

**Fiscal Year 2021-22**Quality and Sustainability Plan

August 2021





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# Message from the President and CEO

I am pleased to present Nova Scotia Health's 2021-22 Quality and Sustainability Plan, which highlights this year's key priorities as we continue to work towards achieving the goals set in our five-year Quality and Sustainability Plan 2019-24.

Our work remains aligned with our strategic plan, **Healthier Together** – which focuses on our services, our people and our community.

The 2021-22 Quality and Sustainability Plan highlights the clear connection between our efforts in providing high-quality and safe care to patients when they need it, and how we efficiently and effectively manage our precious human and financial resources.

This past year has been one like no other. The global COVID-19 pandemic affected us all and Nova Scotia health's overall response impacted many facets of the operations. While we continue to respond to COVID-19, we remain committed to providing care in the best way possible while ensuring the safety and well-being of patients, families and our teams.

As we plan for the future, Nova Scotia Health in consultation with our government partners, including the Department of Health and Wellness, determined we will focus our activities and resources in 2021-22 in the following areas:

- Increased, dedicated focus on mental health and addictions.
- · Expansion of public health capacity.
- Continued transformation of the continuing care sector.
- Support for greater equity across the health system.
- Implementation of strategic digital health and infrastructure projects.
- Expansion of supports for Nova Scotians in community



The access and flow of patients and families through our programs and services, our dedicated workforce of staff, physicians, volunteers and learners, and the world-class innovation and research happening in our facilities are other areas that we value and contribute to the overall health system in Nova Scotia.

While we work towards our priorities, we are also striving to optimize our financial resources. As our budget increases annually, inflationary increases beyond our control must be factored into budgeting. With this in mind, we are focused on creating long-term financial sustainability while improving patient as well as staff and physician experiences.

Our 2021-22 Quality and Sustainability Plan maintains Nova Scotia Health's focus on enhancing access and improving services for Nova Scotians while we continue to navigate through the COVID-19 pandemic and establish our new normal – all while striving to create our overall vision of health people, healthy communities – for generations.

**Dr. Brendan Carr**President and CEO



# 2019-22 Strategic Plan • Healthier Together

# VISION

Healthy people, healthy communities - for generations

### **MISSION**

To achieve excellence in health, healing and learning through working together

### **VALUES**

**Respect** is caring for each other and those we serve

**Integrity** is being honest and ethical

Courage is doing what is right even when it may be difficult

**Innovation** is being open to change, learning new things and exploring new possibilities

> **Accountability** is answering to the people we serve and each other for our decisions and actions

### STRATEGIC DIRECTIONS



**Our Services** 

Deliver a high-quality and sustainable health system



**Our People** 

Strengthen and support a healthy, high-performing workforce



**Our Community** 

Work with our communities to improve the health and wellness of Nova Scotians

Collaboration Diversity
Equity Evidence-Informed Engagement
Integration People-Centred Quality
Research Safety



### Our mandate

Health care in Nova Scotia is the collective responsibility of Nova Scotia Health, the Izaak Walton Killam Health Centre (IWK Health) and the Department of Health and Wellness (DHW). Nova Scotia Health, IWK Health and DHW work as partners with a number of government and community-based organizations and service providers to address prevention of disease and injury, promotion of health and wellness and delivery of health services, including emergency care, primary health care, mental health and addictions, acute care, continuing care and end of life care.

The *Health Authorities Act* establishes the roles and responsibilities for DHW and Nova Scotia Health.

#### DHW is responsible for:

Providing leadership by setting strategic policy direction, priorities and standards for the health system.

Ensuring appropriate access to quality care through the establishment of public funding for health services that are of high value to the population.

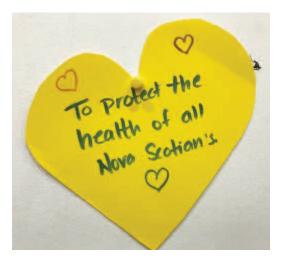
Ensuring accountability for funding and for the measuring and monitoring of health-system performance.

#### Nova Scotia Health is responsible for:

Governing, managing and delivering health services across the province.

Implementing the strategic direction set by DHW.

Engaging with the communities they serve.





### Our mandate



Specifically, Nova Scotia Health provides health services to Nova Scotians and a wide array of specialized services to other Maritimers and Atlantic Canadians. Nova Scotia Health operates hospitals, health centres and community-based programs across the province. Our team includes employees, doctors, researchers, learners and volunteers. We work in partnership with community groups, schools, governments, foundations and auxiliaries, and community health boards. Under the Health Authorities Act, together with IWK Health, we have a legislated responsibility to manage and provide health services to Nova Scotians and to engage with the communities we serve.

Nova Scotia Health is the largest health organization in Atlantic Canada — and the largest employer in Nova Scotia. We serve a population of about 971,000 Nova Scotians. Within our \$2.3 billion budget, we are responsible for hospital and community-based services, including mental health and addictions, public health and primary health care.

Our settings range from one specialty hospital, the QEII Health Sciences Centre, to nine regional hospitals, and more than 30 community hospitals and health centres.

Within the organization, there are about:

24,500 employees

**6,500** volunteers

5,500 learners

**2,586** physicians and 570 medical residents

**160** contracted continuing care service providers

37 community health boards

**41** hospital foundations

**33** auxiliaries

### COVID-19 response

As the world responded to COVID-19, the health system in Nova Scotia worked together to maintain the continuum of services during the pandemic. Working hand-in-hand with our partners – IWK Health, the Department of Health and Wellness and, in particular, the Office of the Chief Medical Officer of Health – Nova Scotia Health supported the province's response on many levels.

We approached the management of the virus from an emergency response perspective. This meant using the same four stage approach we use to respond to other emergencies prevention and mitigation, preparedness, response and recovery. We established emergency operations centres both provincially and in each zone, where emerging issues and opportunities were explored and actioned. Our overall response impacted many facets of operations - as we mobilized to provide care for Nova Scotians while striving to protect our patients, employees, physicians, learners and volunteers. Many of our employees transitioned to work-from-home while others were reassigned to support areas of operation where additional staff were needed. We are extremely proud of the responsiveness of our people and their commitment to care for and protect their fellow citizens.

Many initiatives began during the early phase of the pandemic and will continue into 2021.



# Overall, we continue to respond to the needs of the health system by:

- Collaborating with IWK Health, DHW and community partners to continue to prioritize and implement a responsive, comprehensive testing strategy, timely vaccine deployment to all Nova Scotians and ensure COVID-19 preparedness and timely access to health services.
- Partnering with the DHW to support the long-term care sector including outbreak management, infection prevention and control and occupational health, safety, and wellness.
- Implementing a multi-pronged testing strategy inclusive of primary assessment centres, time-limited university student testing programs, use of mobile testing units and establishment of a self-serve electronic scheduling option.





# COVID-19 response

- Offering high-quality analysis in our microbiology laboratory and bolstering our supplies and human resources to expand our testing capacity for Nova Scotians.
- Focusing on public health contract tracing and increasing the human resources and technologies within this area.
- Supporting the planning and delivery of the province's largest immunization strategy, including health care worker and community immunization clinics and vaccine management and distribution.
- Supporting evidence-based infection control and occupational health and safety practices within the health system, including the addition of new people, processes and technologies to serve the continuing care sector.
- Bolstering our mental health services to increase acute psychiatric resources, enhancing access to outpatient and crisis services and support transitions in care.
- Leveraging technology and innovation, through investments in data management, information systems, communication enhancements and virtual care technologies.
- Implementing new service delivery pathways to support health services including use of virtual care for primary care and specialist services, opening of temporary in-patient bed locations.
- Establishing resources (people, processes, technologies) to support staff deployment

- processes and scheduling for the broader health system during the pandemic.
- Procuring and innovating to bring sustainable, high quality sources for supplies and personal protective equipment (PPE) to Nova Scotia.

As we approached the second wave, while a daunting prospect for all, we took the opportunity to build on what we learned during the initial outbreak.

Working with our partners, we have based our preparations for subsequent waves on several principles:

We must be prepared to live and work in environments with the possible presence of COVID-19.

We must be agile and responsive, balancing the needs of COVID-19, non-COVID and at-risk populations.

The demand for health services may exceed available resources driving the need for alternative approaches and innovation.

Continuing to offer health services to Nova Scotians now and into future waves is a top priority while we also ensure preparation and responsiveness to COVID-19. With that in mind, we will work to provide care in the best way possible while ensuring the safety and wellbeing of patients, families and our teams.

# Our 2021-22 Quality & Sustainability Plan priorities



Improving the health status of Nova Scotians is what guides the work of Nova Scotia Health.

Currently, that health status is not what it should be and that tells us we need to think differently about what services we provide, and where and how we provide them. Much of our population is increasingly frail with more than one serious illness and a high prevalence of mental health disorders and substance abuse. We are also seeing a migration of people from rural to urban and semi-urban areas. We know that our health system is not as efficient as it could be.

Consistent with government and DHW priorities, in 2021-22, we will focus our activities and resources in the following areas:

- Increased, dedicated focus on mental health and addictions, in partnership with the new Office of Mental Health and Addictions.
- Expansion of public health capacity.
- Continued transformation of the continuing care sector.
- Support for greater equity across the health system.
- Implementation of strategic digital health and infrastructure projects.
- Expansion of supports for Nova Scotians in community, including:
  - Access to primary care.
  - Increased community capacity to engage with the health system and enhanced involvement of community and other stakeholders in planning and decision making.

# Our 2021-22 Quality & Sustainability Plan priorities

### A Increased, dedicated focus on Mental Health and Addictions

Between the years of 2015-17, Nova Scotia Health's Mental Health and Addictions Program of Care (MHAP) engaged in a health services planning process, in partnership with IWK Health, which culminated in the release of a report titled: Milestones on our Journey, Transforming Mental Health and Addictions in Nova Scotia: A Provincial Model for Promoting Positive Mental Health, Care and Support (*Milestones On Our Journey*). Since the launch of Milestones, significant progress has been made in achieving the goal of ensuring that Nova Scotians living with mental and/or substance use disorders get the right services, at the right time, in the right place and from the right provider.

In 2021-22, government has established the Office of Mental Health and Addictions overseen by the Chief Mental Health and Addictions Officer.

# The Office will provide system level leadership to:

- Identify and support system level priorities.
- Align mandates and enable collaboration across agencies, departments and partners to achieve enhanced mental health outcomes.



### **COVID-19 Response**

In response to the COVID-19 pandemic and as a means of staying on course and ensuring service continuity, MHAP a-celerated the implementation of key pieces of *Direction 2025*'s strategy and is further along the implementation process and overall service transformation than originally planned. Between March 22, 2020 (when the provincial state of emergency was declared) and March 6, 2021, MHAP has:

- Completed 24,966 crisis interventions via Provincial Mental Health and Addictions Crisis Line.
- Completed more than 14,659 new intake assessments.
- Completed nearly 14,994 initial treatment assessments.
- outpatient visits which includes 172,698 appointments provided through tele-mental health (phone/virtual).
- Completed more than 30,694 visits to our Opioid Use Disorder Treatment Programs.

(Cont'd.)

A Increased, dedicated focus on Mental Health and Addictions (Cont'd.)

Consistent with government and DHW priorities and with our role in the broader mental health and addictions system of care, in 2021-22, we will focus our activities and resources in the following areas:

- Establishing Addiction Withdrawal Management Hubs.
- Expanding access to Tier 2 supports, and enhancement of treatment services in community for children, adolescents and adults:
  - Establishing single session therapy intervention.
  - Routinely meeting and maintaining the urgent care wait-time standard of seven days and the non-urgent wait-time standard of 28 days.
  - Investing in rural psychiatry recruitment and retention.
  - Enhancing our peer support programming.
- Collaborating with IWK Health, the Department of Labour and Advanced Education (LAE) and the Office of Mental Health and Addictions, Nova Scotia Health will implement e-Mental Health and Addictions (e-MHA) services and supports and ensure that they are grounded in user needs. This includes launching our new website and e-mental health services <a href="https://www.MHAhelpNS.ca">www.MHAhelpNS.ca</a>.

#### COVID-19 Response (Cont'd.)

There have been more than 15,588 MHA related visits to Provincial Emergency Departments (ED), accounting for about 4.2 per cent of all ED visits during this timeframe. It should be noted that in the reporting period, about 20 per cent of ED visits were missing a coded chief complaint and therefore the reason for visit s unknown. This means that the volume of MHA-related visits may be underestimated.

Additionally, as an interim measure, MHAP will be implementing new supports to improve access to acute psychiatry services, transitions in care and community supports.

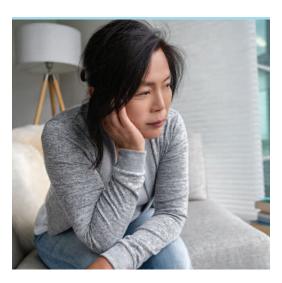
- Increasing access to specialized addiction services/supports, like opioid treatment and recovery program and the new addictions medicine consult service.
- Continuing to advance Direction 2025
   (Direction 2025 Summary Document
   (nshealth.ca)), a plan to bring Nova
   Scotia Health's MHAP vision of "the right
   service, from the right provider, at the
   right time and place" to life.

### A Increased, dedicated focus on Mental Health and Addictions (Cont'd.)

In addition, we will build on the work implemented during the COVID-19 pandemic and expand further to achieve the identified goals in *Direction 2025*. Our areas of focus are to:

- Partner to increase availability of, and support access to, early/brief intervention and self-management supports for people and their families with mild to moderate mental health/substance use problems.
- Increase access and availability of services targeted to those with moderate to severe mental disorders, including addictions, that impacts their daily ability to function.
- Improve value and alignment of services to meet patient and family needs through the completion of program/service reviews in key priority areas.
- Improve quality and effectiveness of mental health and addictions care through continuous quality improvement to systematically improve program processes, analyze program performance and integrate patient and family feedback.
- Increase consistency across mental health and addictions service areas by providing consistent standards of service across the province and ensuring a competent, engaged and high-quality workforce.

Foster a culture of accountability and transparency by improving capacity to measure, manage and report on performance at local, zonal and provincial levels.



A Increased, dedicated focus on Mental Health and Addictions (Cont'd.)



Looking to the future, work that was started in 2020-21 and will continue throughout 2021-22 that is critical to the successful achievement of our program focus areas is:

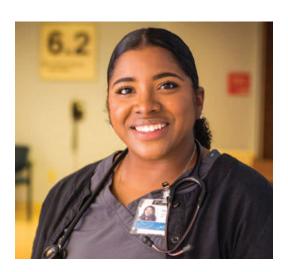
- Early monitoring and self-management through e-Mental Health services and tools; encouraging Nova Scotians to take an active role in their mental health and well-being.
- Improving access and flow across outpatient services via consistent assessments and development of care pathways, including but not limited to the adoption and roll-out of a Routine Outcomes Monitoring solution.
- Engaging community groups, community organizations and other institutions within Nova Scotia to better meet the needs of the people we serve.
- Broadening access to mental health physician and psychiatry services via the introduction of consult models.
- Continuing to expand the training and development opportunities for clinicians and staff across our program of care through the Provincial Centre for Training, Education and Learning.
- Expanding access to care throughout the province through provincial virtual care and reducing impacts of issues related to recruitment challenges.



A Increased, dedicated focus on Mental Health and Addictions (Cont'd.)

Priority Initiative for 2021-22	Expected Outcome	
Review of Mental Health and Addictions Service Models	<ul> <li>Comprehensive review of models of care and service delivery across the program.</li> <li>Recommendations and guidance for service improvement, service realignment and program focus.</li> </ul>	
eMental Health – services, tools and supports	<ul> <li>Expansion of tools, supports and service delivery offered to Nova Scotians through e-Mental Health.</li> <li>Expanded utility for 2020-launched MHAP website.</li> </ul>	
Physician Consult Models	<ul> <li>Pilot projects supporting physician and psychiatry services to be offered in different ways.</li> <li>Opportunities for future change in the physician model of service delivery.</li> </ul>	
Research and Innovation	<ul> <li>Development of a Research and Innovation (R&amp;I) framework to support R&amp;I within the MHAP.</li> <li>Strategically focused research opportunities and engagement with commercial partners.</li> </ul>	
Stepped Care / Stepped Care 2.0	<ul> <li>MHCC partnership to support Tier two and Tier three use of e-MH tools and stepped approach to client care.</li> <li>Formalization and adoption of Stepped Care model.</li> </ul>	
Collaborative projects with Department of Health and Wellness and Mental Health Commission of Canada (MHCC)	<ul> <li>Continued strengthening of relationship between MHAP and DHW and MHCC.</li> <li>Opportunities for future development work.</li> </ul>	
Organizational improvements and supports	<ul> <li>Improved training and development opportunities for staff and physicians within MHAP.</li> <li>Streamlined approach and support for Nova Scotia Health operational initiatives including OPOR.</li> </ul>	

### **B** Expansion of Public Health capacity



Taking a population health approach to our work means investing in and focusing our efforts on the broad range of factors and conditions that influence our health.

This work requires that we recognize health as not simply the absence or treatment of disease, but also as a capacity or resource to be developed that enables a fulfilling life.

In partnership with DHW and the Chief Medical Officer of Health, new investments in public health capacity will better equip the system to respond to public health issues and improve outcomes for Nova Scotians. These investments will support enhanced resources for epidemiology (surveillance), more medical officers of health and emergency management and leadership capacity in core public health functions.

### **COVID-19 Response**

At the height of the first wave of COVID-19, the Nova Scotia Health Public Health team surged its capacity by more than 330 per cent to meet the demands of outbreak investigation and contact tracing. During this time, 90 per cent of the Public Health team successfully transitioned to working from home, rising to and overcoming logistical challenges associated with such a rapid transition.

The Public Health team also organized quickly to deliver new program elements important for mitigating and preventing COVID-19 transmission, including daily health monitoring for cases and contacts, active daily surveillance for long term care facilities. In addition, new investments have been made to support more resources for contact tracing and mobile testing.

Public Health team members were organized to support vulnerable communities and populations, including shelter and food provision for homeless and unhoused individuals who needed to self-isolate. This was a vital factor in containing the spread of disease. Between April and August 2020 more than 100 people were supported to self-isolate, with 838 isolation days in 9 hotels and 2,500+ meals provided.

Despite significant operational and logistical challenges, the team managed a summertime catch-up for the school grade immunization program deferred due to COVID-19 in April, making Nova Scotia the only jurisdiction to do so on a province-wide scale.

### **B** Expansion of Public Health capacity (Cont'd.)

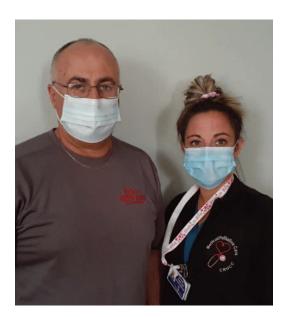
Nova Scotia Health's sustained and new work to address poverty, health equity, systemic racism, food security and harm reduction will result in improved health outcomes: reduction in chronic and communicable diseases and increase in disease prevention and health promotion. The need for us to focus in this way was validated through efforts to renew Nova Scotia Health's strategic plan.

During the winter of 2019, we engaged with many stakeholders including employees, physicians, patients, families, community health boards and community partners to confirm how we can work together to move toward the long-term goal of improved population health.

Doing so is a critical factor in creating sustainability in the health care system, as a population health approach can be expected to lower hospital admissions, result in shorter admissions, and reduce re-admissions.

Since March 2020, response to COVID-19 required Nova Scotia Health to interact with, engage and support communities in many ways that revealed the importance of a population health approach. It is clear through prior engagement and through our COVID-19 response that Nova Scotians recognize the importance of focusing not just on treatment of poor health outcomes but also addressing conditions that impact health. That is why we are doubling our efforts around several priority goals that will help us build organizational and system capacity, strengthen our community partnerships, champion healthy public policies, and inform and support our decision-making.

We are building a population health approach that is sustainable in the long term to ensure public health is strengthened and positions us to meet modern day opportunities and challenges in health promotion, disease and injury prevention and health protection.

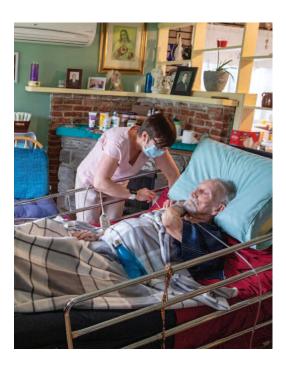


C Continued transformation of Continuing Care

The COVID-19 pandemic had a profound impact on the continuing care sector.

Nova Scotia Health and the Department of Health and Wellness are working together to apply learnings from that experience. DHW is developing a five-year blueprint to plan and implement new and innovative approaches to transform the Continuing Care sector in Nova Scotia. The blueprint will address barriers related to choice and flexibility, infrastructure, workforce development, and sustainability, while creating more capacity to address volumes increase and the complexity of care. It will further focus on people-centered care and service excellence.

Within Nova Scotia Health, the Continuing Care program is comprised of a team of intake and placement staff, care coordinators, home care nurses, behavioral health resource consultants and other members of the allied health and support team. These individuals work in communities and hospitals across Nova Scotia to support individuals as they transition through the care continuum by providing intake, assessment, care planning and coordination, service delivery and access to a range of services including home oxygen, home support, home care nursing and other community-based programming and transition into long-term care.



Within Nova Scotia Health, the Continuing Care program is comprised of a team of intake and placement staff, care coordinators, home care nurses, behavioral health resource consultants and other members of the allied health and support team. These individuals work in communities and hospitals across Nova Scotia to support individuals as they transition through the care continuum by providing intake, assessment, care planning and coordination, service delivery and access to a range of services including home oxygen, home support, home care nursing and other community-based programming and transition into long-term care.

### C Continued transformation of Continuing Care (Cont'd.)

The pandemic has brought renewed attention and focus on the access issues in both home care, equipment programs and long-term care. In 2021-22, we will continue to work with our acute care colleagues, DHW and service providers to:

- Provide ongoing support for COVID-19
   response within the continuing care
   sector, including: infection control and
   occupational health and safety resources;
   a model for regional COVID-19 care; and a
   community transition unit to support
   patients waiting in hospitals to move to
   their community-based home with
   appropriate supports and services.
- Implement improvements in the longterm care placement process including the acquisition and implementation of the new placement coordination software system.
- Review and update the current Nova Scotia Health continuing care case management model.
- Implement recommendations to improve the occupational health and safety outcomes for workers in home care, long term care, and disability support sectors.

### **COVID-19 Response**

In response to the COVID-19 pandemic, the Continuing Care team established zone-based outbreak response teams to provide support to continuing care providers dealing with COVID-19. Resources from across Nova Scotia Health such as IPAC, communications, deployment centres, emergency preparedness, clinical experts as well as government resources were leveraged to ensure timely and effective responses to contain spread, care for those who became ill and maintain care for all individuals served by the organization. We implemented a province-wide hospital variance to long-term care placement to ensure those with the greatest need were able to access long term care and patient flow across the system was maintained.

We enabled 2,138 individuals to transition into long term care including 1,481 patients from hospital. We worked with home care providers to develop and implement a provincial emergency level response code protocol to ensure a consistent approach to service reduction where and when necessary. We continued to provide support to about 15,000 home care clients. Between February 2020 and February 2021, we received 21,630 calls from individuals, caregivers and physicians seeking our supports and services. With support from DHW, Nova Scotia Health has implemented an IPAC program and Occupational Health program for continuing care providers as well as increased deployment centre, emergency preparedness and communications support to assist continuing care providers throughout the remainder of the pandemic.

D Support for greater diversity, equity and inclusion



The health system in Nova Scotia strives to ensure equity-deserving groups – including Indigenous people, African Nova Scotians, persons with disabilities, and other underrepresented groups – are genuinely included, celebrated and provided equal opportunity to thrive and live healthy, fulfilling lives. Working in partnership with the Office of Equity and Anti-Racism, DHW and community partners, Nova Scotia Health is committed to understanding, addressing and preventing systemic racism, while continuing to provide high quality and culturally competent care.

Since 2015, Nova Scotia Health has had a focus on advancing diversity, equity and inclusion across the organization through its provincial diversity and inclusion committee and zone-based committees. Through the work of these committees, the diversity and inclusion framework, a joint document with Nova Scotia Health and IWK Health, was created to further bring focus on specific areas, including:

- Developing and ensuring culturally competent person- and people-centred care and services;
- Increasing diversity in the workforce;
- Engaging and partnering with diverse communities;
- Ensuring diversity in organizational leadership, decision-making and policy; and
- Achieving equity through data collection and research.

D Support for greater diversity, equity and inclusion (Cont'd.)

A variety of initiatives and engagements have resulted from the diversity and inclusion committees, as well as from discussions with teams, leaders and executive members about Nova Scotia Health's foundations: diversity, equity, safety, engagement, collaboration, quality, research, integration, evidence-informed and people-centred.

These initiatives will continue through 2021-22, and several notable examples are described below.

#### **First Nations and Cultural Safety Training**

Several important initiatives were born from this work, including the delivery of cultural safety training across several program areas and within various service areas in partnership with First Nations communities. This training provided opportunities for individual staff members to learn about the lived experience of Indigenous peoples in Canada and how this has shaped health, justice and education system outcomes. Importantly, it has served as a foundation for future discussions on which program design and service must be based and has begun to shape some changes in health care approaches. To further aid and expand this work, Nova Scotia Health has established an Indigenous Health Consultant role to conduct further work within the organization to ensure programs and services are offered in ways that are culturally relevant and safe for Indigenous peoples.

# African Nova Scotian Health Advisory Committee

In 2017, work was undertaken to engage with African Nova Scotian communities about their experiences access health services and health care. The result of this engagement was a report that provided a broad set of recommendations for improvement to these services and to how health care is managed. Key to these recommendations was the creation of an African Nova Scotian Health Consultant role to work within Nova Scotia Health to improve capacity with respect to the provision of culturally relevant and safe services for Black Nova Scotians. The position was created in late 2019 and filled in early 2020. Since that time, the position has assisted with navigating COVID-19 services, including testing, for specific communities. This position will advance work on another recommendation emerging from community engagement: the creation of an African Nova Scotian Health Advisory Committee which will further inform programs and services for Black Nova Scotians.



D Support for greater diversity, equity and inclusion (Cont'd.)

#### **Diversity, Equity and Inclusion Network**

To build on and enhance the work already identified in the diversity and inclusion framework, Nova Scotia Health will establish a network focused on diversity, equity and inclusion. This network will aid in focusing resources to develop an integrated diversity, equity and inclusion strategy for Nova Scotia Health. The strategy will refocus the efforts of dispersed resources to design, plan, evaluate and collaborate on operational improvements to achieve a more diverse workforce, to have culturally safe programs and services, and to influence decision-making and policy from an equity perspective.

#### **People Services Strategy**

In 2019, Nova Scotia Health embarked on a process to develop its People Strategy. In the engagement process, leaders clearly expressed a need to focus on diversity and strong themes of equity emerged. In 2020, as the People Strategy was further drafted and refined, COVID-19 and the Black Lives Matter movement changed the context in which the organization was working, and the need for action was even more clear.

Messages from the CEO opened the door for many staff to express their thoughts and experiences, leading to meaningful and substantive conversations with Black, Indigenous and People of Colour (BIPOC) across the organization. The People Strategy, released in March 2021, will support diversity and equity through the development of people, establishment of supportive and enabling policies (i.e., equity in employment), and celebration of diverse experiences and perspectives across 24,700 employees, 6,500 volunteers, 5,500 learners, 2,586 physicians, 570 medical residents and many others.



#### E

### Implementation of strategic infrastructure and digital projects

# Infrastructure redevelopments and renewals

Nova Scotia Health has a very large physical footprint with more than 40 hospitals and health centres, many of which are older and in need of repair or replacement. With planned investment from the Province of Nova Scotia, we are moving forward with several infrastructure projects that will support health promotion and illness prevention and also reflect advances in technology, best practices and population demographics.



Our approach to all redevelopment projects is to modernize and transform care delivery by looking at population needs and then re-designing our programs and services to meet those needs. Work on the major redevelopments in Cape Breton and Halifax – including the QEII New Generation Project and the Bayer's Lake Community Outpatient Centre – are progressing well, as are other projects across the province like the new primary care space on the grounds of Soldiers

Memorial Hospital in Middleton, construction of a new hospital in Pugwash to replace North Cumberland Memorial Hospital and the expansion and modernization of South Shore Regional Hospital in Bridgewater.

# Digital health - One Person, One Record and virtual care

A digital health strategy, inclusive of One Person, One Record and virtual care opportunities, will set the course for a new way of working in Nova Scotia Health.

The One Person, One Record (OPOR) strategy is Nova Scotia's opportunity to transform our health care system to ensure the right information is available to the right person, at the right time and place. At present, the three existing hospital information system deployed in the province are fragmented and costly to maintain. The OPOR strategy requires the province to replace those existing hospital information systems with a core clinical information system (OPOR – CIS). It will provide a foundation for improved health system governance, integration of patient information across the care continuum, and standardized processes and practices.

Implementation of strategic infrastructure and digital projects (Cont'd.)



The province is currently in the process of selecting the systems vendor. Nova Scotia Health has initiated readiness activities to prepare, with a focus on clinical standardization, refining workflows/practices and stakeholder engagement. Ultimately, OPOR will enhance patient safety, improve quality and clinical outcomes, improve patient experiences, improve access to health information for provider and improve the health system's use of information.



The COVID-19 pandemic has shown us there is great potential in virtual care.

Strategies have been employed to sustain and, in some situations, increase access to care providers and services in Nova Scotia including primary care, mental health and addictions and access to specialists. To that end, we will continue to explore how we enhance the use of virtual care throughout the system with an initial focus on virtual care pilots that can positively impact access to primary health care and mental health and addictions.

### **F** Expanded access to Primary Health Care

Primary Health Care is a multi-dimensional system that has a responsibility to organize care for individuals across the continuum of care and throughout their lifetime as well as to work with our partners to improve the health of our communities.

Establishing a strong primary health foundation will serve to facilitate overall health system transformation and improve the health status of Nova Scotians.

Nova Scotia Health has been moving forward in a purposeful and planned way toward a strengthened primary health care system that provides improved access to all Nova Scotians with a focus on unattached Nova Scotians. In partnership with DHW, we have been successful in enhancing our focus on collaborative family practice teams across the province with more than 85 new teams established. Continuing to create more collaborative family practice teams, as well as supporting the ones currently in place, will help us recruit and retain family physicians and other health professionals in our communities. There is important work ahead including supporting more teams to become health homes, to enhance team-based care, improve quality, and engage patients and families in their health and care.



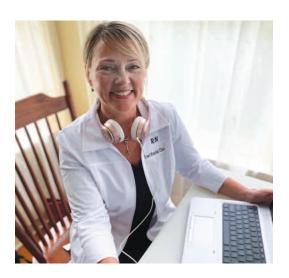
Furthermore, Nova Scotia Health's Primary Health Care team is focused on strengthening the supports available for Nova Scotians to live well and manage their chronic conditions. We will continue the implementation of strategies and programs to support patients in managing their own health by building knowledge, skills and confidence.

We are also re-imagining the delivery of wellness programming and chronic disease management services in ways that improve integration with family practice and other parts of the health system. The COVID-19 pandemic has shown us there is great potential in virtual care. To that end, we will continue to explore how we enhance the use of virtual care throughout the primary health care system.

**F Expanded access to Primary Health Care** (Cont'd.)

We are committed to continuing to strengthen how primary health care is delivered in Nova Scotia by:

- Continuing to provide expanded access to virtual care through 2021/22.
- Creating more and strengthening existing collaborative family practice teams resulting in Nova Scotians being supported by a regular primary care provider and team.
- Supporting Nova Scotians to live their healthiest life by focusing on living well and providing supports for managing their chronic conditions.
- Enhancing the availability of primary care to ensure Nova Scotians have access to safe, culturally appropriate primary health care and specifically, for those who do not have a regular primary care provider, implementing a system of supports that ensures access to primary care, when needed, including through the use of virtual care.
- Working with our partners to ensure primary health care providers and teams have the resources they need to do their work, including virtual care, electronic medical record (EMR), effective leadership, and supports to engage in quality improvement and research.





Continuing to evaluate our efforts, which includes contributing to research, measuring system performance, and trying and testing new innovations.

**G** Integration of public engagement



Engaging with Nova Scotians about their own health and the health system is part of our legislated mandate and one important way to support creating a healthier future for Nova Scotians. It is key to long-term improvement of our province's health status.

Nova Scotia Health's efforts to embed patient and public engagement in our organizational culture was recently recognized by IAP2 (International Association of Public Participation) with receipt of their Canadian Organization of the Year. From our more than 200 patient/family advisors and the Patient, Family and Public Advisory Council, to the engagement work of programs like primary health care and cancer care and, of course, our dedicated community health boards, we seek to learn about Nova Scotians' experiences with their own health and their interactions with the health care system. We listen and build upon what we hear to enhance our vision of a health care system informed and supported by patients, families, the public and our internal audience.



In addition to the priorities above, we will continue to place emphasis on other areas of operation that support our strategic priorities.

#### These include:

Improved access to surgical services with a focus on orthopedics

Access and flow

Pathology, Laboratory Medicine and Diagnostic Imaging Services

Our people

Research and innovation

Our financial strategy



A Improved access to surgical services with a focus on orthopedics

Timely access to quality, safe, surgical services is important to Nova Scotians.

Within Nova Scotia Health, there are more than 70,000 surgeries every year, in 17 locations, at a total cost of more than \$250 million. Nova Scotia Health's Perioperative (Surgical) Services Program continues to focus on efforts to improve care, access and outcomes.

Improving access and care for orthopedics (hip and knee replacements) remains a high priority for Nova Scotia Health. Over the past three years, we have made strides forward including reducing the length of time patients are waiting for hip and knee surgery, introducing wellness models, shortening lengths of stay in hospital after surgery and improving our patient's experiences.

Unfortunately, the impact of COVID-19 on our orthopedics program has been two-fold. Beginning in March 2020, it was necessary to postpone all but emergency and urgent surgeries including orthopedic procedures. While many of those procedures have now been completed or are rescheduled, the program has also been impacted by bed availability and patient flow related to COVID-19. Across all four zones, the delays in placing patients in long term care due to the virus has meant fewer beds available for other services including surgeries.



As COVID-19 continues to impact hospital services, we anticipate the overall reduction in surgeries could mean a backlog of cases into the 2021-22 fiscal year.

Despite this, Nova Scotia Health will continue with implementation of our multi-year plan for hip and knee joint replacements, to improve the care we offer. Our focus on wellness is helping delay or prevent the need for some patients while helping others achieve better overall health leading into their surgery. We will maintain this focus and continue to create more opportunities for patients to have a voice in their surgical journey.



### B Improved access and flow

In our complex health care system, improving access and flow has become a critical focus to help ensure patients have access to the right care by the right provider, in the right place, at the right time.

Inefficient flow or transition from one care environment to another creates bottlenecks and constrains the ability of clinicians to provide people-centred care in a timely and efficient manner.

Working with our partners, Nova Scotia Health has implemented a multi-year quality improvement plan for access and flow with a system level approach that spans emergency departments, inpatient services and continuing care. This important work will be enabled through a Clinical Service Network to support access and patient flow planning, policy, evaluation and performance monitoring. In addition, technology and evidence are being leveraged to monitor inpatient bed utilization, trends within long term care and continuing care and emergency department services.

# The key areas of access and flow focus for 2021-22 are:

 Improving access to care and transitions across the continuum, with a focus on discharge planning, frailty and transitions across the lifespan and care settings.

### **COVID-19 Response**

During the pandemic, access and flow into long-term care has been particularly challenging and this has contributed to high occupancy within hospitals.

Consequently, we have activated new approaches to bed utilization through temporary funding. For example, we have used our available veterans' beds for patients awaiting long-term care, temporarily opened new medical-surgical beds at Dartmouth General Hospital and converted spaces into temporary alternative level of care units.

- Creating evidence-based toolkits that can be used to optimize access and flow across the organization/system including role clarity and accountabilities.
- Supporting the development of evidence-based standardization/work processes.
- Building a strong patient flow community that fosters collective learning and sharing.
- Implementing and evaluating multiple improvement strategies to determine how best to support improved ambulance offload times and the time to admit a patient waiting in the emergency department.

Pathology, Laboratory Medicine and Diagnostic Imaging Services

Diagnostic Imaging and Pathology and Laboratory Medicine services must be as responsive, accessible, and sustainable as possible as we continue to look at ways to improve service to meet population needs.

This means taking advantage of new technology and applying innovative approaches to service delivery. Working with our partners at Department of Health and Wellness and IWK Health, our goal is to continue to develop an integrated, harmonized provincial service delivery model that will allow us to ensure our health human resources are used in the most efficient manner while we maintain a peoplecentred, high-quality, safe and cost-effective diagnostic system well into the future.



### **COVID-19 Response**

The Pathology and Laboratory Medicine (PLM) team is adept at using innovation and technology to respond to challenges and the COVID-19 pandemic was no exception.

Within weeks of the pending need, COVID testing was available and capacity was expanded to meet current and future demands for testing; the team proactively enhanced testing supplies in anticipation of world-wide shortages and even produced high quality swabbing kits in-house.

# Technology is a critical component to PLM's pandemic response:

- New equipment for the QEII.
   Microbiology Lab increased COVID
   testing capacity and created
   efficiencies to allow redeployment of
   staff to support COVID testing.
   Testing has been expanded to the
   Cape Breton Regional Hospital to
   further increase capacity.
- Priority testing is available at several sites across the province. Although capacity is limited, this provides an option for rapid turnaround times in situations where obtaining results in a fraction of the time is critical.

(Cont'd.)

C Pathology, Laboratory Medicine and Diagnostic Imaging Services (Cont'd.)

One area where we will continue to focus our efforts during 2021-22 is the provincial radiology imaging repository known as Picture Archiving and Communication System (PACS). PACS is a clinical tool/technology utilized at all sites across the province to store, view and report on radiology images. PACS is an essential part of a sustainable, high-quality diagnostic service and presently the system requires significant upgrade to both software and hardware. Taking action to upgrade the PACS system now is necessary to reduce the risk level and prevent negative impacts on our clinician's ability to treat patients effectively. The upgraded system will allow for more efficient radiologist workflows, including peer learning, improvements in web viewing functionality, expanded storage capabilities, and expanded integration of other types of imaging such as colonoscopy or dermatology, and continued support and maintenance.

In addition, the existing PowerScribe radiology reporting system was recently upgraded within the Central Zone and IWK Health. The radiology reporting platform used in other areas of the province is end-of-life. Together with IM/IT, Diagnostic Imaging will embark on a project to expand PowerScribe throughout the province, resulting in a standard radiology reporting platform province wide.

### COVID-19 Response (Cont 'd.)

- PLM had to quickly transition from walk-in services to an appointment only service for outpatient blood collection to ensure pre-screening, social distancing and infection control measures were in place. Initially a phone service was used while expansion of an online appointment system was implemented.
- With restrictions to non-regulated health service providers, PLM instituted in-home blood collections for individuals unable to leave their homes. This was a new offering and the response from patients has been overwhelmingly positive.

#### Our priority initiatives in 2021-22 are to:

- Continue with upgrades to the PACS system (provincial radiology imaging repository) and PowerScribe.
- Continue to implement Point of Care Testing which is innovative technology that provides testing at or near the bedside.
- Ensure Nova Scotia Health has a robust, integrated transportation system for samples.
- Implement and expand MRI technology and use in multiple locations to address current wait times.

### D

### Our people

Our people are, and always will be, our greatest resource. We are committed to shaping a positive work culture for all staff, physicians, volunteers and learners, and providing a caring environment that supports and fosters a high performing workforce.

Our *People Strategy* has the goal of creating a high performing workforce where our people are valued, inspired and engaged. The strategy is informed by best practice and data from surveys of staff and physicians. We will continue to focus our actions to strengthen our culture to ensure Nova Scotia Health is a place where individuals want to work, study and volunteer.



Our focus on recruitment and retention continues particularly for hard-to-fill professions as well as hard-to-recruit to communities. Our provincial strategies for recruitment and retention are realizing success thanks to a multi-faceted approach including incentives, targeted outreach, collaboration with partners and various other opportunities. We recognize and appreciate the ongoing support from communities across the province who actively participate in helping to attract professionals to their area.

Workplace health, wellness and safety is critical to having a highly engaged and productive workforce. We will continue to champion a workplace safety culture through the implementation of multiple initiatives and programs such as attendance support, mental health and psychological safety in our work-place, safe patient handling and injury prevention and our comprehensive workplace violence prevention program.

Our people (Cont'd.)



Key areas of focus for 2021-22 include:

Continue to implement our People Strategy

Effective and efficient employee recruitment

**Enhanced physician recruitment** 

Workforce planning, inclusive of physician recruitment and retention, continues to be a top priority for Nova Scotia Health. Between April 2019 and September 2020, Nova Scotia Health recruited 194 physicians. (April 2019 to March 2020 = 129 and April 2020 to September 2020 = 65).

Our physician recruitment strategy continues to strengthen by working with our partners, educational institutions and physician leadership. Communities play a key role in our efforts and we continue to strengthen our relationships with them by active participation and involvement in local recruitment groups. Nova Scotia Health will continue to aggressively expand active promotion of living and working in Nova Scotia through the development of a robust digital marketing campaign, a significant focus on the recruitment of Dalhousie medical learners, career fair presence nationally and internationally, and the enhancement of online presence and virtual opportunities to connect with candidates during global realities of pandemic.

### **E** Research and innovation



Research and innovation play an integral role in how Nova Scotia Health moves forward its quality improvement mandate and commitment to safe patient care and service delivery that promotes health for every Nova Scotian.

Nova Scotia Health is committed to patient care improvement efforts by growing our research and innovation enterprise while strengthening our scientific approaches. Our research and innovation work is vital to the improvement and modernization of health care and health care delivery. At Nova Scotia Health, we are driven to discover and implement new technologies, treatments and approaches to care. In addition to improving care for Nova Scotians, the opportunity to do ground-breaking research helps attract the very best clinicians.

### **COVID-19 Response**

In March 2020 and as part of our response to COVID-19, a provincial consortium was formed to evaluate and match the Personal Protective Equipment (PPE) challenges facing Nova Scotia Health with the potential design and manufacturing capabilities that exist in Atlantic Canada. This consortium, called Skunkworks, was comprised of representatives from ACOA, Nova Scotia Health, IWK Health, Dalhousie University, Nova Scotia Business Inc., BioNova, and IgniteLabs. Skunkworks is a term given to a team that has been pulled together to radically innovate and research on an initiative that falls outside the organization's regular mandate. Nova Scotia Health's role in this model yielded an integrated and collaborative effort by research and innovation, finance, supply chain, IPAC, legal as well as the PPE working group that supported deliveries of much needed equipment for clinical operations teams.

Contributions included the procurement of PPE and supplies with local companies such as a locally designed face shield, a Dalhousie University designed face shield, hand sanitizer and intubation shields.

(Cont'd.)

**E** Research and innovation (Cont'd.)



In addition to better care, research and innovation generates spinoff companies, commercialization, patents and partnerships with local start-ups. Our region is experiencing a growing culture of innovation and accelerating health innovation is a key priority for Nova Scotia Health.

### COVID-19 Response (Cont 'd.)

The Skunkworks team stands ready to offer full support should Nova Scotia Health's PPE needs change and it continues to maintain vigilance since COVID-19 requirements have reduced. Research and innovation is currently working with key leaders within the Skunkworks team to determine ways in which we can continue this nimble and responsive approach to sourcing local solutions for Nova Scotia Health's challenges.

Optimizing our financial resources to achieve the best outcome is also key to our success.

Our experiences over the past months with the COVID-19 response demonstrated to us opportunities to change and innovate in some aspects of our operations. Accordingly, we have launched a Reset and Transform initiative which is focused on the long-term financial sustainability of Nova Scotia Health while improving clinician and patient experiences. Through this initiative we are creating culture change and adding value to operations while developing a systematic approach to review all opportunities and repeatable processes to execute and deliver benefits.



As our budget increases each year, a large portion of the expenditure growth is related to inflationary increases that are, in many cases, beyond our ability to control. We believe however that focusing our efforts on expenses, such as what type of supplies and services are used, could result in lower costs without compromising patient care. To support this, Nova Scotia Health has established guiding principles on what is a reasonable annual growth target for general expenses. This supports financial accountability where programs and services "live within their means." For many programs, this will be challenging as many general expenses are directly related to the number of patients seen and services provided however we want to ensure we are utilizing our valuable financial resources wisely in support of our vision of healthy people, healthy communities - for generations.

We know the first step in planning how our financial resources will be used is the identification of our strategic investments and priorities as outlined in this plan. As we focus on the strategies to deliver on improved health service access and outcomes for all Nova Scotians, we must do so in a fiscally responsible way. As such, our key priorities and the financial sustainability of the health system will always be important considerations in our planning processes.



The financial plan for 2021-22 allows Nova Scotia Health to maintain our focus on enhancing access and improving services for Nova Scotians while we continue to navigate through the COVID-19 pandemic and establish our new normal.

As we strive to deliver services efficiently and effectively, we continue to make investments to support long term sustainability. We also continue to look within the organization for service change opportunities and new ways of doing things, through our Reset and Transform initiative and setting reasonable annual growth targets for general expenses to meet evolving care models, technology and standards, and changing population needs. We must explore all these opportunities to ensure the best use of the financial resources. Our intention is to bend the Health Care inflation curve and lower reliance on government funding. In addition, we are enhancing our data analytics capability to facilitate the optimization of resources, revenues, infrastructure and health human resources.

This 2021-22 financial plan provides
Nova Scotia Health with a solid
foundation to continue to build on and
it will be key to ensuring our
organization's financial sustainability,
trans-parency and accountability
into the future.



### A 2021-2022 Financial Plan

Our 2021-22 financial plan is an extension of our strategic and priority plans and includes multiyear goals, milestones and financial responsibility. A summary can be seen below.

	2021-22
Revenue	\$
Regular Operating Revenue	2,349,093,000
Funding for Utilization, Contractual and Statutory Increases	39,769,000
COVID-19 Response	69,571,000
Funding for Strategic Priorities:	
QEII and Cape Breton Redevelopment	12,959,000
Improve Access to Primary Care	19,318,000
Improve Access to Surgical Services	11,212,000
Enhance Mental Health & Additions Services	8,718,000
OPOR Readiness	4,500,000
Public Health Expansion	4,235,000
Patient Access and Flow	3,836,000
Total Revenue	2,523,211,000

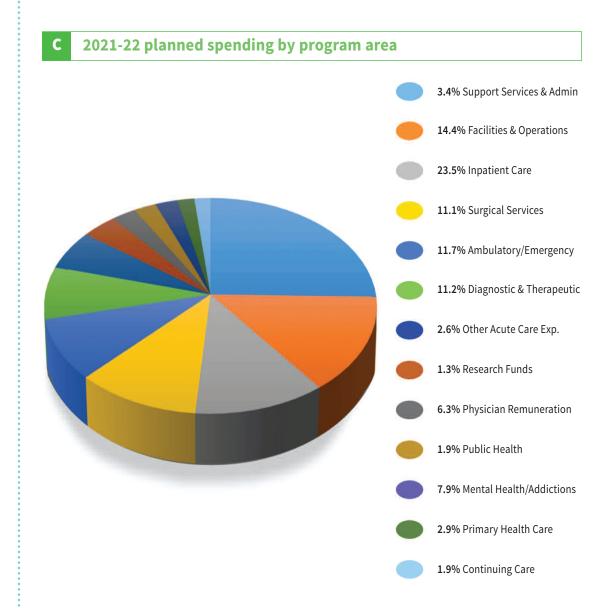
Expenses	\$
Wages and Benefits	1,817,051,000
Medical, Clinical and Surgical Supplies	198,950,000
Drugs	135,128,000
Buildings and Grounds	79,460,000
Equipment Leases and Maintenance	72,700,000
Food Services, Housekeeping, Laundry and Contracted Services	69,202,000
Other Expenses	150,720,000
Total Expenses	2,523,211,000



B Nova Scotia Health's 2021-22 operating budget allocation

	2020	)-21 Actual Expenses	2021-22 Budget
Inpatient Care		628,038,000	638,898,000
Facilities & Operations		335,224,000	362,489,000
Surgical Services		214,905,000	228,877,000
Ambulatory Care & Emergency Services		281,545,000	276,448,000
Diagnostic & Therapeutic Services		275,542,000	272,012,000
Other Acute Care Expenditures		58,641,000	60,032,000
Research Funds		28,360,000	43,716,000
Physician Remuneration*		145,971,000	151,293,000
Support Services and Administration		82,979,000	95,050,000
Public Health		55,638,000	60,330,000
Mental Health & Addictions		178,739,000	199,578,000
Primary Health Care		60,891,000	66,402,000
Continuing Care		44,539,000	46,566,000
TOTAL		2,391,012,000	2,523,211,000

<sup>\*</sup>Excludes direct physician compensation which is not included in Nova Scotia Health's budget allocation and is funded through a direct relationship between the Department of Health and Wellness and the province's physicians.





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