

Analysis of Internal Medicine Services and Workforce Alignment in Newfoundland and Labrador

Objective

To compare the level of internal medicine services in Newfoundland and Labrador (NL) to those in Tasmania (TAS) and to assess the alignment of the workforce and level of service provided in each hospital.

Practice Points

1. Many hospitals in the province currently have difficulty in maintaining consistent on site coverage by specialists in internal medicine.

Results

Table 1. Number of Facilities in Tasmania and NL Providing Each Level of Internal Medicine Services

Level	Description	TAS	NL
2	Low-acuity medical care service	13	2
	Nurse-led service		
	Has the ability to monitor patients, with 24 hour access to a Licensed Practical Nurse (LPN) and access to a physician or family physician (FP)		
3	Has the ability to provide acute resuscitation prior to transfer	0	15
	Low-acuity, multi-system medical condition ambulatory and/or inpatient service		
4	Outpatient care provided by a visiting physician practicing in internal medicine/ internal medicine specialist, including by telehealth	1	1
	Has established linkages to a higher level internal medicine inpatient and ambulatory care service		
5	Inpatient care provided by a physician practicing in internal medicine supported by inpatient and outpatient consultations for a (limited) range of medicine subspecialties	1	5
6	Multidisciplinary team approach to treat complex and critically ill medical patients	2	4
	Inpatient care provided by a team of on-site physicians practicing in internal medicine with on-site access to a comprehensive range of sub-specialty medicine expertise		

- Compared to Tasmania, many more hospitals in NL provide higher complexity internal medicine services requiring support by medicine subspecialties.

Table 2. Description of Workforce Requirements to Provide Each Level of Internal Medicine Services

Level	Workforce Description
2	24 hour access to a Registered Nurses (RN); nursing services also provided by Licensed Practical Nurse (LPN)
	Inpatient care by a physician
3	May have access to allied health professionals, as required
	Visiting physician practicing in internal medicine
4	Specialist dietetics and nutrition, podiatry, social work, physiotherapy and occupational therapy services (visiting or on-site)
	RNs with experience and/or post graduate qualifications in nursing on-site
5	24 hour on-call roster for physicians practicing in internal medicine
	Physician on-site 24 hours
	Nursing staff with appropriate experience and post graduate qualifications
6	Full range of generalist allied health services
	Medical resident on-site 24 hours
	Sub-specialists available on-site for consultation
	Residents in majority of sub-specialist medicine services
6	Specialized allied health services on-site
	May have on-site Nurse Practitioners (NPs) to supplement sub-specialty medicine roles

Table 3. Level of Internal Medicine Services and Level of Workforce Providing Internal Medicine Services for Each Hospital in NL

Hospital	Service Level	Workforce Level
Eastern Health (EH)		
Health Sciences	6	6
St. Clare's	5	6 (5A)
Janeway	-	-
Carbonear	5	5
Burin Peninsula	5	5
Dr. G.B. Cross	6	5 (4M)
Central Health (CH)		
James Paton	6	5
Central NL	6	5
Western Health (WH)		
Western Memorial	5	5 (3A)
Sir Thomas Roddick	5	5
Labrador-Grenfell Health (LGH)		
Charles S. Curtis	3	3A; 4M; 5N
Labrador	3	3A; 4M; 5N
Labrador West	3	3A; 4M; 5N

- Three hospitals located outside St. John's report providing the highest level (Level 6) of internal medicine services. None of those hospitals have the workforce required to provide this complexity of care.
- Nineteen health centres provide a lower-acuity ambulatory or inpatient service and all have the appropriate workforce level to provide that service.

Conclusions

1. Some hospital sites in NL report being able to deliver more complex care than they would be expected to do given staffing levels. These survey data do not allow a distinction between what sites reported as their complexity of care and the actual complexity of care provided.
2. As recommended by Health Accord NL, acute care standards should be developed for NL to ensure a match between expected service delivery at each site and staffing patterns.