



Hospital therapists slam Chilliwack rehab closure

June 26, 2012

Chilliwack Progress

Byline: Robert Freeman

The Health Sciences Association of B.C. has joined Chilliwack hospital doctors and community leaders criticizing the decision to replace a rehab unit at Chilliwack General with an outpatient service.

"Doctors and rehab specialists were not consulted about this closure," said HSABC President Reid Johnston.

"Without consulting the front line workers," he said, Fraser Health Authority officials "are not going to understand the implications of what they're going to do."

Which echoes the concern of doctors at CGH that the closure was "not carefully thought out" in terms of the impact on patient care and on other hospital departments that sent patients recovering from the likes of surgery or strokes to the rehab unit.

Dr. Ken Hirst, who heads CGH's department of general medical practices, told The Progress in an earlier interview that rehab patients are often elderly and may not recover at home due to the lack of family or community support networks.

If they now need to return to hospital, he said, it will "lessen the availability of surgical and medical beds." "It makes the hospital even more inefficient in its ability to deliver what it should be doing, which is acute care," he said.

Johnston said that program leaders without clinical experience are making decisions at health authorities under pressure to cut costs.

Those decisions "might make business sense, but not health care sense," he said.

"If the goal (at CGH) was to save money, there might be other ways to do that other than just shutting down the (rehab) service," he said, a move that therapists and social workers represented by the HSABC were "willing" to look at, had they been asked.

Johnston also pointed out that the \$800,000 saved by the FHA in closing the rehab unit will now leave the community and be spent elsewhere in the system.

"The people of Chilliwack might want to say something about that," he said.

FHA spokesman Roy Thorpe-Dorward said the health authority is "taking the feedback seriously" about the lack of consultation.

"We're looking carefully at how we can do things differently when we make program changes like this," he said.

However, to date there are no changes in rolling out the new outpatient service, which the FHA describes as an "addition" to rehab options, rather than a cutback.

No patients currently in the rehab unit will be moved, but in the future those patients who need in-hospital rehab will be sent to Abbotsford, and the rest will use the outpatient service.

FHA officials say better health outcomes are obtained when patients go home.

A "patient coordinator" will address transportation concerns of those in "hardship situations," Thorpe-Dorward said.

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