								

Facility Location Key: cas = Stan Cassidy Centre for Rehabilitation (F'ton)

vhc = Victoria Health Centre (F'ton)

frj = Fredericton Junction

sta = Stanley doa = Doaktown chi = Chipman boi = Boiestown

			F	ACILIT	Ϋ́		
TERTIARY SERVICES	rosurgery / Neuro Intensive Care plogy al Dialysis natal Intensive Care ary Rehabilitation U						
Cardiac Surgery							
Neurosurgery / Neuro Intensive Care							
Oncology							
Renal Dialysis							
Neonatal Intensive Care							
Tertiary Rehabilitation	U						
Long-term Psychiatric Care							

Facility Location Key: dec = Chalmers (F'ton) min = Minto oro = Oromocto bat = Bath

woo = Woodstock per = Perth-Andover har = Harvey pla = Plaster Rock

mca = McAdam

					F	ACILIT	Y			
AMBULATORY	SERVICES									
		dec	oro	WOO	har	mca	min	bat	per	pla
Emergency:	Ø	U	U	U						
Emergency:	First Aid, Stabilization, Referral				U	U	U	U	U	U
Outpatient Clini	ics	U	U	U		U		U	U	U
Day Care:	Medical	U	J	U					U	
	Psychiatry	U								
Day Surgery								U	U	U
Addictions:	Assessment and Referral									
	Out-patient Counselling									
	Aftercare/Relapse Prevention									
	Community Prevention/ Education									
Visiting Special	ty Clinics	U	U	U	U	U	U	U	U	U
Breast Cancer S	creening		U						U	
Physicians' Off	ice									
48 Hour Holdin	g & Observation (4-stretcher)					U				

Ø Under review system-wide.

Facility Location Key: cas = Stan Cassidy Centre for Rehabilitation (F'ton)

vhc = Victoria Health Centre (F'ton)

frj = Fredericton Junction

sta = Stanley doa = Doaktown chi = Chipman boi = Boiestown

	_				F	'ACILIT	Ϋ́		
AMBULATORY	SERVICES	cas	vhc	frj	sta	chi	doa	boi	
Emergency:	Ø								
Emergency	First Aid, Stabilization, Referral								
Outpatient Clin	ics	U							
Day Care:	Medical	U							
	Psychiatry								
Day Surgery									
Addictions:	Assessment and Referral		U						
	Out-patient Counselling		U						
	Aftercare/Relapse Prevention		U						
	Community Prevention/ Education		U						
Visiting Special	ty Clinics								
Breast Cancer S	Screening								
Physicians' Off	ice			U	U	U	U	U	
48 Hour Holdin	g & Observation (4-stretcher)								

Ø Under review system-wide.

EXTRAMURAL SERVICES

Facility Location Key: oro = Oromocto Unit

min = Minto Office, Fredericton Unit

fre = Fredericton Unit

boi = Boiestown Office, Fredericton Unit har = Harvey Office, Fredericton Unit

woo = Woodstock Unit

psu = Perth Sub-unit, Woodstock Unit

NID Frame - Avan - A Decomposit		Acceptance	SEF	RVICE I	DELIVI	ERY U	NITS	
NB Extra-mural Program		oro	min	fre	boi	har	woo	psu
Acute Care:	General Acute Care	U	U	U	U	U	U	U
	Palliative	U	U	U	U	U	U	U
	Oxygen	U	U	J	U	U	U	U
Long-term Care:	General Chronic Care	U	U	U	U	U	U	U
	Oxygen	U	U	U	U	U	U	U
Community Resource:	Consultation	U	U	U	U	U	U	U
	Education	U	U	U	U	U	U	U
	Short-term Treatment	U	U	U	U	U	U	U
Community Rehabilitation Phys Resource Pool:	iotherapy	U	U	U	U	U	U	C
	Occupational Therapy	U	U	U	U	U	U	U
	Speech Lang. Pathology	U	U	U	U	U	U	U
Support Services to Education		U	U	U	U	U	U	U

REGION 4 HOSPITAL CORPORATION

Region 4 Hospital Corporation / Corporation hospitalière de la région 4

MAXIMUM ALLOWABLE BEDS REGION 4 HOSPITAL CORPORATION

BED TYPE		MAXIMUM
ACUTE	- M & S, OBS, Paeds	175
	- Short-term Psychiatry	15
SUB-TOTAL ACUTE		190
RESTORATIVE		41
Addictions	- Detoxification	10
	- Short-term Treatment	0
	- Long-term Residential	0
SUB-TOTAL ADDICT	TIONS	10
Total Non-tertian	RY	241
TERTIARY BEDS	- Oncology	0
	- Cardiac Surgery / SICU	0
	- Neurosurgery / SICU	0
	- Tertiary Psychiatry	0
	- Tertiary Rehabilitation	0
TOTAL TERTIARY		0
		•
GRAND TOTAL		241

1995/96 Service Population (Health Region 4)	50,782
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NOTE: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan '92*.

INTRAMURAL SERVICES

Facility Location Key: edm = Edmundston

grf = Grand Falls stq = Saint Quentin

mad = Ste. Anne de Madawaska

add = Addictions (62 Queen St., Edmundston)

				F	ACILIT	Y		
PRIMARY SERVICES	edm	grf	stq	mad	add			
G P Medicine	U	U	U	U				
G P Paediatrics	U	U						
Low-Risk, Non-Surgical Obstetrics	U	U	U					
Restorative Care	U							
Nursing	Ú	U	U					
ECG	U	U	U	U				
Respiratory Therapy	U	U						
Occupational Therapy	U	U						
Physiotherapy	U	U	U					
Pharmacy Services	U	U	U					
Clinical Nutrition	U	U	U					

Facility Location Key: edm = Edmundston

grf = Grand Falls stq = Saint Quentin

mad = Ste. Anne de Madawaska

add = Addictions (62 Queen St., Edmundston)

G G				F	ACILIT	Y		
SECONDARY SERVICES	edm	grf	stq	mad	add			
General Internal Medicine	U	U						
General Surgery	U	U						
G P Anaesthesia	U	U						
Specialty Anaesthesia	U							
Psychiatry	U							
Orthopaedics	U							
Otolaryngology	U							
Specialty Paediatrics	U							
Specialty Obstetrics and Gynaecology	U							
Respirology	U							
Medical Oncology	U							
Gastroenterology	U							
Ophthalmology	U							
Urology	U							
Concentrated Care		U						
Addictions - Detoxification					U			
Addictions - Short-term Treatment								
Addictions - Long-term Residential								

Facility Location Key: edm = Edmundston

grf = Grand Falls stq = Saint Quentin

mad = Ste. Anne de Madawaska

add = Addictions (62 Queen St., Edmundston)

				F	'ACILIT	Ϋ́		
SECONDARY SERVICES - 2	edm	grf	stq	mad	add			
EEG	U							
Audiology	U							
Speech Language Pathology	U	U						
Psychology	U							
Social Work	U	U						
Clinical Engineering	U							
Recreational Therapy	U							
Cardiac Intensive Care	U							
Surgical Intensive Care	U							
Plastic Surgery								
Neurology								
Haematology								
Physiatry								
Thoracic and Vascular Surgery	U							
Dermatology	U							
Rheumatology								
Geriatrics	U							
Specialty Cardiology	U							
Endocrinology								
EMG	U							
Lithotripsy								

Facility Location Key: edm = Edmundston

grf = Grand Falls stq = Saint Quentin

mad = Ste. Anne de Madawaska

add = Addictions (62 Queen St., Edmundston)

LABORATORY	Z CEDVICES				F	ACILIT	Ϋ́		
LABORATORY	SERVICES	edm	grf	stq	mad	add			
Primary: Speci	men Collection				U	U			
	Clinical Chemistry	U	U	υ					
	Haematology	U	U	U					
Secondary:	Transfusion Services	U	U						
	Surgical Pathology	U							
	Autopsy Pathology	U							
	Cytopathology	U							
	Cytogenetics								
	Microbiology	U							

Facility Location Key: edm = Edmundston

grf = Grand Falls stq = Saint Quentin

mad = Ste. Anne de Madawaska

add = Addictions (62 Queen St., Edmundston)

					F	ACILIT	Ϋ́		
IMAGING SER	VICES	edm	grf	stq	mad	add			
Primary: Gener	ral Radiography	U	U	U					
Secondary:	Diagnostic Ultrasound - Abdominal	U	U	U					
	- Cardiac	U							
	- Ophthalmological	U							
	- Neurological	U							
	Gastrointestinal Radiology	U	Ù	U		/			
	Mammography	U	U						
	Diagnostic Nuclear Medicine (in vivo)	U							
	Nuclear Cardiology	U							
	CT Scanning	U							
	MRI								

Facility Location Key: edm = Edmundston

grf = Grand Falls stq = Saint Quentin

mad = Ste. Anne de Madawaska

add = Addictions (62 Queen St., Edmundston)

				F	'ACILIT	Y		
TERTIARY SERVICES	edm	grf	stq	mad	add			
Cardiac Surgery								
Neurosurgery / Neuro Intensive Care								
Oncology								
Renal Dialysis	U							
Neonatal Intensive Care								
Tertiary Rehabilitation								
Long-term Psychiatric Care								

Facility Location Key: edm = Edmundston

grf = Grand Falls stq = Saint Quentin

mad = Ste. Anne de Madawaska

add = Addictions (62 Queen St., Edmundston)

					F	ACILIT	Y	FACILITY									
AMBULATORY	Services	edm	grf	stq	mad	add											
Emergency:	Ø	U	U	U													
Emergency:	First Aid, Stabilization, Referral																
Outpatient Clini	cs	U	U	U													
Day Care:	Medical	U	U														
	Psychiatry	U															
Day Surgery		U	U														
Addictions:	Assessment and Referral					U											
	Out-patient Counselling					U											
	Aftercare/Relapse Prevention					U											
	Community Prevention/ Education					U											
Visiting Special	ty Clinics	U	U	U													
Breast Cancer S	creening	U	U														
Physicians' Offi	ice				U												
48 Hour Holdin	g & Observation (4-stretcher)																

Ø Under review system-wide.

EXTRAMURAL SERVICES

Facility Location Key: grf = Grand Falls Unit

ked = Kedgwick Office, Grand Falls Unit

edm = Edmundston Unit

							>	
NB Extra-mural Progra	AM		Sei	RVICE I	DELIV	ery U	NITS	
		grf	ked	edm				
Acute Care:	General Acute Care	U	U	U				
	Palliative	U	U	U				
	Oxygen	U	U	U				
Long-term Care:	General Chronic Care	U	U	U				
	Oxygen	U	U	U				
Community Resource:	Consultation	U	U	U				
	Education	U	U	U				
	Short-term Treatment	Ú	U	U				
Community Rehabilitation P Resource Pool:	hysiotherapy	U	U	U				
	Occupational Therapy	U	U	U				
	Speech Lang. Pathology	U	U	U				
Support Services to Education	1	U	U	U				
								1

REGION 5 HOSPITAL CORPORATION

Restigouche Health Services Corporation / Corporation des services de santé du Restigouche

MAXIMUM ALLOWABLE BEDS REGION 5 HOSPITAL CORPORATION

BED TYPE		MAXIMUM
ACUTE	- M & S, OBS, Paeds	130
	- Short-term Psychiatry	20
SUB-TOTAL ACUTE		150
RESTORATIVE		30
Addictions	- Detoxification	6
	- Short-term Treatment	14
	- Long-term Residential	0
SUB-TOTAL ADDICT	TIONS	20
Total Non-tertian	RY	200
TERTIARY BEDS	- Oncology	0
	- Cardiac Surgery / SICU	0
	- Neurosurgery / SICU	0
	- Tertiary Psychiatry ¹	
	- Tertiary Rehabilitation	0
TOTAL TERTIARY		
GRAND TOTAL		200

1995/96 Service Population (Health Region 5)	37,770
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NOTE: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan '92*.

¹⁾ Under review.

INTRAMURAL SERVICES

Facility Location Key: cam = Campbellton

chr = Centre hospitaliere Restigouche (Campbellton)

dal = Dalhousie jac = Jacquet River

adds = Addictions (3 Stanley St., Campbellton)

addp = Addictions (31 Prince William St., Campbellton)

				F	'ACILIT	Y		
PRIMARY SERVICES	cam	chr	dal	jac	adds	addp		
G P Medicine	U		U	U				
G P Paediatrics	U		U					
Low-Risk, Non-Surgical Obstetrics	U							
Restorative Care	U		U					
Nursing	U	U	U					
ECG	U		U					
Respiratory Therapy	U		U					
Occupational Therapy	U	U	U					
Physiotherapy	U	U	U					
Pharmacy Services	U		U					
Clinical Nutrition	U		U					

Facility Location Key: cam = Campbellton

chr = Centre hospitaliere Restigouche (Campbellton)

dal = Dalhousie jac = Jacquet River

adds = Addictions (3 Stanley St., Campbellton)

addp = Addictions (31 Prince William St., Campbellton)

				F	'ACILIT	Ϋ́		
SECONDARY SERVICES	cam	chr	dal	jac	adds	addp		
General Internal Medicine	U		U					
General Surgery	U							
G P Anaesthesia	U	U						
Specialty Anaesthesia	U	U						
Psychiatry	U	U						
Orthopaedics	U							
Otolaryngology	U							
Specialty Paediatrics	U							
Specialty Obstetrics and Gynaecology	U							
Respirology	U							
Medical Oncology	U							
Gastroenterology	U							
Ophthalmology	U							
Urology	U							
Concentrated Care			U					
Addictions - Detoxification					U			
Addictions - Short-term Treatment						U		
Addictions - Long-term Residential								

Facility Location Key: cam = Campbellton

chr = Centre hospitaliere Restigouche (Campbellton)

dal = Dalhousie jac = Jacquet River

adds = Addictions (3 Stanley St., Campbellton)

addp = Addictions (31 Prince William St., Campbellton)

				F	'ACILIT	Ϋ́		
SECONDARY SERVICES - 2	cam	chr	dal	jac	adds	addp		
EEG	U							
Audiology	U		U					
Speech Language Pathology	U		U					
Psychology	U	U						
Social Work	U	U	U					
Clinical Engineering	U							
Recreational Therapy	U	U						
Cardiac Intensive Care	U							
Surgical Intensive Care	U							
Plastic Surgery								
Neurology	U							
Haematology								
Physiatry								
Thoracic and Vascular Surgery	U							
Dermatology								
Rheumatology								
Geriatrics	U							
Specialty Cardiology								
Endocrinology								
EMG								
Lithotripsy								

Facility Location Key: cam = Campbellton

chr = Centre hospitalière Restigouche (Campbellton)

dal = Dalhousie jac = Jacquet River

adds = Addictions (3 Stanley St., Campbellton)

addp = Addictions (31 Prince William St., Campbellton)

_	_				F	ACILIT	Ϋ́		
LABORATORY	SERVICES	cam	chr	dal	jac	adds	addp		
Primary: Speci	men Collection		U		U				
	Clinical Chemistry	U		U					
	Haematology	U		U					
Secondary:	Transfusion Services	U							
	Surgical Pathology	U							
Αι	Autopsy Pathology	U							
	Cytopathology	U							
	Cytogenetics								
	Microbiology	U							

Facility Location Key: cam = Campbellton

chr = Centre hospitalière Restigouche (Campbellton)

dal = Dalhousie jac = Jacquet River

adds = Addictions (3 Stanley St., Campbellton)

addp = Addictions (31 Prince William St., Campbellton)

					F	ACILIT	Ϋ́		
IMAGING SER	VICES	cam	chr	dal	jac	adds	addp		
Primary: Gener	ral Radiography	U		U					
Secondary:	Diagnostic Ultrasound - Abdominal	U		U					
	- Cardiac	U							
	- Ophthalmological	U							
	- Neurological	U							
	Gastrointestinal Radiology	U		U		/			
	Mammography	U		U					
	Diagnostic Nuclear Medicine (in vivo)								
	Nuclear Cardiology								
	CT Scanning	U							
	MRI								

Facility Location Key: cam = Campbellton

chr = Centre hospitaliere Restigouche (Campbellton)

dal = Dalhousie jac = Jacquet River

adds = Addictions (3 Stanley St., Campbellton)

addp = Addictions (31 Prince William St., Campbellton)

		F	'ACILIT	Ϋ́Y		
eurosurgery / Neuro Intensive Care ncology enal Dialysis eonatal Intensive Care ertiary Rehabilitation						
Cardiac Surgery						
Neurosurgery / Neuro Intensive Care						
Oncology						
Renal Dialysis						
Neonatal Intensive Care						
Tertiary Rehabilitation						
Long-term Psychiatric Care	U					

Facility Location Key: cam = Campbellton

chr = Centre hospitaliere Restigouche (Campbellton)

dal = Dalhousie jac = Jacquet River

adds = Addictions (3 Stanley St., Campbellton)

addp = Addictions (31 Prince William St., Campbellton)

	_				F	'ACILIT	Ϋ́		
AMBULATORY	SERVICES	cam	chr	dal	jac	adds	addp		
Emergency:	Ø	U		U					
Emergency:	First Aid, Stabilization, Referral								
Outpatient Clini	ics	U		U					
Day Care:	Medical	U		U					
	Psychiatry								
Day Surgery		U		U					
Addictions:	Assessment and Referral					U	U		
	Out-patient Counselling						U		
	Aftercare/Relapse Prevention						U		
	Community Prevention/ Education						U		
Visiting Special	ty Clinics	U		U					
Breast Cancer S	creening	U		U					
Physicians' Offi	ice				U				
48 Hour Holdin	g & Observation (4-stretcher)								

Ø Under review system-wide.

EXTRAMURAL SERVICES

Facility Location Key: res = Restigouche Unit

		SERVICE DELIVERY UNITS									
NB Extra-mural Program		res	DLI	CVICE	DELIV	LKT C	I	Г			
Acute Care:	General Acute Care	U									
	Palliative	U									
	Oxygen	U									
Long-term Care:	General Chronic Care	U									
	Oxygen	U									
Community Resource:	Consultation	U									
	Education	U									
	Short-term treatment	U									
Community Rehabilitation P Resource Pool:	hysiotherapy	U									
	Occupational Therapy	U									
	Speech Lang. Pathology	U									
Support Services to Education	1	U									

REGION 6 HOSPITAL CORPORATION

NOR'EAST Health Network / Réseau santé NOR'EST

MAXIMUM ALLOWABLE BEDS REGION 6 HOSPITAL CORPORATION

BED TYPE		MAXIMUM
ACUTE	- M & S, OBS, Paeds	273
	- Short-term Psychiatry	22
SUB-TOTAL ACUTE		295
RESTORATIVE		63
Addictions	- Detoxification	10
	- Short-term Treatment	0
	- Long-term Residential	0
SUB-TOTAL ADDICT	IONS	10
Total Non-tertian	RY	368
TERTIARY BEDS	- Oncology	0
	- Cardiac Surgery / SICU	0
	- Neurosurgery / SICU	0
	- Tertiary Psychiatry	0
	- Tertiary Rehabilitation	0
TOTAL TERTIARY		0
		•
GRAND TOTAL		368

1995/96 Service Population (Health Region 6)	79,169
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NOTE: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan '92*.

INTRAMURAL SERVICES

Facility Location Key: bat = Bathurst paq = Paquetville

car = Caraquet add = Addictions tra = Tracadie (350 George St., Bathurst)

tra = Tracadie lam = Lamèque ptv = Pointe Verte

				E	ACILIT	V		
PRIMARY SERVICES				Г	ACILIT	1		
	bat	car	tra	lam	ptv	paq	add	
G P Medicine	U	U	U	U	U	U		
G P Paediatrics	U	U	U					
Low-Risk, Non-Surgical Obstetrics	U	U						
Restorative Care	U		U					
Nursing	Ú	U	U	U				
ECG	U	U	U	U	U	U		
Respiratory Therapy	U	U	U					
Occupational Therapy	U	U	U					
Physiotherapy	U	U	U	U				
Pharmacy Services	C	C	U	U				
Clinical Nutrition	U	U	U	U				

Facility Location Key: bat = Bathurst paq = Paquetville

car = Caraquet add = Addictions tra = Tracadie (350 George St., Bathurst)

lam = Lamèque ptv = Pointe Verte

				F	ACILIT	Y		
SECONDARY SERVICES	bat	car	tra	lam	ptv	paq	add	
General Internal Medicine	U	U	U					
General Surgery	U	U						
G P Anaesthesia	U	U						
Specialty Anaesthesia	U							
Psychiatry	U							
Orthopaedics	U							
Otolaryngology	U							
Specialty Paediatrics	U							
Specialty Obstetrics and Gynaecology	U	U						
Respirology	U							
Medical Oncology	U							
Gastroenterology	U		U					
Ophthalmology	U							
Urology	U							
Concentrated Care		U	U					
Addictions - Detoxification			U					
Addictions - Short-term Treatment								
Addictions - Long-term Residential								

Facility Location Key: bat = Bathurst paq = Paquetville

car = Caraquet add = Addictions tra = Tracadie (350 George St., Bathurst)

tra = Tracadie lam = Lamèque ptv = Pointe Verte

				F	'ACILIT	Y		
SECONDARY SERVICES - 2	bat	car	tra	lam	ptv	paq	add	
EEG	U							
Audiology	U							
Speech Language Pathology	U	U	U					
Psychology	U							
Social Work	U	U	U					
Clinical Engineering	U							
Recreational Therapy	U							
Cardiac Intensive Care	U							
Surgical Intensive Care	U							
Plastic Surgery	U							
Neurology	U							
Haematology								
Physiatry	U							
Thoracic and Vascular Surgery	U							
Dermatology	U							
Rheumatology	U							
Geriatrics	U							
Specialty Cardiology								
Endocrinology								
EMG	U							
Lithotripsy	U							

Facility Location Key: bat = Bathurst paq = Paquetville car = Caraquet add = Addictions

r = Caraquet add = Addictions a = Tracadie (350 George St., Bathurst)

tra = Tracadie lam = Lamèque ptv = Pointe Verte

					F	ACILIT	Ϋ́		
LABORATORY	SERVICES	bat car tra lam ptv paq add							
Primary: Speci	men Collection					υ	U	U	
	Clinical Chemistry	U	U	U	U				
	Haematology	U	U	U	U				
Secondary:	Transfusion Services	U	U						
	Surgical Pathology	U							
	Autopsy Pathology	U							
	Cytopathology	U							
	Cytogenetics	Ø							
	Microbiology	U							

Ø Under review.

Facility Location Key: bat = Bathurst paq = Paquetville car = Caraquet add = Addictions

r = Caraquet add = Addictions = Tracadie (350 George St., Bathurst)

tra = Tracadie lam = Lamèque ptv = Pointe Verte

					F	'ACILIT	Ϋ́		
IMAGING SERVICES			car	tra	lam	ptv	paq	add	
Primary: Gener	ral Radiography	כ	U	U	U				
Secondary:	Diagnostic Ultrasound - Abdominal	U	U	U	U				
	- Cardiac	U							
	- Ophthalmological	U							
	- Neurological	U							
	Gastrointestinal Radiology	U	Ù	U	U	/			
	Mammography	U	U	U					
	Diagnostic Nuclear Medicine (in vivo)	U							
	Nuclear Cardiology	U							
	CT Scanning	U							
	MRI								

Facility Location Key: bat = Bathurst paq = Paquetville

car = Caraquet add = Addictions

tra = Tracadie (350 George St., Bathurst)

lam = Lamèque ptv = Pointe Verte

Tertiary Services				F	ACILIT	Ϋ́		
TERHARY SERVICES	bat	car	tra	lam	ptv	paq	add	
Cardiac Surgery								
Neurosurgery / Neuro Intensive Care								
Oncology								
Renal Dialysis	U							
Neonatal Intensive Care								
Tertiary Rehabilitation								
Long-term Psychiatric Care								

Facility Location Key: bat = Bathurst paq = Paquetville car = Caraquet add = Addictions

r = Caraquet add = Addictions = Tracadie (350 George St., Bathurst)

tra = Tracadie lam = Lamèque ptv = Pointe Verte

					Е	FACILITY						
AMBULATORY	SERVICES				Г	ACILII	Y			T		
			car	tra	lam	ptv	paq	add				
Emergency:	Ø	U	U	U	U							
	First Aid, Stabilization, Referral											
Outpatient Clin	ics	U	U	U	U							
Day Care:	Medical	U	U	U								
	Psychiatry											
Day Surgery		U	U									
Addictions:	Assessment and Referral			U				U				
	Out-patient Counselling			U				U				
	Aftercare/Relapse Prevention			U				U				
	Community Prevention/ Education			U				U				
Visiting Special	ty Clinics	U	U	U	U							
Breast Cancer S	Screening	U		U								
Physicians' Off	ice					U	U					
48 Hour Holdin	g & Observation (4-stretcher)											

Ø Under review system-wide.

EXTRAMURAL SERVICES

Facility Location Key: bat = Bathurst Unit

pen = Acadian Peninsula Unit, Tracadie-Sheila car = Caraquet Sub-unit, Acadian Peninsula Unit lam = Lamèque Sub-unit, Acadian Peninsula Unit

ND E			Ser	RVICE I	Delivi	ery Ui	NITS	
NB Extra-mural Program		bat	pen	car	lam			
Acute Care:	General Acute Care	U	U	U	U			
	Palliative	U	U	U	U			
	Oxygen	U	U	U	U			
Long-term Care:	General Chronic Care	U	U	U	U			
	Oxygen	U	U	U	U			
Community Resource:	Consultation	U	U	U	U			
	Education	U	U	U	U			
	Short-term Treatment	U	U	U	U			
Community Rehabilitation Ph Resource Pool:	ysiotherapy	U	U	U	U			
	Occupational Therapy	U	U	U	U			
	Speech Lang. Pathology	U	U	U	U			
Support Services to Education		U	U	U	U			
7								

REGION 7 HOSPITAL CORPORATION

Region 7 Hospital Corporation / Corporation hospitalière de la région 7

MAXIMUM ALLOWABLE BEDS REGION 7 HOSPITAL CORPORATION

BED TYPE		MAXIMUM
Acute	- M & S, OBS, Paeds	135
	- Short-term Psychiatry	12
SUB-TOTAL ACUTE	(?)	147
RESTORATIVE (?)		31
Addictions	- Detoxification (?)	10
	- Short-term Treatment	0
	- Long-term Residential	0
SUB-TOTAL ADDICTION	ONS	10
TOTAL NON-TERTIARY	7	188
TERTIARY BEDS	- Oncology	0
	- Cardiac Surgery / SICU	0
	- Neurosurgery / SICU	0
	- Tertiary Psychiatry	0
	- Tertiary Rehabilitation	0
TOTAL TERTIARY		0
GRAND TOTAL		188

1995/96 Service Population (Health Region 7)	39,208
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NOTE: Restorative care includes what were termed "Extended Care" and "Rehabilitation" in *Master Plan '92*.

INTRAMURAL SERVICES

Facility Location Key: chh = Chatham Head

neg = Neguac

bsa = Baie Ste. Anne rog = Rogersville bla = Blackville

Primary Services				F	ACILIT	Ϋ́				
PRIMARY SERVICES	chh	neg	bsa	rog	bla					
G P Medicine	U	U	U	U	U					
G P Paediatrics	U									
Low-Risk, Non-Surgical Obstetrics	U									
Restorative Care	U									
Nursing	U									
ECG	U									
Respiratory Therapy	U									
Occupational Therapy	U									
Physiotherapy	U									
Pharmacy Services	U									
Clinical Nutrition	U									

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				F	ACILIT	Ϋ́		
SECONDARY SERVICES	chh	neg	bsa	rog	bla			
General Internal Medicine	U							
General Surgery	U							
G P Anaesthesia	U							
Specialty Anaesthesia	U							
Psychiatry	U							
Orthopaedics	U							
Otolaryngology	U							
Specialty Paediatrics	U							
Specialty Obstetrics and Gynaecology	U							
Respirology								
Medical Oncology	U							
Gastroenterology	U							
Ophthalmology	U							
Urology	U							
Concentrated Care								
Addictions - Detoxification	U							
Addictions - Short-term Treatment								
Addictions - Long-term Residential								

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Special Programs 2				F	ACILIT	Ϋ́					
SECONDARY SERVICES - 2	chh	neg	bsa	rog	bla						
EEG	U										
Audiology	U										
Speech Language Pathology	U										
Psychology	U										
Social Work	U										
Clinical Engineering	U										
Recreational Therapy	U										
Cardiac Intensive Care	U										
Surgical Intensive Care	U										
Plastic Surgery											
Neurology											
Haematology											
Physiatry											
Thoracic and Vascular Surgery	U										
Dermatology											
Rheumatology											
Geriatrics	U										
Specialty Cardiology											
Endocrinology											
EMG											
Lithotripsy											

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						. crr			
LABORATORY	SERVICES				F	ACILIT	Υ		
LABORATORI	DERVICES	chh	neg	bsa	rog	bla			
Primary: Speci	men Collection		U	U	U	υ			
	Clinical Chemistry	U							
	Haematology	U							
Secondary:	Transfusion Services	U							
	Surgical Pathology	U							
	Autopsy Pathology	U							
	Cytopathology								
	Cytogenetics								
	Microbiology								

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_					F	'ACILIT	Ϋ́			
IMAGING SERV	VICES	chh	neg	bsa	rog	bla				
Primary: Gener	ral Radiography	U	U							
Secondary:	Diagnostic Ultrasound - Abdominal	U								
	- Cardiac	U								
	- Ophthalmological	U								
	- Neurological	U								
	Gastrointestinal Radiology	U				/				
	Mammography	U								
	Diagnostic Nuclear Medicine (in vivo)									
	Nuclear Cardiology									
	CT Scanning	U								
	MRI									

Facility Location Key: = Chatham Head chh

neg = Neguac

= Baie Ste. Anne bsa rog = Rogersville = Blackville bla

rog = Rog bla = Bla	gersville ckville	:						
				F	ACILIT	Ϋ́		
TERTIARY SERVICES	chh	neg	bsa	rog	bla			
Cardiac Surgery								
Neurosurgery / Neuro Intensive Care								
Oncology								
Renal Dialysis								
Neonatal Intensive Care								
Tertiary Rehabilitation								
Long-term Psychiatric Care								

October 1997 100

Facility Location Key: chh = Chatham Head

> neg = Neguac

= Baie Ste. Anne bsa rog = Rogersville = Blackville bla

		gersville ckville	;									
		FACILITY										
AMBULATORY	SERVICES	chh	neg	bsa	rog	bla						
Emergency:	Ø	U										
Emergency:	First Aid, Stabilization, Referral											
Outpatient Cl	inics	U										
Day Care:	Medical	U										
	Psychiatry											
Day Surgery		U										
Addictions:	Assessment and Referral	U										
	Out-patient Counselling	U										
	Aftercare/Relapse Prevention	U										
	Community Prevention/ Education	U										
Visiting Specia	lty Clinics	U										
Breast Cancer S	Screening	U										
Physicians' Off	fice		U	U	U	U						
48 Hour Holdin	ng & Observation (4-stretcher)											

Ø Under review system-wide.

October 1997 101

EXTRAMURAL SERVICES

Facility Location Key: mir = Miramichi Unit

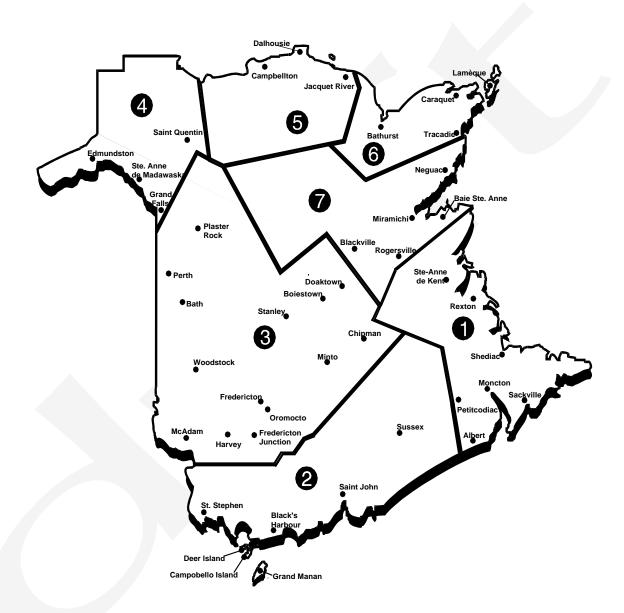
neg = Neguac Office, Miramichi Unit bla = Blackville Office, Miramichi Unit

							>	
NB Extra-mural Progra	AM				DELIV	ERY U	NITS	Π
G	9 11 2	mir	neg	bla				
Acute Care:	General Acute Care	U	U	U				
	Palliative	U	U	U				
	Oxygen	U	U	U				
Long-term Care:	General Chronic Care	U	U	U				
	Oxygen	U	U	U				
Community Resource:	Consultation	U	U	U				
	Education	U	U	U				
	Short-term treatment	U	U	U				
Community Rehabilitation P Resource Pool:	hysiotherapy	U	U	U				
	Occupational Therapy	U	U	U				
	Speech Lang. Pathology	U	U	U				
Support Services to Education	1	U	U	U				
7								

APPENDIX "A"

Map of New Brunswick Health Regions: Region Hospital Corporation Facility Locations

NEW BRUNSWICK HEALTH REGIONS / REGION HOSPITAL CORPORATION FACILITIES



APPENDIX "B"

Map of New Brunswick Health Regions: Extra-Mural Program Service Delivery Unit Locations

EXTRA-MURAL PROGRAM SERVICE DELIVERY UNITS / REGION HOSPITAL CORPORATION BOUNDARIES