



“Dr. Peter” lives on through AIDS daycare centre

During his lengthy battle with AIDS, Dr. Peter Jepson-Young tried to live life to the full. “Dr. Peter” was well known in Vancouver for his *AIDS Diaries*, which described how he lived with AIDS. They first appeared on local television, and then he received a national profile on the CBC during his last 2 years of life. Shortly before he died in 1992, he told his family and friends to do something to provide “comfort care” to help patients living with AIDS maintain their independence.



Patient (right) meets with nurse at the Dr. Peter Centre

His request came to fruition this year. The Dr. Peter Centre, which links with other AIDS organizations that share his vision, began offering a variety of support programs in April 1997, when it became Canada’s first AIDS daycare centre. All patients are formally admitted to the centre, which is operated by the Dr. Peter AIDS Foundation; they may refer themselves. The facility is currently open 5 hours daily on weekdays but eventually hopes to open 7 days a week. It reached its capacity of 55 people within the first month of operation, with about 25 people attending each day. Another 25 are already on a waiting list.

Nutrition is a key element at the centre, which serves breakfast and lunch. Judi Angel, the foundation’s executive director, says some participants have gained 9 kg in their first month. The facility also features rooms for reading, group therapy, daytime naps, complementary therapy and children’s play. Self-responsibility is emphasized: participants can dispense their medication and do their laundry.

At a daily cost of \$70 per person, compared with an estimated \$1000 per day for hospitalization,

the program’s cost-effectiveness is indisputable. Operating funding comes from a \$1 million Ministry of Health grant; the centre is already being evaluated by the British Columbia Centre for Excellence in HIV/AIDS.

Housed temporarily at St. Paul’s Hospital, the centre is planning to build a combined daycare centre and residential facility, which will have 20 beds for both respite and hospice-style care, on an adjacent site that will be leased from the city. Fund-raising is under way for the \$7-million project. Staff hope to move to the new facility by Jepson-Young’s birthday on June 7, 1999. — © Heather Kent

Passport guarantors: if you sign, do not bill

Now that physicians are charging patients for a wide range of “non-insured” medical services, it isn’t surprising that some areas of confusion are developing. A good example involves patients’ requests for a doctor to act as guarantor for a passport application.

Every application must be signed by a guarantor, who must be a professional such as a physician, lawyer or minister who has known the applicant for at least 2 years. One of the caveats is that the guarantor cannot receive any form of compensation. If they do accept payment the application becomes invalid and the applicant will be ordered to submit a new form signed by a different guarantor.

Passport officials are rigid on this policy — they say the rule is designed to ensure that unscrupulous people will not be encouraged to act as a guarantor simply for the fee involved. Although charging a patient for this service will not land a physician in court, this kind of misunderstanding can result in a potentially embarrassing and time-consuming problem for applicants, who will often request that their payment be returned. (This has already happened in Nova Scotia.) The headaches involved are a substantial nuisance and physicians could avoid them by not charging for this service. — © Dorothy Grant, coordinator, patient-physician relations, Medical Society of Nova Scotia

Wanted: more Newfoundland MDs

Comments that there are no major problems with physician supply in Newfoundland and Labrador have been met with derision by the provincial medical society and its