

Action for Health

A Strategic Plan
2022–2026



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Message from Premier Tim Houston

Action for Health is our government's roadmap for a health system where Nova Scotians can access world-class healthcare in a timely manner.

There is no shortage of challenges facing our health system. These challenges require monumental action and investment.

The message we have heard over and over again is clear – change is needed to provide better health and better healthcare for Nova Scotians and to support and respect the people who work in the health system. We heard it from Nova Scotians on doorsteps, from community leaders, advocates, and stakeholders, and from healthcare workers themselves during the Speak Up for Healthcare Tour.

This is a turning point for Nova Scotia. As we move from identifying problems to fixing them, I am confident we are heading in the right direction because we are guided by input we received from those who know the system best.

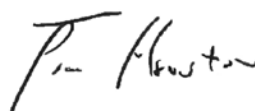
This is our plan to fix what we believe to be the core issues – recruitment and retention, access to care, and outdated infrastructure (both physical and digital). It addresses long-standing and more recent problems in our hospitals.

It also outlines concrete action on related issues, including long-term care, addictions and mental health, diversity, equity and inclusion, and the factors that affect the health and well-being of Nova Scotians each and every day.

The Ministers of Health and Wellness, the Office of Healthcare Professionals Recruitment, Seniors and Long-term Care, and the Office of Addictions and Mental Health have been given mandates to make healthcare accessible, integrated, proactive, compassionate, and measurable. They are working to ensure quality results for the dollars invested. They will be ready to adjust strategies as needed, as situations evolve, and as new opportunities arise.

Action for Health will guide all of us in working together to shape a healthier society in Nova Scotia. The outcomes will drive innovation, industry, and our economy.

We can't do this alone. We will only succeed if everyone pulls together – government representatives, health providers, and Nova Scotians. Let's get to work.



Tim Houston
Premier of Nova Scotia

The Future of Healthcare

Action for Health provides a path to a completely different kind of healthcare experience and health culture for Nova Scotia – one that is proactive and focused on people and patients. It will require a new kind of relationship between the traditional healthcare system, providers, patients, communities, and partners – a system where people’s wider needs are supported to address the root causes of poor health and avoid unnecessary hospital visits.

This vision is long overdue. The cracks in healthcare have been widening for many years. And, as a result, we’ve seen the number of Nova Scotians with poor health outcomes and chronic disease grow.

But our strengths are many.

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.

Our government is listening to health providers and giving them the respect they deserve.

With innovative advancements in tools, technology and treatment, we are well situated to provide quality results in an economic and sustainable manner.

Progress will be tracked at novascotia.ca/actionforhealth. As we move forward, we will add metrics to measure our success.

This plan is the first step in transforming health in Nova Scotia.

It will not be easy.

It will be expensive.

And it will not happen overnight.

But we are willing to do the work and make the investments required to give Nova Scotians the health system they deserve. We are also committed to 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.

At the end of this journey we will have true health transformation – for our generation and those who follow.

Solutions for Healthcare

We are advancing six core solutions to the people of Nova Scotia, each with its own objective for creating an efficient, modern, equitable, and respectful health ecosystem. The work, actions, and investments generated by these solutions will make an impact in the short and the long term.

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”



Solution One:

Become a magnet for health providers

Our government will make Nova Scotia a sought-after place for health providers by offering a simple, streamlined recruitment experience that leads directly to jobs in healthy, safe workplaces and a home in welcoming communities. In our vision, health providers from all communities are represented, respected, valued, and heard. Using world-class technology and with information at their fingertips, they are connected to and supported by a network of peers across Nova Scotia to provide high-quality, culturally appropriate care, informed by best practices and research. People enjoy work-life balance, robust benefits and a workplace approach that revolves around respect, sustainability, and continuous quality improvement.

What we heard:

Recruiting and retaining doctors, nurses, continuing care assistants, paramedics, and many other health providers is one of the most pressing issues facing healthcare today. Nothing is more critical to delivering high-quality care equitably across the province. The Speak Up for Healthcare Tour identified the hiring process, workforce development, burnout, and compensation as areas that need to be addressed so Nova Scotia can become a magnet for healthcare providers – to be a place where top talent want to start and grow their careers. Their wish list included a streamlined hiring process, incentives and supports, easier licensing processes and help for internationally trained professionals.

They also emphasized the need for consistent onboarding, better matching of people with positions, prioritizing of understaffed roles, and the need to ensure health providers reflect diversity. To retain staff, the system must address burnout, feelings of being undervalued, competitive compensation, working conditions, and physical and digital deficiencies in work environments. People working in the continuing-care sector have told us they need access to proper equipment and tools and consistency in staffing approaches.

What we've done:

- ✓ Established the Office of Healthcare Professionals Recruitment and hired recruiters
- ✓ Offered jobs to all graduating nurses in Nova Scotia
- ✓ Worked with the College of Paramedics of Nova Scotia to create a temporary licence so that graduating paramedics can start working in their field sooner instead of waiting for licensing exams
- ✓ Increased the budget for physician incentives and created two new programs to recruit new doctors and retain graduates, primarily in rural communities
- ✓ Created a team of navigators to connect doctors and other healthcare professionals with the information they need to support their move to Nova Scotia
- ✓ Created a skills development fund to help provide training so long-term staff can grow in their careers
- ✓ Launched a recruitment campaign targeting healthcare professionals and skilled tradespeople
- ✓ Created the Come Home to Nova Scotia website to recruit doctors with ties to Nova Scotia
- ✓ Established a recruitment program to enable streamlined access and hiring of staff in the continuing-care sector
- ✓ Made the Continuing Care Assistant Registry mandatory
- ✓ Expanded an innovation fund to help long-term care facilities and home-care agencies find local solutions to obstacles that could prevent a person from accepting or staying in a job
- ✓ Established a mental health resource for First Responders
- ✓ Provided tuition and books for current and incoming continuing care assistant students
- ✓ Invested in more workplace safety measures for long-term care and home-care staff
- ✓ Added two permanent addictions and mental health clinical assistants in Eastern Zone while psychiatrist recruitment continues



Solution 1: Become a magnet for health providers

What we will do:	Actions will include:
<p>Invest in education and training opportunities to ensure the health needs of communities are met</p>	<ul style="list-style-type: none"> • Develop a provincial health workforce strategy to ensure community health needs are met in the short and long term • Open more nursing seats to increase the number of registered and practical nurses graduating in the province, including those from underrepresented groups • Work with Cape Breton University to research and explore new ways to recruit, train, and retain more healthcare workers in rural areas • Work with Dalhousie Medical School's Family Medicine Clinics to take 3,500 more people from the Need a Family Practice Registry • Increase residency seats, targeted to areas of specialty and need across the province, such as child psychologists • Train more specialized healthcare professionals, including laboratory technologists, through a partnership with the Michener Institute of Education • Continue implementation of free tuition and books for continuing care assistant students
<p>Increase supports for local recruitment efforts, showcasing Nova Scotia's warm and welcoming culture</p>	<ul style="list-style-type: none"> • Give communities the tools they need for successful recruitment, including establishing a \$2 million fund for local recruitment efforts, and developing recruitment and retention plans to meet community health needs • Continue to implement new physician incentive programs to recruit doctors and retain graduates, primarily in rural communities • Provide new and graduating family physicians and nurse practitioners the tools they need, such as office space, mentorship, and onboarding supports, to establish new practices • Work with the Health Association of Nova Scotia to support clinical placements and rural hiring of continuing care assistants
<p>Streamline the recruitment experience to attract qualified health providers, including those from underrepresented groups</p>	<ul style="list-style-type: none"> • Establish clear and effective processes and timelines for hiring • Expand opportunities for physicians and/or other health professionals to participate in recruitment efforts • Establish a retirement fund for full time physicians who practise patient-facing services

What we will do:	Actions will include:
<p>Understand and address systemic racism, oppression, and discrimination in recruitment and retention strategies</p>	<ul style="list-style-type: none"> • Ensure reporting mechanisms are in place for staff experiencing racism and discrimination in the workplace • Identify and address internal barriers to equity in employment and advancement • Review and update employment equity policies to address the concerns of equity-seeking and racially visible groups • Review and implement diversity and equity training to support the continued development of the workforce
<p>Accelerate and support the integration of qualified internationally educated and trained health providers</p>	<ul style="list-style-type: none"> • Explore opportunities to increase the number of clinical associates practising in the province • Expand existing pathways for foreign-trained physicians to gain full licensing in Nova Scotia by increasing the number of seats in the Practice Ready Assessment Program • Support internationally educated health providers to work in the province, including supporting their transition and integration into communities • Work with the Nova Scotia Community College to position the Nursing Re-entry Program to meet the needs of internationally educated licensed practical nurses • Advance a targeted immigration strategy to support recruitment efforts in continuing care
<p>Accelerate investments in technology and digitization to ensure care teams are able to provide quality, people-centred care that is culturally specific</p>	<ul style="list-style-type: none"> • Implement One Person, One Record (OPOR) • Use resident assessment technology in long-term care homes to better understand people’s care needs

Solution Two:

Provide the care Nova Scotians need and deserve

Imagine a system where Nova Scotians receive people-centred, flexible, quality healthcare throughout life, when they need it. Whether interacting with a primary health provider, finding addictions or mental health support, seeking help in an emergency, managing chronic disease or accessing continuing care as they age with dignity, Nova Scotians deserve a response that is compassionate, equitable, effective, and informed by evidence. By thinking differently about healthcare delivery across the continuum of care, embracing data, metrics, modern tools and technology, and leveraging staff expertise and experience, people get the right care in the right place at the right time from the right care team.

What we heard:

Both rural and urban health providers focused on a lack of access to care, mainly driven by two issues – a lack of adequate resources to meet people’s needs and a misalignment of access points, which creates barriers such as overcrowding in emergency rooms and a lack of available long-term care beds. They said the health of each Nova Scotian should be considered as an interconnected whole, not in silos that result in competition for funding, lack of enthusiasm for innovation, and inefficient spending.

They advocated for more local decision-making. People flagged aging infrastructure as a key issue and urged investments in technology and physical infrastructure, including more patient-enabling tech tools and virtual care platforms. The public has long been lobbying for better access to long-term care and home care so that they can age in place. They say the system is difficult to navigate and not equitable. And this government has heard time and again that the healthcare system cannot handle today’s needs.

What we've done:

- ✓ Expanded virtual care to people on the Need a Family Practice Registry
- ✓ Introduced a rebate for fertility treatments and surrogacy-related medical expenses
- ✓ Invested in increased staffing levels to establish a daily standard of at least 4.1 hours of one-on-one care per long-term care resident
- ✓ Expanded operating room hours and added 28 beds and staffing at Dartmouth General Hospital to support more surgeries
- ✓ Invested in expanded operating room capacity in Cape Breton
- ✓ Funded more cataract surgeries in the province



Solution 2: Provide the care Nova Scotians need and deserve

What we will do:	Actions will include:
<p>Develop innovative primary healthcare models to deliver care when, where, and how it's needed</p>	<ul style="list-style-type: none"> • Strengthen local decision making by empowering leaders in each zone to develop clinical health services plans to realign services with the needs of communities • Give local leadership the supports they need to implement their plans, including the adoption of new technologies, integration with other areas of the system, and letting providers work to their full scope of practice
<p>Expand access to long-term and home care with investments in people, technology, and infrastructure</p>	<ul style="list-style-type: none"> • Renovate and build more than 2,500 single-bed rooms over three years • Seek federal government funding for at least an additional 1,000 new private rooms on top of the 2,500 for a total of 3,500 new single-bed rooms • Work to increase staffing levels at long-term care homes to achieve a daily standard of 4.1 hours of one-on-one care per resident • Increase culturally-specific supports to ensure needs are met in a way that reflects the diversity of the residents of Nova Scotia • Refocus efforts on Home First strategies to help more patients return home with increased levels of supports rather than wait in hospital for admission to long-term care • Redesign the Home Support Program to better meet the needs of continuing-care clients and their caregivers
<p>Improve the coordination of care services for Nova Scotians with complex needs</p>	<ul style="list-style-type: none"> • Expand the INSPIRED program beyond Halifax to provide home care for patients with advanced COPD • Develop new chronic disease management programs to provide supports for other chronic illnesses • Expand challenging behaviours supports for continuing care providers, clients, and their families • Implement programming that better meets the needs of specialized populations such as individuals with complex behaviours and young adults

What we will do:	Actions will include:
<p>Implement innovative solutions to reduce surgical wait times, provide safe, quality care and achieve benchmarks</p>	<ul style="list-style-type: none"> ■ Reduce wait lists by completing 2,500 additional surgeries in the next 12 months ■ Establish a centralized booking system to manage waitlists for surgeries ■ Realize efficiencies by establishing a process for central intake and pooling of referrals ■ Continue to dedicate resources to expand operating room hours and capacity
<p>Expand virtual care to strengthen the system and improve access to appropriate care</p>	<ul style="list-style-type: none"> ■ Develop a multi-year virtual care strategy ■ Expand virtual care to include some consultations with specialists so patients don't have to travel for care ■ Integrate mental health services into the virtual care program for all Nova Scotians ■ Introduce virtual care as another service option in emergency departments to lower wait times for patients without a primary care provider seeking non-urgent care ■ Allow walk-in clinics to offer virtual care



Solution Three:

Cultivate excellence on the frontlines

We will build care teams that work together and have the information, technology, and tools they need to provide a high standard of care. Healthcare workers entering the field will be well-prepared and mentored. Other best practices, along with performance and outcome measures, will drive improvements in care and motivate all involved. The culture will shift to be collaborative, people-centred, and results-focused, becoming a driver of innovation, industry, and our economy.

What we heard:

In addition to recruiting and hiring new staff to support Nova Scotia's healthcare system, the sector expressed a pressing need to harness the expertise of its existing staff and support them in their professional development. Developing a spirit of entrepreneurship was an idea that came up consistently during the Speak Up for Healthcare Tour, and it was noted that this won't happen in a system that is stretched to its breaking point – we need budget reallocation strategies, multidisciplinary teams and new care models.

They said we need to empower providers to make people-centred decisions at all levels of healthcare. Beyond the tour, we are continually hearing that Nova Scotians are living longer lives with more complex needs and that the continuing care system must also evolve so people can flourish.



What we've done:

- ✓ Completed extensive work at the Dartmouth General Hospital under the QEII New Generation Project
- ✓ Started the redevelopment of the IWK Health Centre's emergency department to expand capacity to more than double its current size to meet current and future demands
- ✓ Opened a new facility in Kentville to train family medicine residents
- ✓ Developed an initial operating concept for a 'command centre' that will integrate and coordinate the people, data, processes, and decision-making required for timely patient access and flow at the QEII Health Sciences Centre
- ✓ Invested in new hearing and speech technology that will benefit newborns, children, and other Nova Scotians
- ✓ Invested in recognition of prior learning, work-and-learn opportunities, and professional development efforts in continuing care
- ✓ Introduced an amendment to the *Hospitals Act* to allow nurse practitioners to admit patients to hospital
- ✓ Increased wages for unionized and non-unionized continuing care assistants in the publicly funded sector by about 23 per cent

Solution 3: Cultivate excellence on the frontlines

What we will do:	Actions will include:
<p>Invest in health equipment, technology, and infrastructure to support a safe, attractive, and healthy workplace</p>	<ul style="list-style-type: none"> • Develop modern infrastructure to support the health system, including the continued implementation of the QEII New Generation and Cape Breton Regional Municipality Redevelopment projects • Replace and expand medical equipment to support safe, quality care, including upgrades to laboratory services, diagnostic imaging, and cardiac care • Implement IT solutions to improve patient care, access and flow across the system, such as a transportation scheduling system and a bed placement system in long-term care • Expand the ‘command centre’ model to Central Zone and eventually province-wide
<p>Increase professional development and practice supports</p>	<ul style="list-style-type: none"> • Develop a mentorship program to support early-career nurses entering the workforce • Implement the Work and Learn Continuing Care Assistant Education Model • Ensure health providers have access to addictions and mental health training and education • Enhance access to development opportunities for underrepresented healthcare providers
<p>Increase the number of care teams working together to maximize resources and provide safe, quality care</p>	<ul style="list-style-type: none"> • Leverage information and technology to connect care teams and enhance collaboration
<p>Continue efforts to standardize and simplify how health providers work</p>	<ul style="list-style-type: none"> • Implement best practices to reduce variation in surgical procedures to improve patient care

What we will do:	Actions will include:
<p>Address barriers and optimize the ability of health providers to work to their full scope of practice</p>	<ul style="list-style-type: none"> • Review and assess restrictions limiting health providers from working to their optimal scope of practice • Explore opportunities to expand the role of health providers, such as nurses, pharmacists, and paramedics to support delivery of health services • Expand the registered nurse prescribing pilot to improve access to approved services and medications
<p>Ensure diversity, inclusion, and representation at all levels of the health system, including leadership, to generate a workforce that represents the people being served</p>	<ul style="list-style-type: none"> • Develop measurable diversity, equity, and inclusion frameworks and assign accountability at all levels of the health system • Review health policies, programs, and services to understand equity gaps and develop solutions • Create designated African Nova Scotian health consultant positions to provide leadership and guidance in the delivery of culturally specific health services
<p>Focus on keeping current healthcare workers through retention efforts and supports aimed at rebuilding the resilience of the health workforce</p>	<ul style="list-style-type: none"> • Continue to engage health providers and support staff, including those who have moved within and outside of the province, on factors that influence retention • Develop or enhance existing policies, strategies, and initiatives through a lens of retention, including onboarding of new hires and matching physicians to opportunities in communities that fit their lifestyle • Level the playing field with respect to remuneration and pay family doctors at a rate that is in line with that of hospitalists

Solution Four:

Build in accountability at every level

Our transformed health system will be coordinated and equitable, with a shared understanding of expectations, roles, responsibilities, and success driving high performance. Health providers will connect to other areas of the system to support continuity and a quality patient experience. Value for money improves as innovation and collaboration lead to better population health and patient care, and enhanced well-being of care teams. Areas for improvement will be continuously assessed based on patient outcomes and experience, provider experience, and dollars invested. Every person will strive for cultural competence in an environment of respect, collaboration, and learning. Transparency and openness will help Nova Scotians understand what's happening and why decisions are being made.

What we heard:

Many health providers on the tour expressed frustration with their workplace culture and a perceived lack of accountability within management, a sense of complacency, a lack of caring for staff, a lack of urgency to make decisions, and a disconnect between management and frontline staff. They acknowledged the challenges facing management teams but felt strongly that more must be done to ensure health leadership is held accountable for their performance and the pace and outcomes of their decisions. They want training for managers, performance reviews, streamlining of management, and an environment that supports innovation.

Health providers themselves want to spend their time working directly with patients, through full scope of practice, and not with mountains of paperwork. Aside from what we heard during the Speak Up for Healthcare Tour, Nova Scotians view long surgical waitlists, nurses working double shifts, and ambulances waiting for hours to unload patients as proof of inefficiencies, waste, and poor decision making. As well, the number of people needing continuing care supports far exceeds capacity.

What we've done:

- ✓ Replaced the Nova Scotia Health Authority board of directors with an interim Administrator and introduced a streamlined leadership team to work with frontline healthcare workers and system leaders to drive change
- ✓ Revised accountability agreements with the health authorities to monitor outcomes
- ✓ Established a multiyear accountability framework to ensure outcomes are being met through focused system performance at all levels



Solution 4: Build in accountability at every level

What we will do:	Actions will include:
<p>Clearly articulate desired culture and expectations, and model behaviours that drive excellence at every level</p>	<ul style="list-style-type: none"> • Establish a leadership development program with greater attention given to underrepresented groups, including Indigenous and African Nova Scotians • Review and refresh long-term care funding and agreements • Explore funding models that provide more choice for both individuals and caregivers, providing them with more opportunities to arrange their own services, while ensuring accountability for investments made • Introduce a healthcare auditor as a new officer of the legislature to guide and support a culture of continuous improvement
<p>Reduce red tape and duplication to direct more resources to quality patient care</p>	<ul style="list-style-type: none"> • Review and modify the organizational structure of healthcare to reduce duplication and ensure it's designed around patient needs and behaviours • Address governance challenges in the continuing care system to reduce administration and confusion, and improve accountability • Develop modern and flexible legislation and regulatory regime that supports a person-centred approach to service delivery in continuing care • Review the current approach to case management to ensure a person-centred approach that maximizes flexibility for clients in continuing care and their families • Review existing workflows for opportunities to reduce the amount of time spent on paperwork • Implement digital solutions to improve processes • Continue to identify opportunities to reduce unnecessary administrative burden on physicians, staff, and patients
<p>Set clear and transparent metrics and standards for the planning and delivery of health services and publicly report on results</p>	<ul style="list-style-type: none"> • Develop an Integrated Health Services Planning Framework that outlines program standards and standards for the delivery of health services • Develop health system indicators to measure and report publicly on progress and performance of the health system • Maintain performance agreements with the health authorities

What we will do:	Actions will include:
<p>Improve public and provider access to information to ensure accessibility, a coordinated and equitable approach, and clear expectations</p>	<ul style="list-style-type: none"> • Use data to drive decisions and determine where improvement is needed • Work with diverse communities to ensure access to culturally specific information
<p>Improve coordination and collaboration across the health system to address and avoid gaps in service</p>	<ul style="list-style-type: none"> • Continue to integrate continuing-care programs with other areas of the health system to improve transitions and continuity of care • Establish new ways of working with Tajiikeimik to support Mi'kmaw-led health priorities and improved health outcomes for Mi'kmaq and other Indigenous groups • Establish a health equity partnership including Department of Health and Wellness, Nova Scotia Health, IWK and other stakeholders to understand and address equity issues in the system • Establish a Patient Navigation Program to support Indigenous patients, and equity-seeking and racialized patients, navigating the health system • Improve the integration of mental health and addictions services across the health system, including primary healthcare and emergency departments • Champion a three-digit mental health crisis phone line • Conduct a full review of the formulary of drugs covered by Pharmacare programs to ensure the needs of Nova Scotians are met

Solution Five:

Be responsive and resilient

Approaching health proactively bolsters health equity, addresses social determinants of health, and builds on learnings from the COVID-19 pandemic. Investing in public health, research, preparedness, and emergency response will build a system that can weather ups and downs and will position us for a healthy future. With more decisions informed by local needs, people and communities will become active contributors to a healthy, equitable, diverse health system. By focusing on keeping Nova Scotians healthy, and managing chronic disease and other public health issues, we will meet the health challenges of today and tomorrow.

What we heard:

A clear belief expressed during the Speak Up for Healthcare Tour, particularly in areas outside of Halifax, is that centralized decision-making is reducing the ability for the health system to respond to community issues in a timely manner. Providers described situations where they believed access to care and patient outcomes were impacted by the inability of the health system to make timely decisions. They believe local leaders are better able to prioritize issues and make decisions based on contextual factors that are relevant to a community.

Participants also want proactive investments in social programs that will alleviate pressures in the health system by addressing the root causes of poor health – affordable housing, food security, and living wages. They said COVID-19 has led to more comfort with virtual care and other innovations and this should be leveraged to full effect. Meanwhile, the public wants to know that the system will be able to respond to another pandemic or similar health emergency. They want solutions for dealing with an aging population. And they want a system that treats the whole person, not simply one ailment.

What we've done:

- ✓ Opened urgent treatment centres in North Sydney and Parrsboro
- ✓ Added new vehicles and staff to double patient transfer capacity and enable paramedics to focus on emergencies
- ✓ Invested in the Newcomer Health Clinic to hire more staff and expand operations
- ✓ Launched the Health Innovation Hub
- ✓ Invested in the development of a Mi'kmaw Mental Health and Addictions Strategy
- ✓ Invested in the Eskasoni Crisis and Referral Centre to support mental health and addictions services
- ✓ Extended presumptive prescription benefit coverage for firefighters to include more cancers and heart attacks



Solution 5: Be responsive and resilient

What we will do:	Actions will include:
<p>Engage with, learn from, and collaborate with communities and support organizations to improve access to culturally appropriate services</p>	<ul style="list-style-type: none"> • Work with communities, including First Nations, Acadian, and Francophone communities, to ensure their language interpretation needs are met • Improve access to services in African Nova Scotian communities through the expansion of the Nova Scotia Brotherhood Initiative and the development of a sisterhood model
<p>Continuously advance the delivery of healthcare through research and learning by doing</p>	<ul style="list-style-type: none"> • Encourage research and discovery through the Health Innovation Hub
<p>Support the health and well-being of health providers</p>	<ul style="list-style-type: none"> • Ensure conflict resolution policies and programs are in place for health workers • Focus on workplace safety initiatives to support staff in delivery of quality care, including access to training and equipment in long-term care and the installation of power stretchers and loaders in all ambulances • Work with Emergency Medical Care Inc. on workplace initiatives such as a paramedics’ mentorship program and an employee engagement committee
<p>Ensure projects already in progress will meet the needs of a growing and changing population</p>	<ul style="list-style-type: none"> • Put a plan in place to guide sustainable investments in health infrastructure over the medium and long-term • Invest in community-based health services for newcomers, including child and youth services

What we will do:	Actions will include:
<p>Explore and implement innovative solutions to optimize resources and capacity while ensuring quality and safety</p>	<ul style="list-style-type: none"> • Open more urgent treatment centres to improve access to same day/next day care across the province • Review the composition of care teams to ensure appropriate resources are available to support staff and patient flow in hospital • Explore alternative levels of care in long-term care to complement existing programs • Partner with community organizations to pilot smart home technologies and scale up solutions based on evidence • Explore community hub models to support seniors' timely access to focused care in home or long-term care settings • Expand patient transfer units to reduce the use of ambulances for transfers between facilities in Halifax and Cape Breton • Expand EHS Integrated Health Programs, such as the Extended Care Paramedic Program for continuing care patients, and the Community-based Paramedic Program in Cape Breton, to avoid unnecessary trips to the emergency department
<p>Strengthen the public health system so that we are better prepared to respond to future public health emergencies, including epidemics and pandemics</p>	<ul style="list-style-type: none"> • Invest in resources to better equip the system to respond to public health issues • Continue the delivery of COVID-19 vaccines and boosters to Nova Scotians

Solution Six:

Address the factors affecting health and well-being

We will provide supports and empower partnerships, people, communities, governments, and organizations to work together to achieve good health and well-being. When we address long-standing barriers to better health, including inequities and social determinants like food security, housing, racism, and discrimination, Nova Scotians will experience improved health and a better quality of life. As we respond and move forward from the COVID-19 pandemic, we will work to strengthen community-based primary care, mental health supports, public health, and health promotion, while learning from and collaborating with diverse populations. Over time, this will reduce pressure on the health system and contribute to its sustainability.

What we heard:

Throughout the Speak Up for Healthcare Tour, participants focused on the need for greater health equity, which they defined as an effort to ensure all Nova Scotians have fair and equitable access to the health services they need to achieve the best outcomes. Many said this requires investments in social and economic programs related to income, social status, race, gender, and location. Continuing care stakeholders have told us of gaps in community supports to help people stay independent and participate in their communities.

Healthcare workers pointed out eloquently that the system is built to support sick people, rather than to keep them healthy. They amplified messages we've been hearing for years – that we need to emphasize prevention, whether in physical or mental health, and interventions must be targeted. We hear frequently that the pandemic generated fear and anxiety, and intensified pre-existing mental illnesses and substance-abuse disorders. To top it off, we also know that we are lagging behind in global health indicators, particularly when it comes to suicide and cancer mortality, which can both be linked to overall health and well-being.



What we've done:

- ✓ Established the Seniors Care Grant to provide help with household services
- ✓ Provided funding for community projects that help older Nova Scotians stay healthy, active, and socially connected in their communities
- ✓ Established the Office of Addictions and Mental Health
- ✓ Implemented New Recovery Support Hubs in Dartmouth and New Glasgow
- ✓ Invested in mental health peer-support training for youth
- ✓ Opened the province's first acute mental health day hospital at the QEII Health Sciences Centre

Solution 6: Address the factors affecting health and well-being

What we will do:	Actions will include:
<p>Partner with communities and empower Nova Scotians to improve our collective health and wellness</p>	<ul style="list-style-type: none"> • Establish a community wellness framework to guide long-term funding for community organizations working to improve community wellness • Support and expand Youth Health Centres in high schools • Support innovative community-based programs that promote independence among home care clients
<p>Build capacity with strategic investments in diverse communities and by partnering with community organizations to design culturally safe and appropriate health services</p>	<ul style="list-style-type: none"> • Make sustainable investments in organizations working to advance health in diverse communities, including 2SLGBTIQ+ • Develop a Health Equity Framework to guide targeted approaches on health equity experiences for various equity-seeking populations • Map community organizations, associations, and groups to determine gaps in services and opportunities to improve outcomes through partnerships
<p>Enhance data collection to better understand the health of our communities to guide policy and investment decisions and support prevention efforts</p>	<ul style="list-style-type: none"> • Collect the data needed to better understand and address health inequities
<p>Proactively address factors affecting health with accessible and comprehensive primary healthcare, public health, and health promotion</p>	<ul style="list-style-type: none"> • Work with the Department of Education and Early Childhood Development on addictions programming across the province, and ensure an educational component in the curriculum for students to learn the harms associated with drugs and alcohol • Expand public health services for children, youth, and families

What we will do:	Actions will include:
<p>Reduce gaps in access to care with strategic investments in addictions and mental health</p>	<ul style="list-style-type: none"> • Develop a workforce strategy to meet the mental health and addiction needs of Nova Scotians • Work with organizations inside and outside of government to ensure management of standards of care, best practices, and models of care • Continue support for harm reduction programs, including managed alcohol programs, needle exchanges, overdose prevention sites, and naloxone • Implement and expand same-day mental wellness supports, peer support lines, recovery support centres, and the integrated youth services model • Introduce universal addictions and mental health coverage that guarantees every Nova Scotian access to mental health professionals • Develop targeted solutions for people facing the greatest barriers to accessing addictions and mental health services
<p>Prioritize and collaborate across government to address the social determinants of health</p>	<ul style="list-style-type: none"> • Support the Department of Agriculture as it examines policies and programs to reduce the costs of healthy foods • Support the Department of Education and Early Childhood Development as it reviews and updates curriculum related to physical activity and healthy living • Identify new opportunities for partnerships to address addictions and mental health

Measuring Success

The work to transform healthcare in Nova Scotia requires time, energy, and financial investment. Our government is committed to both short- and long-term solutions that will move us to an accessible, sustainable, people-centred, and outstanding system.

Measuring success is a key part of this work, and we will do so transparently, through performance measures that will be easily accessible to the public. Health and well-being will also be monitored over the long term to track changes in the overall health status of Nova Scotians.

We will ask ourselves tough questions and demand the truth on issues such as how many Nova Scotians are still seeking a primary care provider, how long people are waiting for certain surgeries, and the number of health providers who have been recruited to live and work here.

We know that Nova Scotians want tangible progress, and so do we.

Look for updates at novascotia.ca/actionforhealth



Glossary of Terms

Care team:

The client, families, regulated health professionals, unregulated care providers, and employers involved in the delivery of care

Continuing Care:

Services provided to people who need care outside of hospital, in their home and community

Health equity:

The absence of unfair and avoidable or remediable differences in health among population groups defined socially, economically, demographically, or geographically

Home Care:

Services provided to people of all ages who need assistance to maintain their optimal well-being and independence at home

Long-term Care:

Facilities licensed and funded by the Province to provide services for people who need ongoing care

People-centred:

People, providers, families, and communities are equal partners in planning, developing, and monitoring care to make sure it meets their needs and achieves the best outcomes



Primary health care:

A multidimensional system that organizes services for people across the continuum of care and understands and works with partners to improve the health of communities

Scope of practice:

The roles, functions, and accountabilities a healthcare professional is educated and authorized to perform by legislation, regulatory authority, and regulations

Social determinants of health:

The non-medical factors that influence health outcomes, including the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life

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NOVA SCOTIA

