

Annual Accountability Report

on Emergency Departments

April 1, 2023 – March 31, 2024



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Executive Summary

This report provides accountability to Nova Scotians on emergency department (ED) effectiveness, improvements and challenges, including how often EDs were closed in the 2023-24 fiscal year due to scheduled or temporary unplanned closures. Urgent Treatment Centres (UTCs) and the Collaborative Emergency Centres (CECs) are not included, as they do not operate as EDs.

The total number of ED closure hours decreased by 35% from last fiscal year to this year, from 79,813 in 2022-23 to 51,552 in 2023-24. Scheduled closures decreased from 37,890 hours in 2022-23 to 23,381 hours in 2023-24. Closure hours due to unplanned or temporary closures decreased this year, dropping from 41,923 hours in 2022-23 to 28,171 hours in 2023-24. However, in 2023-24, temporary closures constitute a larger proportion of the total closure hours (55%) than last year (45%). EDs were staffed and operational for 87% of the hours they were scheduled to be open this year. ED closures occurred in small volume rural and community EDs. Tertiary and regional EDs did not have any closures.

In January 2023, the Nova Scotia government released the 'Improving Emergency Care' plan, which has driven continued improvements for patients to access emergency and urgent care, reduce ambulance response times, and provide more care options for patients.

Key improvements have focused on improving patient flow and access to care in EDs, including the availability of UTCs for non-emergency care, and expanding the use of virtual services to support care of appropriate ED and UTC patients. Recruitment and retention work has been ongoing to reduce ED physician and staffing shortages, which can lead to temporary closures. ED staffing now includes ED Patient Advocates and Waiting Room Care Providers at all regional EDs, the creation of Physician Flow Lead roles, and the addition of Nurse Practitioners and Physician Assistants. Rapid Assessment Zones have been implemented and targeted improvements in ambulance offload times have contributed to clearing paramedics from EDs faster to be available to respond in communities. Real-time ED wait times and closure information is now available on the YourHealthNS app and Nova Scotia Health (NSH) website.

In addition to these ED improvements, continued work in Primary Care has contributed to better access to care for low acuity needs, improving availability of emergency services to those who truly need emergency and urgent care.

We continue to evaluate, adapt, and improve emergency and primary care to ensure Nova Scotians have the right care in the right setting at the right time. The 'Improving Emergency Care' plan is driving work and improvements to continue to reduce ED closures and improve emergency access to care, so all Nova Scotians receive timely and efficient care.

Acronyms Used in this Report

C3	Care Coordination Centre
CECs	Collaborative Emergency Centres
CTAS	Canadian Triage Acuity Score
EDs	Emergency Departments
EHS	Emergency Health Services
IWK	Izaak Walton Killam Health
NFPR	Need a Family Practice Registry
NSH	Nova Scotia Health
RAZ	Rapid Assessment Zone
UTCs	Urgent Treatment Centres
VCNS	Virtual Care Nova Scotia
VENS	Virtual Emergency Nova Scotia
VUNS	Virtual Urgent Nova Scotia
YHNS	YourHealthNS App

Introduction

The Annual Accountability Report on ED Closures for the fiscal year ending March 31, 2024, is prepared pursuant to Section 6 of the Emergency Department Accountability Act (2014). This Act requires the NSH and IWK Health to report on all ED closures, hold public consultations in communities that have experienced a pattern of ongoing closures, and report on the outcomes of those consultations directly to the Minister of Health and Wellness.

The report gives an account of various aspects of the health system related to emergency care, including closures, wait times, and other patient flow indicators.

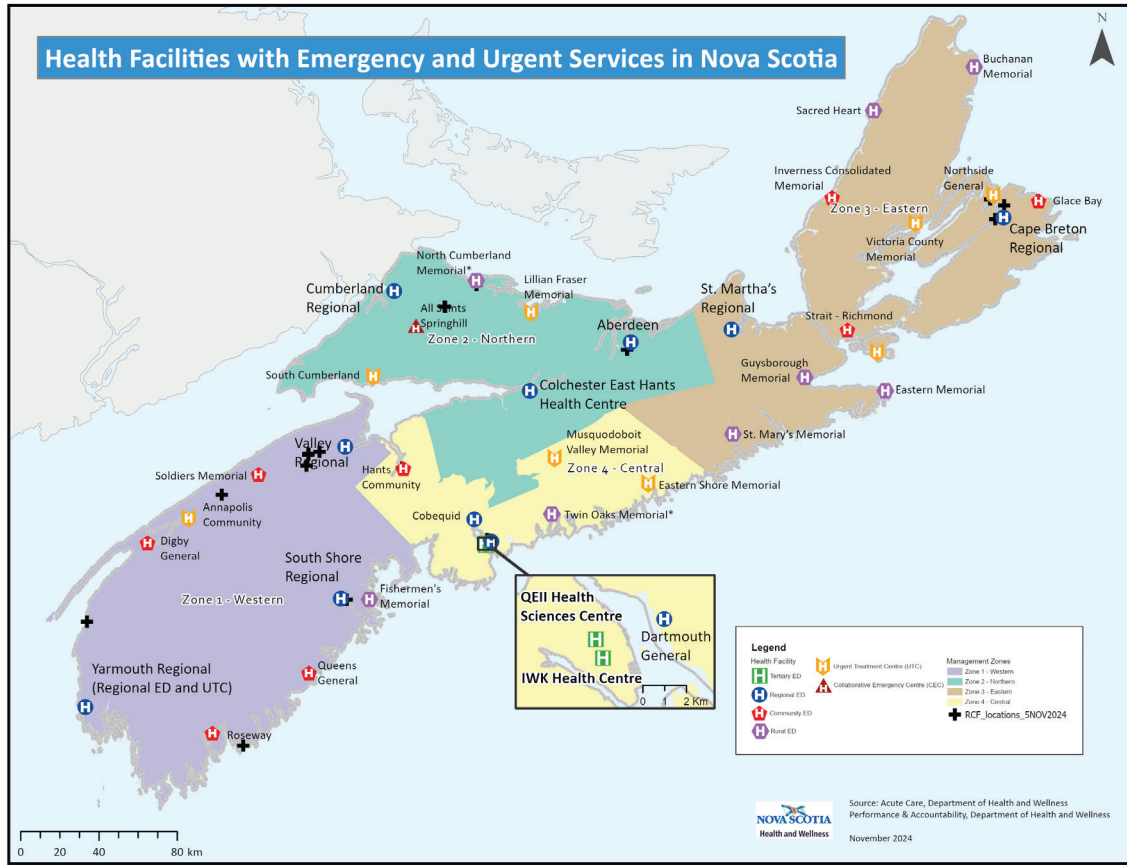
Emergency Care in Nova Scotia

In Nova Scotia, emergency and urgent care is provided through a network of services available across the province, which includes EDs, UTCs, and CECs, as well as associated services including EHS and telemedicine. ED physicians, nurses and other clinical and support staff teams play a critical role in the province’s healthcare system, quickly assessing and providing quality care to patients with unexpected emergent and urgent illnesses and injuries.

Health Facilities with Emergency and Urgent Services in Nova Scotia

Twenty-eight (28) EDs, nine (9) UTCs; and three (3) CECs form the single integrated network of emergency and urgent care in Nova Scotia (see map).

Figure 1. Health Facilities with Emergency and Urgent Services in Nova Scotia



*North Cumberland and Twin Oaks operate as Rural EDs during the day and CECs at night.

Emergency Departments

The 28 EDs are categorized by four service levels (see Table 1 below). The two tertiary care EDs are located in Halifax and have access to all specialty care services on site 24/7, including surgery, diagnostic imaging and laboratory services. The ten regional EDs are located in hospitals with some specialty services and in-patient admissions and are advanced full service EDs which operate 24/7 with no unplanned closures. The exception is Cobequid ED in Lower Sackville which is a regional ED open 0700 – 0100 and does not have access to in-patient beds onsite. The eight Community EDs have access to diagnostic imaging and laboratory services and some in-patient admissions. Some of these ED have planned hours that are less than 24/7 and occasional unplanned closures. There are six smaller rural EDs are smaller EDs with limited access to diagnostic imaging and laboratory services and limited in-patient beds.

Most Nova Scotians live close to the tertiary, regional or community EDs: 97% of residences are within a one-hour drive, and 88% are within 30 minutes.

Table 1. EDs by Level

Level (Number of Sites)	Sites	Zone
1 – Tertiary Hospital ED (2)	QEII Health Sciences Centre (HI Site)	Central
	IWK Health Centre	Central
2 – Regional Hospital ED (10)	Dartmouth General	Central
	Cobequid Community Health Centre	Central
	South Shore Regional	Western
	Valley Regional	Western
	Yarmouth Regional*	Western
	Aberdeen Regional	Northern
	Colchester Regional	Northern
	Cumberland Regional	Northern
	St. Martha’s Regional	Eastern
	Cape Breton Regional	Eastern
3 – Community Hospital ED (8)	Hants Community	Central
	Digby General	Western
	Queens General	Western
	Roseway	Western
	Soldiers Memorial	Western
	Glace Bay	Eastern
	Inverness Consolidated Memorial	Eastern
	Strait Richmond	Eastern
4 – Rural Hospital ED (8)	Fisherman’s Memorial	Western
	Buchanan Memorial	Eastern
	Eastern Memorial	Eastern
	Guysborough Memorial	Eastern
	Sacred Heart Community Health Centre	Eastern
	St. Mary’s Memorial	Eastern
	Twin Oaks Memorial**	Central
	North Cumberland Memorial**	Northern

*Yarmouth operates both a Regional ED and an UTC.

**Twin Oaks Memorial and North Cumberland Memorial operate as Rural ED during the day and CEC at night with nurse or paramedic on site and offsite physician support.

Urgent Treatment Centres

To provide more consistent and sustainable care, some small rural EDs with more frequent unplanned closures have been converted to UTCs. One additional UTC transitioned since last fiscal for a total of nine UTCs located in hospitals with access to diagnostic imaging and bloodwork in which urgent care is provided for patients with non-life-threatening health conditions such as simple fractures, minor infections, skin and eye irritations, and small lacerations. Eight of these UTCs are operated by NSH, the ninth being St. Anne Centre which is a nonprofit society owned by the citizens of Isle Madame and Louisdale.

In total, NSH UTCs recorded 60,611 visits during the 2023-24 period. Many of these patients would have otherwise needed to seek care at hospital EDs.

Currently, care is accessed at NSH UTCs through same-day or next-day appointments. The St. Anne’s Hospital UTC provides 24/7 service and sees patients who walk in with no appointments.

Table 2. UTC Sites

UTC	Zone	Opening Date
Yarmouth Regional*	Western	1-Sep-2024
Annapolis Community Health Centre	Western	12-Oct-2022
Musquodoboit Valley Memorial	Central	3-Apr-2023
Eastern Shore Memorial	Central	6-Mar-2023
Lillian Fraser Memorial Hospital, Tatamagouche	Northern	1-Jan-2023
South Cumberland Community Care Centre	Northern	17-Dec-2021
Victoria County Memorial Hospital (Temporary)	Eastern	3-Oct-2022
Northside General Hospital	Eastern	1-Nov-2021
St. Anne’s, Arichat**	Eastern	7-Apr-2020

*Yarmouth operates both a Regional ED and an UTC.

** St. Anne’s operates as UTC 24/7 but is not part of NSH network of hospital sites.

UTCs are not included in the ED closures analysis of this report.

Collaborative Emergency Centres

CECs are a model of emergency service delivery in which there are nurses and/or paramedics on site to provide in-person assessment and care to patients. These emergency clinicians have telephone and video access to EHS physicians for clinical direction and support. If required, patients may be booked in the next day for further assessment or care or transferred to a regional ED for additional care.

Table 3. CEC Sites by Level

Level	Sites	Zone
Daytime Rural ED and Night CEC (2)	Twin Oaks	Central
	North Cumberland	Northern
CEC Only (No ED) (1)	All Saints	Northern

Two of the CECs are in small rural hospitals which function as Level 4 EDs during the day with a physician present on-site and convert to CECs at night. One rural hospital site operates during the day based on physician availability as only as a CEC with virtual access to physicians.

All Saints CEC is not included in the ED closures analysis of this report.

Virtual Care in EDs and UTCs

Two virtual services have been introduced to support patient care in some EDs, UTCs and CEC: Virtual Emergency Nova Scotia (VENS) and Virtual Urgent Nova Scotia (VUNS).

VENS is a program in which appropriate urgent and emergent patients are assisted to be seen virtually by a Nova Scotia emergency physician. VENS was initially pilot tested at Colchester East Hants Health Centre during COVID-19 and is currently used at All Saints CEC and Yarmouth ED. Patients are initially triaged by a nurse and, if appropriate, connected with NS Emergency Physician virtually. A full assessment can be performed, tests and interventions can be performed during the visit. In the Yarmouth ED, the addition of VENS has created more capacity for the on-site emergency physician to see patients who require in-person physician care and for more critical cases. At All Saints CEC, the addition of VENS has enabled this small site to see more patients of varying acuity in their community.

VUNS is a virtual care service appropriate for individuals seeking care in EDs, UTCs or CECs for some urgent, non-life-threatening conditions. This service is especially beneficial during times when an ED is temporarily closed. With VUNS, patients receive in-person triage and registration by on-site clinical staff, followed by a virtual assessment with a physician who can order tests and prescribe some medications if required.

Table 4. VENS and VUNS Sites

Service	No. of Sites	Sites	Zone	Number of Visits in 2023-24
VENS	2	Yarmouth Regional	Western	1414
		All Saints	Northern	
VUNS	20	Hants Community	Central	1505*
		Twin Oaks Memorial	Central	
		Eastern Shore Memorial	Central	
		Musquodoboit Valley Memorial	Central	
		Victory County (Temporary)	Eastern	
		Glace Bay	Eastern	
		St. Mary's Memorial	Eastern	
		Guysborough Memorial	Eastern	
		Eastern Memorial	Eastern	
		Inverness Consolidated Memorial	Eastern	
		Buchanan Memorial	Eastern	
		Northside General	Eastern	
		North Cumberland	Northern	
		All Saints	Northern	
		South Cumberland	Northern	
		Digby General	Western	
		Roseway	Western	
Soldiers Memorial	Western			
Queens Memorial	Western			
Fisherman's Memorial	Western			

*Data for VUNS is only available October 2023 to March 2024

Emergency Health Services

The network of emergency and urgent care is complemented by the provincial EHS system, which includes the EHS Medical Communications Centre, ground ambulance and critical care LifeFlight service to coordinate pre-hospital care, inter-facility transport and provide clinical support to 911 callers.

811 Telecare and Mental Health and Addictions Supports

Nova Scotians have access to a 24/7 telecare service through 811, available in over 125 languages, providing nursing advice and helping callers determine the most appropriate level of care for their needs.

The province also offers a 24/7 Provincial Mental Health and Addictions Crisis Line, providing crisis intervention for children, youth, and adults experiencing mental health crises or emotional distress.

Emergency Department Visits

In 2023-24, there were 41,829 visits to the IWK ED, a 1.93% decrease from the previous year (42,653).

At NSH EDs, there were 519,310 visits in 2023-24, a 2.04% decrease from the previous year (530,118). It is important to note that the number of EDs operating hours decreased over these two fiscal years due to the shift in model of care to UTCs (see UTC section above for number of UTC visits).

In 2023-24, most ED visits were made by patients who were in the 17-65 age group. Almost all patients who visited the IWK ED were under 17 years of age (98.6%, 41,219 visits). NSH EDs received 53,059 visits by patients under 17 years of age (10.2% of visits).

Table 5. Emergency Department Demographics

Age (group)	NSH		IWK		Total NSH & IWK	
	% of Total	# of Visits	% of Total	# of Visits	% of Total	# of Visits
<2	1.6%	8,440	24.2%	10,132	3.3%	18,572
2-16	8.6%	44,619	74.4%	31,087	13.5%	75,706
17-65	61.3%	318,559	1.4%	594	56.9%	319,153
66-80	20.2%	104,959	0.0%	< 5	18.7%	< 104,961
>80	8.2%	42,736	0.0%	0	7.6%	42,736
Grand Total*	100.0%	519,310	100.0%	41,829	100.0%	561,139

*A small subset of records with incomplete age information has been excluded.

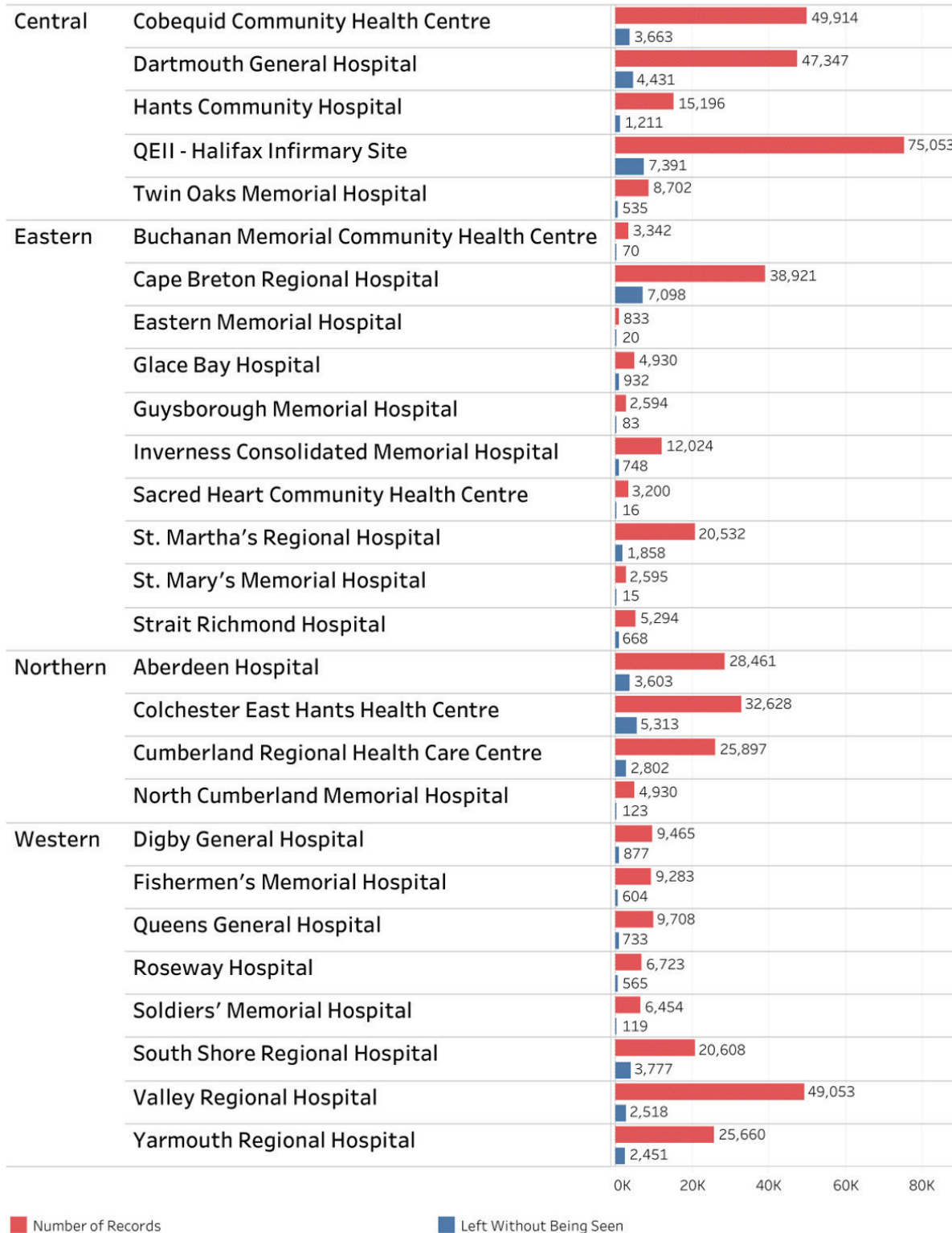
In 2023-24, 2080 patients left the IWK ED without being seen, representing 5.0% of ED visits, lower than the 8.6% of ED visits in the previous year. During the same period, 52,521 patients who visited NSH EDs left without being seen by an ED clinician (10.02% of ED visits). This is lower than 10.4% of ED visits in the previous year.

The graph on the following page shows the total number of visits by ED and the total number of patients who left without being seen at each ED in NSH in 2023-24.

Figure 2. ED Visits

Total ED Visits and Patients Left Without Being Seen FY 2023-24

Note: excludes UTCs and All Saints Springhill Hospital



Number of Records

Left Without Being Seen

Triage of Emergency Patients

When patients come to the ED for care, they are assessed as soon as possible after arriving to determine how serious their injury or illness is. NSH and IWK Health use the Canadian Triage Acuity Scale (CTAS), the standard triage system used across Canada. Based on the assessment, patients are assigned a CTAS score which triages them for further assessment with the most serious cases addressed first.

Table 6. Canadian Triage and Acuity Scale

CTAS Triage Levels		Definition	CTAS Standard Time to Health Care Practitioner and Re-assessment
Level 1	Life threatening conditions requiring immediate attention For example: Patients heart has stopped, or they've experienced life-threatening trauma. Patients will receive treatment right away.	Resuscitation	Immediately with continuous nursing assessment
Level 2	High risk for loss of limb or function or signs of a serious problem For example: heart attack symptoms or stroke, not conscious, having a lot of trouble breathing and/or severe bleeding	Emergent	15 min to provider; nursing reassessment every 15 min
Level 3	May worsen or progress into a more serious condition For example: head injury, deep cut or foreign, object in eyes or ears, chest pain (not related to a known heart problem), signs of serious infection and/or urgent mental health concerns	Urgent	30 min to provider; nursing reassessment every 60 min
Level 4	Less urgent conditions and vital signs within normal limits For example: back, arm or leg pain or cuts.	Less/Semi-urgent	60 min to provider; nursing reassessment every 60 min
Level 5	Normal vital signs and non-urgent conditions For example: sore throat, ear infection, minor cuts or bumps, medication request and/or return visits.	Non-urgent	120 min to provider; nursing reassessment every 2 hours

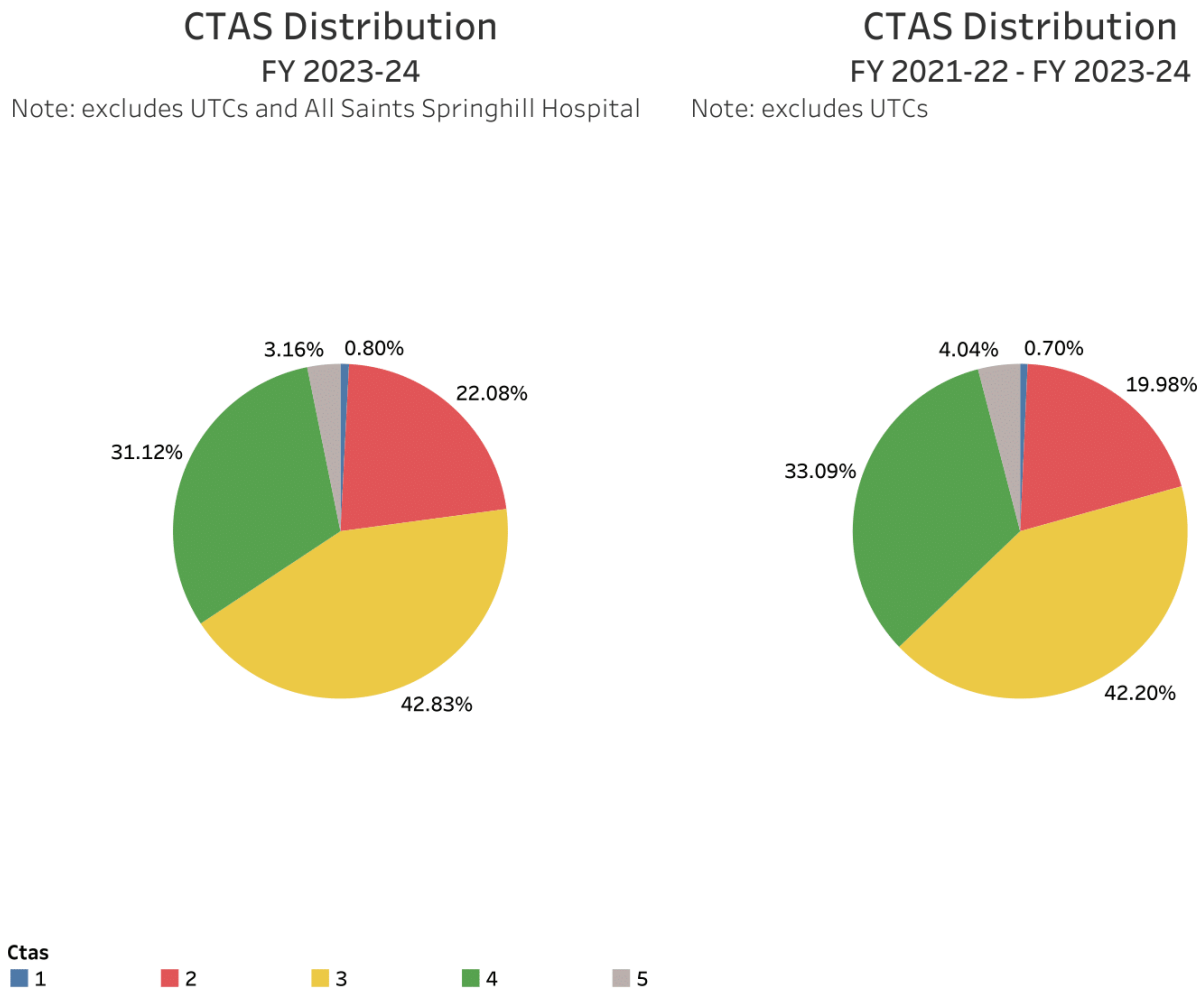
Source: [CTAS Introduction](#)

At the IWK ED, 60% of visits were higher acuity (CTAS level 1-3) and 40% were lower acuity (CTAS level 4-5) in 2023-24. This is similar to the previous fiscal year (61% vs. 39%).

At NSH EDs, as the figure below shows, 65% of visits were higher acuity and 35% were lower acuity in 2023-24. This similar to the previous fiscal year (62% vs. 38%). The slight decrease in lower acuity patients presenting to EDs may indicate that these patients have been able to access care in other locations, such as primary care options.

More lower acuity patients present at smaller NSH EDs, and higher acuity patients present to or are transported by EHS to the NSH 11 regional or tertiary care sites that provide services that are not available at all EDs (i.e., CT scan, surgical or critical care services).

Figure 3. Distribution of Patient Acuity at EDs 2023-24 Compared to Previous Years

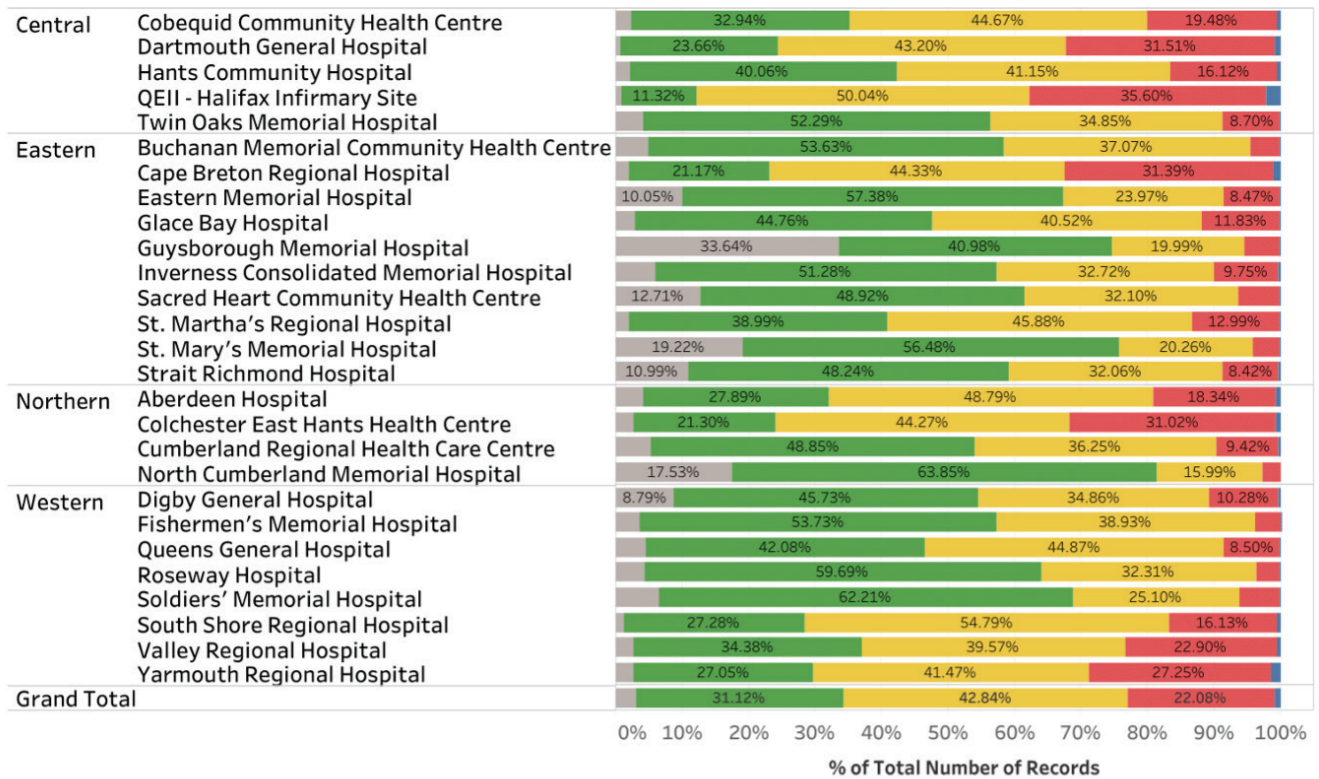


A small subset of records with incomplete CTAS values were excluded.

Figure 4. Distribution of Patient Acuity at EDs By Site

**CTAS Distribution
FY 2023-24**

Note: excludes UTCs and All Saints Springhill Hospital



Ctas
 ■ 5 ■ 4 ■ 3 ■ 2 ■ 1

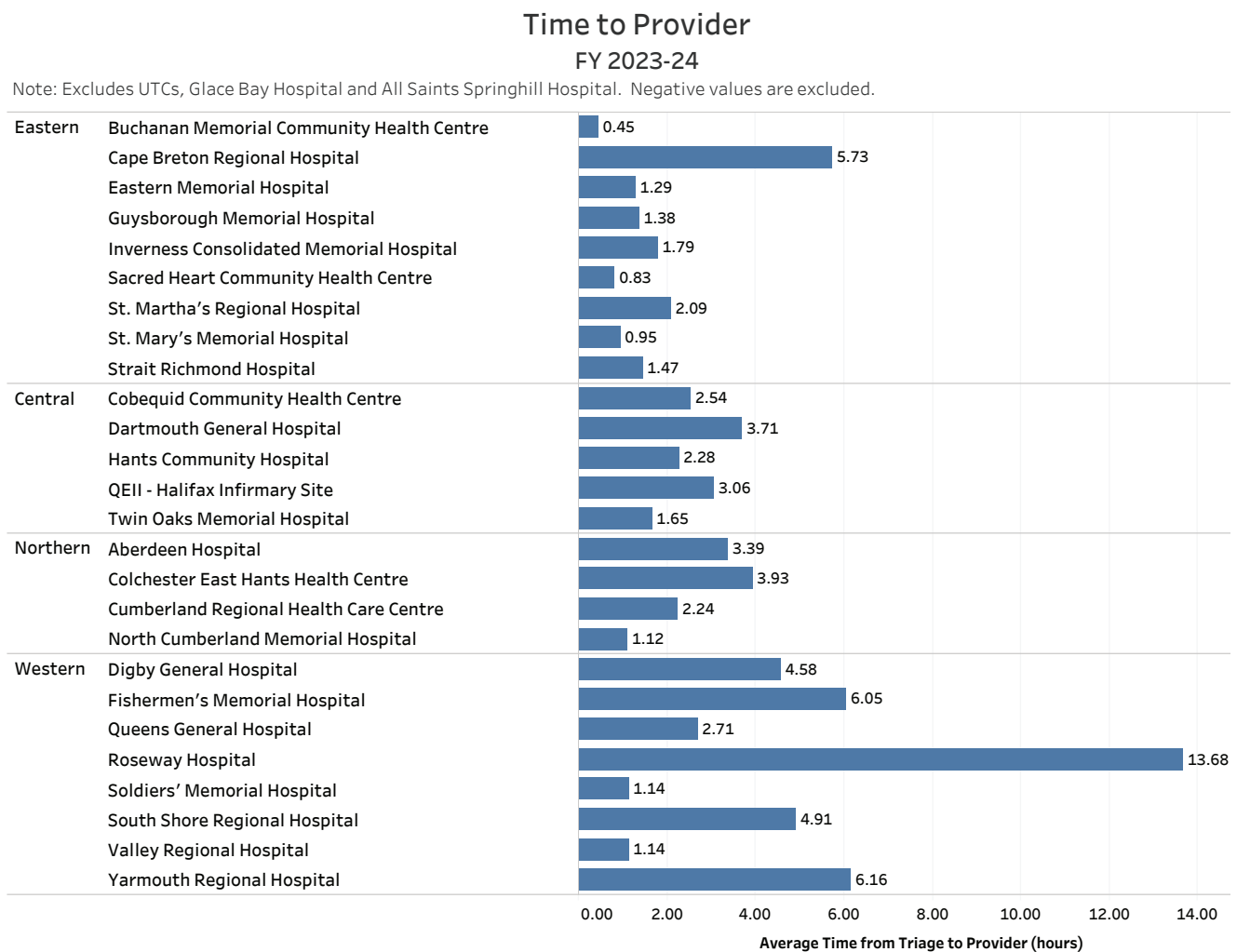
A small subset of records with incomplete CTAS values were excluded.

ED Wait Times

ED wait time is measured from the time a patient is triaged to when they are seen by an ED clinician and is a key metric as a marker of the timeliness and quality of patient care. This time is impacted by several factors, including: the number of patients who come to EDs, patient acuity, space available in the ED, the length of time of the stay of patients in the ED, available hospital beds outside of the ED in which to move admitted ED patients to, and how long admitted patients stay in hospital before they are discharged. Several quality initiatives are underway to decrease the ED wait time and are described later in the report.

In 2023-24, the IWK ED average wait time from arrival/triage to provider was 1 hour and 45 minutes, a 12.5% decrease from the previous year (2 hours). The average ED wait time at NSH from triage to provider in 2023-24 was 2.96 hours, a 5.7% increase from the previous year (2.8 hours).

Figure 5. ED Wait Times



ED Open Hours and Closures

Tertiary and Regional EDs are all open 24/7, with the exception of Cobequid ED, which is a regional ED with scheduled open hours of 0700 – 0100. There were no temporary closures at tertiary or regional EDs in 2023-24. While certain smaller community and rural EDs (Level 3 or 4) are occasionally closed, the overall emergency and urgent network of care is integrated and always expected to respond to emergencies 24 hours a day/7 day a week. NSH works with their teams across the province to achieve coverage when they are faced with an ED closure.

The public can now easily access real-time information on [ED closures](#) and [wait times](#) through the YourHealthNS (YHNS) app and online platform. This convenient tool allows individuals to make informed decisions about where to seek care by providing up-to-date details on ED availability and current wait times at hospitals across the province. By offering this transparency, YHNS helps reduce uncertainty, improve patient flow, and ensure a more efficient healthcare experience for Nova Scotians.

Emergency Department Closures

ED closures are categorized as scheduled or unscheduled.

Scheduled or planned ED closures occur when EDs are planned to have open operational hours of less than 24/7. The purpose of planning for an ED to be open less than 24/7 is to create more predictable and sustainable staffing and services, and to avoid unplanned ED closures. The following EDs have scheduled open hours that are less than 24/7:

- Fisherman's Memorial Hospital ED (Western Zone)
- Soldiers Memorial Hospital ED (Western Zone)
- Strait Richmond ED (Eastern Zone)
- Glace Bay Health Care Facility ED (Eastern Zone)
- Cobequid Community Health Centre ED (Central Zone)

An unscheduled (or unplanned or temporary) ED closure, is a short-notice reduction of ED open operational hours, typically due to the availability of the minimum number of healthcare professionals required to safely open and run the ED. Other factors that can lead to temporary ED closures include urgent facility/infrastructure issues that impacts safety or operations. Most temporary closures occur in small, rural EDs. In 2023-24, 13 EDs experienced temporary closures.

ED closures are closely tracked. The percentage of scheduled hours open was calculated for 28 EDs by determining the total number of hours the ED was open (i.e., subtracting the scheduled and temporary closure hours) and dividing by the total number of hours in the year (24/7). The public can view real-time information on ED closures and hours on the NSH website and on the YourHealthNS app.

When an ED has experienced an ongoing pattern of temporary closures, the local community is consulted to address concerns and identify a course of action. More information on public consultations is included in Appendix A.

The total number of ED closure hours decreased by 35% from last fiscal year to this year, from 79,813 in 2022-23 to 51,552 in 2023-24. Scheduled closures decreased from 37,890 hours (47% of total closure hours) in 2022-23 to 23,381 hours (45% of total closure hours) in 2023-24. Closure hours due to unplanned or temporary closures decreased this year, dropping from 41,923 hours in 2022-23 to 28,171 hours in 2023-24. However, in 2023-24, temporary closures constitute a larger proportion of

the total closure hours than they did last year therefore 55% of all closures in 2023-24 were due to unplanned/temporary closures compared to being 45% of the total closure hours last year. EDs were staffed and operational for 87% of the hours they were scheduled to be open this year.

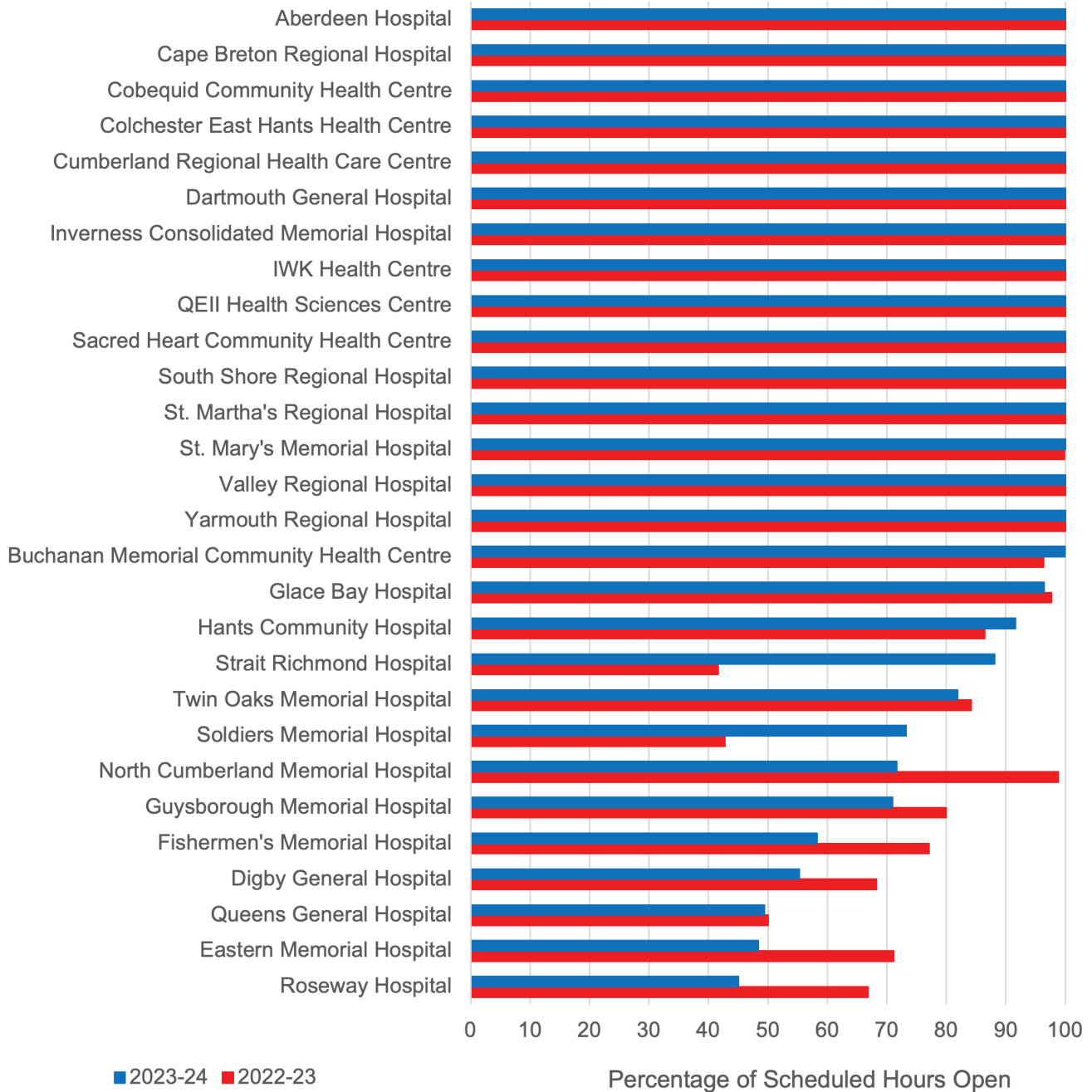
The reduction in ED closure hours is largely due to progress to fill ED physician and clinician vacancies in community and rural EDs.

In 2023-24, EDs were open, staffed, and responsive for 87% of all possible hours, compared to 84% last year.

While important progress has been achieved in reducing closure hours, direct comparison to 2022-23 should be done with caution. Two sites with regular closures were not included this year: Musquodoboit Valley Hospital was converted from a rural ED to a UTC on April 3 2024 and excluded from this analysis, and All Saints Hospital CEC was excluded as it no longer operates as an ED.

Figure 6. Scheduled Hours Open by Site

Percentage of Scheduled Hours Open by ED
in 2023-24 Compared to 2022-23



Improvements to Overcome Challenges Related to ED Closures and Access to Care

In 2023-24, the following were the leading challenges facing emergency and urgent care and service delivery in Nova Scotia:

- Access to emergency care due to long wait times and hospitals with admissions over-capacity.
- Shortages of physicians and healthcare providers to fill ED vacancies.
- Outdated ED infrastructure; and inadequate access to primary and urgent care options.

In response to these challenges, the [Improving Emergency Care Plan](#) was released. This plan outlined targeted improvements to drive forward access emergency and urgent care, to reduce ambulance response times, and to provide care options for patients to receive care.

Access to Emergency Care

Significant strides were made to improve patient care across EDs by reinforcing and expanding waiting room care providers, patient advocates, physician assistants, nurse practitioners, licensed practical nurses', social workers, and security professionals' positions. These improvements enhanced the patient experience and addressed wait times more effectively. Efficient triage and patient flow systems were implemented, utilizing tools like RAZ to prioritize critical cases and direct non-urgent patients to alternative care options, such as urgent care clinics or virtual care services. The IWK Health introduced a Green Zone patient flow process and a triage app to better manage patient prioritization.

Collaboration with virtual care services was strengthened, notably through the implementation of VENS at two sites, with the goal to reduce wait times for patients with non-urgent health concerns.

Flow Lead and Offload Assessment Teams were established in 11 EDs to streamline patient triage and care. Flow physicians provide additional support during peak times and enhancing intradepartmental flow including through rapid assessment zones.

Ambulance offload teams were introduced at 9 regional EDs to expedite patient transfers and return paramedics to service more quickly. A "direct-to-chairs" procedure, developed collaboratively by EHS and NSH, allows non-urgent, mobile patients to be moved directly to the waiting room, freeing paramedics for community coverage and response to incoming emergency calls.

UTCs were expanded to handle non-life-threatening health issues and improve the availability of urgent care.

Finally, patients were empowered to make informed decisions about where to seek care through the YHNS app and website, which now provides up to date information on open hours, closures, predicted ED wait times and service location information.

ED Expansion and Renovation Projects

Work is underway to redevelop seven EDs: Halifax Infirmary, IWK, Cape Breton Regional, South Shore Regional, Yarmouth Regional, Cumberland Regional, and Glace Bay. This aims to enhance patient care and improve the overall functionality of these critical healthcare facilities. Additionally, work began on developing modern hospital infrastructure and spaces to better support the health system into the future, with significant progress on the large QEII Expansion Project and the Cape Breton Regional Hospital Redevelopment Project.

Hospital Access & Flow and Capacity

The Care Coordination Centre (C3) at the QEII Health Sciences Centre was successfully expanded to additional sites across the Central Zone and also functions in each of the other Zones. The C3 system provides healthcare providers with real-time data, significantly improving patient flow throughout the region. By streamlining the process of moving patients to available beds more quickly and efficiently, C3 helps ensure patients receive timely care. Additionally, it supports faster discharge processes, enabling patients to return home sooner and creating space for new admissions. This expansion has been instrumental in enhancing patient care and optimizing hospital capacity across the province.

Physician and Health Care Professional Recruitment, Retention and Expansion of Multi-Disciplinary Teams in EDs

Efforts to fill ED vacancies and ensure continuous physician coverage remain a top priority to prevent unplanned ED closures and minimize strain on the healthcare system. Focusing on recruiting and retaining qualified emergency physicians helps provide consistent care, reduce wait times, and improve efficiency.

The Office of Healthcare Professionals Recruitment plays a key role in attracting and retaining healthcare talent across Nova Scotia, with a focus on rural areas. The Community Fund supports recruitment efforts, offering funding to support local organizations seeking to hire physicians in areas with ED physician vacancies. Additionally, collaboration with regulatory bodies streamlines licensure for internationally educated health professionals, while physician recruiters help familiarize candidates with practicing in the province. These initiatives are crucial to ensuring a stable, effective healthcare workforce.

Nova Scotia's second medical school campus at Cape Breton University, set to open by Fall 2025, will collaborate with Dalhousie University's Faculty of Medicine and train 30 new doctors annually, with a focus on preparing physicians to practice in rural areas across the province.

Access to Primary and Urgent Care Options

Mobile primary care clinics operate every weekend, addressing non-urgent, low-acuity health issues and increasing access to care. Pharmacists provide care to patients with minor ailments and chronic diseases in twelve Community Pharmacy Primary Care Clinics. In addition, in six Pharmacist Walk-in Clinics+ pharmacists have collaborated with nurse practitioners to provide a wider range of services for non-urgent health conditions and prescriptions. These services have added approximately 70,000 additional primary care appointments monthly this year.

Collaborative care teams are operating in 14 communities, with 37 existing teams working to increase patient access. A mobile respiratory clinic operates in Sydney and Antigonish, with plans to expand these services to more communities at existing COVID testing sites, providing care during evenings and weekends. These initiatives have improved primary care access for patients throughout the province.

VirtualCareNS is available to all Nova Scotians on the Need A Family Practice Registry, which improves access to care and has been further expanded to provide evening and weekend appointments. The number of ED visits among unattached Nova Scotians has been decreasing over the last five years coinciding with growth in Pharmacy and VCNS primary care use. Approximately 11,000 visits per month are being completed through VCNS. A multi-year virtual care strategy is underway that will expand virtual care to include consultations with specialists, so patients don't have to travel for care if in person care is not required, while also integrating mental health services into the virtual care program for all Nova Scotians.

Appendix A: Temporary ED Closure Hours and Public Consultations by Zone

In regions where an ED has experienced an ongoing pattern of closures, the health authority shall consult with the community served by the ED as defined by the Health Authorities Act (Emergency Department Accountability Act, 2014).

The following consultations were conducted based on facilities that experienced an ongoing pattern of temporary closures between April 1, 2023 – March 31, 2024.

WESTERN ZONE

Facility	Hours of temporary ED closures
Digby General Hospital	3,923.8
Fishermen’s Memorial Hospital	2,155.5
Roseway Hospital	4,832.0
Soldiers Memorial Hospital	419.5
Queens General Hospital	4,438.8
Total	15,769.5

PUBLIC CONSULTATION: Digby General Hospital (DGH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
Wednesdays, 2023-24 (Monthly)	Nova Scotia Health – Long & Brier Islands Community Committee	6-8
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> Monthly touch-point meetings between representatives of Nova Scotia Health, EHS and community representatives from Long & Brier Islands to share information and discuss issues related to access to healthcare at the Islands Health Centre and in this area of Digby County. Discussions extend to services available at Digby General Hospital including emergency services. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> Continue to work with EHS and community partners to identify potential gaps in services and provide information on mitigations. Create more awareness of other options to access care, such as Virtual Urgent Care at Digby General Hospital, mobile primary care clinics in the region, primary care access clinics, VirtualCareNS, community pharmacy primary care clinics, online options and other resources. 		

PUBLIC CONSULTATION: Queens General Hospital (QGH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jan 17, 2023 Jan 28, 2023 Oct 5, 2023	Queens General Hospital site lead and Queens General Hospital Foundation; Queens Hospital site lead and Queens Auxiliary	10-12 participants each mtg.
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> Queens General Hospital site lead met with Queens Hospital Foundation and shared information on emergency department closures. Discussion focused on reasons for closures and questions/ideas around recruitment and retention of physicians and other health professionals. Follow-up meetings with QGH site lead and Foundation Chair were scheduled regarding recruitment and retention initiatives. Meeting with Queens Auxiliary was also an opportunity to share information on emergency department challenge and recruitment initiatives. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> Work to better understand issues in recruitment and along with partners such as the Foundation to identify initiatives to address challenges. Help facilitate Foundation supported video focused on recruitment. Continue to work with QGH Foundation and Auxiliary to raise awareness of all options to access health care, which now includes Virtual Urgent Care at Queens, and other options such as mobile primary care clinics and same day access clinics, VirtualCareNS, community pharmacy primary care clinics, online options and other resources. 		

PUBLIC CONSULTATION: Fisherman’s Memorial Hospital (FMH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jan 25, 2024 May 30, 2024	Fishermen’s Memorial Hospital (FMH) Site Lead and FMH Auxiliary	Approx. 35-40 each mtg.
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> Information sharing on emergency department scheduling and reduction in hours due to health human resource challenges. Renewed commitment to providing emergency department coverage at FMH. Discussed the implantation of Virtual Urgent Care service that is available daily at certain times, even when the emergency department is closed. Gratitude expressed to the community and hospital auxiliary for ongoing commitment and support. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> Working with partners such as the Hospital Auxiliary and others in the community to promote awareness of all options to access health care, including Virtual Urgent Care at FMH, mobile primary care clinics in the region, same day primary care access clinics, VirtualCareNS, community pharmacy primary care clinics, online options and other resources. 		

PUBLIC CONSULTATION: Digby General Hospital (DGH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
Feb 21, 2024	Digby General Hospital Site Lead, Western Zone Director of Rural and Community Health, program managers	20-30 (two information sessions)
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> Two community information sessions gave the public opportunities to speak with Digby General Hospital leaders/team, ask questions and learn about how to access the various options for care available in Digby and surrounding areas. Participants had opportunities to describe their experience with accessing the emergency department and other services at Digby General Hospital and with the Digby Collaborative Family Practice team. Information tables were set up with information and representatives from: Public Health; Primary Health Care; VirtualCareNS; Mental Health & Addictions, Rehabilitation Services, Recruitment, etc. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> Continue to focus on recruitment and retention and close cooperation with the new Community Navigator in Digby. Create more awareness of other options to access urgent care, such as Virtual Urgent Care at Digby General Hospital. 		

PUBLIC CONSULTATION: Roseway Hospital

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jun 27, 2023 Sep 11, 2023 Dec 4, 2023 Mar 4, 2024	Co-Chairs, Shelburne County-Nova Scotia Health Community Partners Committee	Avg. 14-15 participants each meeting
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> Regularly scheduled meetings between representatives of Nova Scotia Health and community partners in Shelburne County to share information and discuss issues related to access to healthcare in the region, including Roseway Hospital emergency department schedule, primary care, other options to access care, recruitment of physicians and other healthcare providers. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> Housing and accommodations for physicians and other providers is a serious recruitment issue. Ideas explored on how community partners can work together to make more housing available. Agreement on the need to create a welcoming community to ensure newcomers and families become settled in the area, both from a professional and personal perspective. Create more opportunities to encourage local students to pursue healthcare careers, including career fairs, participation in high school co-op program and student bursary support program possibilities. 		

- Work with community to promote awareness of all options to access health care, including Virtual Urgent Care at Roseway, mobile primary care clinics and same day access clinics, VirtualCareNS, community pharmacy primary care clinics, online options and other resources.

PUBLIC CONSULTATION: Soldiers Memorial Hospital

DATE	CHAIR/SPEAKERS	ATTENDANCE
Sep 28, 2023	Nova Scotia Health and local municipal mayors, wardens and council representatives	Approx. 20

SUMMARY OF DISCUSSION:

- Information-sharing meeting between Soldiers Memorial Hospital site leaders, Nova Scotia Health zone senior leadership and municipal representatives from Annapolis, Berwick, Kentville and Middleton to discuss health services in the region, including emergency department schedule at Soldiers Memorial Hospital. An update was provided on recruitment from the office of health professionals recruitment with an opportunity to learn about community recruitment efforts from other municipal partners. Other issues and opportunities were discussed to enhance working together.

ACTION (Specific to EDs):

- Nova Scotia Health re-stated the commitment to ensure residents of Middleton and surrounding areas have access to reliable and safe emergency health services and primary health care services.
- Established more consistent, reliable hours Soldiers Memorial Hospital emergency department.
- Support and cooperate with enhanced community recruitment efforts.
- Improve access to primary health care and new technologies to reduce the need for people to go to emergency departments, such as mobile clinics, etc. Create more awareness of options to access care and explore communications channels.

PUBLIC CONSULTATION: Soldiers Memorial Hospital

DATE	CHAIR/SPEAKERS	ATTENDANCE
Nov 7, 2023	Nova Scotia Health and local municipal mayors, wardens and council representatives	Approx. 15

SUMMARY OF DISCUSSION:

- Follow-up to September meeting between Nova Scotia Health zone leadership and municipal representatives from Annapolis, Berwick, Kentville and Middleton to identify and explore best practices in recruitment and retention, and how improving the physician complement will reduce emergency department closures.

ACTION (Specific to EDs):

- Nova Scotia Health re-stated the commitment to ensure residents of Middleton and surrounding areas have access to reliable and safe emergency health services and primary health care services.
- Established more consistent, reliable hours Soldiers Memorial Hospital emergency department.
- Support and cooperate with enhanced community recruitment efforts.

NORTHERN ZONE

Facility	Hours of temporary ED closures
North Cumberland Memorial Hospital	2,491.5
Total	2,491.5

PUBLIC CONSULTATION: North Cumberland Health Care Centre, Pugwash

DATE	CHAIR/SPEAKERS	ATTENDANCE
Nov 28, 2023	Vice President, Operations, Northern Zone Medical Executive Director, Northern Zone Executive Director, Health Services, Northern Zone Executive Director, Community & Rural Health, Northern Zone Director Integrated Rural Health NZ Site lead, NCHCC EHS Public Works	Approx. 100

SUMMARY OF DISCUSSION:

- Nova Scotia Health hosted an information session to provide updates on healthcare services in Pugwash and surrounding areas. Discussions included the opening of the new North Cumberland Health Care Centre (NCHCC), updates from Primary Health Care, North Cumberland Memorial Hospital Collaborative Emergency Care (CEC), Cumberland Regional Health Care Centre, and recruitment efforts for physicians and staff. Leaders from Nova Scotia Health, Emergency Health Services (EHS), and the Department of Public Works participated, along with the Pugwash Physician Recruitment/Appreciation Committee.

ACTION (Specific to EDs):

- Seeking community cooperation related to recruitment and retention activities for physicians.
- Working with community to create wider awareness of all options to access healthcare, including primary care clinics, VirtualCareNS, community pharmacy primary care clinics, online options and other resources.
- **June 2024:** Approx. 1,000 residents in Pugwash and nearby communities received a community mailer with important details about the new facility and the services available at NCHCC.

PUBLIC CONSULTATION: All Saints Springhill Hospital, Springhill

DATE	CHAIR/SPEAKERS	ATTENDANCE
Nov 28, 2023	All Saints Springhill site lead All Saints Community Healthcare Foundation	10-12 participants each meeting

SUMMARY OF DISCUSSION:

- All Saints Springhill Hospital (ASSH) site lead met with All Saints Community Healthcare Foundation and shared information on how the site is improving access to care by offering virtual urgent care when the collaborative emergency centre (CEC) is closed. Discussion focused on reasons for closures and questions/ideas around recruitment and retention of physicians and other health professionals as well as ways to educate the public on the use of virtual urgent care.

ACTION (Specific to EDs):

- Work to better understand issues in recruitment and along with partners such as the Foundation to identify initiatives to address challenges.
- **June 2024:** A community mailer was sent to 2,600 homes in Springhill, Oxford, Oxford Junction, Collingwood and South Hampton to educate residents about Virtual Urgent Care at ASSH.
- Continue to work with Foundation to raise awareness of all options to access healthcare, which now includes Virtual Urgent Care at ASSH, and other options such as mobile primary care clinics and same day access clinics, VirtualCareNS, community pharmacy primary care clinics, online options and other resources.

EASTERN ZONE

Facility	Hours of temporary ED closures
Buchanan Memorial Hospital	6.0
Eastern Memorial Hospital	4,537.0
Glace Bay Health Care Facility	45.0
Guysborough Memorial Hospital	2,552.0
Strait Richmond Hospital	446.0
Total	7,586

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Apr 19, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/ stakeholders

SUMMARY OF DISCUSSION:

- Reminder about community meeting on April 26 to provide update to public regarding staffing and the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.
- Update on emergency department status and the UTC.
- Update on recruitment and retention of physicians and staff.
- Ongoing engagement in all working group meetings/decisions.
- Update on work being done with EHS.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Ongoing work to support healthcare at Victoria County Memorial Hospital.
- Continue recruitment and retention efforts.
- Poster for local advertisement for community meeting..

PUBLIC CONSULTATION: Meeting with Staff and Victoria County Memorial Hospital Charitable Foundation

DATE	CHAIR/SPEAKERS	ATTENDANCE
Apr 24, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health Christine Hines, Site Lead, Victoria County Memorial Hospital	Victoria County Memorial Hospital staff and Foundation members
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> • Reminder about community meeting on April 26 to provide update to public regarding staffing and the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital. • Update on emergency department status and the UTC. • Update on recruitment and retention of physicians and staff. • Update on work being done with EHS. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> • Ongoing work to support healthcare at Victoria County Memorial Hospital. • Continue recruitment and retention efforts. 		

PUBLIC CONSULTATION: Victoria County Community Meeting

DATE	CHAIR/SPEAKERS	ATTENDANCE
Apr 26, 2023	Brett MacDougall, VP Operations, Eastern Zone, Nova Scotia Health Glenn Cox, Executive Director, Community & Rural Health Services, Nova Scotia Health Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health Christine Hines, Site Lead, Victoria County Memorial Hospital, Nova Scotia Health	134 Community Members
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> • Update provided on temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital • Update provided on recruitment and retention of physicians and staff. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> • Ongoing work with partners and working group to support healthcare at Victoria County Memorial Hospital. • Continue recruitment and retention efforts. 		

PUBLIC CONSULTATION: North Sydney UTC update to Municipal and Provincial political leaders

DATE	CHAIR/SPEAKERS	ATTENDANCE
May 9, 2023 Email update	Barb O'Neill, Director, Emergency Care, Eastern Zone, Nova Scotia Health Anne Buchanan, Director, Integrated Care - Community Sites, Eastern Zone, Nova Scotia Health	Recipients: Minister Brian Comer, MLA; John White, MLA; Kendra Coombs, MLA and Fred Tilley, MLA Earlene MacMullin, Gordon MacDonald and Darren O'Quinn, CBRM councilors
SUMMARY OF DISCUSSION:		
<ul style="list-style-type: none"> Update on Northside urgent treatment centre (UTC) numbers/waiting area process/patient presentations/patient feedback and handouts for constituents. 		
ACTION (Specific to EDs):		
None		

PUBLIC CONSULTATION: Rural Career Fair Port Hawkesbury

DATE	CHAIR/SPEAKERS	ATTENDANCE
May 11, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Nova Scotia Health department representatives, Nova Scotia Health Site leads and community members
SUMMARY OF DISCUSSION:		
<ul style="list-style-type: none"> Booths set up advertising career opportunities within organization. 		
ACTION (Specific to EDs):		
<ul style="list-style-type: none"> Review survey feedback. 		

PUBLIC CONSULTATION: Guysborough Area Community Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
May 25, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Guysborough Area Stakeholder Working group and Ad Hoc members/stakeholders
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> • Update on emergency department closures due to physician and staff unavailability. • Update on recruitment and retention of physicians and staff. • Update on staff training. • Ongoing engagement in all working group meetings/decisions. • Provide feedback that reflects patient and public voice and perspective. • Housing submission put forward. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> • Work underway to try to fill vacant shifts. • Continue recruitment and retention efforts. • Ongoing work to support healthcare at Guysborough Memorial Hospital & primary health care in the community. 		

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jun 9, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/stakeholders
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> • Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial. • Update on recruitment and retention of physicians and staff. • Update on work being done with EHS. • Ongoing engagement in all working group meetings/decisions. • Provide feedback that reflects patient and public voice and perspective. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> • Ongoing work to support healthcare at Victoria County Memorial Hospital. • Work underway to try to increase access to care through urgent treatment centre, EHS partnerships, etc. • Continue recruitment and retention efforts. • Develop community education document. 		

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jun 29, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Guysborough Area Stakeholder Working group and Ad Hoc members/stakeholders
<p>SUMMARY OF DISCUSSION:</p> <ul style="list-style-type: none"> • Update on emergency department closures due to physician and staff unavailability. • Update on recruitment and retention of physicians and staff. • Ongoing engagement in all working group meetings/decisions. • Provide feedback that reflects patient and public voice and perspective. 		
<p>ACTION (Specific to EDs):</p> <ul style="list-style-type: none"> • Work underway to try to fill vacant shifts. • Continue recruitment and retention efforts. • Ongoing work to support healthcare at Guysborough Memorial Hospital & primary healthcare in the community. 		

PUBLIC CONSULTATION: Guysborough Healthcare Forum

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jul 10, 2023	<p>Honourable Michelle Thompson, Minister of Health</p> <p>Greg Morrow, MLA, Guysborough-Tracadie</p> <p>Warden Vernon Pitts, Municipality of the District of Guysborough</p> <p>Brett MacDougall, VP, Operations, Eastern Zone, Nova Scotia Health</p> <p>Glenn Cox, Executive Director, Community and Rural Health, Eastern Zone, Nova Scotia Health</p> <p>Dr. Don Brien, Executive Medical Director, Eastern Zone, Nova Scotia Health</p> <p>Representatives from Emergency Health Services</p> <p>Bill Innis, Chair, Guysborough Memorial Hospital Foundation (moderator)</p>	100 Community Members

SUMMARY OF DISCUSSION:

- Highlighted commitment to healthcare in the area and work underway on various initiatives.
- Update provided on emergency department closures at Guysborough Memorial Hospital, an overview of primary healthcare in Guysborough and recruitment and retention efforts underway for physicians and hospital staff.

ACTION (Specific to EDs):

- Work underway to try to fill vacant shifts.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Guysborough Memorial Hospital & primary healthcare in the community.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Aug 24, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/ stakeholders

SUMMARY OF DISCUSSION:

- Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.
- Update on recruitment and retention of physicians and staff.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to increase access to care.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Victoria County Memorial Hospital

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Aug 31, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Guysborough Area Stakeholder Working group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Update on emergency department closures due to physician and staff unavailability.
- Update on recruitment and retention of physicians and staff.
- Upcoming potential doctor site visit.

ACTION (Specific to EDs):

- Work underway to try to fill vacant shifts.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Guysborough Memorial Hospital & primary healthcare in the community.

PUBLIC CONSULTATION: CEO meeting with members of Victoria County council, Working Group and hospital foundation

DATE	CHAIR/SPEAKERS	ATTENDANCE
Oct 5, 2023	Karen Oldfield, Interim CEO & President, Nova Scotia Health Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Members of Victoria County Working Group, Victoria County Memorial Hospital Foundation and Victoria County Council

SUMMARY OF DISCUSSION:

- Update on emergency department status at Victoria County Memorial Hospital.
- Discussion on ways to increase access through urgent treatment centre and raise awareness of other pathways to care.
- Recruitment and retention of physicians and staff.
- Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.

ACTION (Specific to EDs):

- Continue to look at ways to increase care access.
- Community partners to see what they can do to support the hospital.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Victoria County Memorial Hospital.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Oct 18, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/ stakeholders

SUMMARY OF DISCUSSION:

- Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.
- Update on recruitment and retention of physicians and staff.

- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to increase access to care.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Victoria County Memorial Hospital.

PUBLIC CONSULTATION: Inverness County Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Oct 24, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Representatives from Inverness County council and Nova Scotia Health

SUMMARY OF DISCUSSION:

- Initial meeting of the working group consisting of representatives from Nova Scotia Health and community, partners working together to support healthcare at Inverness Consolidated Memorial Hospital and Sacred Heart Community Health Centre.

ACTION (Specific to EDs):

- Identify what resources partners can provide to help support the recruitment and retention of current and future healthcare providers.
- Identify additional potential members for the working group.
- Work together to ensure support for healthcare in Inverness County (Inverness and Cheticamp).

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Oct 26, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Guysborough Area Stakeholder Working group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Update on emergency department closures due to physician and staff unavailability.
- Update on recruitment and retention of physicians and staff.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to fill vacant shifts.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Guysborough Memorial Hospital & primary healthcare in the community.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Nov 22, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health Guest Speaker: Mary Jane Morrison, Associate Dean, Shannon School of Business, Cape Breton University	Victoria County Memorial Hospital Working Group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Mary Jane Morrison provided an update on planning for the medical school campus at Cape Breton University.
- Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.
- Update on recruitment and retention of physicians and staff.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to increase access to care.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Victoria County Memorial Hospital.

PUBLIC CONSULTATION: Inverness County Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Nov 28, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health Guest Speaker: Mary Jane Morrison, Associate Dean, Shannon School of Business, Cape Breton University	Inverness Consolidated Memorial Hospital Working Group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Mary Jane Morrison provided an update on planning for the medical school campus at Cape Breton University.
- Update on recruitment and retention of physicians and staff.

- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Share information on incentives/initiatives to support people interested in pursuing a career in healthcare.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Inverness Consolidated Memorial Hospital.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Nov 30, 2023	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health Guest Speaker: Mary Jane Morrison, Associate Dean, Shannon School of Business, Cape Breton University	Guysborough Area Stakeholder Working group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Mary Jane Morrison provided an update on planning for the medical school campus at Cape Breton University.
- Update on emergency department closures due to physician and staff unavailability.
- Update on recruitment and retention of physicians and staff.
- Update on virtual urgent care pilot project.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to fill vacant shifts.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Guysborough Memorial Hospital & primary healthcare in the community.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jan 8, 2024	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.
- Update on recruitment and retention of physicians and staff.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to increase access to care.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Victoria County Memorial Hospital.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jan 18, 2024	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/ stakeholders

SUMMARY OF DISCUSSION:

- Update on physician and staffing status at Victoria County Memorial Hospital and recruitment efforts.

ACTION (Specific to EDs):

- Continue recruitment and retention efforts.
- Develop community communication tools to provide updates on Victoria County Memorial Hospital. and its services, highlight work that is being done by Working Group and others.
- Ongoing work to support healthcare at Victoria County Memorial Hospital.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Feb 6, 2024	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/ stakeholders

SUMMARY OF DISCUSSION:

- Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.
- Update on recruitment and retention of physicians and staff.

- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to increase access to care.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Victoria County Memorial Hospital.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Feb 26, 2024	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Guysborough Area Stakeholder Working group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Update on emergency department closures due to physician and staff unavailability.
- Update on recruitment and retention of physicians and staff.
- Education/training beginning for virtual urgent care pilot project.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to fill vacant shifts.
- Continue recruitment and retention efforts.
- Arrange presentation to council on Virtual Urgent Care.
- Ongoing work to support healthcare at Guysborough Memorial Hospital & primary healthcare in the community.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Feb 27, 2024	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health Guest Speaker: Mary Jane Morrison, Associate Dean, Shannon School of Business, Cape Breton University	Inverness Consolidated Memorial Hospital Working Group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Mary Jane Morrison provided an update on planning for the medical school campus at Cape Breton University.
- Update on recruitment and retention of physicians and staff.

- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Share information on incentives/initiatives to support people interested in pursuing a career in healthcare.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Inverness Consolidated Memorial Hospital.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Mar 18, 2024	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Victoria County Memorial Hospital Working Group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Update on the temporary urgent treatment centre (UTC) at Victoria County Memorial Hospital.
- Update on recruitment and retention of physicians and staff.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to increase access to care.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Victoria County Memorial Hospital.

PUBLIC CONSULTATION: Victoria County Memorial Hospital Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Mar 25, 2024	Andrew Heighton, Director, Rural Health, Eastern Zone, Nova Scotia Health	Guysborough Area Stakeholder Working group and Ad Hoc members/stakeholders

SUMMARY OF DISCUSSION:

- Update on emergency department closures due to physician and staff unavailability.
- Update on recruitment and retention of physicians and staff.
- Update on Virtual Urgent Care pilot project.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to fill vacant shifts.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Guysborough Memorial Hospital & primary healthcare in the community.

PUBLIC CONSULTATION: Canso Area Community Working Group

DATE	CHAIR/SPEAKERS	ATTENDANCE
Jun 6, 2023	Melanie Newell, Site Lead, Eastern Memorial Hospital & Health Services Manager, Primary Health Care, Eastern Zone, Nova Scotia Health	Canso Area Stakeholder Working group and Ad Hoc members/stakeholders
Oct 24, 2023		
Nov 9, 2023		
Jan 18, 2024		
Feb 23, 2024		

SUMMARY OF DISCUSSION:

- Update on emergency department closures due to physician and staff unavailability.
- Update on recruitment and retention of physicians and staff.
- Ongoing engagement in all working group meetings/decisions.
- Provide feedback that reflects patient and public voice and perspective.

ACTION (Specific to EDs):

- Work underway to try to fill vacant shifts.
- Continue recruitment and retention efforts.
- Ongoing work to support healthcare at Eastern Memorial Hospital & primary healthcare in the community.

CENTRAL ZONE

Facility	Hours of temporary ED closures
Hants Community Hospital	738.0
Twin Oaks Memorial Hospital	1,592.0
Total	2,330.0

PUBLIC CONSULTATION: Eastern Shore Memorial Hospital (ESMH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
May 11, 2023	Roberta Duchesne, Director, Community & Rural Sites, CZ Amy Donnelly, Health Services Manager, ESMH Emergency Health Services Patty Henley, Community Advisory Committee	Approx. 50
SUMMARY OF DISCUSSION: <ul style="list-style-type: none"> EHS presenting on the issues around transport and wait times and their processes. Good feedback from community and it was felt that with the presentation from EHS there was more of an understanding within the community around process. ED Closure Data Conversation about Urgent Treatment Center Community Advisory Committee introduction 		
ACTION (Specific to EDs): <ul style="list-style-type: none"> Schedule a community meeting in the spring of 2024. 		

PUBLIC CONSULTATION: Hants Community Hospital (HCH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
May 18, 2023 From 2:00-3:00PM	Chair: Roberta Duchesne, Director of Community & Rural Site, Central Zone In Attendance: Dr. Sam Campbell, Associate Chief Emergency/VUNS Lori Sanderson, Executive Director Central Zone Operations Kerry Heather, HSM Emergency Dept, Ambulatory Care, Periop Melissa Sheehy-Richard, MLA	Approx. 13

Carla Adams, Senior Communications Advisor
Central Zone

Dr. Kirk Magee, Emergency Medicine Chief

Randi Monroe, Executive Director Central Zone

Stephanie Wood, HSM Primary Health Care

Laurie Murley, Councillor West Hants

Graeme Kohler, Interim Director Access & Flow
Network

Dr. Bill Enright, Community member

Andrea Parker, Community Health Board
Coordinator

SUMMARY OF DISCUSSION:

Primary Care Clinic/Unattached Clinic:

- NP started in January 2 says a week offering primary care (out of HHWT space). Also hired NP to work with Avon Medical and Pharmasave.
- Proposed having appointment times at clinic for ED follow ups for unattached patients, or unattached patients who can not see physician for weeks.
- Possibility to have an algorithm for ED doctors to follow on where to send patients.
- Possible signage in Emergency Department to let people know if they are unattached, where to access care.
- Suggestion to have a West Hants specific "where to go for care Pamphlet". It is currently grouped in with Central Zone.

Recruitment/Family Med Residents with CCFP/Accelerated Competency Assessments:

- Emergency residents from Royal College in final year of training to do 2 shifts a month.

Hants ED CPP Project/Nurse Practitioner in ED

- Limited availability of CPPs trained in Emergency.
- How effective are NPs in Emerg rather than Patient Clinic with scarce primary care.
- Family Physician and CPP collaboration would provide limited service.
- Is CPP credentialing needed? What training is needed to work in ED.

Communication/Signage:

- Suggestion for green/red/orange for ED status.

Virtual Care Registration:

- Two week delay between sign up and being seen with for Virtual Care.
- App in the works to direct people to appropriate care (ED, Pharmacy, etc).

Round Table:

- Dr. Campbell stepping down but will stay on project.

ACTION (Specific to EDs):

- Initial conversation has been to focus on CPP's for a time and then figure out what we need to do next in relation to adding a Nurse Practitioner to the team.
- Hants could be removed from system status plan to stop accepting EHS.
- Goal to stop complete closures of ED.

PUBLIC CONSULTATION: Hants Community Hospital (HCH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
September 19, 2023 From 10:00-11:00AM	<p>Chair: Roberta Duchesne, Director of Community & Rural Site, Central Zone</p> <p>In Attendance: Lori Sanderson, Executive Director Central Zone Operations</p> <p>Melissa Sheehy-Richard, MLA</p> <p>Dr. Kirk Magee, Emergency Medicine Chief</p> <p>Randi Monroe, Executive Director Central Zone</p> <p>Stephanie Wood, HSM Primary Health Care</p> <p>Graeme Kohler, Interim Director Access & Flow Network</p> <p>Dr. Cathryn Smith, Chief of Staff</p> <p>Andrea Parker, Community Health Board Coordinator</p> <p>Sarah McKenzie, Clinical Nurse Educator</p> <p>Cheryl Barker, Community member</p> <p>Judy Grant, Community member</p>	Approx. 12

SUMMARY OF DISCUSSION:

Primary Care Clinic/Unattached Clinic:

- Construction/signage complete for West Hants Access Clinic. Space available for Family Physicians.

Recruitment/Family Med Residents with CCFP/Accelerated Competency Assessments:

- Interested 2nd year residents can contact Dr. Maria Alexiadis.

Hants ED CPP Project/Nurse Practitioner in ED:

- Provincial directive put a hold on hiring paramedics.
- Not currently pursuing NP for Emerg.

Communication/Signage:

- Three colours for signage may be too confusing for patients.

Virtual Care Registration Assistance Update:

- Remove from agenda.

Round Table:

- Active onboarding for Physicians in area.
- All Hants nurses are trained to assess patients in waiting room.

ACTION (Specific to EDs):

- Chloe to invite Jasmine Paloheimo, Medical Affairs Lead, to next meeting.
- Will get RN prescribers in ED.
- Sarah McKenzie to host monthly simulation trainings. All new nurses to be trained in ACLS, PALS and Trauma Nursing.

PUBLIC CONSULTATION: Musquodoboit Valley Memorial Hospital

DATE	CHAIR/SPEAKERS	ATTENDANCE
September 21, 2023 From 6:00-8:00PM	Tara Rutherford, Health Services Manager, MVMH and Braeside Wendy Robinson, The Grow Within Project EHS Kolten MacDonell, Health Services Manager, Primary Health Care Cora Lee Joudrey, VirtualCareNS Dr. Andrew Travers, Emergency Health Services	Approx. 20

SUMMARY OF DISCUSSION:

- Wendy explained the Grow Within Project and reviewed past and planned events to thank Health Care staff and promote recruitment from within the Community.
- Overview of Musquodoboit Valley Memorial Hospital Urgent Treatment Center; what it is and how to access. Shared pamphlet describing urgent care and examples of reasons to be seen. Reviewed Volume of Visits Data.
- Emergency Health Services (EHS) presented an overview of their services.
- Primary Health Care update highlighting need a family practice registry and HealthyNS.
- VirtualCareNS presentation included a description of the service, offerings, how to use the program, and registration details.

NOTE:

- The transition from an ED to UTC was reviewed as well as the partnership with the other sites in the zone/province to work towards best practice and areas of improvement.
- A review of what to expect when calling seeking an appointment was discussed. Including what the identified challenges were with wait times on hold, technical errors with the cue system and efforts that are trialed to improve this experience including adjusting the recorded message with clear direction as well as adjusting to options in the phone tree.
- What to expect when talking to the nurse was reviewed including criteria that the nurses use to help guide patients through the system. Some examples of when the nurse would direct a patient onto an open emergency department and why were presented.
- Need a family practice was explained, patrons had some questions for primary care on how to navigate.
- Physician recruitment was reviewed.
 - Virtual care presented how patients can register and access the services with a step by step process.

ACTION (Specific to EDs):

- No noted take away actions.

PUBLIC CONSULTATION: Hants Community Hospital (HCH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
November 27th, 2023	Roberta Duchesne Director, Community & Rural Sites, CZ Kerry Heather, HSM HCH ED Dr. Ahmad Ahmad and Dr. Sarah Bezanson, HCH ED Medical Co-leads Melissa Sheehy-Richard, MLA Community Members	

SUMMARY OF DISCUSSION:

- Pharmacist Scope of Practice and community support
- Pharmacy Primary Care Clinic Update
- MLA/Government Presentation
- Emergency Department Physician Recruitment Update
- EHS Presentation
- ED Closure Data
- Mental Health and Addictions discussion
- Questions

PUBLIC CONSULTATION: Hants Community Hospital (HCH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
January 8th 2024 From 2:00-3:00PM	<p>Chair: Roberta Duchesne, Director of Community & Rural Site, Central Zone</p> <p>In Attendance: Dr. Sam Campbell, Associate Chief Emergency/VUNS</p> <p>Lori Sanderson, Executive Director Central Zone Operations</p> <p>Kerry Heather, HSM Emergency Dept, Ambulatory Care, Periop</p> <p>Melissa Sheehy-Richard, MLA</p> <p>Carla Adams, Senior Communications Advisor Central Zone</p> <p>Dr. Kirk Magee, Emergency Medicine Chief</p> <p>Randi Monroe, Executive Director Central Zone</p> <p>Stephanie Wood, HSM Primary Health Care</p> <p>Laurie Murley, Councillor West Hants</p> <p>Graeme Kohler, Interim Director Access & Flow Network</p> <p>Dr. Bill Enright, Community member</p> <p>Andrea Parker, Community Health Board Coordinator</p>	Approx. 13

SUMMARY OF DISCUSSION:

Primary Care Clinic/Unattached Clinic:

- Trying to recruit NP as a term.
- Stopped seeing patients outside of West Hants to create better access. Appointments booked up until February.
- Sending Pediatric patients to Dr. Susan Russell from Emerg for follow up.

Recruitment/Family Med Residents with CCFP/Accelerated Competency Assessments:

- Ongoing Physician Recruitment. Lots of vacancies. Prat program puts international students through 12 week assessment, if successful, placed in rural community for 3 years. Two cohorts per year, Hants put forward as a location.
- Number of hospitalists expressing interest.

Hants ED CPP Project/Nurse Practitioner in ED:

- On hold.

RN Prescribers:

- Brought in Interprofessional Group to meet with staff. In a good place to start.
- Collaborative role, physician must be present. Only available when ED is open.
- VUC being set up in all EDs.

Round Table:

- Sarah McKenzie – scheduling going well, issues with volume of patients despite having full staff. Extra inpatients in ED/flow, increasing amount LWBS. Would be helpful to have additional physicians on and work on moving inpatients out of ED.
- Proposed 6 hour shift for Physician resource piece. Float funding declined as Hants is not regional. This has been escalated.
- Physician incentive – NS Health Travel Program. Aiming to keep Hants and Cobequid open through redeployment.
- Kerry Heather – Implementing VUC and RN Prescribers. Four LPNs to cover Virtual Care. Positions may be temporary.
- Stephanie Wood – RN finishing in August and will be placed in the area.

ACTION (Specific to EDs):

- Laura Porter to start see patients triaged CTAS 4 and 5s. Office being set up.
- Melissa Sheehy-Richard, MLA, to advertise RN positions and Avon Medical Clinic positions.

PUBLIC CONSULTATION: Twin Oaks Memorial Hospital (TOMH)

No meetings were scheduled due to illness of previous HSM.

PUBLIC CONSULTATION: Eastern Shore Memorial Hospital (ESMH)

DATE	CHAIR/SPEAKERS	ATTENDANCE
April 27, 2023	Chair: Greg Cross, Community Member and Community Advisory Committee Chair	Approx. 10
May 25, 2023		10
June 16, 2023	Roberta Duchesne, Director of Community & Rural Sites, Central Zone, NSHA	10
July 27, 2023	Guest Speaker June 16, 2023: NSH Physician Recruitment Rep	12
August 24, 2023		10
September 28, 2023	Guest Speaker July 27, 2023: Ellen Crumley (Community Engagement Consultant)	10
October 26, 2023	Mill Brook Band Health Services	10
November 23, 2023	Guest Speaker October 26, 2023: NSH Recruitment Reps	7
January 25, 2024		12
February 22, 2024	Guest Speaker February 22, 2024: Lesley MaGee (Well Being Hub)	12
March 28, 2024	Emergency Health Services	12

SUMMARY OF DISCUSSION:

The Community Advisory Committee of Eastern Shore East met on the below dates:

- April 27, 2023: New physician coming to the community. Working on a community guide for Sheet Harbour and surrounding areas. Prepping for community meeting May 11. Urgent Care is covered 5 days per week, and currently no locums. Discussions around housing requirements and community engagement.
- May 25, 2023: May 11 community meeting went well and was well attended. There was lots of positive feedback. Urgent Care continues 5 days per week. There currently is a shortage of nurses and discussed recruitment. Discussion has on the possibility of a foundation and the benefits.
- June 16, 2023: Physician recruitment rep present to discuss process. Part of pilot project for Virtual Urgent Care. Looking at this being available 7 days per week if utilized. CCAs are being incorporated to the nursing floor at ESMH.
- July 27, 2023: Ellen Crumley Consultant for Community Engagement present as well as Mill Brook Band around Health Services. New Physician Dr. Biola starting at ESMH September 1. Urgent Care is up and running and a night time model is being looked at.
- August 24, 2023: Meetings with Mill Brook Band will continue every couple of months. Following up with Physician Resident who has shown interest in coming to Sheet Harbour. Community Engagement meeting were held four in total and were well attended. Urgent Care continues, Virtual Urgent Care has started and night time model is in progress.
- September 28, 2023: Urgent Care expanding to 6 days per week. Virtual Care is up and running. No update on the night time model. No update on the day care yet. Working on website for Eastern Shore. Event at high school coming to recruit students. Patty Henley will be attending.
- October 26, 2023: NSH Recruitment reps present to discuss process and how things work.
- November 23, 2023: Discussed retirements at ESMH. There are currently no physician opening at ESMH. Discussed retention strategies, staff parties and appreciation events. Urgent Care is going well and now open every Saturday.
- January 25, 2024: Two new members to the committee. Focusing on professional recruitment and retention. Discussed having events for recruitment and retention. Some issues with patients not being able to get through to urgent care due to the messaging. Follow up needed. Currently hosting travel nurses due to shortages of RNs and LPNs. Nighttime model still a work in progress. Looking at ways to support staff at night.
- February 22, 2024: EHS present to discuss issues. Lesley MaGee present to talk about the Well Being Hub. Staff event being held March 1 at Harbourview Lodge. Work is continuing the foundation.
- March 28, 2024: Discussions around community engagement, what is needed and wanted. Visioning exercise for the community to complete.

ACTION (Specific to EDs):

- The Community Advisory Committee will continue meeting monthly.

Appendix B: Temporary Emergency Department Closures by Date and Hours Closed

Reporting period: April 1, 2023 – March 31, 2024

WESTERN ZONE

South Shore Regional, Yarmouth Regional and Valley Regional had no unscheduled closures.

Digby General Hospital	Hours Closed
April	
2023-04-01	6.0
2023-04-02	14.0
2023-04-03	14.0
2023-04-07	9.0
2023-04-08	8.0
2023-04-09	15.0
2023-04-14	12.0
2023-04-16	18.0
2023-04-17	8.0
2023-04-18	14.0
2023-04-20	8.0
2023-04-21	14.0
2023-04-22	8.0
2023-04-23	16.0
2023-04-24	8.0
2023-04-29	6.0
2023-04-30	14.0
May	
2023-05-01	8.0
2023-05-07	6.0
2023-05-08	15.0
2023-05-09	8.0
2023-05-11	6.0
2023-05-12	18.0

2023-05-13	24.0
2023-05-14	24.0
2023-05-15	8.0
2023-05-16	4.0
2023-05-17	16.0
2023-05-18	24.0
2023-05-19	24.0
2023-05-20	8.0
2023-05-24	9.0
2023-05-25	8.0
2023-05-26	14.0
2023-05-27	4.0
2023-05-28	24.0
2023-05-29	14.0
2023-05-30	24.0
2023-05-31	16.0
June	
2023-06-01	18.0
2023-06-02	19.0
2023-06-04	24.0
2023-06-05	32.0
2023-06-06	6.0
2023-06-07	8.0
2023-06-10	8.0
2023-06-11	8.0
2023-06-13	7.0
2023-06-14	8.0
2023-06-15	9.0
2023-06-16	16.0
2023-06-17	8.0
2023-06-18	7.0
2023-06-20	17.0
2023-06-21	10.0
2023-06-22	7.0
2023-06-25	24.0

2023-06-26	8.0	2023-08-25	16.0
2023-06-27	13.0	2023-08-26	24.0
July		2023-08-27	16.0
2023-07-02	24.0	2023-08-28	24.0
2023-07-03	4.0	2023-08-29	24.0
2023-07-08	9.0	September	
2023-07-09	16.0	2023-09-05	9.0
2023-07-10	8.0	2023-09-06	14.0
2023-07-11	9.0	2023-09-07	18.0
2023-07-12	7.0	2023-09-08	8.0
2023-07-18	13.0	2023-09-09	9.0
2023-07-19	25.0	2023-09-10	24.0
2023-07-23	9.0	2023-09-11	24.0
2023-07-24	14.0	2023-09-12	24.0
2023-07-26	18.0	2023-09-13	20.0
2023-07-27	8.0	2023-09-14	18.0
2023-07-28	18.0	2023-09-15	8.0
2023-07-29	24.0	2023-09-16	16.0
2023-07-30	18.0	2023-09-17	8.0
2023-07-31	1.0	2023-09-18	16.0
August		2023-09-19	9.2
2023-08-01	20.0	2023-09-20	12.0
2023-08-02	8.0	2023-09-28	18.0
2023-08-05	16.0	2023-09-29	8.0
2023-08-07	20.0	2023-09-30	15.5
2023-08-08	8.0	October	
2023-08-12	14.0	2023-10-01	8.0
2023-08-14	24.0	2023-10-02	10.0
2023-08-18	14.0	2023-10-06	14.0
2023-08-19	24.0	2023-10-07	14.0
2023-08-20	24.0	2023-10-08	24.0
2023-08-21	24.0	2023-10-09	8.0
2023-08-22	10.0	2023-10-10	18.0
2023-08-23	24.0	2023-10-11	8.0
2023-08-24	24.0	2023-10-12	14.0

2023-10-14	6.0	2023-11-21	24.0
2023-10-15	15.0	2023-11-22	8.0
2023-10-16	24.0	2023-11-23	21.0
2023-10-17	10.0	2023-11-24	24.0
2023-10-18	16.0	2023-11-25	14.0
2023-10-19	14.0	2023-11-26	24.0
2023-10-20	8.0	2023-11-27	24.0
2023-10-21	6.0	2023-11-28	8.0
2023-10-22	24.0	2023-11-29	6.0
2023-10-23	8.0	2023-11-30	8.0
2023-10-24	6.0	December	
2023-10-25	24.0	2023-12-01	7.0
2023-10-26	14.0	2023-12-02	8.0
2023-10-27	24.0	2023-12-03	19.0
2023-10-28	24.0	2023-12-04	24.0
2023-10-29	24.0	2023-12-05	24.0
2023-10-30	8.0	2023-12-06	8.0
November		2023-12-08	18.0
2023-11-01	6.0	2023-12-09	24.0
2023-11-02	24.0	2023-12-10	8.0
2023-11-03	24.0	2023-12-15	18.0
2023-11-04	24.0	2023-12-16	24.0
2023-11-05	24.0	2023-12-17	24.0
2023-11-06	24.0	2023-12-18	16.0
2023-11-07	24.0	2023-12-19	16.0
2023-11-08	17.0	2023-12-20	14.0
2023-11-09	24.0	2023-12-21	18.0
2023-11-10	24.0	2023-12-22	16.0
2023-11-11	8.0	2023-12-23	24.0
2023-11-12	14.0	2023-12-24	24.0
2023-11-13	6.0	2023-12-25	8.0
2023-11-14	8.0	2023-12-26	8.0
2023-11-18	6.0	2023-12-27	8.0
2023-11-19	8.0	2023-12-28	18.0
2023-11-20	18.0	2023-12-29	18.0

2023-12-30	24.0	2024-02-04	24.0
2023-12-31	19.0	2024-02-05	24.0
January		2024-02-06	8.0
2024-01-01	18.0	2024-02-08	9.0
2024-01-02	18.0	2024-02-09	24.0
2024-01-03	14.0	2024-02-10	24.0
2024-01-04	24.0	2024-02-11	8.0
2024-01-05	18.0	2024-02-13	7.0
2024-01-06	24.0	2024-02-14	10.0
2024-01-07	24.0	2024-02-15	14.0
2024-01-08	17.0	2024-02-16	7.0
2024-01-09	8.0	2024-02-17	15.0
2024-01-10	6.0	2024-02-19	6.0
2024-01-11	14.0	2024-02-20	8.0
2024-01-12	24.0	2024-02-22	7.0
2024-01-13	8.0	2024-02-23	24.0
2024-01-14	18.0	2024-02-24	8.0
2024-01-15	17.0	2024-02-25	18.0
2024-01-16	15.0	2024-02-26	8.0
2024-01-17	24.0	2024-02-27	14.0
2024-01-18	12.0	2024-02-28	8.0
2024-01-19	20.0	2024-02-29	12.0
2024-01-20	4.0	March	
2024-01-21	8.0	2024-03-01	15.0
2024-01-22	8.0	2024-03-02	7.0
2024-01-23	16.0	2024-03-04	18.0
2024-01-24	8.0	2024-03-05	24.0
2024-01-26	10.0	2024-03-06	12.0
2024-01-27	8.0	2024-03-09	14.0
2024-01-30	7.0	2024-03-10	6.0
2024-01-31	8.0	2024-03-11	8.0
February		2024-03-12	9.0
2024-02-01	7.0	2024-03-13	20.0
2024-02-02	8.0	2024-03-14	6.0
2024-02-03	19.0	2024-03-15	8.0

2024-03-16	14.0
2024-03-18	12.0
2024-03-19	8.0
2024-03-22	18.0
2024-03-23	18.0
2024-03-24	8.0
2024-03-25	18.0
2024-03-27	24.0
2024-03-28	15.0
2024-03-29	24.0
2024-03-30	8.0
2024-03-31	18.0
Digby General Hospital Total	3,923.8

Fishermen's Memorial Hospital	Hours Closed
April	
2023-04-01	11.0
2023-04-02	9.5
2023-04-03	9.5
2023-04-04	11.0
2023-04-05	10.5
2023-04-06	11.3
2023-04-08	9.5
2023-04-09	9.5
2023-04-11	1.8
2023-04-14	10.2
2023-04-15	11.3
2023-04-19	9.5
2023-04-20	15.0
2023-04-21	11.5
2023-04-22	9.5
2023-04-23	9.5
2023-04-24	1.7
2023-04-25	8.0
2023-04-26	8.0

2023-04-27	9.5
2023-04-28	15.0
2023-04-29	15.0
2023-04-30	12.8
May	
2023-05-01	10.8
2023-05-02	3.5
2023-05-04	9.5
2023-05-05	11.0
2023-05-07	8.0
2023-05-08	9.5
2023-05-10	2.5
2023-05-11	4.5
2023-05-12	2.0
2023-05-13	9.5
2023-05-14	9.5
2023-05-15	3.0
2023-05-16	5.0
2023-05-18	0.5
2023-05-19	9.5
2023-05-20	9.5
2023-05-22	2.3
2023-05-23	1.8
2023-05-26	9.5
2023-05-28	15.0
2023-05-29	2.5
June	
2023-06-01	9.5
2023-06-02	9.5
2023-06-03	11.5
2023-06-05	2.5
2023-06-06	2.0
2023-06-07	10.5
2023-06-08	10.7
2023-06-09	9.5

2023-06-10	12.2	2023-07-20	13.3
2023-06-11	10.5	2023-07-21	12.2
2023-06-12	6.8	2023-07-22	10.5
2023-06-13	10.0	2023-07-23	1.5
2023-06-14	12.5	2023-07-24	12.8
2023-06-15	12.2	2023-07-25	13.3
2023-06-16	12.3	2023-07-26	10.3
2023-06-17	9.5	2023-07-27	12.5
2023-06-18	15.0	2023-07-30	2.5
2023-06-19	11.8	2023-07-31	9.5
2023-06-21	11.3	August	
2023-06-22	14.3	2023-08-01	11.3
2023-06-23	10.0	2023-08-02	12.3
2023-06-24	3.2	2023-08-03	11.8
2023-06-25	3.0	2023-08-04	11.8
2023-06-26	8.3	2023-08-05	9.5
2023-06-28	3.8	2023-08-06	15.0
2023-06-30	10.5	2023-08-07	9.5
July		2023-08-08	12.2
2023-07-01	9.5	2023-08-09	12.0
2023-07-03	4.7	2023-08-10	12.2
2023-07-04	12.0	2023-08-11	11.0
2023-07-05	3.0	2023-08-12	9.5
2023-07-06	11.0	2023-08-13	9.5
2023-07-07	10.7	2023-08-15	9.5
2023-07-08	12.0	2023-08-16	9.5
2023-07-09	11.0	2023-08-18	9.5
2023-07-10	7.2	2023-08-20	9.5
2023-07-12	2.7	2023-08-23	15.0
2023-07-13	14.3	2023-08-24	15.0
2023-07-14	12.3	2023-08-25	5.5
2023-07-16	8.7	2023-08-28	9.5
2023-07-17	12.3	2023-08-29	9.5
2023-07-18	4.5	2023-08-30	8.0
2023-07-19	12.2	2023-08-31	10.5

September		2023-10-17	8.0
2023-09-02	13.5	2023-10-19	8.0
2023-09-03	13.5	2023-10-21	8.0
2023-09-05	8.0	2023-10-22	8.0
2023-09-06	8.0	2023-10-26	13.5
2023-09-07	8.0	2023-10-27	8.0
2023-09-08	8.0	2023-10-29	8.0
2023-09-09	8.0	2023-10-31	8.0
2023-09-10	13.5	November	
2023-09-11	8.0	2023-11-11	8.0
2023-09-12	13.5	2023-11-12	8.0
2023-09-13	8.0	2023-11-13	10.0
2023-09-14	8.0	2023-11-14	8.0
2023-09-15	8.0	2023-11-17	8.0
2023-09-16	13.5	2023-11-18	8.0
2023-09-19	8.0	2023-11-19	13.5
2023-09-20	8.0	2023-11-20	8.0
2023-09-21	8.0	2023-11-21	8.0
2023-09-22	8.0	2023-11-22	13.5
2023-09-23	8.0	2023-11-23	8.0
2023-09-24	8.0	2023-11-25	8.0
2023-09-26	5.5	2023-11-26	13.5
2023-09-28	8.0	2023-11-27	13.5
2023-09-29	8.0	2023-11-28	8.0
2023-09-30	8.0	2023-11-29	8.0
October		2023-11-30	8.0
2023-10-01	8.0	December	
2023-10-03	8.0	2023-12-01	8.0
2023-10-07	13.5	2023-12-02	8.0
2023-10-08	13.5	2023-12-03	13.5
2023-10-09	8.0	2023-12-04	8.0
2023-10-10	1.0	2023-12-05	8.0
2023-10-12	8.0	2023-12-06	8.0
2023-10-13	10.0	2023-12-11	8.0
2023-10-14	8.0	2023-12-12	8.0

2023-12-13	13.5	2024-02-18	8.0
2023-12-14	8.0	2024-02-19	8.0
2023-12-15	8.0	2024-02-20	8.0
2023-12-16	8.0	2024-02-21	8.0
2023-12-18	8.0	2024-02-22	8.0
2023-12-20	8.0	2024-02-24	8.0
2023-12-21	8.0	2024-02-25	8.0
2023-12-22	8.0	2024-02-27	7.5
2023-12-23	8.0	March	
2023-12-24	8.0	2024-03-08	9.5
2023-12-25	13.5	2024-03-09	8.0
2023-12-26	8.0	2024-03-10	6.0
2023-12-27	8.0	2024-03-11	6.0
2023-12-28	8.0	2024-03-13	13.5
2023-12-29	8.0	2024-03-14	13.5
2023-12-30	8.0	2024-03-16	8.0
2023-12-31	8.0	2024-03-17	9.0
January		2024-03-18	1.5
2024-01-01	13.5	2024-03-19	6.0
2024-01-13	8.0	2024-03-30	8.0
2024-01-14	13.5	Fishermen's Memorial Hospital Total	2,155.5
2024-01-19	8.0		
2024-01-20	8.0		
2024-01-21	8.0		
2024-01-22	8.0		
2024-01-29	8.0		
2024-01-31	5.5		
February			
2024-02-01	13.5		
2024-02-04	8.0		
2024-02-07	8.0		
2024-02-10	8.0		
2024-02-12	11.5		
2024-02-13	8.0		
2024-02-16	8.0		
		Queens General Hospital	Hours Closed
		April	
		2023-04-01	10.5
		2023-04-02	18.5
		2023-04-03	18.5
		2023-04-04	8.0
		2023-04-05	10.5
		2023-04-06	18.5
		2023-04-07	8.0
		2023-04-08	10.5
		2023-04-09	18.5
		2023-04-10	18.5
		2023-04-11	18.5

2023-04-12	18.5	2023-05-18	18.5
2023-04-13	8.0	2023-05-19	18.5
2023-04-14	10.5	2023-05-20	18.5
2023-04-15	18.5	2023-05-21	18.5
2023-04-16	18.5	2023-05-22	18.5
2023-04-17	18.5	2023-05-23	18.5
2023-04-18	18.5	2023-05-24	18.5
2023-04-19	8.0	2023-05-25	8.0
2023-04-20	10.5	2023-05-26	10.5
2023-04-21	18.5	2023-05-27	8.0
2023-04-22	18.5	2023-05-28	10.5
2023-04-23	18.5	2023-05-29	8.0
2023-04-24	18.5	June	
2023-04-25	8.0	2023-06-08	10.5
2023-04-26	10.5	2023-06-09	18.5
2023-04-27	18.5	2023-06-10	18.5
2023-04-28	18.5	2023-06-11	24.0
2023-04-29	24.0	2023-06-12	18.5
2023-04-30	8.0	2023-06-13	18.5
May		2023-06-14	18.5
2023-05-01	10.5	2023-06-15	8.0
2023-05-02	8.0	2023-06-16	10.5
2023-05-03	10.5	2023-06-17	18.5
2023-05-04	18.5	2023-06-18	18.5
2023-05-05	24.0	2023-06-19	18.5
2023-05-06	18.5	2023-06-20	18.5
2023-05-08	10.5	2023-06-21	18.5
2023-05-09	18.5	2023-06-22	8.0
2023-05-10	18.5	2023-06-23	10.5
2023-05-11	18.5	2023-06-24	18.5
2023-05-12	18.5	2023-06-25	18.5
2023-05-13	18.5	2023-06-26	8.0
2023-05-14	18.5	2023-06-27	18.5
2023-05-16	18.5	2023-06-28	18.5
2023-05-17	10.5	2023-06-29	18.5

2023-06-30	8.0	2023-08-02	18.5
July		2023-08-03	18.5
2023-07-01	24.0	2023-08-04	18.5
2023-07-02	18.5	2023-08-05	18.5
2023-07-03	10.5	2023-08-06	8.0
2023-07-04	18.5	2023-08-09	10.5
2023-07-05	18.5	2023-08-10	16.0
2023-07-06	18.5	2023-08-11	8.0
2023-07-07	18.5	2023-08-12	10.5
2023-07-08	18.5	2023-08-13	18.5
2023-07-09	8.0	2023-08-14	18.5
2023-07-10	10.5	2023-08-15	8.0
2023-07-11	18.5	2023-08-18	10.5
2023-07-12	23.8	2023-08-19	18.5
2023-07-13	18.5	2023-08-20	18.5
2023-07-14	18.5	2023-08-21	24.0
2023-07-15	18.5	2023-08-22	18.5
2023-07-16	18.5	2023-08-23	8.0
2023-07-17	18.5	2023-08-24	10.5
2023-07-18	18.5	2023-08-25	24.0
2023-07-19	8.0	2023-08-26	18.5
2023-07-20	10.5	2023-08-27	18.5
2023-07-21	18.5	2023-08-28	8.0
2023-07-22	24.0	2023-08-29	10.5
2023-07-23	18.5	2023-08-30	24.0
2023-07-24	18.5	2023-08-31	18.5
2023-07-25	18.5	September	
2023-07-26	18.5	2023-09-01	18.5
2023-07-27	8.0	2023-09-02	24.0
2023-07-28	10.5	2023-09-03	8.0
2023-07-29	8.0	2023-09-04	10.5
2023-07-30	10.5	2023-09-05	18.5
2023-07-31	18.5	2023-09-06	18.5
August		2023-09-07	8.0
2023-08-01	18.5	2023-09-09	15.5

2023-09-10	18.5	2023-10-24	18.5
2023-09-11	18.5	2023-10-25	18.5
2023-09-12	18.5	2023-10-26	8.0
2023-09-13	8.0	2023-10-27	10.5
2023-09-14	4.5	2023-10-28	18.5
2023-09-15	10.5	2023-10-29	18.5
2023-09-16	8.0	2023-10-30	18.5
2023-09-21	10.5	2023-10-31	18.5
2023-09-22	18.5	November	
2023-09-23	18.5	2023-11-01	24.0
2023-09-24	18.5	2023-11-02	16.5
2023-09-25	8.0	2023-11-03	18.5
2023-09-29	19.0	2023-11-04	24.0
2023-09-30	8.0	2023-11-05	20.0
October		2023-11-07	10.5
2023-10-01	16.0	2023-11-08	8.0
2023-10-02	18.5	2023-11-10	10.5
2023-10-03	18.5	2023-11-11	32.0
2023-10-04	18.5	2023-11-13	10.5
2023-10-05	8.0	2023-11-14	18.5
2023-10-07	10.5	2023-11-15	8.0
2023-10-08	8.0	2023-11-16	8.0
2023-10-10	15.0	2023-11-18	10.5
2023-10-11	18.5	2023-11-19	18.5
2023-10-12	8.0	2023-11-20	8.0
2023-10-13	10.5	2023-11-22	10.5
2023-10-14	24.0	2023-11-23	18.5
2023-10-15	18.5	2023-11-24	18.5
2023-10-16	8.0	2023-11-25	24.0
2023-10-17	10.5	2023-11-26	8.0
2023-10-18	8.0	2023-11-28	8.0
2023-10-20	10.5	2023-11-30	19.0
2023-10-21	18.5	December	
2023-10-22	8.0	2023-12-01	18.5
2023-10-23	10.5	2023-12-02	18.5

2023-12-03	8.0	2024-01-18	18.5
2023-12-04	10.5	2024-01-19	8.0
2023-12-05	8.0	2024-01-21	19.0
2023-12-08	13.0	2024-01-22	8.0
2023-12-10	10.5	2024-01-25	4.0
2023-12-11	8.0	2024-01-26	10.5
2023-12-12	10.5	2024-01-27	18.5
2023-12-13	8.0	2024-01-28	8.0
2023-12-17	14.0	February	
2023-12-18	19.0	2024-02-01	5.0
2023-12-19	8.0	2024-02-02	10.5
2023-12-21	20.0	2024-02-03	24.0
2023-12-22	10.5	2024-02-04	24.0
2023-12-23	18.5	2024-02-05	18.5
2023-12-24	24.0	2024-02-06	18.5
2023-12-25	18.5	2024-02-07	18.5
2023-12-26	18.5	2024-02-08	8.0
2023-12-27	24.0	2024-02-09	16.0
2023-12-28	18.5	2024-02-10	24.0
2023-12-29	8.0	2024-02-11	18.5
2023-12-31	19.0	2024-02-12	18.5
January		2024-02-13	18.5
2024-01-01	24.0	2024-02-14	24.0
2024-01-02	8.0	2024-02-15	8.0
2024-01-03	13.0	2024-02-18	13.0
2024-01-04	10.5	2024-02-19	10.5
2024-01-05	18.5	2024-02-20	8.0
2024-01-06	24.0	2024-02-21	5.0
2024-01-07	26.5	2024-02-22	8.0
2024-01-08	10.5	2024-02-26	13.0
2024-01-09	18.5	March	
2024-01-10	8.0	2024-03-01	19.0
2024-01-15	10.5	2024-03-02	18.5
2024-01-16	18.5	2024-03-03	18.0
2024-01-17	18.5	2024-03-06	10.5

2024-03-07	8.0
2024-03-08	13.0
2024-03-14	10.5
2024-03-15	8.0
2024-03-16	19.0
2024-03-17	24.0
2024-03-18	24.0
2024-03-19	8.0
2024-03-23	10.5
2024-03-24	8.0
2024-03-26	10.5
2024-03-27	18.5
2024-03-28	8.0
2024-03-29	19.0
2024-03-30	8.0
2024-03-31	10.5
Queens General Hospital Total	4,438.8

Roseway Hospital	Hours Closed
April	
2023-04-02	6.0
2023-04-03	14.0
2023-04-04	8.0
2023-04-06	17.0
2023-04-07	8.0
2023-04-09	14.0
2023-04-10	6.0
2023-04-11	8.0
2023-04-13	14.0
2023-04-14	24.0
2023-04-15	8.0
2023-04-16	13.0
2023-04-17	5.0
2023-04-18	8.0
2023-04-19	6.0

2023-04-20	14.0
2023-04-21	14.0
2023-04-22	8.0
2023-04-26	7.0
2023-04-27	14.0
2023-04-28	24.0
2023-04-29	24.0
2023-04-30	8.0
May	
2023-05-05	19.0
2023-05-06	16.0
2023-05-07	8.0
2023-05-08	12.0
2023-05-11	13.0
2023-05-12	17.0
2023-05-13	16.0
2023-05-14	8.0
2023-05-17	6.0
2023-05-18	8.0
2023-05-19	8.0
2023-05-20	24.0
2023-05-21	24.0
2023-05-22	8.0
2023-05-23	6.0
2023-05-25	8.0
2023-05-26	16.0
2023-05-27	24.0
2023-05-28	8.0
2023-05-29	13.0
2023-05-30	4.0
2023-05-31	5.0
June	
2023-06-01	24.0
2023-06-02	24.0
2023-06-03	24.0

2023-06-04	24.0	2023-07-20	16.0
2023-06-05	24.0	2023-07-21	24.0
2023-06-07	8.0	2023-07-22	16.0
2023-06-08	8.0	2023-07-23	16.0
2023-06-14	17.0	2023-07-24	14.0
2023-06-15	8.0	2023-07-25	8.0
2023-06-17	17.0	2023-07-26	17.0
2023-06-18	8.0	2023-07-27	16.0
2023-06-20	6.0	2023-07-28	16.0
2023-06-21	24.0	2023-07-29	24.0
2023-06-22	24.0	2023-07-30	16.0
2023-06-23	8.0	2023-07-31	16.0
2023-06-27	8.0	August	
2023-06-28	24.0	2023-08-01	24.0
2023-06-29	16.0	2023-08-02	16.0
2023-06-30	14.0	2023-08-03	16.0
July		2023-08-04	24.0
2023-07-01	24.0	2023-08-05	24.0
2023-07-02	8.0	2023-08-06	24.0
2023-07-03	11.0	2023-08-07	24.0
2023-07-04	8.0	2023-08-08	15.0
2023-07-05	8.0	2023-08-09	24.0
2023-07-06	8.0	2023-08-10	24.0
2023-07-07	8.0	2023-08-11	24.0
2023-07-08	17.0	2023-08-12	8.0
2023-07-09	8.0	2023-08-17	17.0
2023-07-10	6.0	2023-08-18	24.0
2023-07-11	8.0	2023-08-19	8.0
2023-07-13	17.0	2023-08-21	6.0
2023-07-14	8.0	2023-08-22	24.0
2023-07-15	17.0	2023-08-23	24.0
2023-07-16	16.0	2023-08-24	19.0
2023-07-17	8.0	2023-08-25	17.0
2023-07-18	6.0	2023-08-26	17.0
2023-07-19	16.0	2023-08-27	17.0

2023-08-28	17.0
2023-08-29	16.0
2023-08-30	24.0
2023-08-31	17.0
September	
2023-09-01	8.0
2023-09-02	18.0
2023-09-03	8.0
2023-09-04	18.0
2023-09-05	17.0
2023-09-06	17.0
2023-09-07	24.0
2023-09-08	24.0
2023-09-09	24.0
2023-09-10	8.0
2023-09-11	9.0
2023-09-12	14.0
2023-09-13	24.0
2023-09-14	24.0
2023-09-15	24.0
2023-09-16	24.0
2023-09-17	8.0
2023-09-18	8.0
2023-09-19	8.0
2023-09-20	13.0
2023-09-22	17.0
2023-09-23	17.0
2023-09-24	8.0
2023-09-25	17.0
2023-09-26	17.0
2023-09-27	11.0
2023-09-28	9.0
2023-09-29	14.0
2023-09-30	8.0

October	
2023-10-02	17.0
2023-10-03	24.0
2023-10-04	10.5
2023-10-05	17.0
2023-10-06	24.0
2023-10-07	24.0
2023-10-08	8.0
2023-10-09	13.0
2023-10-11	9.0
2023-10-12	17.0
2023-10-13	20.0
2023-10-14	9.0
2023-10-15	8.0
2023-10-16	8.0
2023-10-17	8.0
2023-10-18	6.0
2023-10-19	8.0
2023-10-20	13.0
2023-10-21	24.0
2023-10-22	8.0
2023-10-23	8.0
2023-10-24	24.0
2023-10-25	17.0
2023-10-26	17.0
2023-10-27	8.0
2023-10-28	17.0
2023-10-29	17.0
2023-10-30	24.0
2023-10-31	17.0
November	
2023-11-01	24.0
2023-11-02	17.0
2023-11-03	24.0
2023-11-04	17.0

2023-11-05	17.0	2023-12-18	13.0
2023-11-06	8.0	2023-12-19	9.0
2023-11-07	17.0	2023-12-20	8.0
2023-11-08	16.0	2023-12-21	17.0
2023-11-09	17.0	2023-12-22	17.0
2023-11-10	24.0	2023-12-23	24.0
2023-11-11	24.0	2023-12-24	20.0
2023-11-12	8.0	2023-12-25	17.0
2023-11-13	9.0	2023-12-26	24.0
2023-11-14	8.0	2023-12-27	17.0
2023-11-15	8.0	2023-12-28	24.0
2023-11-16	24.0	2023-12-29	16.0
2023-11-17	16.0	2023-12-30	24.0
2023-11-18	24.0	2023-12-31	24.0
2023-11-19	8.0	January	
2023-11-21	6.0	2024-01-01	19.0
2023-11-22	8.0	2024-01-02	6.0
2023-11-23	9.0	2024-01-03	24.0
2023-11-24	8.0	2024-01-04	24.0
2023-11-27	6.0	2024-01-05	16.0
2023-11-28	24.0	2024-01-06	17.0
2023-11-29	16.5	2024-01-07	16.0
2023-11-30	8.0	2024-01-08	16.0
December		2024-01-09	14.0
2023-12-04	11.0	2024-01-10	17.0
2023-12-05	8.0	2024-01-11	24.0
2023-12-06	16.0	2024-01-12	17.0
2023-12-07	17.0	2024-01-13	24.0
2023-12-08	24.0	2024-01-14	16.0
2023-12-09	8.0	2024-01-15	16.0
2023-12-13	17.0	2024-01-16	8.0
2023-12-14	17.0	2024-01-17	6.0
2023-12-15	14.0	2024-01-18	16.0
2023-12-16	14.0	2024-01-19	14.0
2023-12-17	20.0	2024-01-20	24.0

2024-01-21	8.0	2024-02-27	24.0
2024-01-24	9.0	2024-02-28	8.0
2024-01-25	24.0	2024-02-29	17.0
2024-01-26	17.0	March	
2024-01-27	24.0	2024-03-01	16.0
2024-01-28	8.0	2024-03-02	24.0
2024-01-29	6.0	2024-03-03	16.0
2024-01-30	8.0	2024-03-04	8.0
2024-01-31	7.0	2024-03-05	17.0
February		2024-03-06	19.0
2024-02-01	8.0	2024-03-07	17.5
2024-02-02	24.0	2024-03-08	8.0
2024-02-03	24.0	2024-03-09	17.0
2024-02-04	8.0	2024-03-10	8.0
2024-02-05	9.0	2024-03-11	8.0
2024-02-07	8.0	2024-03-12	24.0
2024-02-08	16.0	2024-03-13	17.0
2024-02-09	8.0	2024-03-14	24.0
2024-02-10	5.0	2024-03-15	24.0
2024-02-11	8.0	2024-03-16	14.0
2024-02-12	17.0	2024-03-17	8.0
2024-02-13	12.0	2024-03-18	17.0
2024-02-14	16.0	2024-03-19	16.0
2024-02-15	24.0	2024-03-20	17.0
2024-02-16	17.0	2024-03-21	24.0
2024-02-17	24.0	2024-03-22	15.0
2024-02-18	24.0	2024-03-23	24.0
2024-02-19	16.0	2024-03-24	8.0
2024-02-20	17.0	2024-03-26	7.5
2024-02-21	18.0	2024-03-27	24.0
2024-02-22	17.0	2024-03-28	17.0
2024-02-23	20.0	2024-03-29	24.0
2024-02-24	17.0	2024-03-30	24.0
2024-02-25	20.0	2024-03-31	24.0
2024-02-26	17.0	Roseway Hospital Total	4,827.0

Soldiers Memorial Hospital	Hours Closed	August	
April		2023-08-01	6.0
2023-04-01	6.0	2023-08-03	6.0
2023-04-03	6.0	2023-08-04	6.0
2023-04-10	6.0	2023-08-07	6.0
2023-04-17	6.0	2023-08-08	6.0
2023-04-24	6.0	2023-08-10	6.0
May		2023-08-11	6.0
2023-05-01	6.0	2023-08-14	6.0
2023-05-08	6.0	2023-08-22	6.0
2023-05-15	6.0	2023-08-28	6.0
2023-05-29	6.0	September	
2023-05-30	6.0	2023-09-01	6.0
June		2023-09-04	6.0
2023-06-02	6.0	2023-09-08	6.0
2023-06-05	6.0	2023-09-11	6.0
2023-06-12	6.0	2023-09-15	6.0
2023-06-19	6.0	2023-09-18	6.0
2023-06-22	6.0	2023-09-22	6.0
2023-06-26	6.0	2023-09-25	6.0
July		2023-09-29	6.0
2023-07-03	6.0	October	
2023-07-04	6.0	2023-10-04	6.0
2023-07-10	6.0	2023-10-06	6.0
2023-07-11	6.0	2023-10-09	6.0
2023-07-13	6.0	2023-10-12	6.0
2023-07-14	6.0	November	
2023-07-17	6.0	2023-11-02	6.0
2023-07-18	6.0	2023-11-03	6.0
2023-07-20	6.0	2023-11-08	5.5
2023-07-24	6.0	2023-11-13	6.0
2023-07-25	6.0	December	
2023-07-28	6.0	2023-12-01	6.0
2023-07-31	6.0	2023-12-22	6.0

2023-12-25	6.0
January	
2024-01-05	6.0
2024-01-12	6.0
2024-01-19	6.0
2024-01-26	6.0
February	
2024-02-02	6.0
2024-02-09	6.0
2024-02-16	6.0
2024-02-23	6.0
March	
2024-03-01	6.0
2024-03-06	6.0
2024-03-13	6.0
Soldiers Memorial Hospital Total	419.5
Grand Total	15,764.5

NORTHERN ZONE

Colchester, Cumberland Regional and Aberdeen had no unscheduled closures.

North Cumberland Memorial Hospital	Hours Closed
April	
2023-04-02	12.0
2023-04-03	4.0
2023-04-04	4.0
2023-04-05	4.0
2023-04-06	12.0
2023-04-07	4.0
2023-04-08	12.0
2023-04-09	12.0
2023-04-10	4.0
2023-04-11	12.0
2023-04-12	12.0

2023-04-13	12.0
2023-04-14	12.0
2023-04-17	12.0
2023-04-18	4.0
2023-04-19	4.0
2023-04-20	4.0
2023-04-21	12.0
2023-04-22	12.0
2023-04-24	4.0
2023-04-25	4.0
2023-04-26	4.0
2023-04-27	12.0
2023-04-28	4.0
2023-04-29	12.0
May	
2023-05-01	4.0
2023-05-03	4.0
2023-05-04	4.0
2023-05-06	4.0
2023-05-08	4.0
2023-05-09	4.0
2023-05-10	4.0
2023-05-13	4.0
2023-05-14	12.0
2023-05-15	4.0
2023-05-16	4.0
2023-05-19	4.0
2023-05-20	4.0
2023-05-21	12.0
2023-05-22	4.0
2023-05-23	4.0
2023-05-24	4.0
2023-05-26	6.0
2023-05-27	12.0
2023-05-28	12.0

2023-05-30	4.0	2023-07-11	4.0
June		2023-07-12	12.0
2023-06-02	4.0	2023-07-13	12.0
2023-06-03	12.0	2023-07-14	12.0
2023-06-05	12.0	2023-07-15	12.0
2023-06-07	4.0	2023-07-16	12.0
2023-06-09	12.0	2023-07-17	4.0
2023-06-10	12.0	2023-07-18	4.0
2023-06-11	12.0	2023-07-19	4.0
2023-06-13	4.0	2023-07-20	12.0
2023-06-14	5.0	2023-07-22	4.0
2023-06-15	2.0	2023-07-23	12.0
2023-06-16	2.0	2023-07-24	4.0
2023-06-17	4.0	2023-07-25	12.0
2023-06-18	12.0	2023-07-26	12.0
2023-06-19	4.0	2023-07-27	12.0
2023-06-23	12.0	2023-07-28	12.0
2023-06-24	12.0	2023-07-29	16.5
2023-06-25	12.0	2023-07-30	12.0
2023-06-26	12.0	2023-07-31	12.0
2023-06-27	12.0	August	
2023-06-28	12.0	2023-08-02	12.0
2023-06-29	12.0	2023-08-05	12.0
2023-06-30	12.0	2023-08-06	12.0
July		2023-08-07	12.0
2023-07-01	12.0	2023-08-10	12.0
2023-07-02	12.0	2023-08-11	12.0
2023-07-03	4.0	2023-08-12	4.0
2023-07-04	12.0	2023-08-14	12.0
2023-07-05	12.0	2023-08-15	12.0
2023-07-06	12.0	2023-08-16	12.0
2023-07-07	4.0	2023-08-18	12.0
2023-07-08	12.0	2023-08-20	12.0
2023-07-09	12.0	2023-08-21	12.0
2023-07-10	4.0	2023-08-23	12.0

2023-08-24	12.0	October	
2023-08-27	4.0	2023-10-01	12.0
2023-08-28	12.0	2023-10-02	12.0
2023-08-30	12.0	2023-10-03	2.0
September		2023-10-04	4.0
2023-09-01	4.0	2023-10-05	4.0
2023-09-02	12.0	2023-10-06	2.0
2023-09-03	12.0	2023-10-07	12.0
2023-09-05	4.0	2023-10-08	12.0
2023-09-06	12.0	2023-10-09	12.0
2023-09-07	2.0	2023-10-10	6.0
2023-09-08	4.0	2023-10-11	2.0
2023-09-09	12.0	2023-10-12	2.0
2023-09-10	12.0	2023-10-13	4.0
2023-09-11	2.0	2023-10-14	12.0
2023-09-12	4.0	2023-10-15	12.0
2023-09-13	12.0	2023-10-16	2.0
2023-09-14	2.0	2023-10-17	2.0
2023-09-15	4.0	2023-10-18	12.0
2023-09-16	12.0	2023-10-19	4.0
2023-09-17	12.0	2023-10-20	2.0
2023-09-18	2.0	2023-10-21	12.0
2023-09-19	4.0	2023-10-22	12.0
2023-09-20	12.0	2023-10-23	4.0
2023-09-21	2.0	2023-10-24	12.0
2023-09-22	4.0	2023-10-25	2.0
2023-09-23	12.0	2023-10-26	2.0
2023-09-24	12.0	2023-10-27	4.0
2023-09-25	12.0	2023-10-28	12.0
2023-09-26	4.0	2023-10-29	12.0
2023-09-27	6.0	2023-10-30	4.0
2023-09-28	2.0	2023-10-31	2.0
2023-09-29	4.0	November	
2023-09-30	4.0	2023-11-01	12.0

2023-11-02	4.0	2023-12-08	12.0
2023-11-04	12.0	2023-12-09	12.0
2023-11-05	12.0	2023-12-10	12.0
2023-11-06	4.0	2023-12-11	12.0
2023-11-07	6.0	2023-12-12	12.0
2023-11-09	2.0	2023-12-13	12.0
2023-11-10	2.0	2023-12-14	12.0
2023-11-11	12.0	2023-12-15	12.0
2023-11-12	12.0	2023-12-16	12.0
2023-11-13	4.0	2023-12-17	12.0
2023-11-14	2.0	2023-12-18	12.0
2023-11-15	12.0	2023-12-19	12.0
2023-11-16	12.0	2023-12-20	12.0
2023-11-17	2.0	2023-12-21	4.0
2023-11-18	12.0	2023-12-22	12.0
2023-11-19	12.0	2023-12-23	12.0
2023-11-20	4.0	2023-12-24	12.0
2023-11-21	4.0	2023-12-25	12.0
2023-11-22	2.0	2023-12-26	12.0
2023-11-23	2.0	2023-12-27	12.0
2023-11-24	12.0	2023-12-28	4.0
2023-11-25	12.0	2023-12-29	2.0
2023-11-26	12.0	2023-12-30	12.0
2023-11-27	4.0	2023-12-31	12.0
2023-11-28	12.0	January	
2023-11-29	6.0	2024-01-01	12.0
2023-11-30	4.0	2024-01-02	12.0
December		2024-01-03	12.0
2023-12-01	2.0	2024-01-04	2.0
2023-12-02	12.0	2024-01-05	12.0
2023-12-03	12.0	2024-01-07	12.0
2023-12-04	4.0	2024-01-08	2.0
2023-12-05	4.0	2024-01-09	2.0
2023-12-06	12.0	2024-01-10	12.0
2023-12-07	2.0	2024-01-11	4.0

2024-01-12	2.0	2024-02-15	2.0
2024-01-13	12.0	2024-02-16	12.0
2024-01-14	12.0	2024-02-17	12.0
2024-01-15	2.0	2024-02-18	12.0
2024-01-16	2.0	2024-02-19	4.0
2024-01-17	2.0	2024-02-20	2.0
2024-01-18	2.0	2024-02-21	2.0
2024-01-19	2.0	2024-02-22	4.0
2024-01-20	12.0	2024-02-23	2.0
2024-01-21	12.0	2024-02-24	12.0
2024-01-22	12.0	2024-02-25	12.0
2024-01-23	2.0	2024-02-26	4.0
2024-01-24	6.0	2024-02-27	12.0
2024-01-25	12.0	2024-02-28	2.0
2024-01-26	2.0	2024-02-29	2.0
2024-01-27	12.0	March	
2024-01-28	12.0	2024-03-01	4.0
2024-01-29	4.0	2024-03-02	2.0
2024-01-30	12.0	2024-03-03	2.0
2024-01-31	2.0	2024-03-04	4.0
February		2024-03-05	2.0
2024-02-01	2.0	2024-03-06	12.0
2024-02-02	4.0	2024-03-07	12.0
2024-02-03	4.0	2024-03-08	2.0
2024-02-04	12.0	2024-03-09	12.0
2024-02-05	4.0	2024-03-10	2.0
2024-02-06	2.0	2024-03-11	4.0
2024-02-07	2.0	2024-03-12	4.0
2024-02-08	4.0	2024-03-13	2.0
2024-02-09	2.0	2024-03-14	2.0
2024-02-10	12.0	2024-03-15	4.0
2024-02-11	12.0	2024-03-16	2.0
2024-02-12	4.0	2024-03-17	2.0
2024-02-13	12.0	2024-03-18	2.0
2024-02-14	2.0	2024-03-19	2.0

2024-03-20	2.0
2024-03-21	4.0
2024-03-22	4.0
2024-03-23	4.0
2024-03-24	2.0
2024-03-25	2.0
2024-03-26	12.0
2024-03-27	12.0
2024-03-28	12.0
2024-03-29	12.0
2024-03-30	12.0
2024-03-31	2.0
North Cumberland Memorial Hospital Total	2,491.5
Grand Total	5,637.0

EASTERN ZONE

Cape Breton Regional, St. Martha's Regional, St. Mary's Memorial, Inverness Consolidated Memorial and Sacred Heart Community Health Centre had no unscheduled closures.

Buchanan Memorial Community Health Centre	Hours Closed
January	
2024-01-01	6.0
Buchanan Memorial Community Health Centre Total	6.0

Eastern Memorial Hospital	Hours Closed
April	
2023-04-01	12.0
2023-04-02	12.0
2023-04-03	19.0
2023-04-04	24.0
2023-04-05	24.0
2023-04-06	8.0

2023-04-12	6.5
2023-04-13	24.0
2023-04-14	24.0
2023-04-15	24.0
2023-04-16	24.0
2023-04-17	24.0
2023-04-18	24.0
2023-04-19	24.0
2023-04-20	24.0
2023-04-21	24.0
2023-04-22	24.0
2023-04-23	24.0
2023-04-24	36.0
2023-04-25	24.0
2023-04-26	24.0
2023-04-27	24.0
2023-04-28	24.0
2023-04-29	24.0
2023-04-30	5.0
May	
2023-05-01	19.0
2023-05-02	24.0
2023-05-03	24.0
2023-05-04	24.0
2023-05-12	12.0
2023-05-13	24.0
2023-05-14	24.0
2023-05-15	24.0
2023-05-16	24.0
2023-05-17	20.0
2023-05-22	24.0
2023-05-23	24.0
2023-05-24	24.0
2023-05-25	24.0
2023-05-26	24.0

2023-05-27	24.0	2023-07-14	24.0
2023-05-28	5.0	2023-07-15	24.0
2023-05-29	19.0	2023-07-16	24.0
2023-05-30	24.0	2023-07-17	17.0
2023-05-31	24.0	2023-07-18	12.0
June		2023-07-19	12.0
2023-06-01	24.0	2023-07-20	12.0
2023-06-02	20.0	2023-07-23	2.0
2023-06-03	13.0	2023-07-24	7.0
2023-06-09	12.0	2023-07-31	24.0
2023-06-10	24.0	August	
2023-06-11	24.0	2023-08-01	24.0
2023-06-12	24.0	2023-08-02	24.0
2023-06-13	24.0	2023-08-03	24.0
2023-06-14	20.0	2023-08-04	12.0
2023-06-19	27.0	2023-08-07	16.0
2023-06-20	24.0	2023-08-08	24.0
2023-06-21	24.0	2023-08-09	12.0
2023-06-22	24.0	2023-08-10	5.0
2023-06-23	24.0	2023-08-11	24.0
2023-06-24	24.0	2023-08-12	24.0
2023-06-25	5.0	2023-08-13	24.0
2023-06-26	19.0	2023-08-14	12.0
2023-06-27	24.0	2023-08-15	12.0
2023-06-28	24.0	2023-08-16	24.0
2023-06-29	24.0	2023-08-17	12.0
2023-06-30	24.0	2023-08-18	12.0
July		2023-08-19	12.0
2023-07-01	24.0	2023-08-20	12.0
2023-07-02	24.0	2023-08-21	19.0
2023-07-03	24.0	2023-08-22	24.0
2023-07-04	12.0	2023-08-23	24.0
2023-07-11	16.0	2023-08-24	24.0
2023-07-12	24.0	2023-08-25	19.0
2023-07-13	24.0		

September		2023-10-16	7.0
2023-09-04	16.0	2023-10-20	17.0
2023-09-05	24.0	2023-10-23	12.0
2023-09-06	24.0	2023-10-24	24.0
2023-09-07	24.0	2023-10-25	24.0
2023-09-08	24.0	2023-10-26	24.0
2023-09-09	24.0	2023-10-27	24.0
2023-09-10	24.0	2023-10-28	24.0
2023-09-11	17.0	2023-10-29	24.0
2023-09-12	12.0	2023-10-30	24.0
2023-09-13	12.0	2023-10-31	24.0
2023-09-14	12.0	November	
2023-09-15	12.0	2023-11-01	24.0
2023-09-16	12.0	2023-11-02	24.0
2023-09-17	12.0	2023-11-03	24.0
2023-09-18	7.0	2023-11-04	24.0
2023-09-20	12.0	2023-11-05	24.0
2023-09-21	24.0	2023-11-06	24.0
2023-09-22	16.0	2023-11-07	24.0
2023-09-29	12.0	2023-11-08	24.0
2023-09-30	12.0	2023-11-09	24.0
October		2023-11-10	24.0
2023-10-02	12.0	2023-11-11	24.0
2023-10-05	16.0	2023-11-12	24.0
2023-10-06	24.0	2023-11-13	12.0
2023-10-07	24.0	2023-11-27	12.0
2023-10-08	24.0	2023-11-28	12.0
2023-10-09	17.0	December	
2023-10-10	12.0	2023-12-04	5.0
2023-10-11	12.0	2023-12-05	12.0
2023-10-12	12.0	2023-12-06	17.5
2023-10-13	12.0	2023-12-07	12.0
2023-10-14	12.0	2023-12-08	12.0
2023-10-15	12.0	2023-12-09	12.0

2023-12-10	12.0	2024-02-03	12.0
2023-12-11	7.0	2024-02-04	12.0
2023-12-22	12.0	2024-02-05	19.0
2023-12-23	12.0	2024-02-06	24.0
January		2024-02-07	24.0
2024-01-01	5.0	2024-02-08	24.0
2024-01-02	12.0	2024-02-09	24.0
2024-01-03	17.0	2024-02-10	24.0
2024-01-04	24.0	2024-02-11	24.0
2024-01-05	24.0	2024-02-12	24.0
2024-01-06	12.0	2024-02-13	24.0
2024-01-07	12.0	2024-02-14	24.0
2024-01-08	7.0	2024-02-15	24.0
2024-01-12	5.0	2024-02-16	24.0
2024-01-13	7.0	2024-02-17	24.0
2024-01-15	12.0	2024-02-18	24.0
2024-01-16	24.0	2024-02-19	12.0
2024-01-17	24.0	2024-02-26	5.0
2024-01-18	24.0	2024-02-27	12.0
2024-01-19	24.0	2024-02-28	12.0
2024-01-20	24.0	2024-02-29	12.0
2024-01-21	24.0	March	
2024-01-22	24.0	2024-03-01	12.0
2024-01-23	24.0	2024-03-02	12.0
2024-01-24	24.0	2024-03-03	12.0
2024-01-25	24.0	2024-03-04	7.0
2024-01-26	24.0	2024-03-11	12.0
2024-01-27	24.0	2024-03-12	24.0
2024-01-28	24.0	2024-03-13	24.0
2024-01-29	12.0	2024-03-14	12.0
2024-01-30	12.0	2024-03-21	15.0
2024-01-31	12.0	2024-03-22	24.0
February		2024-03-23	24.0
2024-02-01	12.0	2024-03-24	24.0
2024-02-02	12.0	2024-03-25	17.0

2024-03-26	12.0
2024-03-27	12.0
2024-03-28	12.0
2024-03-29	12.0
2024-03-30	12.0
2024-03-31	12.0
Eastern Memorial Hospital Total	4,537.0

Glace Bay Hospital	Hours Closed
July	
2023-07-31	2.0
August	
2023-08-01	2.0
2023-08-07	2.0
2023-08-14	2.0
2023-08-15	2.0
October	
2023-10-09	11.0
December	
2023-12-25	11.0
January	
2024-01-24	2.0
February	
2024-02-12	2.0
2024-02-21	5.0
March	
2024-03-05	2.0
2024-03-19	2.0
Glace Bay Hospital Total	45.0

Guysborough Memorial Hospital	Hours Closed
April	
2023-04-01	17.0
2023-04-03	17.0

2023-04-04	8.0
2023-04-05	17.0
2023-04-06	8.0
2023-04-08	5.0
2023-04-09	7.0
2023-04-10	4.0
2023-04-12	17.0
2023-04-13	24.0
2023-04-14	19.0
2023-04-17	8.0
2023-04-18	8.0
2023-04-20	17.0
2023-04-21	24.0
2023-04-22	24.0
2023-04-23	24.0
2023-04-24	8.0
2023-04-25	17.0
2023-04-26	8.0
2023-04-27	17.0
2023-04-28	8.0
2023-04-30	6.0
May	
2023-05-01	24.0
2023-05-02	8.0
2023-05-03	17.0
2023-05-04	8.0
2023-05-05	17.0
2023-05-06	24.0
2023-05-07	24.0
2023-05-08	8.0
2023-05-09	16.0
2023-05-10	8.0
2023-05-11	17.0
2023-05-12	8.0
2023-05-15	17.0

2023-05-16	8.0	2023-08-05	7.0
2023-05-17	17.0	2023-08-10	17.0
2023-05-18	8.0	2023-08-11	19.0
2023-05-19	12.0	2023-08-12	18.0
2023-05-25	17.0	2023-08-13	23.0
2023-05-26	19.0	2023-08-14	19.0
2023-05-31	17.0	2023-08-15	17.0
June		2023-08-16	8.0
2023-06-01	8.0	2023-08-18	12.0
2023-06-04	12.0	2023-08-19	5.0
2023-06-06	17.0	2023-08-20	24.0
2023-06-07	8.0	2023-08-21	24.0
2023-06-14	17.0	2023-08-22	8.0
2023-06-15	8.0	2023-08-23	17.0
2023-06-17	12.0	2023-08-24	8.0
2023-06-22	17.0	2023-08-29	17.0
2023-06-23	8.0	2023-08-30	8.0
2023-06-26	17.0	2023-08-31	17.0
2023-06-27	8.0	September	
2023-06-30	12.0	2023-09-01	8.0
July		2023-09-04	17.0
2023-07-04	17.0	2023-09-05	10.0
2023-07-05	8.0	2023-09-06	17.0
2023-07-06	17.0	2023-09-07	8.0
2023-07-07	8.0	2023-09-08	17.0
2023-07-12	17.0	2023-09-09	24.0
2023-07-13	8.0	2023-09-10	24.0
2023-07-18	17.0	2023-09-11	8.0
2023-07-19	8.0	2023-09-12	17.0
2023-07-25	6.0	2023-09-13	8.0
2023-07-26	24.0	2023-09-14	17.0
2023-07-27	8.0	2023-09-15	19.0
August		2023-09-18	17.0
2023-08-03	12.0	2023-09-19	8.0
2023-08-04	6.0	2023-09-20	17.0

2023-09-21	8.0	December	
2023-09-26	17.0	2023-12-01	24.0
2023-09-27	8.0	2023-12-02	24.0
October		2023-12-03	24.0
2023-10-04	17.0	2023-12-04	8.0
2023-10-05	8.0	2023-12-05	17.0
2023-10-10	17.0	2023-12-06	8.0
2023-10-11	8.0	2023-12-07	17.0
2023-10-18	17.0	2023-12-08	7.0
2023-10-19	8.0	2023-12-11	17.0
2023-10-24	17.0	2023-12-12	8.0
2023-10-25	8.0	2023-12-13	17.0
2023-10-30	6.0	2023-12-14	8.0
2023-10-31	7.0	2023-12-15	17.0
November		2023-12-16	8.0
2023-11-01	17.0	2023-12-19	17.0
2023-11-02	8.0	2023-12-20	8.0
2023-11-05	6.0	2023-12-22	12.0
2023-11-06	7.0	2023-12-27	17.0
2023-11-07	17.0	2023-12-28	14.0
2023-11-08	14.0	2023-12-29	19.0
2023-11-09	7.0	January	
2023-11-15	17.0	2024-01-02	17.0
2023-11-16	8.0	2024-01-03	8.0
2023-11-18	6.0	2024-01-11	17.0
2023-11-19	7.0	2024-01-12	8.0
2023-11-20	13.0	2024-01-16	17.0
2023-11-21	17.0	2024-01-17	8.0
2023-11-22	8.0	2024-01-22	9.2
2023-11-23	17.0	2024-01-25	17.0
2023-11-24	8.0	2024-01-26	21.0
2023-11-28	17.0	2024-01-30	17.0
2023-11-29	24.0	2024-01-31	14.8
2023-11-30	24.0	February	
		2024-02-04	12.0

2024-02-05	17.0
2024-02-06	8.0
2024-02-12	13.0
2024-02-13	17.0
2024-02-14	16.0
2024-02-15	10.0
2024-02-16	13.0
2024-02-17	7.0
2024-02-18	12.0
2024-02-22	17.0
2024-02-23	8.0
2024-02-27	17.0
2024-02-28	8.0
March	
2024-03-04	3.0
2024-03-05	7.0
2024-03-07	17.0
2024-03-08	8.0
2024-03-21	17.0
2024-03-22	8.0
2024-03-24	2.0
2024-03-25	24.0
2024-03-26	8.0
2024-03-27	6.0
2024-03-28	24.0
2024-03-29	10.0
Guysborough Memorial Hospital Total	2,552.0

Strait Richmond Hospital	Hours Closed
April	
2023-04-03	1.0
2023-04-06	1.0
2023-04-10	1.0
2023-04-11	10.5

2023-04-17	1.0
2023-04-20	1.0
2023-04-24	1.0
2023-04-27	1.0
May	
2023-05-04	1.0
2023-05-05	1.0
2023-05-08	1.0
2023-05-11	1.0
2023-05-12	0.5
2023-05-15	1.0
2023-05-18	1.0
2023-05-22	1.0
June	
2023-06-13	17.0
2023-06-14	7.0
2023-06-19	1.0
2023-06-22	1.0
2023-06-26	1.0
2023-06-29	1.0
July	
2023-07-03	1.0
2023-07-06	1.0
2023-07-07	1.0
2023-07-10	1.0
2023-07-13	17.0
2023-07-14	7.0
2023-07-20	12.0
2023-07-27	17.0
2023-07-31	1.0
August	
2023-08-07	1.0
2023-08-10	1.0
2023-08-14	1.0

2023-08-17	1.0	December	
2023-08-21	1.0	2023-12-04	0.5
2023-08-24	1.0	2023-12-05	14.5
2023-08-28	1.0	2023-12-06	7.0
2023-08-31	17.0	2023-12-12	17.0
September		2023-12-13	7.0
2023-09-01	7.0	2023-12-14	17.0
2023-09-04	17.0	2023-12-15	7.0
2023-09-07	17.0	2023-12-18	1.0
2023-09-08	7.0	2023-12-21	1.0
2023-09-11	1.0	2023-12-25	17.0
2023-09-14	1.0	2023-12-26	24.0
2023-09-18	1.0	2023-12-27	7.0
2023-09-21	1.0	2023-12-28	1.0
2023-09-28	1.0	January	
October		2024-01-01	17.0
2023-10-05	1.0	2024-01-02	8.0
2023-10-09	1.0	2024-01-04	1.0
2023-10-16	1.0	2024-01-08	1.0
2023-10-19	1.0	2024-01-11	1.0
2023-10-23	7.0	2024-01-15	1.0
2023-10-24	8.0	2024-01-18	1.0
2023-10-26	1.0	2024-01-22	1.0
2023-10-30	1.0	2024-01-29	1.0
November		February	
2023-11-02	1.0	2024-02-01	1.0
2023-11-06	1.0	2024-02-08	1.0
2023-11-09	1.0	2024-02-12	1.0
2023-11-13	1.0	2024-02-15	1.0
2023-11-16	3.0	2024-02-19	1.0
2023-11-20	17.0	2024-02-22	1.0
2023-11-21	24.0	2024-02-26	1.0
2023-11-22	7.0	2024-02-27	6.0
2023-11-23	1.0	2024-02-28	7.0
2023-11-27	1.0	2024-02-29	1.0

March	
2024-03-07	1.0
2024-03-11	1.0
2024-03-14	1.0
2024-03-18	1.0
2024-03-25	1.0
2024-03-28	1.0
Strait Richmond Hospital Total	446.0
Grand Total	7,586.0

CENTRAL ZONE

QEII Health Centre, Dartmouth General and Cobequid Community Health Centre had no temporary closures.

Hants Community Hospital	Hours Closed
April	
2023-04-02	8.0
2023-04-03	8.0
2023-04-04	8.0
2023-04-05	14.0
2023-04-08	8.0
2023-04-14	13.0
May	
2023-05-21	13.0
2023-05-23	13.0
2023-05-24	8.0
2023-05-25	8.0
2023-05-31	18.0
June	
2023-06-01	8.0
2023-06-14	8.0
2023-06-15	8.0
2023-06-28	13.0
July	
2023-07-01	13.0

2023-07-04	5.0
2023-07-11	16.0
2023-07-15	8.0
2023-07-16	8.0
2023-07-22	8.0
2023-07-23	8.0
2023-07-30	18.0
2023-07-31	8.0
August	
2023-08-02	13.0
2023-08-03	13.0
2023-08-06	18.0
2023-08-07	8.0
2023-08-10	13.0
2023-08-13	13.0
2023-08-16	8.0
2023-08-17	8.0
2023-08-18	13.0
2023-08-19	16.0
2023-08-20	19.0
2023-08-21	13.0
2023-08-22	13.0
2023-08-23	13.0
2023-08-27	13.0
2023-08-30	8.0
2023-08-31	8.0
September	
2023-09-01	13.0
2023-09-02	18.0
2023-09-03	24.0
2023-09-04	8.0
2023-09-05	13.0
2023-09-15	12.0
2023-09-16	12.0
2023-09-17	12.0

2023-09-23	8.0
2023-09-24	7.0
2023-09-29	8.0
2023-09-30	7.0
October	
2023-10-07	6.0
2023-10-08	7.0
2023-10-14	12.0
January	
2024-01-01	16.0
2024-01-28	9.0
February	
2024-02-09	17.0
2024-02-10	15.0
2024-02-14	15.0
2024-02-15	15.0
March	
2024-03-01	15.0
2024-03-02	11.0
Hants Community Hospital Total	738.0

Twin Oaks Memorial Hospital	Hours Closed
April	
2023-04-03	4.0
2023-04-06	12.0
2023-04-08	12.0
2023-04-14	12.0
2023-04-15	13.0
2023-04-16	16.0
2023-04-17	8.0
2023-04-20	12.0
2023-04-22	12.0
2023-04-28	12.0
May	
2023-05-05	24.0

2023-05-11	12.0
2023-05-12	23.0
2023-05-13	5.0
2023-05-14	13.0
2023-05-17	12.0
2023-05-18	12.0
2023-05-20	12.0
2023-05-21	13.0
2023-05-23	12.0
2023-05-25	12.0
2023-05-26	12.0
2023-05-29	12.0
2023-05-30	13.0
June	
2023-06-01	12.0
2023-06-03	12.0
2023-06-08	16.0
2023-06-09	20.0
2023-06-11	4.0
2023-06-12	14.0
2023-06-13	12.0
2023-06-17	13.0
2023-06-18	12.0
2023-06-20	12.0
2023-06-22	12.0
2023-06-25	12.0
2023-06-29	14.0
2023-06-30	13.0
July	
2023-07-08	12.0
2023-07-09	13.0
2023-07-17	13.0
2023-07-21	23.0
2023-07-22	12.0
2023-07-23	12.0

2023-07-24	4.0	2023-10-31	12.0
2023-07-25	24.0	November	
2023-07-26	8.0	2023-11-07	12.0
2023-07-28	12.0	2023-11-11	12.0
2023-07-30	12.0	2023-11-16	12.0
August		2023-11-18	12.0
2023-08-05	12.0	2023-11-29	13.0
2023-08-06	12.0	2023-11-30	12.0
2023-08-07	12.0	December	
2023-08-11	24.0	2023-12-04	12.0
2023-08-12	12.0	2023-12-06	12.0
2023-08-13	16.0	2023-12-09	1.0
2023-08-14	24.0	2023-12-10	13.0
2023-08-16	12.0	2023-12-11	5.5
2023-08-25	16.0	2023-12-21	11.0
2023-08-26	12.0	2023-12-22	24.0
2023-08-30	12.0	2023-12-23	12.0
September		2023-12-24	11.0
2023-09-02	12.0	2023-12-25	25.0
2023-09-03	12.0	2023-12-26	12.0
2023-09-09	24.0	2023-12-27	12.0
2023-09-15	13.0	2023-12-28	12.0
2023-09-16	24.0	2023-12-31	12.0
2023-09-17	24.0	January	
2023-09-18	12.0	2024-01-01	12.0
2023-09-19	12.0	2024-01-02	12.0
2023-09-23	12.0	2024-01-05	12.0
2023-09-27	12.0	2024-01-09	13.0
October		2024-01-12	12.0
2023-10-01	12.0	2024-01-15	13.0
2023-10-04	12.0	2024-01-22	10.0
2023-10-05	12.0	2024-01-24	12.0
2023-10-12	12.0	2024-01-27	13.0
2023-10-13	12.0	February	
2023-10-17	12.0	2024-02-09	12.0

2024-02-12	12.0
2024-02-17	11.5
2024-02-23	12.0
2024-02-25	23.0
March	
2024-03-02	12.0
2024-03-03	12.0
2024-03-07	12.0
2024-03-09	12.0
2024-03-10	12.0
2024-03-11	12.0
2024-03-14	12.0
2024-03-22	12.0
2024-03-23	12.0
2024-03-24	3.0
2024-03-25	7.0
2024-03-26	6.0
2024-03-29	12.0
Twin Oaks Memorial Hospital Total	1,591.0
Grand Total	2,329.0

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