

Annual Accountability Report

on Emergency Departments

April 1, 2021 – March 31, 2022



Table of Contents

Executive Summary	1
Introduction	1
Emergency Care in Nova Scotia	2
Emergency Department Visits	4
Emergency Department Closures	11
Hours of Operation Changes.....	12
Nova Scotia Response to Challenges	14
Next Steps	17
ED Hours Closed/Open	19
Temporary ED Closure Hours and Public Consultations by Zone.....	21
Appendix A: Temporary ED Closures by Date and Hours Closed	30

Executive Summary

On March 22, 2020, Nova Scotia (NS) declared a state of emergency to help contain the spread of COVID-19. The province worked with the Nova Scotia Health Authority (NSHA) and the IWK Health Centre (IWK) to plan and prepare for health service delivery during the pandemic. This included the consolidation of emergency services, changes to hours of operation of select sites, and model of care enhancements to ensure Nova Scotians had access to emergency and urgent care when needed.

COVID-19 has proven that the healthcare system can be responsive, collaborative, and flexible. It highlighted the dedication and resourcefulness of those on the frontlines. COVID-19 has led to an increase in technological utilization of virtual care and other innovations which should be leveraged to full effect. Investments in several key initiatives are helping to reintroduce health services and programs impacted by COVID-19 and ensure Nova Scotians have access to the care they need when they need it.

As we plan for the future to improve population outcomes, provide safe access, and optimize citizens' experience, we continue to evaluate, adapt, and improve on emergency care and its interface with, and relationship to, primary health care. There is ongoing planning, informed by front-line experience, evolving toward an integrated provincial network of emergency care. At the same time, there is ongoing planning and action, to strengthen the primary health care system with collaborative family practice, where family physicians, nurse practitioners, family practice nurses, and other health care providers work together to meet patient needs.

Introduction

The Annual Accountability Report on Emergency Departments (ED) for the fiscal year ending March 31, 2022, is prepared pursuant to Section 6 of the *Emergency Department Accountability Act* (2014). This Act requires the NSHA and IWK 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.

For the 2021-22 reporting period, a more fulsome ED Accountability report has been developed. The report includes comprehensive aspects of the health system related to emergency care, including closures, wait times, ambulance offloads, inpatient length of stay, and patient flow indicators.

During the 2021-22 fiscal year, EDs continued to experience disruptions due to a combination of factors including staff shortages, infection prevention and control and public health measures resulting from the COVID-19 pandemic. Despite these challenges, the government, NSHA and IWK continue to work collaboratively with other partners to improve access to quality healthcare in NS.

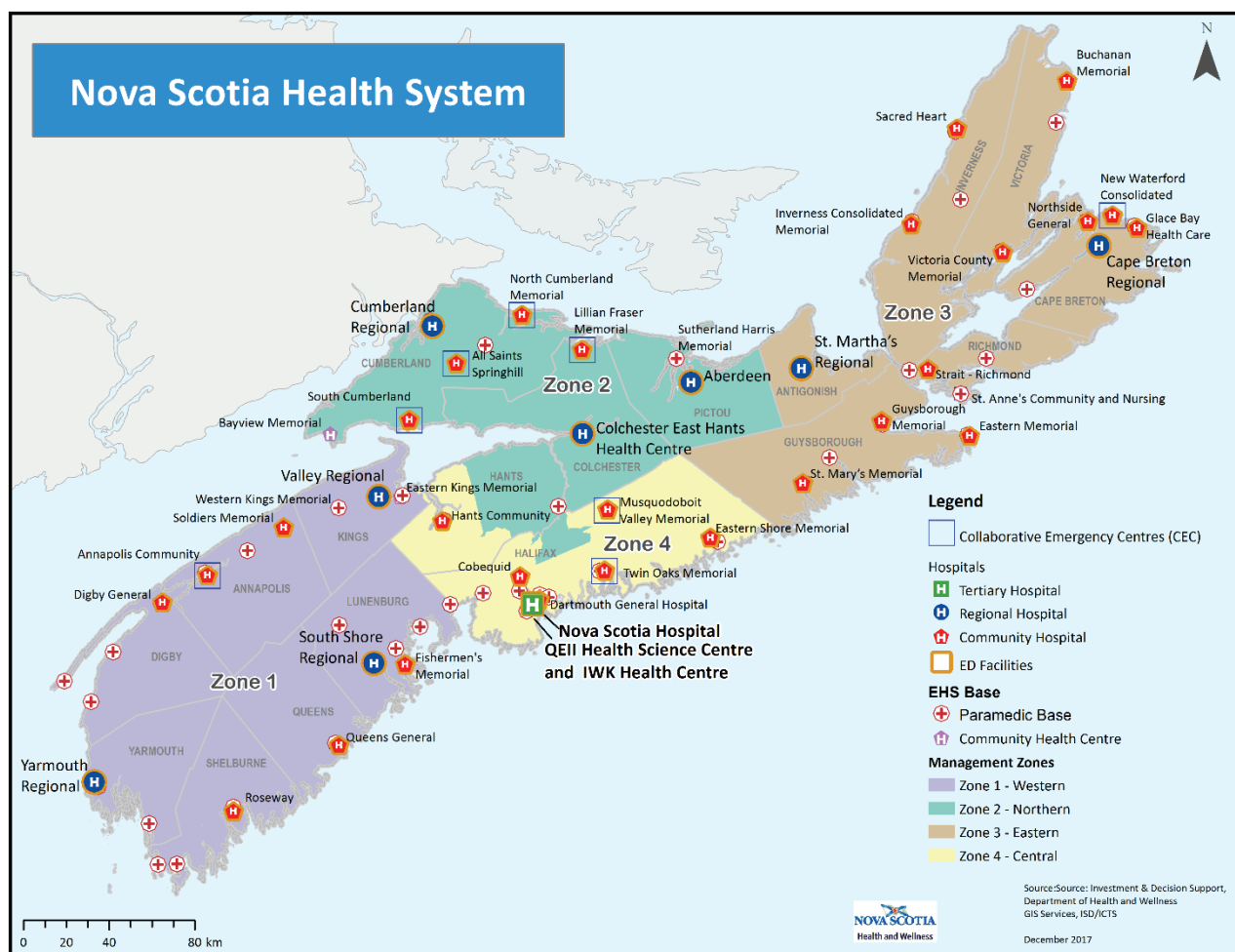
Emergency Care in Nova Scotia

EDs and their staff are an essential part of the province's healthcare system, quickly assessing and managing patients with unexpected illness or injury. EDs in NS are part of a single integrated network of emergency care consisting of:

- Two tertiary care EDs
- Ten geographically distributed Level 2 EDs
- And a series of community Level 3 and 4 EDs

97% of Nova Scotians live within a one-hour drive of a Level 1, 2, or 3 ED, with 88% living within 30 minutes. Further resilience is built into this system with multiple smaller rural Level 4 facilities, and a world class 911, ambulance and communication centre to coordinate pre-hospital care, inter-facility transport and tele-health support.

While certain smaller sites (Level 3 or 4) can be closed from time to time, the overall emergency system is always expected to respond to emergencies (24 hours a day/7 days a week). NSHA and IWK work with their teams in specific sites and zones, and across the province to achieve coverage when faced with a site closure.



In addition, the province has a telecare service (811) to provide nursing advice and help callers determine the most appropriate level of care for their needs, a mobile mental health line to support people in crisis, urgent care centres, and virtual care.

Most of Nova Scotia's 38 EDs operate on a 24/7 schedule, except for seven that have established different hours of operation after consultation with communities. These facilities are considered to have scheduled hours of closure. Unplanned ED closures are considered temporary closures. Typically, these closures are due to unavailability of ED staff (doctors, nurses, or paramedics). 19 community hospitals experienced temporary closures in 2021–2022.

Most temporary closures occur in smaller, rural EDs. Tertiary care (IWK and QEII) and regional hospital EDs are required to be open 24 hours a day, seven days a week, 365 days a year. In community hospitals, when an ED has experienced an ongoing pattern of closures, NSHA consults with the local community to address concerns and identify a course of action. More information on consultations held in 2021–22 is included on Page 23 of this report.

Recent changes in NS include expanded virtual care across the province for those on the Need a Family Practice Registry, Scotia Surgery trial with IWK to address backlog of pediatric surgeries and opening new urgent treatment centres (UTC) in North Sydney and Parrsboro. UTCs provide care for those with unexpected but non-life-threatening health concerns with appointments offered within one to two days. A Care Coordination Centre, operated by NSHA was launched which will more efficiently manage ED access and flow, ensuring each patient's journey through the hospital is appropriate to their care needs.

Emergency Department Visits

Emergency Department Demographics

Emergency Department Demographics						
	NSHA		IWK		Total NSHA & IWK	
Age (group)	% of Total	Number	% of Total	Number	% of Total	Number
<2	1.1%	5,649	28.7%	9,390	2.8%	15,039
2-16	6.0%	30,030	69.0%	22,596	9.9%	52,626
17-65	64.1%	318,480	2.33%	762	60.3%	319,242
66-80	20.3%	100,955	0.0%	0	19.1%	100,955
>80	8.3%	41,371	0.0%	0	7.8%	41,371

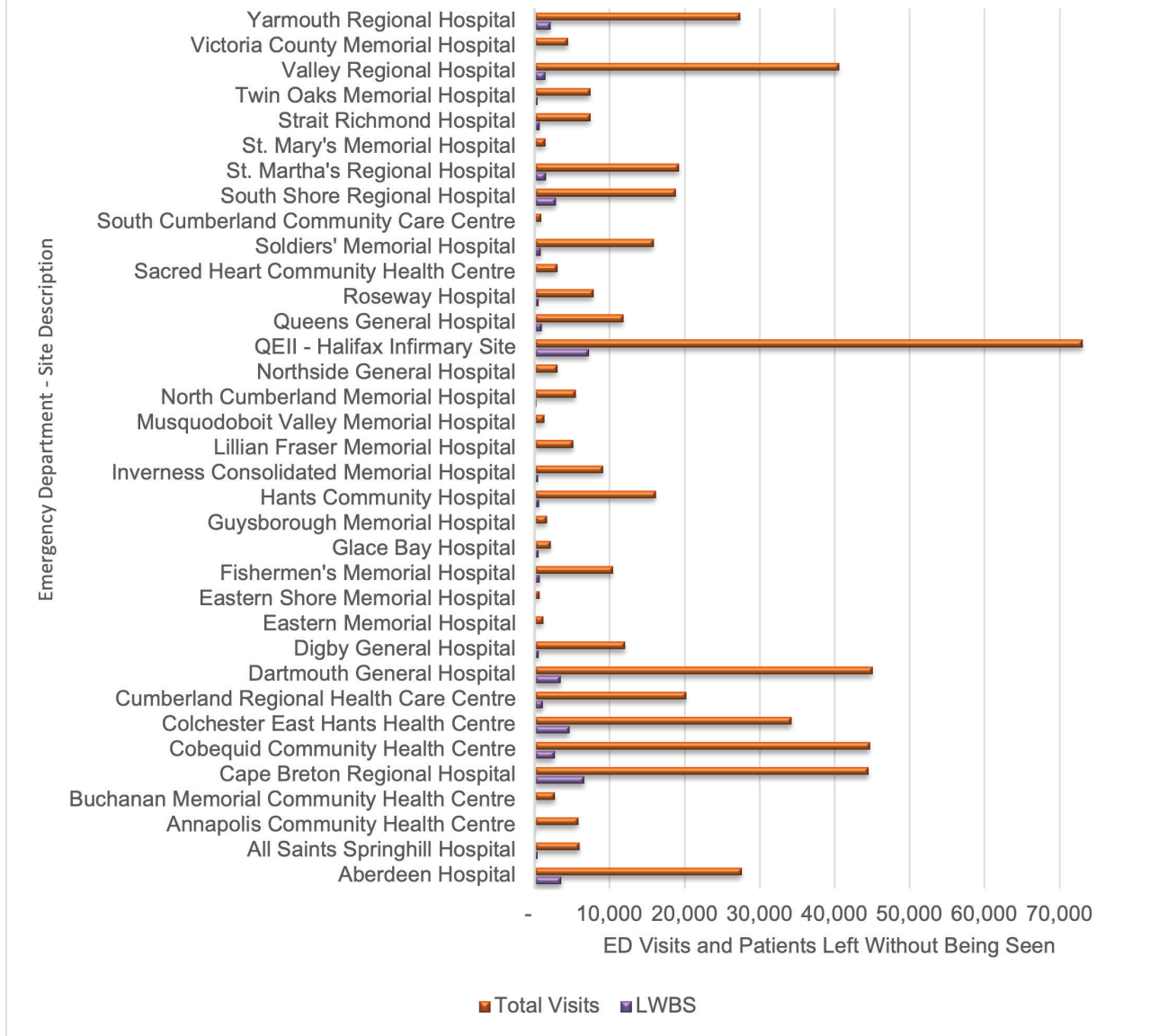
Between April 1, 2021 and March 31, 2022, of the 536,666 ED visits, 2.8% were under the age of 2, 9.9% were between 2-16, 60.3% were between 17-65, 19.1% were between 66-80 and 7.8% were over 80 years old.

Visits and Left Without Being Seen:

In 2021-2022 there were 536,666 total visits to EDs across NS. During this same time period 43,142 (8.0%) patients who visited EDs left without being seen (LWBS) by staff at an ED. The EDs with the greatest number of patients LWBS are South Shore Regional (15.0%) and Cape Breton Regional (14.8%).

The graph on the following page shows the total number of visits by ED and the total number of patients that left without being seen at each ED during the period of April 1, 2021 to March 31, 2022:

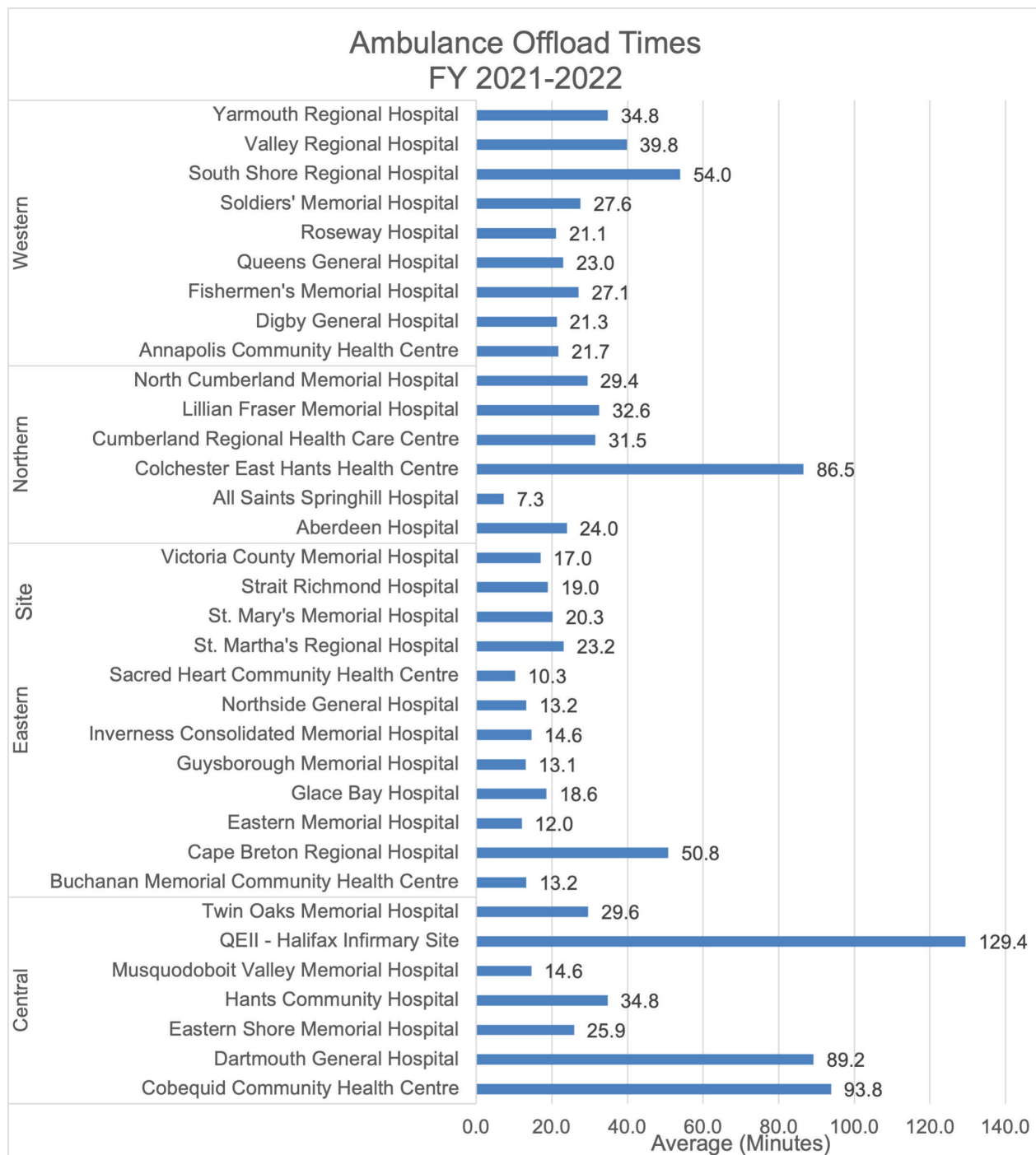
Total ED Visits and Patients Left Without Being Seen at EDs



The government is committed to reducing the number of LWBS patients by reducing ED wait times. Specific actions to reduce ED wait times can be found on page 19 of this report – Next Steps.

Emergency Health Services - Ambulance Offload Times

Offload times represent the Emergency Health Services (EHS) arrival at the hospital (based on GPS time stamp) to transfer of care (marked by paramedic). Ambulance offload time is important because the shorter offload time ensures paramedics are available to respond to other ambulance calls.



The average ambulance offload time between April 1, 2021 and March 31, 2022 was 33.1 minutes. The longest ambulance offload time was 129.4 minutes at the QEII, while the shortest was 7.3 minutes at All Saints Springhill Hospital. Regional sites with more consistent offload times within expected target (30 minutes) are the Aberdeen Hospital and St. Martha's Regional Hospital.

All zones are working to improve ambulance offload times in collaboration with EHS. Offload teams have been implemented in some facilities resulting in early improvement in offload times. This has been offset by increased volume, and length of stays of admitted patients. Teams continue to collaborate with EHS and partners to test and try and scale/spread successful initiatives to reduce offload delays. Initiatives include direct to chair and initiatives to expedite transfers to inpatient units.

Triage

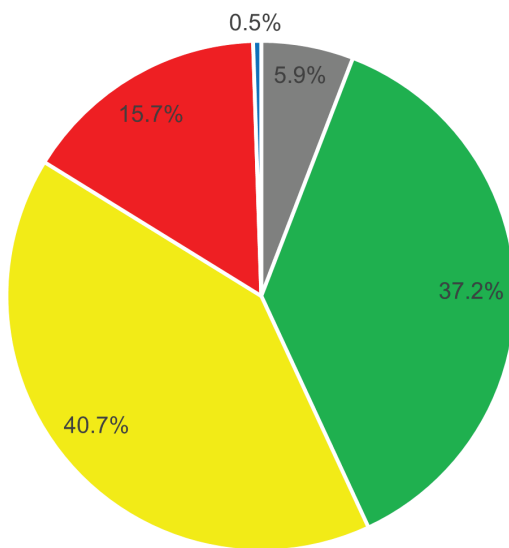
ED wait times depend on how urgently patients and others need care and the volume in the ED at the time. Once patients have been assessed, they may need tests (i.e., X-rays or lab tests) or need to be seen by a specialist. When patients come to the ED for care, they will be assessed by a triage nurse or paramedic soon after arriving. Triage staff will ask patients questions about why they are there and will check patients' breathing, pulse, blood pressure and temperature. Triage staff will also ask patients about existing health conditions, medications and pain level.

Based on the information gathered, triage staff will assign patients a score between one and five. This number affects the order in which patients are seen, with the most serious problems addressed first. NSHA and the IWK use the Canadian Triage Acuity Scale (CTAS) to assess people who come to the EDs. CTAS is the standard triage system used across Canada to determine how bad an injury or illness is and plan what to do next.

CTAS Triage Levels		Definition	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

As the graphs below show, between April 1, 2021 – March 31, 2022, of the 531,677 ED visits, 3,095 (0.6%) were Level 1, 96,425 (18.1%) were Level 2, 223,026 (42.0%) were Level 3, 181,901 (34.2%) were Level 4 and 27,190 (5.1%) were Level 5. These figures align with 2018-19 through 2020-21 in which the average CTAS level distribution was 0.5% Level 1, 15.7% Level 2, 40.7% Level 3, 37.2% Level 4 and 5.9% Level 5. The largest variances being with Level 2 (increasing 2.4%) and Level 4 (decreasing by 3%).

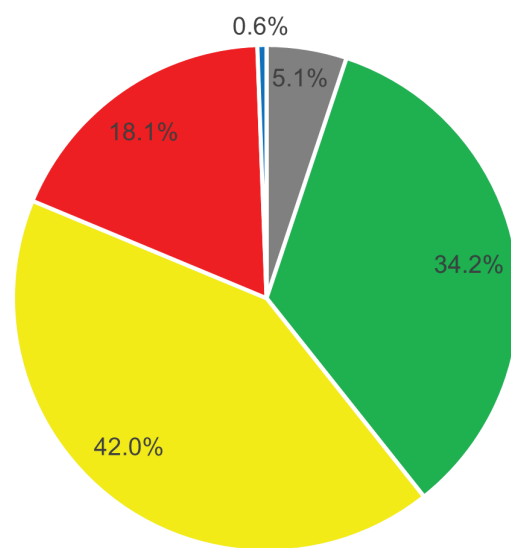
3 Year Average (2018-2021) CTAS Level ED Visits



CTAS Triage Levels

■ 5 ■ 4 ■ 3 ■ 2 ■ 1

2021-2022 CTAS Level ED Visits

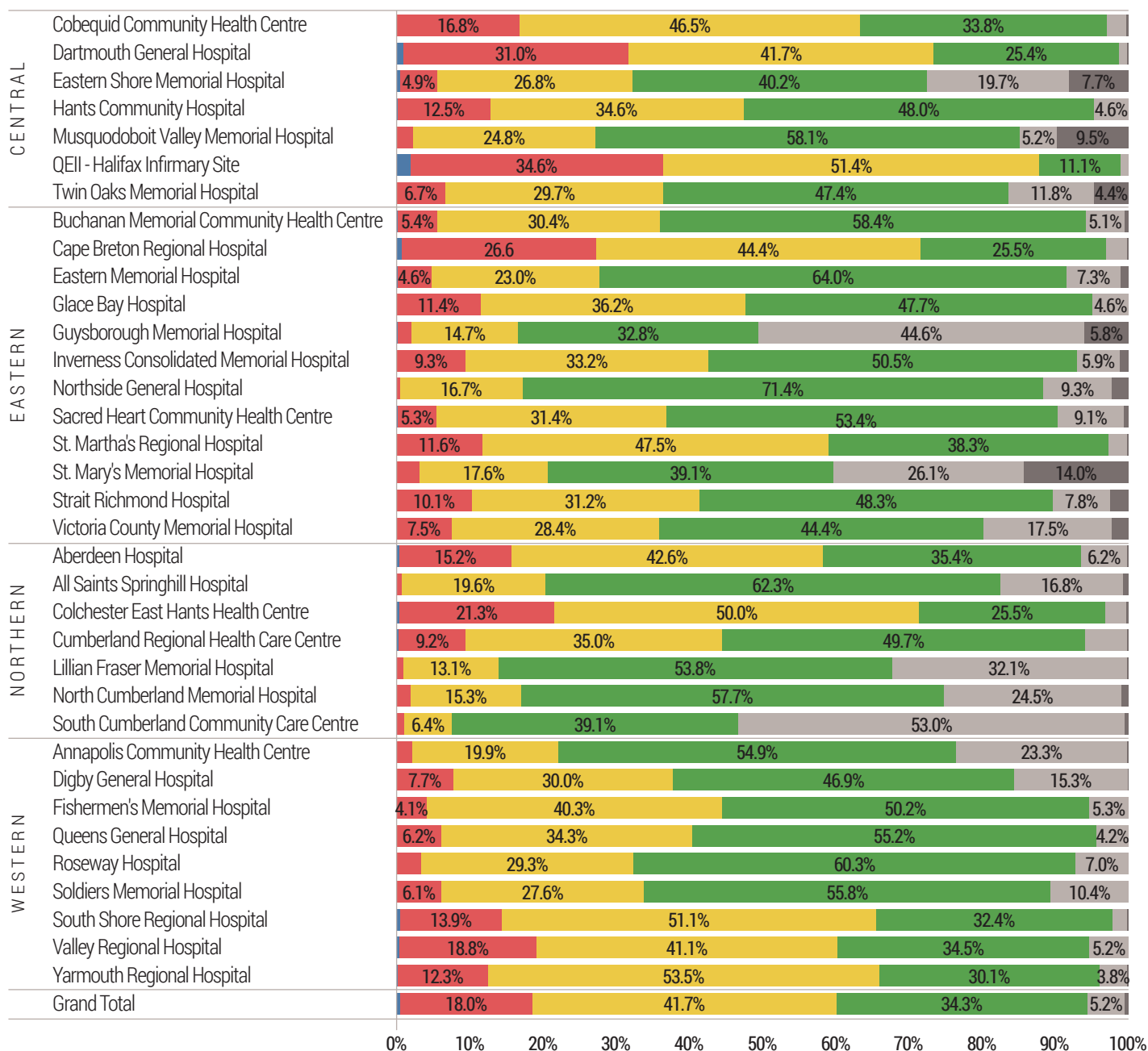


CTAS Triage Levels

■ 5 ■ 4 ■ 3 ■ 2 ■ 1

More level 4 and 5 patients are seen at the smaller sites, because of the service provision in those sites. More acutely ill patients are often directed to the regional or tertiary care sites to receive the required services (i.e., CT scan, surgical or critical care services); some using ambulance protocols.

CTAS Distribution by Site - FY 2022

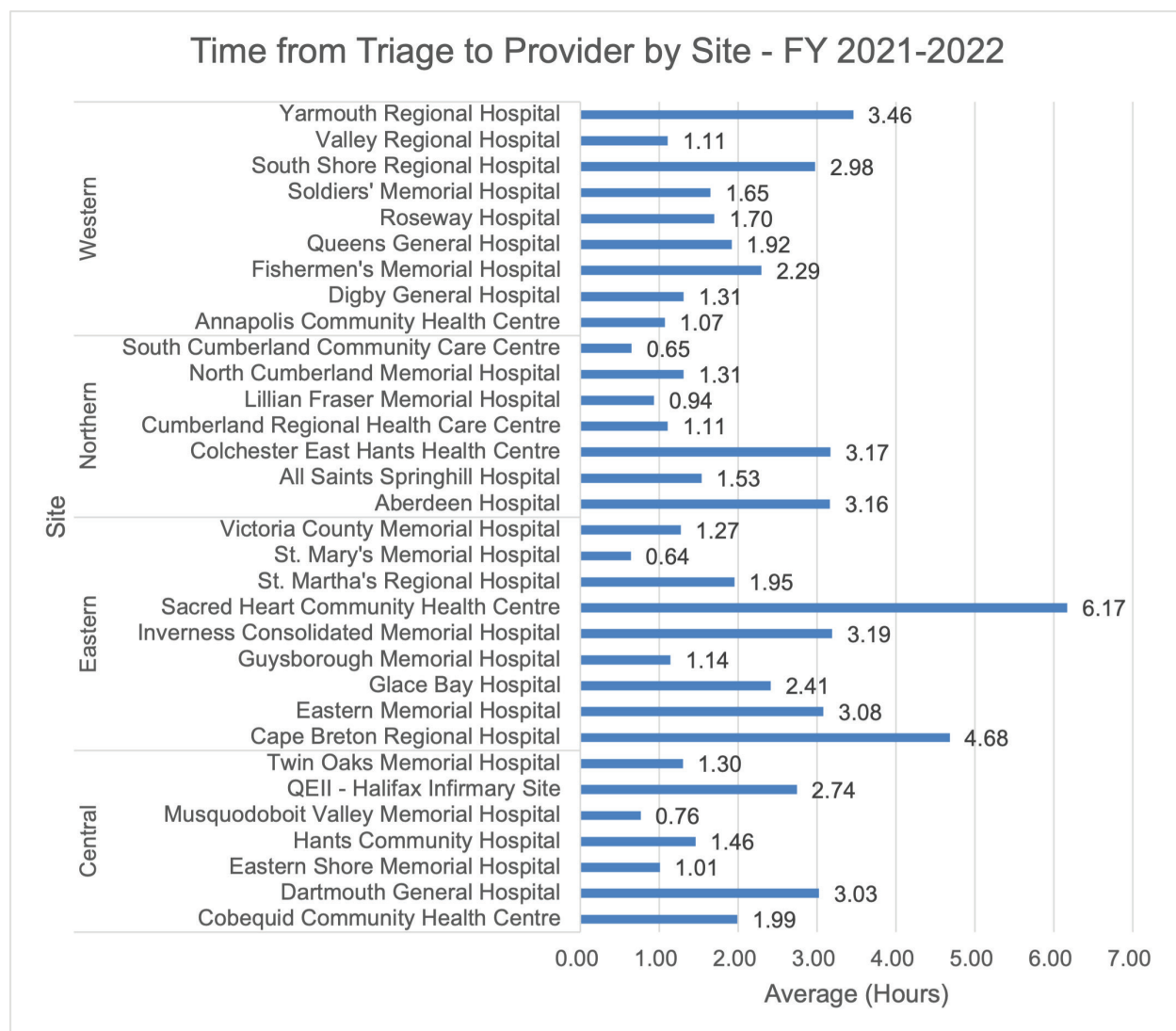


Wait Times

Triaging of patients at EDs is one of the key steps prior to initiation of provider care. To improve the overall wait time to provider, NSHA and IWK have identified the need to reduce the wait time for ED patients. Understanding the complexity of patients also helps determine staffing and whether the right resources are in place at the facility to manage the care.

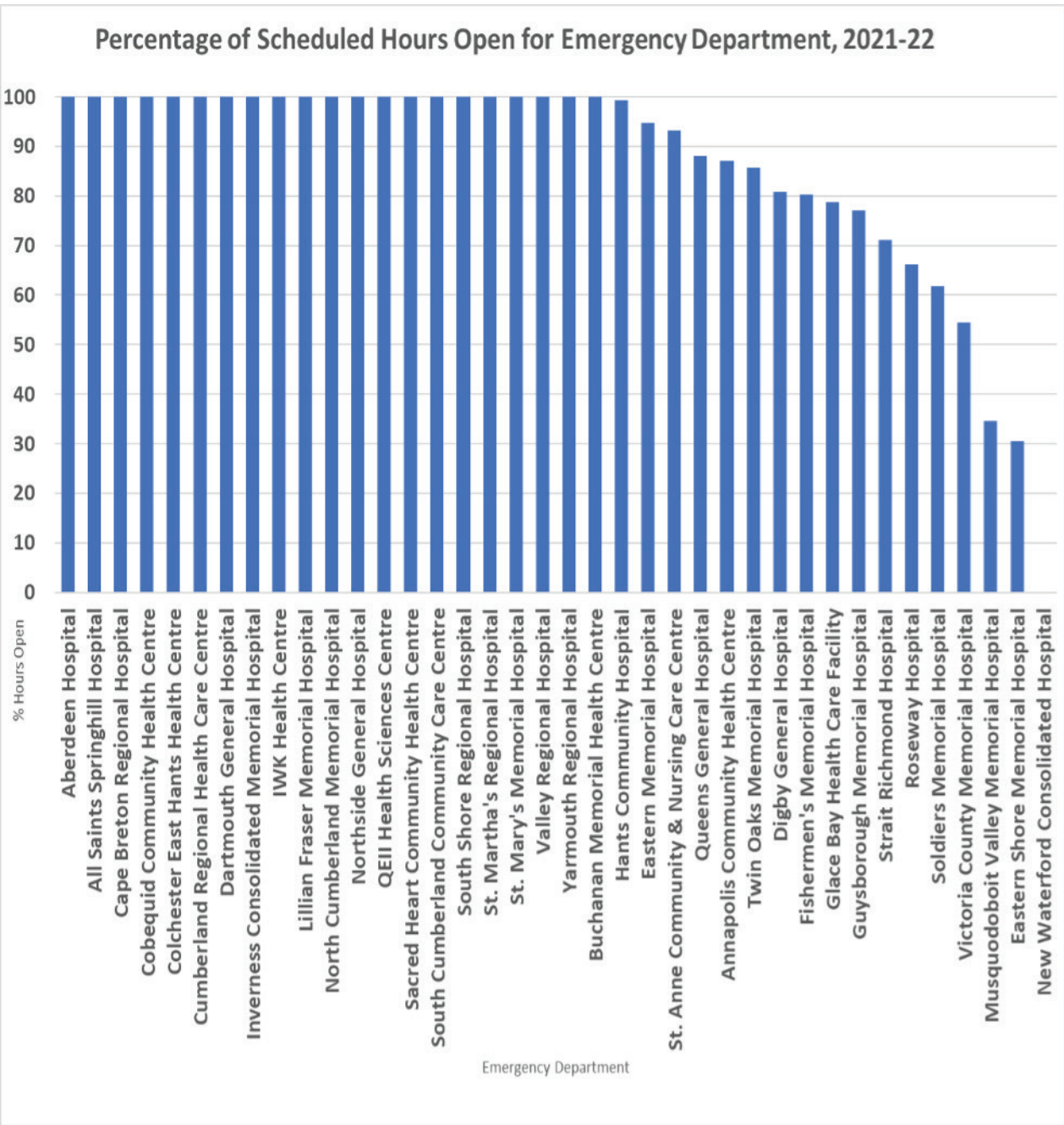
As EDs are faced with increased patient load and expectations the need to balance limited resources against the provision of timely patient care has led to multiple efforts to optimize processes at EDs. The wait time from triage to provider is one of the key metrics tracked at EDs as a marker of timeliness and quality patient care. Time from triage to provider is impacted by volumes and acuity.

Time to provider delays are impacted by space, overall ED length of stay (LOS) and admitted patient LOS. Several quality initiatives are underway to decrease time from triage to provider.



The average ED wait time from triage to provider for April 1, 2021 – March 31, 2022, was 2.07 hours. The longest average wait time was 6.17 hours at the Sacred Heart Community Health Centre, while the shortest was 0.64 hours at St. Mary's Regional hospital. **The above data combines all CTAS levels.

Emergency Department Closures



*New Waterford Consolidated remains closed since September 2019 for renovations and due to health human resources has not returned to service.

In the past year 89.0% of all ED scheduled hours were staffed, ready, and responsive. The majority of ED closures occurred in small volume Level 4 EDs, during which the closest Level 1, 2 and 3 EDs remained open. People in those geographies continued to have access to a level 1-3 ED within a 60 minute drive time for 97% of Nova Scotians.

Hours of Operation Changes

Level 2/regional hospitals are required to maintain a 24/7, year-round schedule, and every effort is made to maintain a 24/7, year-round schedule for community hospitals with EDs.

At the beginning of 2020, the province worked collaboratively with NSHA to plan and prepare for providing health service delivery during the COVID-19 pandemic. This included the consolidation of various emergency services, reassignment of emergency and critical care trained registered nurses, as well as model of care enhancements at various EDs to ensure Nova Scotians had access to emergency care when needed.

As of September 3, 2021, the ED and ICU at Cumberland Regional Health Care Centre (CRHCC) reduced ICU beds from five to three and closed two intermediate care unit beds. To minimize disruptions, NSHA redirected nursing staff to CRHCC from nearby community-based care at All Saints Springhill Hospital (ASSH). As of October 1, 2021, ASSH reduced its daily operating hours from 7am-7pm, to 8am-4pm, Mon-Fri, freeing up four full-time equivalent (FTE) registered nurses (RN) for redeployment to the CRHCC ED.

LEVEL 4 - COLLABORATIVE EMERGENCY CENTRES

Collaborative Emergency Centres (CECs) are one of the Level 4 care delivery models developed in 2011, to enhance daytime access to primary care (family practice team) in rural locations, and to maintain access points to the broader integrated network of emergency care at night. CECs were designed to provide access to primary healthcare with same-day or next-day appointments with expanded hours and a team approach to care.

Beginning in early 2020, to proactively respond to changing conditions and enhance the system's ability to respond during the COVID-19 pandemic, the roles of various CECs were modified to better align available resources with care needs.

Facility	Community	Scheduled hours of operation **
South Cumberland Community Care Centre	Parrsboro	Closed since March 2020 Now an Urgent Treatment Centre
All Saints Springhill Hospital	Springhill	Feb 28, 2022 7:00 am – 7:00 pm Mon – Fri 8:00 am – 4:00 pm Sat - Sun
North Cumberland Memorial Hospital	Pugwash	Closed Now an Urgent Treatment Centre
Lillian Fraser Memorial Hospital	Tatamagouche	Daily (7 days/week): Monday – Friday, 8:00 am – 3:00 pm Saturday – Sunday, 8:00 am – 7:00 pm

Annapolis Community Health Centre	Annapolis Royal	Daily (7 days/week): 8:00 am – 8:00 pm Mon-Fri 8:00 am – 3:00 pm Sat & Sun Jun – Aug 2021 8:00 am -3:00 pm Mon–Fri Aug 2021 – Mar 2022 7 days/week.
Musquodoboit Valley Memorial Hospital	Middle Musquodoboit	Daily (7 days/week): 8:00 am – 8:00 pm
Twin Oaks Memorial Hospital	Musquodoboit Harbour	24/7 year-round
New Waterford Consolidated Hospital	New Waterford	Closed since September 2019 for renovations.

Nova Scotia Response to Challenges

CHALLENGES

The three core challenges facing the Nova Scotia health care system are:

1. Recruitment and retention of healthcare professionals
2. Access to care
3. Outdated infrastructure, both physical and digital.

RESPONSE

The government has taken specific actions under *Action for Health* to address the core challenges and improve healthcare.

To address the recruitment and retention of health professionals, government initiatives include:

- Created the Office of Health Care Professionals Recruitment that is solely focused on attracting and keeping healthcare professionals in NS;
- Guaranteed all nurses who graduate from NS universities and Nova Scotia Community College (NSCC) over the next five years a job in the province;
- Supported a policy change by the College of Paramedics of NS to issue a new temporary license to graduating paramedics so they can start working in their field sooner, while they wait to write their licensing exam;
- Developed a nursing mentorship program to provide mentorship and supervision to nurses in early immersion, transition to practice and optimization of scope and professional development programs;
- Invested \$57 million to attract and retain more people to work in continuing care, including providing free tuition for more than 2,000 continuing care assistant students over the next two years;
- Increased wages of continuing care assistants in the publicly funded continuing care sector by up to 23%; and,
- Launched a recruitment campaign to attract healthcare professionals and created a team of navigators to connect healthcare professionals with the information they need to support their move to NS.

To address the challenges of access to care, government initiatives include:

- Supported an ED transition team pilot at the QEII Health Sciences Centre Halifax Infirmity site with the goal to improve patient flow and reduce the amount of time ambulances are waiting at the ED;
- Opened UTCs in North Sydney and Parrsboro so residents can access urgent healthcare treatment. The centres provide care to people with or without a primary care provider and can treat unexpected, non-life-threatening health concerns that require same or next day treatment;
- Opened a new primary healthcare centre in Middleton which is larger than the aging medical clinic it has replaced in the community and includes more exam and meeting rooms and new space for visiting health professionals and more space for training medical residents;
- Expanded the VirtualCareNS pilot so more people on the Need a Family Practice Registry can start receiving care online or by phone while they wait to be matched with a provider in their community;

- Supported a trial and partnership between IWK and Scotia Surgery until March 2023, to reduce surgery waitlists for children and youth by performing more less-complex surgeries at Scotia Surgery;
- Opened new recovery support centres in Dartmouth and New Glasgow, providing people seeking help with substance use or gambling with on-site withdrawal and recovery support;
- Opened the province's first mental health acute day hospital at the QEII Health Sciences Centre in Halifax, providing an additional level of care for those who can safely and successfully recover at home or in their community; and,
- A virtual physician support pilot project was launched in Eastern Zone using virtual care physicians to support two rural EDs. The pilot looks to reduce wait times for Nova Scotians visiting the ED with health concerns that can be treated virtually.

ENHANCING CARE IN RURAL COMMUNITIES

Initiatives underway to overcome some of the challenges faced in rural communities include advancing work on CECs, UTCs and virtual care. Capital investments are also being made to accommodate additional spaces for family medicine residency programs in rural communities.

A pilot project was launched in the Eastern zone using virtual physicians to support rural EDs. Virtual physician support is currently used on a trial basis at two sites in the zone - Buchanan Memorial Community Health Centre in Neil's Harbour and Eastern Memorial Hospital in Canso. It is used only when the number of physicians available in a community is limited for extended periods of time.

When virtual physician support is in use, patients coming to an ED between 8 p.m. and 8 a.m. are triaged by a nurse. For patients with less severe injury/illness, the nurse calls the EHS Medical Communications Centre Physician (MCCP) for a virtual consultation. For patients with more severe injury or illness, the local on-call physician comes to the ED. Emergencies and ambulances still go to the department.

The Rural Access to Mental Health initiative was also launched September 2021 at Cape Breton Regional Hospital to help people with urgent mental healthcare the option of receiving a virtual care assessment. Allowing assessments to be conducted virtually helps to reduce wait times, improves access and eliminates travel to other regions. The pilot was expanded to St. Martha's Regional Hospital in March 2022. The province has since announced further expansion of this pilot to other areas of the province.

VIRTUAL CARE

As part of the plan, *Action for Health*, work is underway to expand virtual care to strengthen the system and improve access to appropriate care. A multi-year virtual care strategy is being developed that will work to expand virtual care to include consultations with specialists, so patients don't have to travel for care while also integrating mental health services into the virtual care program for all Nova Scotians. Specific to EDs, virtual care will be used as another service option in EDs to lower wait times for patients without a primary care provider seeking non-urgent care and allowing walk-in clinics to offer virtual care.

ACCESS AND FLOW

The patient's time is the most valuable currency in healthcare. Patients and essential care partners expect to have access to the right service in the optimal setting when required. Initiatives are underway to improve access and flow at EDs in NS by strategically targeting the reduction of unnecessary waiting for care and the most appropriate alignment of care needs with care teams and environments. Access and flow improvements consider three critical components to improve organizational performance: People, Process and System.

DHW is currently working with NSHA and IWK to develop system-wide innovative solutions to improve surgical wait times and improve access and flow at EDs. Actions include expanding virtual care to Nova Scotians on the Need a Family Practice registry and opening the province's first mental health acute day hospital at the QEII Health Sciences Centre in Halifax.

IMMIGRATION

As part of the Action for Health Solution 1: Become a magnet for health providers, the Government of NS has identified a new office within DHW, the Office of Healthcare Professionals Recruitment (OHPR), which has a focus on recruitment and retention of healthcare providers. OHPR works with other DHW divisions, health authorities, system partners and regulatory bodies to coordinate efforts, to reduce barriers, and to identify retention strategies in the healthcare recruitment space.

A key focus area is working towards accelerating the integration of qualified internationally educated and trained health providers to enable them to get work sooner. Some of this work involves working with regulatory bodies to streamline licensure requirements and assisting with reducing barriers to licensure that internationally educated health professionals may face when looking to enter the health work force in NS.

Other initiatives, such as OHPR's \$2M community fund, will provide funding to community projects that enable health professionals' transition and integration into communities.

DHW has supported partners with key bridging initiatives such as the MOU with the Michener Institute that will enable expanded pathways for key health professions, for example, increasing opportunities for clinical associates to practice, expansion of pathways for LPNs to become RNs, opportunities for family practice nurses, a physician assistant pilot, and a temporary license for paramedics.

Next Steps

During this reporting year, government has supported, implemented, and invested in initiatives, programs and services that have directly and indirectly improved access to EDs across the province.

As we plan for the future we do so with the patient at the centre of our decision-making.

Action for Health is government's strategic plan to address the challenges in acute and primary care, long-term care, and addictions and mental health. Through this, it is our goal to improve population outcomes, provide safe access, and optimize citizens' experience, we continue to evaluate, adapt, and improve on emergency care and its interface with, and relationship to, primary health care.

Action for Health identifies six core solutions:

- Solution 1: Become a magnet for health providers
- Solution 2: Provide the care Nova Scotians need and deserve
- Solution 3: Cultivate excellence on the frontlines
- Solution 4: Build in accountability at every level
- Solution 5: Be responsive and resilient; and
- Solution 6: Address the factors affecting health and well-being

These solutions and the actions to accomplish each will help to reshape and revitalize our healthcare system for patients and health professionals.

Some examples include:

- Accelerating the integration of qualified internationally educated and trained health providers to enable them to get work sooner. Some of this work involves working with regulatory bodies to streamline licensure requirements and assisting with reducing barriers to licensure that internationally educated health professionals may face when looking to enter the health work force in NS;
- Other initiatives, such as the Office of Health Professionals Recruitment's \$2-million community fund, will provide funding to community projects that enable health professionals' transition and integration into communities;
- Supporting partners with key bridging initiatives such as the MOU with the Michener Institute that will expand pathways for key health professions, for example, increasing opportunities for clinical associates to practice, expansion of pathways for LPNs to become RNs, opportunities for family practice nurses, a physician assistant pilot, and a temporary license for paramedics;
- Initiatives that improve access and flow at EDs across our province by strategically targeting the reduction of unnecessary waiting for care and ensuring that the right care is provided by the right provider;
- Expanding VirtualCareNS to every Nova Scotians on the Need a Family Practice Registry;
- Putting in place innovative solutions to reduce surgical wait times, provide safe, quality care and achieve benchmarks;
- Engage with, learn from, and collaborate with communities and support organizations to improve access to culturally appropriate services by working with communities including First Nations, African Nova Scotian, Acadian, and Francophone communities, to ensure their language interpretation needs are met;

- Improving diversity and equity throughout the system for First Nations people, African Nova Scotians, racialized communities, immigrants, people with disabilities, 2SLGBTIQ+, and other equity-seeking populations. Our plan highlights many – but not all – of the actions that will be taken over the next four years to ensure sustained change and the momentum needed to carry us even further;
- Improving coordination and collaboration across the health system to address and avoid gaps in service by establishing new ways of working with Tajiƙeimik to support Mi'kmaw led health priorities and improved health outcomes for Mi'kmaq and other Indigenous groups and establishing a Patient Navigation Program to support Indigenous patients, and equity-seeking and racialized patients, navigating the health system; and,
- Being accountable and transparent about our challenges and successes. That is why we have taken steps to develop the Action for Health Reporting Dashboard that gives Nova Scotians and our health system access to real data, that tells the story of our health system.

Metrics

As part of the updated ED Accountability report the metrics that have been presented in this year's report have been established as key performance indicators (KPI) and will be measured on an annual basis going forward. Ongoing reporting will include an established set of goals for these KPI's and will be compared on a year over year basis. This comparison will allow a multi-year approach that looks to identify trends and will include a discussion and rationale on any outliers. The following metrics will be compared with previous years: LWBS, percentage hours open, wait times and ambulance offload times.

ED Hours Closed/Open (by Zone, Facility and Facility Type), 2021–22

Zone	Facility type	Facility Name	Hours of Closure (2020/21)			Hours Open 2021/22	% Open 2021/22
			<i>Temporary</i>	<i>Scheduled</i>	<i>Total</i>		
1	Regional	South Shore Regional Hospital	0.0	0.0	14,539.9	8,760.0	100%
	Regional	Yarmouth Regional Hospital	0.0	0.0		8,760.0	100%
	Regional	Valley Regional Hospital	0.0	0.0		8,760.0	100%
	Community	Digby General Hospital	1,676.5	0.0		7,083.5	81%
	Community	Fishermen's Memorial Hospital	1,077.3	3,285.0		4,397.7	80%
	Community	Roseway Hospital	2,966.0	0.0		5,794.0	66%
	Community	Soldiers Memorial Hospital	3,354.0	0.0		5,406.0	62%
	Community	Queens General Hospital	1,094.0	0.0		7,711.0	88%
	CEC	Annapolis Community Health Centre	1,132.0	0.0		7,628.0	87%

Total 11,254.9 3,285.0 64,300.2 85%

2	Regional	Colchester East Hants Health Centre	0.0	0.0	18,045.0	8,760.0	100%
	Regional	Cumberland Regional Health Care Centre	0.0	0.0		8,760.0	100%
	Regional	Aberdeen Hospital	0.0	0.0		8,760.0	100%
	CEC	All Saints Springhill Hospital	0.0	6,363.0		2,397.0	100%
	CEC	North Cumberland Memorial Hospital	0.0	0.0		8,760.0	100%
	CEC	South Cumberland Community Care Centre	0.0	6,250.0		2,510.0	100%
	CEC	Lillian Fraser Memorial Hospital	0.0	5,432.0		3,328.0	100%

Total 0.0 18,045.0 43,275.0 100%

3	Regional	Cape Breton Regional Hospital	0.0	0.0	30,067.8	8,760.0	100%
	Regional	St. Martha's Regional Hospital	0.0	0.0		8,760.0	100%
	Community	Eastern Memorial Hospital	459.0	0.0		8,301.0	95%
	Community	Guysborough Memorial Hospital	2,016.5	0.0		6,743.5	77%
	Community	St. Anne Community & Nursing Care Centre	589.0	0.0		8,171.0	93%
	Community	St. Mary's Memorial Hospital	0.0	0.0		8,760.0	100%
	Community	Strait Richmond Hospital	2,528.5	0.0		6,231.5	71%
	Community	Buchanan Memorial Health Centre	3.5	0.0		8,756.5	100%
	Community	Glace Bay Health Care Facility	586.0	5,993.0		2,181.0	79%
	Community	Inverness Consolidated Memorial Hospital	0.0	0.0		8,760.0	100%
	Community	Victoria County Memorial Hospital	3,988.3	0.0		4,771.8	54%
	Community	Northside General Hospital	0.0	5,144.0		3,616.0	100%
	Community	Sacred Heart Community Health Centre	0.0	0.0		8,760.0	100%
	CEC	New Waterford Consolidated Hospital	0.0	8,760.0		0.0	0%

Total 10,170.8 19,897.0 92,572.3 90%

4	Tertiary	QEII Health Sciences Centre	0.0	0.0	14,652.3	8,760.0	100%
	Regional	Dartmouth General Hospital	0.0	0.0		8,760.0	100%
	Community	Cobequid Community Health Centre	0.0	0.0		8,760.0	100%
	Community	Eastern Shore Memorial Hospital	6,095.0	0.0		2,665.0	30%
	Community	Hants Community Hospital	59.8	0.0		8,700.3	99%
	CEC	Musquodoboit Valley Memorial Hospital	2,864.0	4,380.0		1,516.0	35%
	CEC	Twin Oaks Memorial Hospital	1,253.6	0.0		7,506.4	86%

Total 10,272.3 4,380.0 46,667.7 82%

IWK	Tertiary	QEII Health Sciences Centre	0.0	0.0		8,760.0	100%
	TOTAL		31,697.9	45,607.0	77,304.9	255,575.1	89%

Temporary ED Closure Hours and Public Consultations by Zone

Where an ED of a health authority has experienced an ongoing pattern closure of the ED in the last fiscal year, the health authority shall consult with the community served by the ED as part of the consultations conducted in accordance with the next public engagement plan 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, 2021 – March 31, 2022. Some meeting dates were delayed from 21-22 to 22-23 due to unforeseen circumstances.

WESTERN ZONE (1)

Facility	Hours of temporary ED closures
Annapolis Community Health Centre	1,132.0 hours
Digby General Hospital	1,676.5 hours
Fishermen's Memorial Hospital	1,077.3 hours
Roseway Hospital	2,966.0 hours
Soldiers Memorial Hospital	3,354.0 hours
Queens General Hospital	1,049.0
Total	11,254.9 hours

Public Consultation: Annapolis Community Health Centre - CEC

Date	Chair/Speakers	Attendance
May 16, 2022*	Site Leader, ED Medical Lead, Zone Vice President, Executive Medical Director, Primary Health Care Director, Emergency Services Director	18
Summary of discussion: - Community partner conversation with update on ACHC programs and services, improving access to primary health care, virtual care and recruitment of doctors / nurses and COVID-19. - ED dashboard data discussed: closure frequency, causes, impact, and patient demo data.		
Action (specific to EDs): - Look at utilizing other health professionals, such as Nurse Practitioners, to work with physicians to provide emergency services. - Work to identify local students with an interest in pursuing a career in health care, promote and celebrate bursary / sponsorship opportunities, by the Annapolis West Health Foundation. - Enhanced promotion of virtual care, to reduce burden on emergency care. Must address the challenge in rural communities for those without access to internet / social media.		

Public Consultation: Digby General Hospital

Date	Chair/Speakers	Attendance
June 22, 2022*	Mayor, Hospital Site Leader, Zone Vice President, Executive Medical Director, Primary Health Care Director, Emergency Services Director	9
Summary of discussion: - Community partner conversation took place, including an update on hospital-based activities, improving access to care, virtual care options, recruitment of doctors and nurses. - ED dashboard data discussed, including closure frequency, causes, impact and demo data.		
Action (specific to EDs): Value of Community Navigator initiative noted for recruitment / retention activities. Update on navigator hire for Digby. Progress made on local housing options to help with recruitment.		

Public Consultation: Fisherman's Memorial Hospital, Lunenburg

Date	Chair/Speakers	Attendance
May 26, 2022*	Site Leader, ED Medical Lead, Zone Vice President, Executive Medical Director, Primary Health Care Manager, Emergency Services Director	14
Summary of discussion: - Update on programs and services, Palliative Care Unit and Veteran's Unit, improving access on primary health care, virtual care options and recruitment of doctors / nurses and COVID-19. - ED dashboard data discussed, including closure frequency, causes, impact, and demo data.		
Action (specific to EDs): - Priorities around recruitment and retention, specifically physicians and nurses was discussed. - Enhanced promotion of other care options, such as virtual care, to reduce burden on ED.		

Public Consultation: Roseway Hospital, Shelburne

Date	Chair/Speakers	Attendance
June 6, 2022*	Warden, Hospital Site Leader, Zone Vice President, Executive Medical Director, Primary Health Care Director, Emergency Services Director	16
Summary of discussion: - Community partner conversation on improving access to care, virtual care, recruitment activity, Need a Family Practice registry, and COVID-19. ED dashboard data discussed, including closure frequency, causes and impact, and patient demo data. - Better understanding of community needs identified, as local industries (ex. Shipbuilding) have workplace safety plans tied to local ED.		
Action (specific to EDs): - Utilize other health professionals, i.e., Advance Care Paramedics, to provide care in ED. - Maximize scope of other health care providers, such as pharmacists. - Enhanced promotion of other care options, such as virtual care, to reduce burden on ED. - Explore how incentives for ED physician shifts might be offered earlier in scheduling process. - Make it as easy as possible for international medical graduates to practice.		

Public Consultation: Queens General Hospital, Liverpool

Date	Chair/Speakers	Attendance
June 8, 2022*	Hospital Site Leader, ED Medical Lead, Zone Vice President, Executive Medical Director, Primary Health Care Director, Emergency Services Director	17
Summary of discussion: - Presentation to community partners on Hospital programs and services, primary health care, virtual care options, recruitment activity, Need a Family Practice Registry, and COVID-19. - ED dashboard data presented, including closure frequency, causes, impact, and demo data. - Requirements to consult with community as mandated by ED Accountability Act. - Review of how ED staffing and how scheduling is done. - Need identified to improve transportation for people who must travel for health care services.		
Action (specific to EDs): - Improve physician remuneration and incentives to encourage physicians to accept ED shifts. - Look at enhanced access to primary health care and technologies to reduce need for ED visits. - Incorporate other members of health care team by expanding scope of other professionals. - Adapt recruitment practices to reflect how physicians want to practice - How can we make it easier for International Medical Graduates to practice in NS.		

Public Consultation: Soldiers Memorial Hospital, Middleton

Date	Chair/Speakers	Attendance
May 17, 2022*	Hospital Site Leader, ED Medical Lead, Zone Vice President, Executive Medical Director, Primary Health Care Director, Emergency Services Director	25
Summary of discussion: - Community partner conversation, including update on Hospital programs and services, improving access to primary health care, virtual care options and recruitment and COVID-19. - ED dashboard data discussed, including closure frequency, causes, impact and demo data. - Noted large percentage of people, including seniors in local area without a family physician. Some physicians may not want to work in smaller, rural sites where teams are smaller.		
Action (specific to EDs): - Continue to utilize and explore maximizing scope of other health professionals - Continue to look at making physician remuneration more attractive and how incentives, such as locum incentive program are offered to encourage physicians to accept ED shifts. - Improve access to primary health care and new technologies to reduce need for ED visits. - Look at areas where recruitment has been successful, such as Clare region.		

NORTHERN ZONE (2)

Facility	Hours of temporary ED closures
Aberdeen Hospital	0.0 hours
Colchester East Hants Health Centre	0.0 hours
Cumberland Regional Health Care Centre	0.0 hours
Total	0.0 hours

No public consultations were held as there were no temporary ED closures in the Northern Zone.

EASTERN ZONE (3)

Facility	Hours of temporary ED closures
Eastern Memorial Hospital	459.0 hours
Glace Bay Health Care Facility	586.0 hours
Guysborough Memorial Hospital	2,016.5 hours
St. Anne Community & Nursing Care Centre	589.0 hours
Strait Richmond Hospital	2,528.5 hours
Victoria County Memorial Hospital	3,988.3 hours
Buchanan Memorial Hospital	3.5 hours
Total	10,170.8 hours

Public Consultation: North Sydney Urgent Treatment Center

Date	Chair/Speakers	Attendance
April 12,2021	Patient Family Advisors Urgent Treatment Center (UTC) Working group	16
Summary of discussion: • Ongoing engagement in all working group meetings / decisions • Providing feedback reflecting patient and public voice and perspective		
Action (specific to EDs): • Developing an UTC for the North Sydney catchment area • Project charter and TOR developed • Ongoing work for developing / operationalizing UTC model • Vision for the community		
Date	Chair/Speakers	Attendance
October 27, 2021	Director of Integrated Health, Eastern Zone Emergency Program of Care	8
Summary of discussion: • Information briefing on UTC model to open November 1, 2021.		
Action (specific to EDs): • Provided relevant resources for constituents and members of the community, including Urgent Treatment Centre email for the public to send questions or concerns		
Date	Chair/Speakers	Attendance
November 1, 2021 (launch update)	Director of Integrated Health, Eastern Zone Emergency Program of Care	8
November 7, 2021 (one month update)		
February 7, 2022 (three month update)		
Summary of discussion: • One week, one month and three month update.		
Action (specific to EDs): • Updates included stats on number of appointments booked, patient presentations, patient feedback, reinforced where to send comments and questions. • Three month update included update to hours of operation (expanded).		

Date	Chair/Speakers	Attendance
October 28, 2021	Director of Integrated Health, Eastern Zone Emergency Program of Care	50
Summary of discussion: - Public education session to provide overview of UTC for community. Included an opportunity for attendees to ask questions, with a place to direct follow up comments/questions via email. - In addition, UTC handouts were shared/posted online. - The session was livestreamed/posted online.		
Action (specific to EDs): N/A		

Public Consultation: Canso Area Stakeholder Working Group

Date	Chair/Speakers	Attendance
December 6, 2021	Director Integrated Health, Eastern Zone, Emergency Program of Care, Regional Medical Director	13
Summary of discussion: Regular check-ins with working group, included overview of staffing situation at facility, recruitment efforts, with an opportunity for members of the community to ask question, share concerns and seek clarity.		
Action (specific to EDs): Ongoing updates through regular meetings, co-lead by member of community and Nova Scotia Health.		
Date	Chair/Speakers	Attendance
February 1, 2022	Director Integrated Health, Eastern Zone, Emergency Program of Care, Regional Medical Director	6
Summary of discussion: - Update following three months of operations. - Stats for the week, typical presentations, general overview of first week - Attached handouts to share with constituents - UTC overview and know where to go for care.		
Action (specific to EDs): Updates with any changes to service delivery model or hours of operation		

Date	Chair/Speakers	Attendance
April 14, 2022*	Director Integrated Health, Eastern Zone, Emergency Program of Care, Regional Medical Director	8
Summary of discussion: • Update following 5 months of operations • Stats, satisfaction survey results • Attached UTC mailer that has been distributed to all residences in the North Sydney and area.		
Action (specific to EDs): • Updates with any changes to service delivery model or hours of operation		

Public Consultation: Victoria County Council Meeting

Date	Chair/Speakers	Attendance
October 4, 2021	Warden and Councilors of Victoria County, VP, Operations, Eastern Zone Medical Executive Director, Eastern Zone Executive Director, Operations, Eastern Zone Director, Integrated Health Services – Rural Sites	16
Summary of discussion: • Updates to warden and councilors on challenges faced, COVID-19 impacts on health care. • Update for Victoria and Buchanan Memorial Community Health Centre including staff & physician vacancies, recruitment, ED closures and point of care testing at both sites.		
Action (specific to EDs): • Continue recruitment efforts • Look at care models that can relieve pressures on physicians and staff • Continue working on alternative models/approaches at other sites that will relieve some pressure at VCMH ED • Committed to return to council to provide an update and to have community meetings once COVID-19 restrictions eased		

CENTRAL ZONE (4)

Facility	Hours of temporary ED closures
Eastern Shore Memorial Hospital	6,095.0 hours
Musquodoboit Valley Memorial Hospital	2,864.0 hours
Twin Oaks Memorial Hospital	1,253.6 hours
Hants Community Hospital	59.8 hours
Total	10,272.3 hours

Public Consultation: Musquodoboit Valley Memorial Hospital

Date	Chair/Speakers	Attendance
March 22, 2022	Health Services Manager, Health Services Manager, Primary Health Care, Well-Being Hubs Coordinator	11
Summary of discussion: • Overview of Musquodoboit Valley Memorial Hospital site and how collaborative ED works as well as temporary closure data from 2020-2021. • Discussion of temporary closures due to physician shortages including data review and efforts towards physician recruitment. Announcement of new physician joining the practice. • Update on building improvements at Braeside LTC facility. • Information provided on local customized CCA program. • Presentation on Wellbeing Hubs community work. • Primary Health Care update highlighting practitioners in the family practice, need a family practice registry and virtual community health team sessions.		
Action (specific to EDs): • In person community meeting booked for October 2022 at the Bicentennial theatre. • A meeting took place with the area MLA, the Health Services Manager, and the Director on March 21, 2022.		

Public Consultation: Twin Oaks Memorial Hospital

Date	Chair/Speakers	Attendance
May 31, 2022*	Network Lead and MHFP MD, Site Lead and HSM, HSM District of Family practice and PHC and MLA Eastern Shore	5
Summary of discussion: • Discussion of the purpose of the ED community closure meeting. • Review of the types of ED closures, reasons for the closures, and mitigation strategies used. • Review of data indicating the amount of time closures have occurred within last year. • Review of CTAS system, locations, and additional care services available to the community. • Discussion of the RN-prescribing program being introduced to the Twin Oaks Hospital. • Discussion about the Need a Family Practice Registry; family physician recruitment; including Musquodoboit Harbour; virtual wellness and self-management programming. • Discussion on rural incentive program; Alzheimer's groups; mental health access; food insecurity; seniors housing, clean water; support groups and Well-Being Hubs.		
ACTION (specific to EDs): • Continued staffing mitigation to reduce closures and associated impact to community. • An ongoing relationship exists between the area MLA and the site regarding closures and the needs of the community. An introductory meeting took place on September 10, 2021 with the area MLA, the Health Services Manager, and the Director. Outside of meetings, there are ongoing conversations and phone calls between leadership and the MLA.		

Public Consultation: Hants Community Hospital

Date	Chair/Speakers	Attendance
June 22, 2022*	Director of Community, Health Services Manager, ED Director of Emergency, Chief of Staff, ED, VP Operations	31
Summary of discussion: • Number of unfilled physician shifts, with ongoing work and recruitment to fill vacant shifts. • Provided a presentation with closure data, daily volumes, current situation, mitigation plans, physician recruitment plan, what to expect during closures, and alternate health care options. • List of alternate care options will be developed to those who present to ED during closure. • Visible signage to indicate closures. Staff/Security will redirect public and offer list of options. • Community Health Board Coordinator offers to support communication/email notice of closures • PSA/closure announcements will be sent to local radio stations for Valley region.		
ACTION (specific to EDs): • Meeting with Senior Communications Advisor to Enhance communications plan with feedback from community members and Community Health Board Coordinator. • Enhance existing Communications plan with feedback from community Director. • Work ongoing with recruitment and retention to ensure that RN vacancies are filled.		

Public Consultation: Eastern Shore Memorial Hospital

Date	Chair/Speakers	Attendance
October 6, 2021	Health Services Manager, Manager Department of Family Practice & Chronic Disease Management	75
Summary of discussion: • Overview of ED, number of patients seen on average and average CTAS scores. • Reviewed temporary closure data YTD, primarily due to physician shortage • Discussed notification to community (schedule, large road sign, where to find the info online) • Review of barrier to recruitment (funding models APP vs FFS) and shared responsibility with community (i.e., housing, transportation needs, community development opportunities)		
Central Zone Action (specific to Emergency Departments): • Primary Health Care committed to getting the NHS group together within 2 weeks to meet and discuss possible ED models that could be appropriate for Sheet Harbour.		

*Meeting was delayed from 21-22 to 22-23 due to unforeseen circumstances.

Appendix A: Temporary ED closures by date and hours closed

Reporting period: April 1, 2021 – March 31, 2022

ZONE 1 (WESTERN)

Annapolis Community Health Centre	Hours Closed
April	
2021-04-09	7.0
2021-04-13	12.0
2021-04-15	7.0
2021-04-20	7.0
2021-04-27	7.0
2021-04-29	7.0
2021-04-30	7.0
May	
2021-05-01	12.0
2021-05-02	12.0
2021-05-03	7.0
2021-05-06	7.0
2021-05-08	12.0
2021-05-09	12.0
2021-05-10	7.0
2021-05-11	7.0
2021-05-13	7.0
2021-05-15	12.0
2021-05-16	12.0
2021-05-17	7.0
2021-05-21	7.0
2021-05-22	12.0
2021-05-23	12.0
2021-05-24	7.0
2021-05-25	7.0

2021-05-29	12.0
2021-05-30	12.0
June	
2021-06-01	7.0
2021-06-03	7.0
2021-06-04	7.0
2021-06-05	12.0
2021-06-06	12.0
2021-06-07	7.0
2021-06-08	7.0
2021-06-10	7.0
2021-06-11	7.0
2021-06-12	12.0
2021-06-13	12.0
2021-06-14	7.0
2021-06-15	7.0
2021-06-17	7.0
2021-06-18	7.0
2021-06-19	12.0
2021-06-20	12.0
2021-06-21	7.0
2021-06-22	7.0
2021-06-23	7.0
2021-06-24	7.0
2021-06-25	7.0
2021-06-26	12.0
2021-06-27	12.0
2021-06-28	7.0
2021-06-29	7.0
July	
2021-07-01	12.0
2021-07-02	7.0
2021-07-03	12.0
2021-07-04	12.0

2021-07-05	7.0	November	
2021-07-06	7.0	2021-11-10	13.0
2021-07-08	7.0	2021-11-26	13.0
2021-07-09	7.0	December	
2021-07-10	12.0	2021-12-14	4.0
2021-07-11	12.0	2021-12-22	24.0
2021-07-12	7.0	2021-12-23	14.0
2021-07-13	12.0	2021-12-24	24.0
2021-07-15	7.0	2021-12-25	12.0
2021-07-16	7.0	2021-12-26	14.0
2021-07-17	12.0	January	
2021-07-18	12.0	2022-01-02	12.0
2021-07-19	7.0	2022-01-15	12.0
2021-07-20	7.0	2022-01-17	12.0
2021-07-22	7.0	2022-01-25	16.0
2021-07-23	24.0	2022-01-31	12.0
2021-07-24	7.0	February	
2021-07-25	12.0	2022-02-01	14.0
2021-07-26	7.0	2022-02-02	14.0
2021-07-27	7.0	2022-02-03	12.0
2021-07-28	4.0	2022-02-06	12.0
2021-07-29	7.0	2022-02-07	12.0
2021-07-30	7.0	2022-02-08	12.0
2021-07-31	12.0	2022-02-13	12.0
August		2022-02-14	12.0
2021-08-01	12.0	2022-02-23	24.0
2021-08-29	5.0	2022-02-24	12.0
September		March	
2021-09-02	5.0	2022-03-14	4.5
2021-09-17	24.0	2022-03-15	4.0
2021-09-18	8.0	2022-03-21	6.5
October		Annapolis Community Health Centre Total	
2021-10-13	14.0	1,132.0	
2021-10-23	6.0		
2021-10-24	6.0		

Digby General Hospital	Hours Closed
April	
2021-04-06	13.0
July	
2021-07-02	24.0
2021-07-03	14.0
2021-07-10	15.0
August	
2021-08-18	5.0
2021-08-22	24.0
2021-08-23	2.0
2021-08-27	14.0
2021-08-31	24.0
September	
2021-09-01	16.0
2021-09-03	14.0
2021-09-09	14.0
2021-09-10	24.0
2021-09-11	2.0
2021-09-12	24.0
2021-09-13	14.0
2021-09-14	24.0
2021-09-15	2.0
2021-09-17	14.0
2021-09-18	14.0
2021-09-20	24.0
2021-09-21	14.0
2021-09-23	14.0
2021-09-24	14.0
2021-09-25	14.0
2021-09-26	14.0
October	
2021-10-01	24.0
2021-10-02	16.0
2021-10-03	12.0

2021-10-04	24.0
2021-10-05	2.0
2021-10-06	14.0
2021-10-09	14.0
2021-10-10	14.0
2021-10-11	14.0
2021-10-13	14.0
2021-10-18	12.0
2021-10-19	14.0
2021-10-20	14.0
2021-10-24	14.0
2021-10-25	14.0
2021-10-27	12.0
2021-10-28	14.0
2021-10-29	14.0
2021-10-31	12.0
November	
2021-11-05	14.0
2021-11-06	24.0
2021-11-07	3.0
2021-11-14	10.0
2021-11-30	14.0
December	
2021-12-01	14.0
2021-12-02	14.0
2021-12-04	14.0
2021-12-05	14.0
2021-12-06	14.0
2021-12-07	14.0
2021-12-08	24.0
2021-12-09	2.0
2021-12-10	24.0
2021-12-11	16.0
2021-12-12	14.0
2021-12-13	14.0

2021-12-14	14.0
2021-12-15	14.0
2021-12-16	14.0
2021-12-17	14.0
2021-12-18	14.0
2021-12-19	14.0
2021-12-20	14.0
2021-12-21	14.0
2021-12-22	14.0
2021-12-23	24.0
2021-12-24	24.0
2021-12-25	14.0
2021-12-26	24.0
2021-12-27	9.0
2021-12-29	14.0
2021-12-30	14.0
January	
2022-01-04	14.0
2022-01-05	14.0
2022-01-06	20.0
2022-01-07	14.0
2022-01-08	14.0
2022-01-09	13.0
2022-01-10	10.0
2022-01-12	24.0
2022-01-13	2.0
2022-01-16	14.0
2022-01-26	14.0
2022-01-28	10.0
2022-01-29	14.0
2022-01-30	14.0
February	
2022-02-04	24.0
2022-02-05	2.0
2022-02-06	24.0

2022-02-07	14.0
2022-02-08	14.0
2022-02-09	14.0
2022-02-10	14.0
2022-02-11	14.0
2022-02-12	24.0
2022-02-13	14.0
2022-02-14	14.0
2022-02-17	14.0
2022-02-18	14.0
2022-02-19	14.0
2022-02-24	24.0
2022-02-25	2.0
March	
2022-03-01	10.0
2022-03-02	14.0
2022-03-07	24.0
2022-03-08	14.0
2022-03-13	4.5
2022-03-25	14.0
2022-03-27	14.0
Digby General Hospital Total	1,676.5

Fishermen's Memorial Hospital	Hours Closed	2021-07-19	8.5
April		2021-07-22	8.5
2021-04-02	8.5	2021-07-23	8.5
2021-04-03	8.5	2021-07-24	8.5
2021-04-04	8.5	2021-07-25	8.5
2021-04-18	4.5	2021-07-26	8.5
May		2021-07-27	8.5
2021-05-09	8.5	2021-07-28	8.5
2021-05-15	4.5	2021-07-29	8.5
2021-05-19	6.8	2021-07-30	8.5
2021-05-24	8.5	2021-07-31	9.5
2021-05-29	8.5	August	
June		2021-08-01	9.5
2021-06-04	8.5	2021-08-02	9.5
2021-06-05	15.0	2021-08-03	9.5
2021-06-12	8.5	2021-08-04	9.5
2021-06-13	6.0	2021-08-07	9.5
2021-06-18	8.5	2021-08-08	9.5
2021-06-19	4.5	2021-08-09	9.5
2021-06-20	6.0	2021-08-10	9.5
2021-06-21	8.5	2021-08-11	9.5
2021-06-30	8.5	2021-08-12	9.5
July		2021-08-13	9.5
2021-07-03	8.5	2021-08-14	9.5
2021-07-04	15.0	2021-08-15	9.5
2021-07-07	2.5	2021-08-16	9.5
2021-07-10	9.5	2021-08-17	9.5
2021-07-12	9.5	2021-08-18	9.5
2021-07-13	8.5	2021-08-19	9.5
2021-07-14	8.5	2021-08-20	9.5
2021-07-15	8.5	2021-08-21	9.5
2021-07-16	8.5	2021-08-22	9.5
2021-07-17	8.5	2021-08-23	9.5
2021-07-18	15.0	2021-08-24	9.5
		2021-08-25	9.5

2021-08-27	9.5	2021-10-25	15.0
2021-08-28	9.5	2021-10-30	9.5
2021-08-29	9.5	2021-10-31	8.0
2021-08-30	9.5	November	
2021-08-31	9.5	2021-11-01	9.5
September		2021-11-07	9.5
2021-09-02	9.5	2021-11-08	9.5
2021-09-03	9.5	2021-11-10	4.0
2021-09-04	9.5	2021-11-15	9.5
2021-09-05	9.5	2021-11-16	9.5
2021-09-08	9.5	2021-11-17	9.5
2021-09-09	9.5	2021-11-19	9.5
2021-09-10	9.5	2021-11-22	9.5
2021-09-12	9.5	December	
2021-09-13	9.5	2021-12-24	9.5
2021-09-14	9.5	2021-12-25	15.0
2021-09-16	9.5	2021-12-26	9.5
2021-09-17	9.5	2021-12-31	9.5
2021-09-18	9.5	January	
2021-09-19	9.5	2022-01-21	5.0
2021-09-20	9.5	2022-01-26	11.5
2021-09-23	9.5	2022-01-27	15.0
2021-09-24	9.5	February	
2021-09-25	15.0	2022-02-10	5.0
2021-09-27	9.5	March	
October		2022-03-31	9.5
2021-10-01	9.5	Fishermen's Memorial Hospital Total	
2021-10-02	9.5	1,077.3	
2021-10-06	9.5		
2021-10-10	9.5		
2021-10-11	9.5		
2021-10-12	9.5		
2021-10-17	9.5		
2021-10-21	9.5		
2021-10-23	9.5		

Queens General Hospital	Hours Closed	November	
July		2021-11-06	24.0
2021-07-12	24.0	2021-11-07	1.5
2021-07-13	19.0	2021-11-18	15.5
2021-07-15	15.0	2021-11-20	24.0
2021-07-17	24.0	2021-11-21	1.5
2021-07-18	1.0	2021-11-29	15.5
2021-07-20	15.0	December	
August		2021-12-02	7.5
2021-08-16	24.0	2021-12-07	15.5
2021-08-17	25.0	2021-12-09	24.0
2021-08-18	15.0	2021-12-10	11.5
2021-08-19	24.0	2021-12-12	13.5
2021-08-22	24.0	2021-12-20	15.5
2021-08-23	13.0	2021-12-21	15.5
September		2021-12-22	15.5
2021-09-01	15.0	2021-12-24	24.0
2021-09-03	15.0	2021-12-25	15.5
2021-09-08	24.0	2021-12-26	15.5
2021-09-09	1.0	2021-12-29	24.0
2021-09-11	15.0	2021-12-30	1.5
2021-09-12	15.0	2021-12-31	15.5
2021-09-29	15.0	January	
October		2022-01-02	24.0
2021-10-02	24.0	2022-01-03	2.0
2021-10-03	1.0	2022-01-09	15.5
2021-10-05	11.0	2022-01-16	11.5
2021-10-06	24.0	2022-01-19	15.5
2021-10-07	1.0	2022-01-21	24.0
2021-10-09	24.0	2022-01-22	1.5
2021-10-10	1.0	2022-01-23	11.5
2021-10-20	15.0	2022-01-28	13.5
2021-10-22	15.0	February	
2021-10-25	15.5	2022-02-05	13.5
2021-10-30	15.5	2022-02-13	15.5

2022-02-22	24.0
2022-02-23	1.5
2022-02-24	13.5
March	
2022-03-03	24.0
2022-03-04	1.5
2022-03-06	24.0
2022-03-07	1.5
2022-03-17	15.5
2022-03-20	15.5
2022-03-31	13.5
Queens General Hospital Total	1,049.0

Roseway Hospital	Hours Closed
April	
2021-04-02	13.0
2021-04-08	13.0
2021-04-15	12.0
2021-04-19	12.0
2021-04-29	24.0
2021-04-30	1.0
May	
2021-05-02	11.0
2021-05-14	24.0
2021-05-15	1.0
2021-05-28	13.0
June	
2021-06-03	13.0
2021-06-06	14.0
2021-06-13	14.0
2021-06-14	24.0
2021-06-15	1.0
2021-06-16	13.0
2021-06-19	14.0

2021-06-21	13.0
2021-06-23	24.0
2021-06-24	24.0
2021-06-25	1.0
2021-06-27	13.0
2021-06-30	24.0
July	
2021-07-01	1.0
2021-07-02	24.0
2021-07-03	13.0
2021-07-04	24.0
2021-07-05	1.0
2021-07-08	24.0
2021-07-09	1.0
2021-07-10	14.0
2021-07-11	14.0
2021-07-12	24.0
2021-07-13	14.0
2021-07-15	13.0
2021-07-17	12.0
2021-07-18	12.0
2021-07-23	24.0
2021-07-24	1.0
2021-07-27	24.0
2021-07-28	1.0
2021-07-29	24.0
2021-07-30	15.0
August	
2021-08-01	24.0
2021-08-02	19.0
2021-08-03	24.0
2021-08-04	12.0
2021-08-06	13.0
2021-08-07	24.0
2021-08-08	24.0

2021-08-09	2.0	2021-09-21	2.0
2021-08-11	24.0	2021-09-24	24.0
2021-08-12	24.0	2021-09-25	24.0
2021-08-13	12.0	2021-09-26	1.0
2021-08-14	24.0	October	
2021-08-15	24.0	2021-10-01	24.0
2021-08-16	1.0	2021-10-02	24.0
2021-08-19	24.0	2021-10-03	25.0
2021-08-20	12.0	2021-10-04	1.0
2021-08-22	24.0	2021-10-08	24.0
2021-08-23	24.0	2021-10-09	12.0
2021-08-24	12.0	2021-10-10	24.0
2021-08-25	12.0	2021-10-11	1.0
2021-08-27	24.0	2021-10-14	24.0
2021-08-28	2.0	2021-10-15	1.0
2021-08-29	13.0	2021-10-16	24.0
September		2021-10-17	13.0
2021-09-01	24.0	2021-10-18	13.0
2021-09-02	2.0	2021-10-20	24.0
2021-09-03	24.0	2021-10-21	24.0
2021-09-04	13.0	2021-10-22	12.0
2021-09-05	13.0	2021-10-24	24.0
2021-09-06	24.0	2021-10-25	13.0
2021-09-07	24.0	2021-10-30	24.0
2021-09-08	24.0	2021-10-31	24.0
2021-09-09	13.0	November	
2021-09-10	12.0	2021-11-01	24.0
2021-09-11	13.0	2021-11-02	8.0
2021-09-12	12.0	2021-11-03	24.0
2021-09-13	12.0	2021-11-04	13.0
2021-09-14	24.0	2021-11-05	13.0
2021-09-15	12.0	2021-11-07	24.0
2021-09-18	24.0	2021-11-08	24.0
2021-09-19	12.0	2021-11-09	1.0
2021-09-20	24.0	2021-11-12	24.0

2021-11-13	1.0	2022-01-16	12.0
2021-11-14	24.0	2022-01-17	12.0
2021-11-15	14.0	2022-01-18	17.0
2021-11-17	13.0	2022-01-20	24.0
2021-11-18	12.0	2022-01-21	12.0
2021-11-19	4.0	2022-01-27	24.0
2021-11-20	24.0	2022-01-28	24.0
2021-11-21	2.0	2022-01-29	8.0
2021-11-22	13.0	February	
2021-11-25	19.0	2022-02-03	7.0
2021-11-27	12.0	2022-02-07	24.0
2021-11-28	14.0	2022-02-08	2.0
December		2022-02-09	14.0
2021-12-01	24.0	2022-02-12	24.0
2021-12-02	13.0	2022-02-13	24.0
2021-12-08	24.0	2022-02-14	24.0
2021-12-09	13.0	2022-02-15	2.0
2021-12-10	13.0	2022-02-16	14.5
2021-12-17	13.0	2022-02-18	24.0
2021-12-23	24.0	2022-02-19	24.0
2021-12-24	24.0	2022-02-20	25.0
2021-12-25	24.0	2022-02-25	12.0
2021-12-26	2.0	March	
2021-12-29	13.0	2022-03-04	14.0
2021-12-31	24.0	2022-03-06	24.0
January		2022-03-07	24.0
2022-01-01	24.0	2022-03-08	2.0
2022-01-02	24.0	2022-03-12	24.0
2022-01-03	5.0	2022-03-13	17.0
2022-01-06	12.0	2022-03-16	19.0
2022-01-07	24.0	2022-03-18	15.0
2022-01-08	12.0	2022-03-19	20.0
2022-01-11	12.0	2022-03-20	21.5
2022-01-14	24.0	2022-03-21	18.0
2022-01-15	13.0	2022-03-28	14.0

2022-03-29	24.0
2022-03-30	2.0
Roseway Hospital Total	2,966.0

Soldiers Memorial Hospital	Hours Closed
April	
2021-04-07	18.0
2021-04-09	18.0
2021-04-12	11.0
2021-04-15	18.0
2021-04-16	18.0
2021-04-17	18.0
2021-04-21	18.0
2021-04-22	18.0
May	
2021-05-01	18.0
2021-05-16	8.0
2021-05-17	11.0
2021-05-21	18.0
2021-05-24	11.0
2021-05-31	11.0
June	
2021-06-07	11.0
2021-06-08	11.0
2021-06-13	11.0
2021-06-14	11.0
2021-06-15	11.0
2021-06-17	11.0
2021-06-21	11.0
2021-06-22	11.0
2021-06-25	18.0
2021-06-29	11.0
July	
2021-07-02	11.0

2021-07-05	11.0
2021-07-06	11.0
2021-07-12	11.0
2021-07-13	20.0
2021-07-15	24.0
2021-07-16	3.0
2021-07-17	11.0
2021-07-19	11.0
2021-07-27	11.0
2021-07-30	11.0
August	
2021-08-02	18.0
2021-08-03	11.0
2021-08-05	11.0
2021-08-09	11.0
2021-08-10	18.0
2021-08-12	20.0
2021-08-16	18.0
2021-08-17	11.0
2021-08-18	11.0
2021-08-20	16.0
2021-08-24	11.0
2021-08-25	11.0
2021-08-28	20.0
2021-08-31	11.0
September	
2021-09-04	11.0
2021-09-06	11.0
2021-09-07	11.0
2021-09-12	18.0
2021-09-14	11.0
2021-09-15	18.0
2021-09-16	11.0
2021-09-17	19.0
2021-09-18	18.0

2021-09-20	11.0	2021-11-10	12.0
2021-09-21	11.0	2021-11-11	12.0
2021-09-23	11.0	2021-11-12	12.0
2021-09-24	18.0	2021-11-13	11.5
2021-09-25	18.0	2021-11-14	12.0
2021-09-26	18.0	2021-11-15	12.5
2021-09-28	11.0	2021-11-16	12.5
2021-09-29	16.0	2021-11-17	12.5
October		2021-11-18	12.5
2021-10-02	18.0	2021-11-19	12.5
2021-10-04	18.0	2021-11-20	12.5
2021-10-05	11.0	2021-11-21	12.5
2021-10-08	18.0	2021-11-22	12.5
2021-10-09	18.0	2021-11-23	12.5
2021-10-11	18.0	2021-11-24	12.5
2021-10-14	15.0	2021-11-25	15.5
2021-10-15	18.0	2021-11-26	12.5
2021-10-17	20.0	2021-11-27	12.5
2021-10-18	18.0	2021-11-28	12.5
2021-10-19	11.0	2021-11-29	12.5
2021-10-20	11.0	2021-11-30	12.5
2021-10-23	18.0	December	
2021-10-26	11.0	2021-12-01	14.5
2021-10-29	18.0	2021-12-02	12.5
2021-10-31	4.0	2021-12-03	12.5
November		2021-12-04	12.5
2021-11-01	15.0	2021-12-05	12.5
2021-11-02	12.0	2021-12-06	12.5
2021-11-03	12.0	2021-12-07	12.5
2021-11-04	12.0	2021-12-08	12.5
2021-11-05	12.0	2021-12-09	12.5
2021-11-06	14.0	2021-12-10	14.5
2021-11-07	12.0	2021-12-11	12.5
2021-11-08	12.0	2021-12-12	12.5
2021-11-09	12.0	2021-12-13	12.5

2021-12-14	12.5	2022-01-17	18.0
2021-12-15	12.5	2022-01-18	18.0
2021-12-16	12.5	2022-01-19	18.0
2021-12-17	12.5	2022-01-20	15.0
2021-12-18	12.5	2022-01-21	24.0
2021-12-19	12.5	2022-01-22	12.5
2021-12-20	12.5	2022-01-23	18.0
2021-12-21	12.5	2022-01-24	12.5
2021-12-22	12.5	2022-01-25	12.5
2021-12-23	12.5	2022-01-26	12.5
2021-12-24	12.5	2022-01-27	12.5
2021-12-25	12.5	2022-01-28	12.5
2021-12-26	12.5	2022-01-29	18.0
2021-12-27	12.5	2022-01-30	24.0
2021-12-28	12.5	2022-01-31	12.5
2021-12-29	12.5	February	
2021-12-30	15.0	2022-02-01	12.5
2021-12-31	12.5	2022-02-02	12.5
January		2022-02-03	12.5
2022-01-01	12.5	2022-02-04	14.5
2022-01-02	18.0	2022-02-05	18.0
2022-01-03	12.5	2022-02-06	18.0
2022-01-04	12.5	2022-02-07	18.0
2022-01-05	18.0	2022-02-08	12.5
2022-01-06	12.5	2022-02-09	18.0
2022-01-07	12.5	2022-02-10	12.5
2022-01-08	18.0	2022-02-11	12.5
2022-01-09	18.0	2022-02-12	18.0
2022-01-10	12.5	2022-02-13	18.0
2022-01-11	12.5	2022-02-14	12.5
2022-01-12	12.5	2022-02-15	12.5
2022-01-13	12.5	2022-02-16	12.5
2022-01-14	18.0	2022-02-17	12.5
2022-01-15	24.0	2022-02-18	14.5
2022-01-16	18.0	2022-02-19	18.0

2022-02-20	18.0
2022-02-21	12.5
2022-02-22	12.5
2022-02-23	12.5
2022-02-24	12.5
2022-02-25	12.5
2022-02-26	18.0
2022-02-27	24.0
2022-02-28	12.5
March	
2022-03-01	12.5
2022-03-02	12.5
2022-03-03	12.5
2022-03-04	12.5
2022-03-05	18.0
2022-03-06	18.0
2022-03-07	18.0
2022-03-08	12.5
2022-03-09	12.5
2022-03-10	12.5
2022-03-11	18.0
2022-03-12	18.0
2022-03-13	18.0
2022-03-14	18.0
2022-03-15	18.0
2022-03-16	18.0
2022-03-17	12.5
2022-03-18	10.5
2022-03-19	24.0
2022-03-20	24.0
2022-03-21	31.5
2022-03-22	24.0
2022-03-23	22.5
2022-03-24	12.5
2022-03-25	18.0

2022-03-26	24.0
2022-03-27	24.0
2022-03-28	13.5
2022-03-29	12.5
2022-03-30	12.5
2022-03-31	18.0
Soldiers Memorial Hospital Total	3,354.0

ZONE 2 (NORTHERN)

There were no temporary closures in the Northern zone.

ZONE 3 (EASTERN)

Buchanan Memorial Health Centre	Hours Closed
October	
2021-10-03	3.5
Buchanan Memorial Health Centre Total	3.5

Eastern Memorial Hospital	Hours Closed
August	
2021-08-23	24.0
2021-08-24	24.0
2021-08-25	24.0
2021-08-26	24.0
2021-08-27	20.0
January	
2022-01-10	12.0
2022-01-11	12.0
2022-01-12	12.0
2022-01-13	12.0
2022-01-14	12.0
2022-01-15	12.0

2022-01-16	12.0
2022-01-30	12.0
February	
2022-02-07	24.0
2022-02-08	24.0
2022-02-09	24.0
2022-02-10	24.0
2022-02-11	9.0
2022-02-28	12.0
March	
2022-03-06	12.0
2022-03-27	22.0
2022-03-28	24.0
2022-03-29	24.0
2022-03-30	24.0
2022-03-31	24.0
Eastern Memorial Hospital Total	459.0

Glace Bay Health Care Facility	Hours Closed
April	
2021-04-02	11.0
2021-04-02	11.0
2021-04-04	11.0
2021-04-05	11.0
2021-04-11	11.0
2021-04-14	11.0
2021-04-15	11.0
2021-04-16	11.0
2021-04-17	11.0
2021-04-18	11.0
2021-04-21	11.0
2021-04-24	11.0
2021-04-25	11.0

2021-04-27	11.0
May	
2021-05-02	11.0
2021-05-03	11.0
2021-05-05	11.0
2021-05-07	11.0
2021-05-08	11.0
2021-05-09	11.0
2021-05-10	11.0
2021-05-12	11.0
2021-05-16	11.0
2021-05-18	18.0
2021-05-19	11.0
2021-05-22	11.0
2021-05-23	11.0
2021-05-24	11.0
2021-05-28	11.0
2021-05-29	11.0
2021-05-30	11.0
June	
2021-06-05	11.0
2021-06-06	11.0
2021-06-11	11.0
2021-06-13	11.0
2021-06-15	11.0
2021-06-18	11.0
2021-06-20	11.0
2021-06-21	11.0
2021-06-26	11.0
2021-06-27	11.0
July	
2021-07-02	11.0
2021-07-03	11.0
2021-07-04	11.0
2021-07-05	11.0

2021-07-06	11.0
2021-07-07	11.0
2021-07-08	18.0
2021-07-09	11.0
2021-07-10	11.0
2021-07-11	11.0
2021-07-18	11.0
2021-07-19	11.0
Glace Bay Health Care Facility Total	586.0

Guysborough Memorial Hospital	Hours Closed
April	
2021-04-12	24.0
2021-04-13	1.0
2021-04-14	24.0
2021-04-15	1.0
2021-04-20	24.0
2021-04-21	1.0
2021-04-22	24.0
2021-04-23	1.0
2021-04-28	24.0
2021-04-29	1.0
2021-04-30	11.0
May	
2021-05-10	24.0
2021-05-11	1.0
2021-05-12	24.0
2021-05-13	1.0
2021-05-20	24.0
June	
2021-06-29	24.0

July	
2021-07-07	24.0
2021-07-13	24.0
2021-07-15	24.0
2021-07-19	24.0
2021-07-21	24.0
2021-07-24	24.0
2021-07-25	24.0
2021-07-27	24.0
2021-07-29	24.0
August	
2021-08-07	13.0
September	
2021-09-21	24.0
2021-09-23	24.0
2021-09-24	14.5
2021-09-27	24.0
2021-09-29	24.0
October	
2021-10-01	24.0
2021-10-02	24.0
2021-10-03	24.0
2021-10-05	24.0
2021-10-07	24.0
2021-10-13	24.0
2021-10-14	24.0
2021-10-15	24.0
2021-10-16	24.0
2021-10-17	24.0
2021-10-20	24.0
2021-10-21	24.0
November	
2021-11-01	24.0
2021-11-02	24.0

December		2022-02-16	24.0
2021-12-06	24.0	2022-02-17	24.0
2021-12-08	24.0	2022-02-18	24.0
2021-12-14	24.0	2022-02-19	24.0
2021-12-16	24.0	2022-02-20	24.0
2021-12-20	24.0	2022-02-21	5.0
2021-12-21	24.0	2022-02-23	24.0
2021-12-27	24.0	2022-02-24	24.0
2021-12-28	24.0	2022-02-25	5.0
2021-12-29	24.0	2022-02-28	24.0
2021-12-30	24.0	March	
2021-12-31	24.0	2022-03-01	24.0
January		2022-03-02	2.0
2022-01-01	24.0	2022-03-16	24.0
2022-01-02	24.0	2022-03-18	24.0
2022-01-03	25.0	2022-03-19	24.0
2022-01-04	24.0	2022-03-20	24.0
2022-01-05	3.0	2022-03-21	24.0
2022-01-07	24.0	2022-03-22	15.0
2022-01-08	24.0	2022-03-24	24.0
2022-01-09	24.0	2022-03-30	24.0
2022-01-10	24.0	Guysborough Memorial Hospital Total	
2022-01-11	3.0	2,016.5	
2022-01-31	24.0		
February			
2022-02-01	24.0		
2022-02-02	24.0		
2022-02-03	24.0		
2022-02-04	24.0		
2022-02-05	24.0		
2022-02-06	24.0		
2022-02-07	3.0		
2022-02-09	14.0		
2022-02-14	24.0		
2022-02-15	24.0		

St. Anne Community & Nursing Care Centre	Hours Closed
October	
2021-10-09	12.0
2021-10-10	12.0
2021-10-11	12.0
2021-10-15	12.0
2021-10-16	12.0
2021-10-17	12.0
2021-10-18	12.0
2021-10-31	12.0
November	
2021-11-01	24.0
2021-11-02	12.0
2021-11-17	8.0
2021-11-29	24.0
2021-11-30	12.0
December	
2021-12-07	8.0
2021-12-10	12.0
2021-12-24	24.0
2021-12-25	24.0
2021-12-26	24.0
2021-12-31	12.0
January	
2022-01-02	8.0
2022-01-05	12.0
2022-01-07	12.0
2022-01-11	12.0
2022-01-19	9.0
2022-01-23	12.0
2022-01-25	8.0
2022-01-30	12.0
February	
2022-02-17	8.0

2022-02-26	24.0
2022-02-27	12.0
2022-02-28	24.0
March	
2022-03-01	24.0
2022-03-02	24.0
2022-03-03	24.0
2022-03-04	24.0
2022-03-05	24.0
2022-03-06	24.0
2022-03-14	12.0
St. Anne Community & Nursing Care Centre Total	589.0

Strait Richmond Hospital	Hours Closed
April	
2021-04-21	13.0
2021-04-24	24.0
2021-04-25	1.0
2021-04-28	13.0
May	
2021-05-26	24.0
2021-05-27	1.0
2021-05-29	24.0
2021-05-30	24.0
2021-05-31	13.0
June	
2021-06-02	24.0
2021-06-05	24.0
2021-06-06	24.0
2021-06-07	1.0
2021-06-09	13.0
July	
2021-07-03	24.0

2021-07-04	24.0	2021-09-04	24.0
2021-07-05	1.0	2021-09-05	24.0
2021-07-07	13.0	2021-09-06	24.0
2021-07-10	24.0	2021-09-07	14.0
2021-07-11	24.0	2021-09-08	24.0
2021-07-12	13.0	2021-09-09	13.0
2021-07-14	24.0	2021-09-10	13.0
2021-07-15	1.0	October	
2021-07-16	24.0	2021-10-04	24.0
2021-07-17	24.0	2021-10-05	1.0
2021-07-18	24.0	2021-10-06	24.0
2021-07-19	22.0	2021-10-07	1.0
August		2021-10-08	24.0
2021-08-04	13.0	2021-10-09	24.0
2021-08-11	24.0	2021-10-10	24.0
2021-08-12	1.0	2021-10-11	1.0
2021-08-14	24.0	2021-10-13	24.0
2021-08-15	24.0	2021-10-14	1.0
2021-08-16	1.0	2021-10-16	24.0
2021-08-18	24.0	2021-10-17	24.0
2021-08-19	1.0	2021-10-18	1.0
2021-08-21	24.0	2021-10-20	24.0
2021-08-22	24.0	2021-10-21	1.0
2021-08-23	1.0	November	
2021-08-25	24.0	2021-11-25	15.0
2021-08-26	24.0	December	
2021-08-27	24.0	2021-12-04	24.0
2021-08-28	24.0	2021-12-05	24.0
2021-08-29	24.0	2021-12-06	1.0
2021-08-30	24.0	2021-12-08	24.0
2021-08-31	24.0	2021-12-09	24.0
September		2021-12-10	1.0
2021-09-01	24.0	2021-12-12	24.0
2021-09-02	24.0	2021-12-13	24.0
2021-09-03	24.0	2021-12-14	1.0

2021-12-16	24.0	2022-02-16	1.0
2021-12-17	24.0	2022-02-21	12.0
2021-12-18	1.0	2022-02-22	14.0
2021-12-20	24.0	2022-02-23	15.0
2021-12-21	24.0	2022-02-24	15.0
2021-12-22	1.0	2022-02-25	15.0
2021-12-24	24.0	March	
2021-12-25	24.0	2022-03-03	24.0
2021-12-26	24.0	2022-03-04	24.0
2021-12-27	1.0	2022-03-05	24.0
2021-12-29	24.0	2022-03-06	24.0
2021-12-30	24.0	2022-03-07	24.0
2021-12-31	24.0	2022-03-08	24.0
January		2022-03-09	3.0
2022-01-01	24.0	2022-03-11	24.0
2022-01-02	24.0	2022-03-12	24.0
2022-01-03	1.0	2022-03-13	3.0
2022-01-05	24.0	2022-03-14	24.0
2022-01-06	24.0	2022-03-15	24.0
2022-01-07	1.0	2022-03-16	20.0
2022-01-14	13.0	2022-03-17	13.0
2022-01-17	16.0	2022-03-18	13.0
2022-01-31	24.0	2022-03-19	13.0
February		2022-03-20	16.0
2022-02-01	24.0	2022-03-21	13.0
2022-02-02	18.0	2022-03-22	13.0
2022-02-05	24.0	2022-03-23	15.0
2022-02-06	24.0	2022-03-24	13.0
2022-02-07	3.0	2022-03-25	13.0
2022-02-09	24.0	2022-03-26	13.0
2022-02-10	24.0	2022-03-27	13.0
2022-02-11	3.0	2022-03-28	17.5
2022-02-13	24.0	2022-03-29	13.0
2022-02-14	24.0	2022-03-31	16.0
2022-02-15	24.0	Strait Richmond Hospital Total	2,528.5

Victoria County Memorial Hospital	Hours Closed
April	
2021-04-10	16.0
2021-04-11	16.0
2021-04-13	14.0
2021-04-17	16.0
2021-04-18	16.0
2021-04-22	24.0
2021-04-23	1.0
2021-04-27	24.0
2021-04-28	1.0
2021-04-30	16.0
May	
2021-05-01	16.0
2021-05-02	24.0
2021-05-03	16.0
2021-05-07	16.0
2021-05-08	16.0
2021-05-09	16.0
2021-05-27	24.0
June	
2021-06-05	16.0
2021-06-06	24.0
2021-06-07	16.0
2021-06-12	16.0
2021-06-13	24.0
2021-06-14	16.0
2021-06-19	24.0
2021-06-20	3.0
2021-06-21	13.0
2021-06-22	13.0
2021-06-25	14.0
2021-06-26	16.0
2021-06-28	14.0

July	
2021-07-01	24.0
2021-07-02	17.0
2021-07-03	17.0
2021-07-04	17.0
2021-07-09	17.0
2021-07-10	16.0
2021-07-11	17.0
2021-07-17	16.0
2021-07-18	16.0
2021-07-24	16.0
2021-07-25	17.0
2021-07-30	16.0
2021-07-31	19.0
August	
2021-08-01	24.0
2021-08-02	18.0
2021-08-05	16.0
2021-08-06	16.0
2021-08-07	24.0
2021-08-08	24.0
2021-08-09	1.0
2021-08-10	16.0
2021-08-11	16.0
2021-08-13	16.0
2021-08-14	16.0
2021-08-15	24.0
2021-08-16	16.0
2021-08-18	24.0
2021-08-19	16.0
2021-08-20	16.0
2021-08-21	16.0
2021-08-22	24.0
2021-08-23	24.0
2021-08-24	8.0

2021-08-25	24.0	2021-10-12	22.0
2021-08-26	24.0	2021-10-13	2.0
2021-08-27	32.0	2021-10-15	24.0
2021-08-28	24.0	2021-10-16	19.0
2021-08-29	24.0	2021-10-17	24.0
2021-08-30	24.0	2021-10-18	24.0
2021-08-31	24.0	2021-10-19	17.0
September		2021-10-22	24.0
2021-09-01	24.0	2021-10-23	24.0
2021-09-02	24.0	2021-10-24	24.0
2021-09-03	24.0	2021-10-25	20.0
2021-09-04	24.0	2021-10-30	24.0
2021-09-05	24.0	2021-10-31	24.0
2021-09-06	24.0	November	
2021-09-07	24.0	2021-11-01	19.0
2021-09-08	24.0	2021-11-04	17.0
2021-09-09	24.0	2021-11-06	17.0
2021-09-10	24.0	2021-11-07	17.0
2021-09-18	9.0	2021-11-08	17.0
2021-09-19	24.0	2021-11-09	13.0
2021-09-20	10.0	2021-11-11	24.0
2021-09-25	17.0	2021-11-12	17.0
2021-09-26	17.0	2021-11-13	17.0
2021-09-27	17.0	2021-11-14	17.0
2021-09-30	17.0	2021-11-15	24.0
October		2021-11-16	17.0
2021-10-01	24.0	2021-11-18	24.0
2021-10-02	24.0	2021-11-19	1.0
2021-10-03	24.0	2021-11-20	16.0
2021-10-04	13.3	2021-11-22	20.0
2021-10-07	24.0	2021-11-23	12.0
2021-10-08	24.0	2021-11-24	24.0
2021-10-09	11.0	2021-11-25	16.0
2021-10-10	24.0	2021-11-28	16.0
2021-10-11	21.0	2021-11-29	24.0

2021-11-30	16.0	2022-01-11	16.0
December		2022-01-12	16.0
2021-12-02	24.0	2022-01-13	16.0
2021-12-03	24.0	2022-01-17	16.0
2021-12-04	16.0	2022-01-20	16.0
2021-12-06	24.0	2022-01-22	16.0
2021-12-07	16.0	2022-01-23	16.0
2021-12-09	24.0	2022-01-24	16.0
2021-12-10	16.0	2022-01-25	16.0
2021-12-11	16.0	2022-01-28	16.0
2021-12-12	16.0	2022-01-29	16.0
2021-12-13	16.0	2022-01-31	8.0
2021-12-16	16.0	February	
2021-12-17	16.0	2022-02-01	24.0
2021-12-19	24.0	2022-02-02	24.0
2021-12-20	16.0	2022-02-03	16.0
2021-12-21	16.0	2022-02-04	16.0
2021-12-23	24.0	2022-02-05	24.0
2021-12-24	16.0	2022-02-06	24.0
2021-12-25	24.0	2022-02-07	16.0
2021-12-26	16.0	2022-02-08	16.0
2021-12-27	16.0	2022-02-10	24.0
2021-12-28	16.0	2022-02-11	16.0
2021-12-29	24.0	2022-02-12	16.0
2021-12-30	16.0	2022-02-13	24.0
2021-12-31	16.0	2022-02-14	16.0
January		2022-02-15	16.0
2022-01-02	24.0	2022-02-17	16.0
2022-01-03	32.0	2022-02-20	16.0
2022-01-04	16.0	2022-02-21	16.0
2022-01-06	16.0	2022-02-24	24.0
2022-01-07	16.0	2022-02-25	19.0
2022-01-09	24.0	2022-02-26	24.0
2022-01-10	16.0	2022-02-27	24.0

2022-02-28	16.0
March	
2022-03-01	16.0
2022-03-03	16.0
2022-03-04	16.0
2022-03-05	16.0
2022-03-06	16.0
2022-03-07	16.0
2022-03-08	16.0
2022-03-10	14.0
2022-03-11	16.0
2022-03-12	16.0
2022-03-13	24.0
2022-03-14	24.0
2022-03-16	16.0
2022-03-19	24.0
2022-03-20	24.0
2022-03-21	17.0
2022-03-24	16.0
2022-03-27	16.0
2022-03-30	16.0
2022-03-31	16.0
Victoria County Memorial Hospital Total	3,988.3

ZONE 4 (CENTRAL)

Eastern Shore Memorial Hospital	Hours Closed
April	
2021-04-01	24.0
2021-04-02	24.0
2021-04-03	24.0
2021-04-04	24.0
2021-04-05	24.0

2021-04-06	12.0
2021-04-07	12.0
2021-04-08	24.0
2021-04-09	24.0
2021-04-10	24.0
2021-04-12	24.0
2021-04-13	12.0
2021-04-14	12.0
2021-04-15	24.0
2021-04-16	24.0
2021-04-19	24.0
2021-04-20	12.0
2021-04-21	12.0
2021-04-22	24.0
2021-04-23	12.0
2021-04-26	24.0
2021-04-27	12.0
2021-04-28	12.0
2021-04-29	24.0
2021-04-30	24.0
May	
2021-05-01	24.0
2021-05-02	24.0
2021-05-03	24.0
2021-05-04	12.0
2021-05-05	12.0
2021-05-06	24.0
2021-05-07	24.0
2021-05-08	24.0
2021-05-09	24.0
2021-05-10	24.0
2021-05-11	12.0
2021-05-12	12.0
2021-05-13	24.0
2021-05-14	12.0

2021-05-17	24.0	2021-06-30	12.0
2021-05-18	12.0	July	
2021-05-19	12.0	2021-07-01	24.0
2021-05-20	24.0	2021-07-02	24.0
2021-05-21	24.0	2021-07-03	24.0
2021-05-22	24.0	2021-07-04	24.0
2021-05-23	24.0	2021-07-05	24.0
2021-05-25	12.0	2021-07-06	12.0
2021-05-26	12.0	2021-07-07	12.0
2021-05-27	24.0	2021-07-08	24.0
2021-05-28	24.0	2021-07-09	12.0
2021-05-31	24.0	2021-07-12	24.0
June		2021-07-13	12.0
2021-06-01	12.0	2021-07-14	12.0
2021-06-03	24.0	2021-07-15	24.0
2021-06-04	24.0	2021-07-16	12.0
2021-06-05	24.0	2021-07-17	12.0
2021-06-06	24.0	2021-07-19	24.0
2021-06-07	24.0	2021-07-20	12.0
2021-06-08	12.0	2021-07-21	12.0
2021-06-09	12.0	2021-07-22	24.0
2021-06-10	24.0	2021-07-23	12.0
2021-06-11	12.0	2021-07-26	24.0
2021-06-14	24.0	2021-07-27	24.0
2021-06-15	12.0	2021-07-28	24.0
2021-06-16	12.0	2021-07-29	24.0
2021-06-17	24.0	2021-07-30	24.0
2021-06-18	12.0	2021-07-31	24.0
2021-06-21	24.0	August	
2021-06-22	24.0	2021-08-01	24.0
2021-06-23	12.0	2021-08-02	24.0
2021-06-24	24.0	2021-08-03	12.0
2021-06-25	12.0	2021-08-04	24.0
2021-06-28	24.0	2021-08-05	24.0
2021-06-29	24.0	2021-08-06	24.0

2021-08-07	24.0	2021-09-16	24.0
2021-08-08	24.0	2021-09-17	24.0
2021-08-09	24.0	2021-09-20	12.0
2021-08-10	12.0	2021-09-21	23.0
2021-08-11	24.0	2021-09-22	13.0
2021-08-12	24.0	2021-09-23	24.0
2021-08-13	12.0	2021-09-24	12.0
2021-08-16	24.0	2021-09-27	24.0
2021-08-17	12.0	2021-09-28	12.0
2021-08-18	12.0	2021-09-29	12.0
2021-08-19	24.0	2021-09-30	24.0
2021-08-20	24.0	October	
2021-08-21	24.0	2021-10-01	24.0
2021-08-22	24.0	2021-10-02	24.0
2021-08-23	24.0	2021-10-03	24.0
2021-08-24	12.0	2021-10-04	12.0
2021-08-25	12.0	2021-10-05	12.0
2021-08-26	24.0	2021-10-06	12.0
2021-08-27	12.0	2021-10-07	24.0
2021-08-30	24.0	2021-10-08	12.0
2021-08-31	12.0	2021-10-11	24.0
September		2021-10-12	12.0
2021-09-01	12.0	2021-10-13	12.0
2021-09-02	24.0	2021-10-14	24.0
2021-09-03	24.0	2021-10-15	24.0
2021-09-04	24.0	2021-10-18	24.0
2021-09-05	24.0	2021-10-19	12.0
2021-09-06	24.0	2021-10-20	12.0
2021-09-07	12.0	2021-10-21	24.0
2021-09-08	12.0	2021-10-22	12.0
2021-09-09	24.0	2021-10-25	12.0
2021-09-10	12.0	2021-10-26	12.0
2021-09-13	24.0	2021-10-27	24.0
2021-09-14	12.0	2021-10-28	24.0
2021-09-15	12.0	2021-10-29	24.0

2021-10-30	24.0	2021-12-07	12.0
2021-10-31	24.0	2021-12-08	24.0
November		2021-12-09	24.0
2021-11-01	12.0	2021-12-10	24.0
2021-11-02	23.0	2021-12-13	24.0
2021-11-03	24.0	2021-12-14	12.0
2021-11-04	12.0	2021-12-15	24.0
2021-11-05	24.0	2021-12-16	12.0
2021-11-06	24.0	2021-12-17	24.0
2021-11-07	24.0	2021-12-18	24.0
2021-11-08	12.0	2021-12-19	24.0
2021-11-09	12.0	2021-12-20	12.0
2021-11-10	12.0	2021-12-21	12.0
2021-11-12	24.0	2021-12-22	24.0
2021-11-15	24.0	2021-12-23	24.0
2021-11-16	12.0	2021-12-24	24.0
2021-11-17	12.0	2021-12-25	24.0
2021-11-18	24.0	2021-12-26	24.0
2021-11-19	12.0	2021-12-27	24.0
2021-11-22	12.0	2021-12-28	12.0
2021-11-23	12.0	2021-12-29	24.0
2021-11-24	12.0	2021-12-30	12.0
2021-11-25	24.0	2021-12-31	24.0
2021-11-26	24.0	January	
2021-11-27	24.0	2022-01-01	24.0
2021-11-28	24.0	2022-01-02	24.0
2021-11-29	12.0	2022-01-04	12.0
2021-11-30	12.0	2022-01-05	24.0
December		2022-01-06	24.0
2021-12-01	24.0	2022-01-07	24.0
2021-12-02	24.0	2022-01-10	24.0
2021-12-03	24.0	2022-01-11	12.0
2021-12-04	24.0	2022-01-12	24.0
2021-12-05	24.0	2022-01-13	12.0
2021-12-06	12.0	2022-01-14	24.0

2022-01-15	24.0	2022-02-20	24.0
2022-01-16	24.0	2022-02-22	12.0
2022-01-17	12.0	2022-02-23	24.0
2022-01-18	12.0	2022-02-24	12.0
2022-01-19	24.0	2022-02-25	24.0
2022-01-20	24.0	2022-02-26	24.0
2022-01-21	24.0	2022-02-27	24.0
2022-01-22	24.0	2022-02-28	12.0
2022-01-23	24.0	March	
2022-01-24	12.0	2022-03-01	12.0
2022-01-25	12.0	2022-03-02	24.0
2022-01-26	24.0	2022-03-03	24.0
2022-01-27	12.0	2022-03-04	24.0
2022-01-28	24.0	2022-03-07	24.0
2022-01-29	24.0	2022-03-08	12.0
2022-01-30	24.0	2022-03-09	24.0
2022-01-31	12.0	2022-03-10	12.0
February		2022-03-11	24.0
2022-02-01	12.0	2022-03-12	24.0
2022-02-02	24.0	2022-03-13	24.0
2022-02-03	24.0	2022-03-14	24.0
2022-02-04	24.0	2022-03-15	12.0
2022-02-07	24.0	2022-03-16	24.0
2022-02-08	12.0	2022-03-17	24.0
2022-02-09	24.0	2022-03-18	24.0
2022-02-10	12.0	2022-03-19	24.0
2022-02-11	24.0	2022-03-20	24.0
2022-02-12	24.0	2022-03-21	12.0
2022-02-13	24.0	2022-03-22	12.0
2022-02-14	24.0	2022-03-23	24.0
2022-02-15	12.0	2022-03-24	12.0
2022-02-16	12.0	2022-03-25	24.0
2022-02-17	24.0	2022-03-26	24.0
2022-02-18	24.0	2022-03-27	24.0
2022-02-19	24.0	2022-03-28	12.0

2022-03-29	12.0
2022-03-30	24.0
2022-03-31	24.0
Eastern Shore Memorial Hospital Total	6095.0

Hants Community Hospital	Hours Closed
July	
2021-07-30	12.0
December	
2021-12-17	14.0
2021-12-22	12.0
January	
2022-01-30	5.0
February	
2022-02-09	3.5
2022-02-23	13.3
Hants Community Hospital Total	59.8

Musquodoboit Valley Memorial Hospital	Hours Closed
April	
2021-04-02	12.0
2021-04-03	12.0
2021-04-05	4.5
2021-04-07	12.0
2021-04-09	4.5
2021-04-12	4.5
2021-04-14	12.0
2021-04-16	12.0
2021-04-17	12.0
2021-04-18	12.0

2021-04-19	12.0
2021-04-21	12.0
2021-04-23	12.0
2021-04-24	12.0
2021-04-26	12.0
2021-04-27	4.5
2021-04-28	12.0
2021-04-29	12.0
2021-04-30	4.5
May	
2021-05-01	12.0
2021-05-03	12.0
2021-05-04	4.5
2021-05-05	12.0
2021-05-06	12.0
2021-05-07	12.0
2021-05-08	12.0
2021-05-10	12.0
2021-05-12	12.0
2021-05-14	12.0
2021-05-15	12.0
2021-05-17	12.0
2021-05-19	12.0
2021-05-21	12.0
2021-05-22	12.0
2021-05-24	12.0
2021-05-26	12.0
2021-05-31	12.0
June	
2021-06-02	12.0
2021-06-04	12.0
2021-06-05	12.0
2021-06-06	12.0
2021-06-07	12.0
2021-06-09	12.0

2021-06-11	12.0	2021-07-28	12.0
2021-06-12	12.0	2021-07-30	12.0
2021-06-13	12.0	2021-07-31	12.0
2021-06-14	12.0	August	
2021-06-16	12.0	2021-08-02	12.0
2021-06-18	12.0	2021-08-04	12.0
2021-06-19	12.0	2021-08-06	12.0
2021-06-21	12.0	2021-08-07	12.0
2021-06-23	12.0	2021-08-09	12.0
2021-06-25	12.0	2021-08-10	12.0
2021-06-26	12.0	2021-08-11	12.0
2021-06-28	12.0	2021-08-12	12.0
2021-06-30	12.0	2021-08-13	12.0
July		2021-08-14	12.0
2021-07-02	12.0	2021-08-15	12.0
2021-07-03	12.0	2021-08-16	12.0
2021-07-04	12.0	2021-08-17	12.0
2021-07-05	12.0	2021-08-18	12.0
2021-07-06	12.0	2021-08-19	12.0
2021-07-07	12.0	2021-08-20	12.0
2021-07-08	12.0	2021-08-21	12.0
2021-07-09	12.0	2021-08-22	12.0
2021-07-10	12.0	2021-08-23	12.0
2021-07-11	12.0	2021-08-24	12.0
2021-07-12	12.0	2021-08-25	12.0
2021-07-13	12.0	2021-08-26	12.0
2021-07-14	12.0	2021-08-28	12.0
2021-07-15	12.0	2021-08-30	12.0
2021-07-16	12.0	2021-08-31	12.0
2021-07-17	12.0	September	
2021-07-19	12.0	2021-09-01	12.0
2021-07-21	12.0	2021-09-03	12.0
2021-07-23	12.0	2021-09-04	12.0
2021-07-24	12.0	2021-09-06	12.0
2021-07-26	12.0	2021-09-08	12.0

2021-09-09	5.0	November	
2021-09-10	12.0	2021-11-01	12.0
2021-09-11	12.0	2021-11-03	12.0
2021-09-13	12.0	2021-11-04	12.0
2021-09-15	12.0	2021-11-05	12.0
2021-09-17	12.0	2021-11-06	12.0
2021-09-18	12.0	2021-11-08	12.0
2021-09-20	12.0	2021-11-10	12.0
2021-09-22	12.0	2021-11-12	12.0
2021-09-24	12.0	2021-11-13	12.0
2021-09-25	12.0	2021-11-15	12.0
2021-09-27	12.0	2021-11-17	12.0
2021-09-29	12.0	2021-11-19	12.0
October		2021-11-20	12.0
2021-10-01	12.0	2021-11-21	12.0
2021-10-02	12.0	2021-11-22	3.5
2021-10-04	12.0	2021-11-24	12.0
2021-10-05	12.0	2021-11-25	12.0
2021-10-06	12.0	2021-11-26	12.0
2021-10-07	12.0	2021-11-28	12.0
2021-10-08	12.0	2021-11-29	12.0
2021-10-09	12.0	December	
2021-10-11	3.5	2021-12-01	3.5
2021-10-13	12.0	2021-12-03	12.0
2021-10-14	1.0	2021-12-04	12.0
2021-10-15	12.0	2021-12-06	3.5
2021-10-16	12.0	2021-12-08	12.0
2021-10-18	12.0	2021-12-09	12.0
2021-10-20	3.5	2021-12-10	12.0
2021-10-22	2.5	2021-12-11	12.0
2021-10-23	12.0	2021-12-12	12.0
2021-10-25	12.0	2021-12-13	12.0
2021-10-27	3.5	2021-12-14	12.0
2021-10-29	12.0	2021-12-15	12.0
2021-10-30	12.0	2021-12-17	12.0

2021-12-18	12.0	2022-02-07	12.0
2021-12-20	12.0	2022-02-09	12.0
2021-12-22	12.0	2022-02-11	12.0
2021-12-23	12.0	2022-02-13	12.0
2021-12-24	12.0	2022-02-14	12.0
2021-12-25	12.0	2022-02-16	12.0
2021-12-27	12.0	2022-02-18	12.0
2021-12-28	12.0	2022-02-19	12.0
2021-12-29	12.0	2022-02-21	12.0
2021-12-31	12.0	2022-02-23	12.0
January		2022-02-25	12.0
2022-01-01	12.0	2022-02-26	12.0
2022-01-03	12.0	2022-02-28	12.0
2022-01-05	12.0	March	
2022-01-07	12.0	2022-03-02	12.0
2022-01-08	12.0	2022-03-03	12.0
2022-01-10	12.0	2022-03-04	12.0
2022-01-12	12.0	2022-03-05	12.0
2022-01-14	12.0	2022-03-07	12.0
2022-01-15	12.0	2022-03-08	12.0
2022-01-17	12.0	2022-03-09	12.0
2022-01-19	12.0	2022-03-10	12.0
2022-01-21	12.0	2022-03-11	12.0
2022-01-22	12.0	2022-03-12	12.0
2022-01-23	11.5	2022-03-14	12.0
2022-01-24	12.0	2022-03-15	12.0
2022-01-26	12.0	2022-03-16	12.0
2022-01-28	12.0	2022-03-17	12.0
2022-01-29	12.0	2022-03-18	12.0
2022-01-30	12.0	2022-03-20	12.0
2022-01-31	12.0	2022-03-21	12.0
February		2022-03-22	12.0
2022-02-02	12.0	2022-03-23	12.0
2022-02-04	12.0	2022-03-24	12.0
2022-02-05	12.0	2022-03-25	12.0

2022-03-26	12.0
2022-03-28	12.0
2022-03-29	12.0
2022-03-30	12.0
2022-03-31	12.0
Musquodoboit Valley Memorial Hospital Total	2864.0

Twin Oaks Memorial Hospital	Hours Closed
April	
2021-04-03	4.6
2021-04-04	12.5
2021-04-06	5.0
2021-04-25	20.0
2021-04-30	24.0
May	
2021-05-01	7.0
2021-05-22	8.0
2021-05-23	3.0
June	
2021-06-19	16.0
2021-06-24	24.0
2021-06-25	7.0
July	
2021-07-01	5.0
2021-07-03	3.0
2021-07-16	13.0
2021-07-18	13.0
2021-07-24	14.0
2021-07-25	5.0
August	
2021-08-03	12.0
2021-08-05	13.0
2021-08-06	17.0

2021-08-08	13.0
2021-08-09	24.0
2021-08-10	7.0
2021-08-11	24.0
2021-08-12	1.0
2021-08-13	13.0
2021-08-14	20.0
2021-08-15	19.0
2021-08-16	24.0
2021-08-17	7.0
2021-08-19	20.0
2021-08-22	8.0
September	
2021-09-02	24.0
2021-09-03	8.0
2021-09-13	20.0
2021-09-17	20.0
2021-09-18	20.0
2021-09-19	20.0
2021-09-21	13.0
2021-09-24	20.0
2021-09-25	22.0
2021-09-26	15.0
October	
2021-10-01	13.0
2021-10-02	1.0
2021-10-04	22.0
2021-10-10	19.0
2021-10-29	14.0
November	
2021-11-03	13.0
2021-11-14	9.0
2021-11-15	14.0
2021-11-19	24.0
2021-11-20	7.0

2021-11-21	5.0
2021-11-22	24.0
2021-11-23	10.0
2021-11-30	24.0
December	
2021-12-01	8.0
2021-12-02	10.0
2021-12-05	3.0
2021-12-12	18.0
2021-12-15	4.0
2021-12-16	4.0
2021-12-21	20.0
2021-12-25	20.0
2021-12-27	3.0
2021-12-29	22.0
2021-12-30	22.0
2021-12-31	22.0
January	
2022-01-02	11.0
2022-01-04	24.0
2022-01-05	7.0
2022-01-08	2.0
2022-01-19	24.0
2022-01-20	7.0
2022-01-21	19.0
February	
2022-02-02	24.0
2022-02-03	7.0
2022-02-12	13.0
2022-02-26	19.0
2022-02-27	19.0
March	
2022-03-18	22.0
2022-03-25	6.0
2022-03-26	31.0

2022-03-27	11.5
2022-03-28	24.0
2022-03-29	20.0
2022-03-30	10.0
2022-03-31	10.0
Twin Oaks Memorial Hospital Total	1253.6

© Crown copyright, Province of Nova Scotia, 2022
Annual Accountability Report on Emergency Departments
April 1, 2021 – March 31, 2022
Department of Health and Wellness December 2022
ISBN:

