



WORKING TOGETHER TOWARD
better health

Ministers' Report to Nova Scotians 2005–2006



MESSAGE FROM THE MINISTER OF HEALTH, AND THE MINISTER OF HEALTH PROMOTION AND PROTECTION



Changing our focus from a culture of sickness to one of health will take a generation. But success is a great motivator. Getting Nova Scotians healthy, helping them stay healthy, and protecting their health – those are the shared goals of the Department of Health and Nova Scotia Health Promotion and Protection.

Never before has the link between health promotion, health protection, and health care been so important. We face a number of public health threats, from chronic disease to pandemic influenza, and we face a number of challenges – long wait times, an aging population, and a shortage of trained health-care professionals.

While new to our respective portfolios, we are fully aware of such challenges. But what goes unnoticed are the efforts already going on in the province to face those challenges head-on.

For example, we are pleased to celebrate five years of partnerships with our community health boards. We want to say a special thank you to the volunteers who make up our 37 community health boards for their past and present work in promoting healthy communities and looking at new and innovative ways to deliver safe health care in the best interests of Nova Scotians.

One of the great accomplishments this past year has been the development of health promotion teams in communities. Each district health authority, partnered with regional school boards, will have a sport animator, an additional public health nutritionist, a tobacco control coordinator, and a chronic disease coordinator. This is in addition to problem gambling coordinators, addictions staff, and regional representatives for physical activity, sport, and recreation.

Changing a culture is not done quickly or easily. Yet, we're on our way to achieving our vision of a healthier and safer province. To have success, we must all work together – individuals, families, organizations and communities – and each is doing their part. We hope this report serves as a snapshot of that hard work.

Sincerely,

Chris d'Entremont, Minister of Health

Barry Barnett, Minister of Health Promotion and Protection

INVESTING MONEY

when and where it counts

Roughly \$2.6-billion is what was spent to provide health care to Nova Scotians last year – almost half of the entire provincial budget. In order to sustain health care, it's going to take innovative, well-researched investments where the money will make the most difference. That's why over the past year \$300,000 per hour was spent in health-care centres and community clinics and on programs, buildings, and grants for communities.

In 2005–2006, the provincial government allocated \$2.5-million to design and start the **Diabetes Assistance Program**. This program helps cover the cost of most diabetes medications and supplies and is available to people who are under the age of 65 and have no other drug coverage. Between 3,000 and 5,000 Nova Scotians will be eligible for coverage under this program.

New digital diagnostic-imaging equipment in health-care centres across the province will allow area physicians and their patients to make faster and better treatment decisions. The Department of Health is investing more than \$800,000 in new equipment and technology as part of the Picture Archive and Communications System (PACS) expansion project.

Cobequid Community Health Centre

The new Cobequid Community Health Centre in Sackville opened its doors on February 20. The new \$34-million centre is three times the size of the old facility and features an expanded emergency department, more clinical space, and expanded laboratory and diagnostic capabilities, including a new multi-slice CT scanner.



Nova Scotia Health Promotion and Protection gave funding to partnerships of school boards and district health authorities to expand the **Health Promoting Schools** program across the province. Research shows that pairing healthy eating and physical activity, among other healthy behaviours, is the most successful way to help our children be healthy for life.

A Sound Start: The province invested \$275,000 in speech-language treatment for preschool children. Almost 13,000 preschool children in Nova Scotia have some form of communication disorder. Because of this investment, children in several areas of the province have seen a decrease in wait times for their initial assessment and treatment.

“There’s no longer a reliance on the family doctor to be all things to all people. Instead, a team approach can mean a much better use of health-care resources. And we’re shifting our focus to preventing illness and promoting good health, instead of just treating people when they’re sick.”

*Dr. James Rafferty,
North Queens Community Health Centre, Caledonia*

HELPING PEOPLE *stay healthy*

In February, Premier Rodney MacDonald announced the creation of a new department, **Nova Scotia Health Promotion and Protection**. It brings together the progress gained by Nova Scotia Health Promotion, the expertise of public health staff throughout the province, and the vigilance of our medical officers of health. Having these resources together will secure a healthier and safer future for Nova Scotians.

Parents are the focus; healthier children and families are the goal. Nova Scotia Health Promotion and Protection has launched a social marketing campaign for parents of children aged 0–12 that focuses on healthy eating, physical activity, injury prevention (car seats/booster seats), and tobacco (second-hand smoke in the home). The campaign's aim is to motivate and support parents to take small steps toward healthier choices. Visit www.momsanddads.ca for more information.

Walking and wheeling are healthy ways to get around town – for you and the environment. We're working with the Heart and Stroke Foundation, the Ecology Action Centre, and people from municipalities, the province, and the federal government to help more people participate in active transportation like walking to school and work and using our province's many trails.

We've butted out big time. In October 2005, Nova Scotia passed the strongest anti-smoking legislation of its kind in Canada. Smoking will be banned in all indoor public areas and workplaces and at outdoor eating and drinking establishments in the province by December 1, 2006.

The World Health Organization and Health Canada **recommend exclusive breastfeeding** for the first six months of life, to promote the health of both mother and baby. The province's breastfeeding policy supports breastfeeding anytime, anywhere.

Booster seats are { safe. inconvenient }

One of the { happiest frustrating } moments of my day.

For more information on booster seats, go to: momsanddads.ca

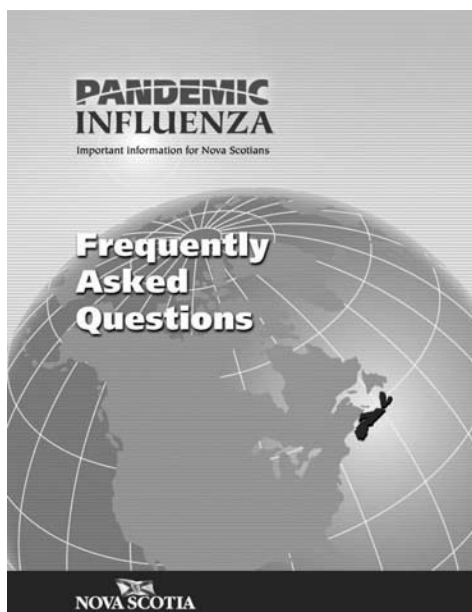
For healthy mealtime ideas, go to: momsanddads.ca

NOVA SCOTIA
HEALTH PROMOTION AND PROTECTION

A 2002 survey showed that today's youth know less about sexual health than youth did 13 years ago. The **Roundtable on Youth Sexual Health**, working with Nova Scotia Health Promotion and Protection, has been addressing this lack of information by developing ways to better promote, support and improve youth sexual health. They recommend actions such as identifying quality resources for helping parents talk to their children about sexual health. The document is expected to be completed and released in fall 2006, and the members of the roundtable will put it into action over the next three to six years.

Nova Scotia Health Promotion and Protection is leading the development of a **Comprehensive Workplace Health Strategy** for Nova Scotian workers. We will encourage groups to work together to develop this strategy and will engage those who know best what's happening in workplaces, and what needs to happen differently to make them healthier.

Nova Scotians are better protected against communicable diseases than ever before. The new **Health Protection Act** enables government to better contain the spread of new contagious diseases, like pandemic influenza or SARS. Under the new legislation, the Minister of Health Promotion and Protection can declare a public health emergency if a threat is serious and imminent.



One in five Nova Scotians who drink alcohol put themselves at risk. **The Alcohol Indicators Report** released in December 2005 gives us the information we need to identify the kinds and the severity of harms and problems that some Nova Scotians experience as a result of using alcohol. Some of the harms could be violence, injury, and even some cancers. The report is a collection of data from various sources and is the first of its kind in the country. It will help our work with partners to develop a strategy to reduce harmful drinking.

Dr. Maureen Allen, Debbie Cotton, and their paramedic and police colleagues invite all grade 10 students to **PARTY** – that's **Prevent Alcohol and Risk-Related Trauma in Youth**. It takes teenagers on the real-life ride of an injury survivor going from a car crash, into an ambulance, through emergency and intensive care, and into rehabilitation. To bring PARTY to your school, e-mail PARTY@gov.ns.ca.



The province continues to work with district health authorities, other provinces, and Health Canada to plan for **pandemic influenza**. We have developed a new website that describes what pandemic influenza is, the risk of it occurring in Canada, what makes it different from the "ordinary" influenza we get every winter, and what the province is doing to prepare.

Information is available at www.gov.ns.ca/pandemic/.

TRAINING, RECRUITING & KEEPING *our health professionals*

Health professionals make our health system work – from doctors and nurses to home support workers, dietitians, paramedics, and many others. Planning to recruit and keep our health professionals is complex and dynamic. We are challenged to leave future generations a health-care system that is sustainable, that meets the health needs of communities, and that is rewarding for health professionals.

Thanks to the **Clinician Assessment for Practice Program** developed by the College of Physicians and Surgeons, 11 internationally trained doctors were recruited to communities across Nova Scotia last year and are now providing care to Nova Scotians.

The very first class of Nova Scotia students who received full tuition bursaries to attend the two-year **Medical Laboratory Technology** course in New Brunswick have graduated. District health authorities will be recruiting these 24 graduates who signed a return-of-service agreement. While additional bursary classes continue to train in our neighbouring province, the Department of Health is working to develop a Nova Scotia program.

Nova Scotia's Nursing Strategy is working.

As of October 31, 2005, there are 177 more registered nurses working in Nova Scotia than there were the year before. Also, the number of co-operative positions sponsored by the strategy has doubled since 2001.

An additional 100 co-operative education seats will be added for 2006, with an emphasis on recruiting to long-term care and rural areas of the province.



With projections showing close to half of the present staff will be eligible for retirement in the next 10 years, the **Cumberland Health Authority** knew it would have to be proactive in finding ways to fill the expected vacancies. So, in partnership with the five health-care foundations serving Cumberland County, the district created the **Cumberland Health Care Careers Bursary Program** for students from Cumberland County. Successful applicants receive a bursary of up to \$4000 per year to support their studies in a number of health-care professions. Students who participate must agree to work in the district for as many years as they receive a bursary.



WAITING *for tests, treatments, and services*

Increasing demand for health care is a key factor in increased wait times. People are living longer and have more complex health needs than ever before. This results in more demand for some tests, treatments, and services.

A combination of healthier lifestyles, chronic disease and injury prevention initiatives, better wait time information, recruitment efforts for specialists in key areas, and other important initiatives will help Nova Scotians get the care they need, when they need it.

In 2005, the health ministers of all provinces and territories agreed to common goals called benchmarks for the provision of 10 medical services in the areas of cancer, cardiac surgery, diagnostic imaging, joint replacements, and sight restoration. Based on clinical evidence, these will help guide the Department of Health in its work to **reduce wait times**.

Nova Scotia continues to invest in medical equipment to combat wait times and to **improve access** for cancer patients needing radiation therapy. The addition of a \$2.4-million linear accelerator at the QE II has meant that patients are not waiting as long as before and technologists can spend more time with those who need it.

At present, Nova Scotians are waiting an average of more than a year and a half for knee or hip replacement. The orthopedic surgical team at Capital Health conducted a two-week **joint replacement blitz** in 2005, performing only knee and hip replacements on a patient group that was waiting. The team was able to perform 122 knee and hip replacement surgeries in the two-week period, where they would normally do 100 replacements in a month.

A new **occupational therapy program for children** in Pictou County means that families have less travel and better access to occupational therapy consultation, assessment, and intervention.



Work to combat and better understand wait times in the province is already under way. Nova Scotians can now go to a website www.gov.ns.ca/health/waittimes/ to view wait times for tests like ultrasounds and some surgeries by clicking on the health district they live in. They can also use the information provided there to decide if they would like to travel outside their community to a location where the wait is shorter. Nova Scotians without Internet access can get the same wait-time information by calling **902-424-5200** or toll-free at **1-800-670-4357**. Data being collected in many areas of the health-care system is also being used by health-care managers to improve the system so patients can benefit.

“For years we have been referring our patients to receive care in communities where the wait lists appear to be the shortest. Now, with the click of a mouse, we have access to the wait lists in each district. We can easily share the various options with our patients and together discuss the best one if receiving care in another community is of interest to them.”

*Dr. Romesh Shukla,
an anaesthetist and president of Doctors Nova Scotia.*

DELIVERING

health services within communities

The future of health care in Nova Scotia lies in the strength of our communities. No matter where you are in Nova Scotia, you should not only have access to high-quality health care and services, but you should have access to health education and opportunities to live a healthier life. All across the province, people are working to create more of those opportunities – so that you get the care you need closer to home.

The IWK Health Centre is developing a **Pediatric Rehabilitation Service**. The service's ultimate goal is to help children with disabilities enjoy an enhanced quality of life through participation and integration in their communities. The IWK Rehabilitation team seeks to achieve this by enhancing clinical care, providing information and support to patients and families, reaching out into patients' communities, and providing educational support to health-care professionals across Nova Scotia. The team has been working closely with the Guysborough Antigonish Strait Health Authority and, most recently, South West Health, as part of a plan to reach out to all district health authorities.

Also, within the past two years, two unique programs, "On the Move" and "Wheelin' Wizards," have been launched by the IWK Pediatric Rehabilitation Service. Both programs bring together groups of young people with disabilities for sessions full of fun, innovative, intervention programming designed to promote skill development, participation, and quality of life.

The **Annapolis Community Health Centre** and four family physicians, a nurse practitioner, a public health nurse, and a number of care providers have opened a collaborative practice in the centre. The practice brings the community health model to Annapolis Royal and surrounding communities. Care providers are able to help patients get comprehensive care in one site from a number of different services and programs.

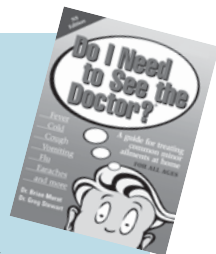
Melanie Mooney, Stroke Coordinator reviews floor plans with Rowland Verge, CMA Practice Solutions and Stan Jones, Yarmouth Stroke Project for the potential development of an ambulatory wellness centre at Yarmouth Regional Hospital.



As part of Cardiovascular Health Nova Scotia, the province's cardiovascular program, **South West Health** received funding to develop a rural stroke program that will serve residents of Shelburne, Yarmouth, and Digby counties. It will be a coordinated approach to providing services from the time a stroke patient is received in the emergency room, throughout their hospital stay and rehabilitation, and their entry back into the community. Rather than focusing solely on people who have had a stroke, the program will include education on stroke prevention and health promotion, so that residents can learn what they can do to avoid becoming stroke victims.

Do I Need to See a Doctor?

Emergency nurses, public health nurses, community health nurses, paramedics, physicians, and others are distributing a colourful, easy-to-read book entitled *Do I Need to See the Doctor?* to parents of young children in the Guysborough Antigonish Strait Health Authority. Clinicians spend time explaining an appropriate section of the book that parents can then use at home to determine how to assess and treat common minor ailments. Popular sections for parents are fever, cough and colds, and ear ache.



Making Strides in Mental Health

- Teens and seniors who think they may be suffering from depression have new resources to help them. The materials are part of a broader campaign by the department to educate Nova Scotians – from school-aged children to the elderly – about the effects of mental illness on families, schools, and workplaces. Brochures to help seniors and teens identify the symptoms of depression are also now available. Go to www.gov.ns.ca/health/mhs to obtain a copy.
- South Shore residents will have better access to mental health services through the addition of a new walk-in clinic at South Shore Regional Hospital. The walk-in clinic provides an opportunity for people with non-urgent mental health problems to speak to a mental health professional. This could include someone experiencing stress, anxiety, grief, or concern over financial or relationship problems or any number of other issues.



“Since our sons, Kyle and Brandon, have been involved in the program, we have noticed huge gains in regards to behaviour issues. Kyle has recently begun to speak words. That has been a major victory for our family. The team delivering the program are very committed and dynamic. While Brandon is presenting some challenges, we remain confident the team will overcome these obstacles. Beyond that, the children of Nova Scotia will be the winners as the team will have gained invaluable experience through this process.”

Gerard and Tracey Avery, commenting on the Early Intensive Behavioural Intervention Program. In 2005–2006 an additional \$4 million was invested to provide Early Intensive Behavioural Intervention treatment for young children with autism.



From L to R, Debbie Burris, RN, Community Health Nurse, Millbrook Health Centre; Glenda Cameron, RN, Maternal Child Unit/Well Women's Clinics, Colchester Regional Hospital; Susan Renaud, RN, Public Health Nurse, Public Health Services.

Women's Wellness

In the Colchester East Hants Health Authority, Public Health Services and the Maternal Child Program at Colchester Regional Hospital have developed a women's wellness initiative.

Six registered nurses were trained to perform pap testing (two from Public Health Services, two from the regional hospital, and two from the Indian Brook and Millbrook First Nations communities). The nurses have begun clinics at the Colchester Regional Hospital, and nearly 100 women have been helped to date. The health authority anticipates continued growth and has already increased the frequency of the clinics to meet the demand. The public health nurses will soon be holding outreach clinics in rural areas, and the First Nations nurses are planning to hold clinics at Indian Brook and Millbrook First Nations.

The clinics are primarily focusing on pap screening, heart rate monitoring, and counselling regarding breast self-exams. Future plans are to include a series of educational sessions on such topics as mental health, osteoporosis, and menopause.

CARING *for seniors*

In light of an aging population that wishes to maintain maximum independence, there is a need to ensure the province is ready. Health promotion and injury prevention initiatives will allow Nova Scotians to maintain their independence and remain active in their communities while investments in chronic disease management, home care, and long-term care beds will support seniors as they age.

Last year, about 1,400 people attended the department's public consultation and focus group meetings across the province or submitted comments in writing to share their thoughts on how continuing care services for all ages should be delivered – today and in the future – to ensure that Nova Scotians can remain in their communities and homes as long as possible. **Shaping the future of continuing care services** in Nova Scotia also involves examining changing demographics, evolving health needs, and future trends in how services are delivered. The recommendations on how to best approach a redesign of services and systems over the next 5 to 10 years will be presented to the provincial government in the spring of 2006.

In Nova Scotia, one in seven people is over the age of 65. By 2016, we estimate that one in every five Nova Scotians will be a senior.

Nova Scotia Health Promotion and Protection is working with stakeholders to develop a provincial strategic framework for **preventing falls** among seniors, a leading cause of injury-related death and hospitalization. The framework will be complete by April 2006.

“Solutions to meeting the needs of seniors and all Nova Scotians today and in the future do not rest in convenient thinking, they lie in our collective creativity.”

From the Strategy for Positive Aging in Nova Scotia, released by the Seniors' Secretariat in December 2005.



CAPITAL INVESTMENTS

- In October 2005, the Department of Health approved 25 new licences for long-term care beds in Cape Breton. Northside Community Guest Home in North Sydney will add a 15-bed Alzheimer unit, and Seaview Manor in Glace Bay will build the remaining 10 beds and replace and upgrade 20 spaces. Planning continues for an additional 100 long-term care beds in Cape Breton.
- Northwoodcare Inc has begun planning for a new multi-service continuing care facility in the Cobequid region that can serve up to 150 people in long-term care, palliative care, community outreach, and rehabilitative services.
- Richmond Villa's \$11.5-million replacement nursing home in St. Peter's, Richmond County, is on schedule to open in early fall of 2006.

WORKING TOGETHER TOWARD *quality care*

The health-care system's main responsibility is to ensure safe, quality health care for Nova Scotians. It's about having the right mix of health services and professionals; it's about access to the right services in a timely way; and it's about having the standards, policies, and guidelines in place and using them consistently.

In 2005, the Department of Health initiated a provincial **Healthcare Safety Advisory Committee** to provide leadership in advancing safety practices and a culture of safety in Nova Scotia's health-care system.

All hospitals in Nova Scotia are currently participating in the national Safer Healthcare Now! campaign. Safer Healthcare Now! is a campaign aimed at reducing preventable complications and deaths in Canadian hospitals. The goal is to improve the safety of patient care through learning, sharing, and implementing interventions that are known to reduce adverse events.

Cape Breton Cancer Centre staff

The Cape Breton Cancer Centre was one of 29 facilities across the country that took part in a national patient satisfaction survey. Almost 80 per cent of respondents from the centre reported their overall care as excellent, far surpassing the Canadian average of 50 per cent. In addition to having the highest overall satisfaction, the **Cape Breton Cancer Centre ranked first** in all other categories. Over 83 per cent of patients rated their access to care positively. Over 87 per cent described their physical comfort and care as excellent. Almost 75 per cent rated the communication, education, and information they received from staff as excellent, and almost 83 per cent felt their preferences as patients were respected.



A Canadian study estimates that 7.5 per cent of patients are adversely affected by care received in health-care settings.

Technology plays a big role in health-care safety.

Nova Scotia is the first province in Canada to implement a single-integrated hospital information system. The system has been implemented in 34 hospitals across the province. Supporting more than 6,000 health-care providers across the province, the system currently has over one million patients on file.

This means easier, faster, and more secure access to vital health information that is necessary for safe and effective care.




NOVA SCOTIA
Health
Health Promotion and Protection

We'd like to hear your feedback on this publication and hear more about how you would like to receive information on the provincial health-care system in the future. To provide feedback visit: www.gov.ns.ca/health/ministersreport/feedback.asp

www.gov.ns.ca/health www.gov.ns.ca/ohp