

Turmoil strikes BC health board

The British Columbia government's controversial decision to regionalize health boards led to a tumultuous period at North Vancouver's Lions Gate Hospital. The issue finally came to a head earlier this year, resulting in the dismissal of both the North Shore Health Board, which is responsible for the hospital, and the hospital's chief executive officer. Twelve of the boards have been appointed throughout the province, with a mandate to bring health care closer to the community.

The North Shore board, appointed in 1996 without a physician representative, lacked "experience in complex medical situations," complains Dr. Peter Richards, president of the Lions Gate medical staff in 1997–98. Board members "didn't seem to understand a lot of basics about acute care," adds Dr. Stewart Madill, the regional vice-president

of medicine. "They focused more on community care and lacked business knowledge."

As well, the board's appointment of Inge Schamborski as CEO proved controversial. Before being appointed to the job Schamborski had been managing the transition to regionalization, and had said she was not a candidate for the Lions Gate job. She later reversed that position. Madill says her appointment created "apprehension" but "everybody was prepared to give her an opportunity at the onset."

Schamborski damaged relations with the hospital staff from the start by moving into offices outside the hospital. "She showed no sensitivity to the feelings of the hospital staff," says Richards.

"She didn't have much presence around the hospital," Madill adds.

Richards says a critical breakdown in communication occurred in 1997

when Lions Gate physicians were told that they could no longer report directly to the board, but had to deal directly with the CEO. This situation "could have been resolved over time," says Richards. Instead, "the goodwill never materialized." At this point, however, the doctors did succeed in having Dr. John Maynard appointed to the board as their first physician representative.

Madill says the CEO's sudden firing of popular administrator Lynette Best in April 1997 had "a huge impact." The physicians responded by passing a vote of nonconfidence in the CEO and board.

In June 1997, Schamborski's contract was up for review and the doctors asked to make a presentation to the board, which responded by reappointing her to a full 3-year term at a meeting attended by only 8 of the 15 members. Maynard, who wasn't present, then resigned. The physicians resorted to written communication with the board. Richards says the board's action led to "carefully coordinated activities across all hospital departments" to remove the board and CEO.

Finally, in February 1998, the health minister terminated the board, and Schamborski was dismissed shortly afterwards. A new 11-member board, including 1 physician, was appointed in May. Doctors are also represented on the search committee for the new CEO, and Richards says goodwill is "back in spades."

"Doctors are essential participants in running a hospital," he says. "If physicians cannot cooperate within an administrative regime they can be instrumental in removing it."

"The conflict here was insurmountable," concludes Madill. "It is crucial to have medical staff involvement or it is not going to work." — © *Heather Kent*

Cool sites

www.cdc.gov/travel/travel.html

Thinking about taking a trip? Or do you have patients who stop by before taking exotic vacations, wondering if they'll be at risk for dengue fever? You may want to check out this fine site. It is run by the US Centers for Disease Control and Prevention (CDC) and contains up-to-date information on health risks facing the peripatetic tourist. A map lets users click on any area to discover which diseases are rampant or rare. Visitors can also search by disease to find which nations pose a risk. The site has current information on recent outbreaks, such as Somalian Rift Valley fever and Hong Kong avian influenza. In addition to a list of comprehensive vaccination requirements, the CDC also offers advice on how to avoid becoming sick in the first place — use insect nets and avoid untreated water. A section on sanitary inspections of cruise ships is included, and there's even an explanation of disinsection — the spraying of aircraft to kill insects travelling on them. Finally, users can find out anything and everything about travellers' diarrhea. In fact, perusing this site before you leave might let you avoid Montezuma's revenge altogether. Remember, an ounce of prevention is worth several rolls of toilet paper. — Dr. Robert Patterson, robpatterson@email.msn.com