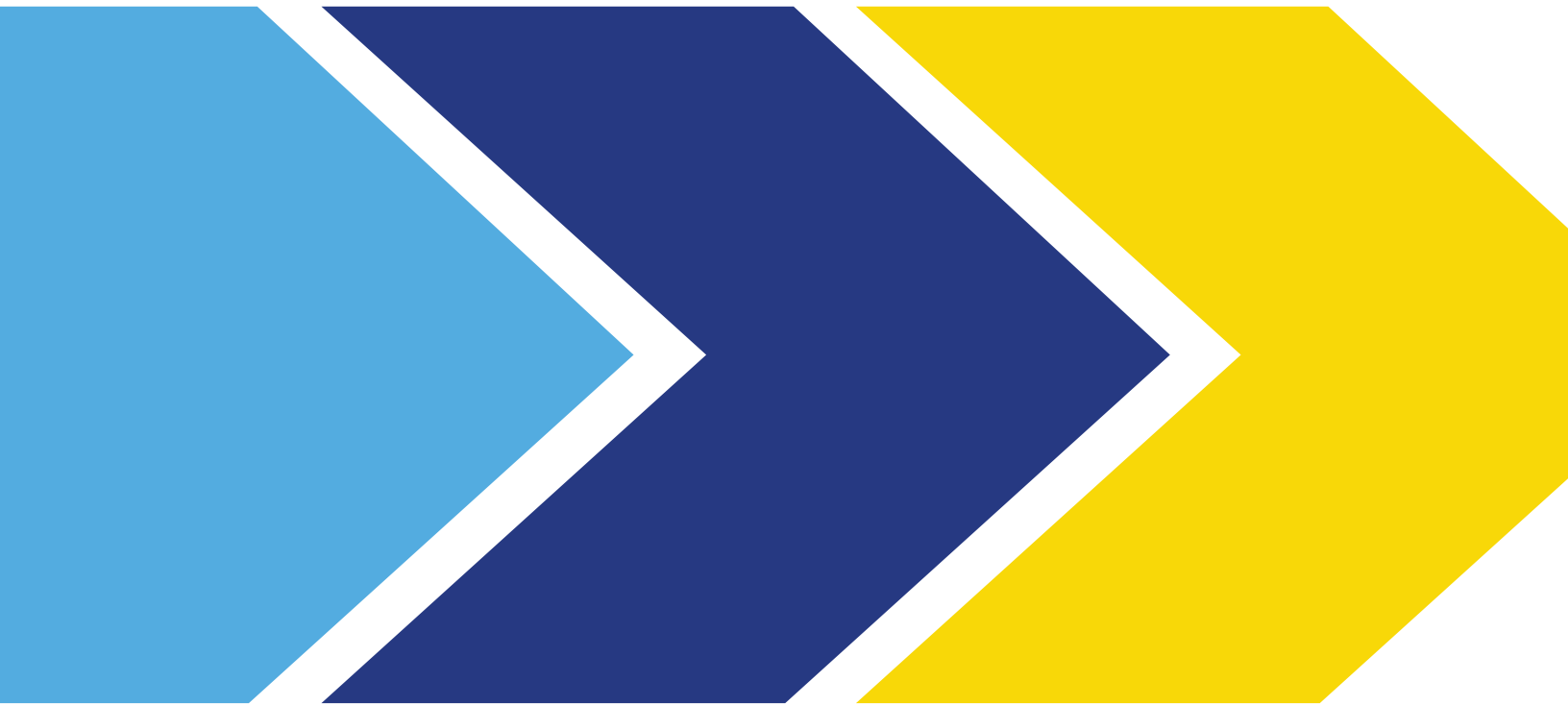


# **BUSINESS PLAN**

2022-23



Health & Wellness



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# Department of Health and Wellness Business Plan 2022-23

## Table of Contents

Message from the Minister ..... 2

Section 1: Mandate, Vision, Mission and Principles ..... 3

Section 2: Responding to and Living With COVID-19 ..... 4

Section 3: 2022-23 Priority Actions to Transform Healthcare ..... 4

Section 4: Accountability and Performance ..... 8

Section 5: 2022-23 Budget..... 9

# Department of Health and Wellness Business Plan 2022-23

## Message from the Minister

Nova Scotians have been dealing with the COVID-19 pandemic since early 2020 and will continue to in the year ahead. Nova Scotia's healthcare system has faced enormous pressures and strains during this time. I want to thank everyone in the healthcare system for their dedication and tireless hard work during the pandemic.

We can't predict when the pandemic will be over, but it will end. Our vaccination rate is high, and we are having great success getting boosters in arms. This year will be a time of transition to living with COVID-19. The virus will not disappear from Nova Scotia, but vaccinations and natural immunity will reduce its impact.

The healthcare system will make the changes necessary as COVID-19 becomes an endemic infection. We have learned a lot over the past two years about preventing and treating viruses like COVID-19. Applying this knowledge will make the healthcare system stronger and better prepared for future challenges.

Transforming the healthcare system will be the priority of the Department of Health Wellness in this fiscal year and for several fiscal years to come. This is a turning point for Nova Scotia as we address longstanding pressures and more recent issues brought forward by the pandemic. We will focus on access to care, population health, and outdated infrastructure (both physical and digital), all with the goal of improving access for all Nova Scotians.

This will be an exciting year. Our focus on new, modern infrastructure will continue, so healthcare workers will have up-to-date facilities to give patients the very best care. We will begin the transformation of health care into a streamlined, effective, responsive patient-centred system. That is what Nova Scotians expect and deserve.

Honourable Michelle Thompson  
Minister of Health and Wellness

# Department of Health and Wellness Business Plan 2022-23

## Section 1: Mandate, Vision, Mission and Principles

### Mandate

Health care in Nova Scotia is the collective responsibility of the Department of Health and Wellness (DHW), the Office of Addictions and Mental Health (OAMH), the Office of Healthcare Professionals Recruitment (OHPR), the Department of Seniors and Long-Term Care (DSLTC), the Nova Scotia Health Authority (NSHA), and the Izaak Walton Killam Health Centre (IWK). DHW works with these partners, and with other 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, addictions and mental health, acute care, continuing care, and end of life care.

The *Health Authorities Act* establishes the roles and responsibilities of DHW, NSHA, and IWK.

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

NSHA and IWK are responsible for:

- Governing, managing and delivering health services across the province;
- Implementing the strategic direction set by DHW; and
- Engaging with the communities they serve.

These organizations work together to coordinate planning, funding, service delivery and to improve access to health care services and patient care.

### Vision

Healthy Nova Scotians

### Mission

To lead a quality, equitable and sustainable health care system that inspires and promotes the health and well-being of all people in Nova Scotia.

# Department of Health and Wellness Business Plan 2022-23

## Section 2: Responding to and Living With COVID-19

As we move to a living with COVID-19 phase of the pandemic, DHW will continue to work with our healthcare partners and the federal government, to focus on the supports that Nova Scotians continue to require, in what is still a very challenging time. Specific actions will include:

- Working with health system partners to develop, enhance, and expand programs, including through telehealth and virtual care.
- Continuing to promote and deliver a sustained COVID-19 vaccination program.
- Evolving our Public Health response, including public health measures and testing.

## Section 3: 2022-23 Priority Actions to Transform Healthcare

In 2022-23, DHW will work with OAMH, OHPR, DSLTC, the health authorities, partners and communities to make progress in all areas of the health system.

The following actions for the coming year highlight our priority areas:

### Improving Access to Primary Health Providers and Specialists

- We will work with NSHA to expand VirtualCareNS to provide immediate access to virtual care for those waiting for a family practice, allow primary care walk-in clinics to offer virtual care, and continue virtual care to include primary consultations with more types of specialists.
- DHW will work with the NSHA and IWK to establish an Integrated Health Services Planning Framework that will lay the groundwork for an improved health care system, and guide the delivery of high-quality, safe and sustainable health services. This Framework enables local clinical services planning, bringing planning and services closer to the communities they serve.

### Better Managing Chronic Illness

- DHW will expand the INSPIRED treatment model for Chronic Obstructive Pulmonary Disease (COPD) patients, and develop a new in-home program to support the treatment of advanced chronic disease.

### Expanding Telehealth/Virtual Care

- We will develop a multi-year virtual care strategy to guide the expansion and integration of virtual care as a key part of how health services are delivered in the province, and work with Nova Scotia Digital Services to increase the speed of innovation toward a One Person, One Record solution.

### Focusing on Recruitment and Retention

## **Department of Health and Wellness Business Plan 2022-23**

- DHW will work with the Office of Healthcare Professionals Recruitment on multi-year strategies to improve the recruitment and retention of healthcare professionals. This will be closely tied to the development of regional integrated health services plans in each management zone.
- We will also:
  - Work with the Nova Scotia Community College to position the Nursing Re-entry Program to meet the needs of internationally educated Licensed Practical Nurses.
  - Explore opportunities to ensure internationally educated healthcare professionals have opportunities to work in the province.
  - Work with the NSHA, IWK and colleges to explore opportunities to expand and maximize scopes of practice across health care providers.
  - Work with the Department of Advanced Education to increase training seats for applied health sciences professions.
  - Increase the number of psychology residents in collaboration with the Office of Addictions and Mental Health.
  - Develop options for establishing a retirement fund for physicians.
  - Participate and support the Atlantic Health Care Accord of Guiding Principles through collaboration with Atlantic colleagues.

### **Addressing Surgical Wait Times**

- DHW will work with the NSHA and IWK to improve surgical wait times, by:
  - Reviewing a centralized booking system to better manage waitlists and remove administrative inefficiencies.
  - Consistently implementing best practices to align with national benchmarks.
  - Addressing delays resulting from the COVID-19 pandemic through allocation strategies based on patient need.

### **Reviewing Prescription Drug Coverage**

- DHW will initiate a review of the formulary to ensure it is meeting needs of Nova Scotia residents.

### **Optimizing the Administration of the Health System**

- We will start to review the organizational structure for healthcare in Nova Scotia to ensure resources and efforts are focused on patient care and well-being.
- DHW will launch a system-wide Accountability Framework, enabling short and long-term monitoring of performance and results, and guiding future planning.

### **Supporting Greater Equity Across the Health System**

- Working with the Office of Equity and Anti-Racism, we will begin collecting race-based data to better understand the health needs of diverse populations.

## **Department of Health and Wellness Business Plan 2022-23**

- DHW will begin development of a Health Equity Framework, which will guide our collective understanding and targeted approaches on health equity experiences for various equity-seeking populations.
- We will complete community asset mapping and capacity assessments of health-related organizations supporting visible and racialized communities in Nova Scotia.
- We will administer the Public Health Agency of Canada Immunization Partnership Funding (IPF) on COVID-19 vaccine confidence, research, and evaluation in African Nova Scotian communities.
- We will continue to build partnerships and collaborations on health equity strategies, such as the Health Strategy for People of African Descent in Nova Scotia.
- We will develop a 5-year DHW Equity Strategy and Action Plan, to better understand, and improve experiences and sense of belonging for equity-seeking departmental staff.
- DHW will support the development and leadership of the newly established Tajikeimik. We will work as partners with the Mi'kmaq of Nova Scotia and the federal government to enhance the design and delivery of health services that serve Mi'kmaw communities in Nova Scotia.

### **Implementing a QEII Command Centre**

- Building upon an initial operating concept, NSH will implement 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 Hospital. Learnings from this initial concept will inform recommendations on a model for the Central Zone and eventually province-wide.

### **Advancing Strategic Health Infrastructure Projects**

- We will develop modern health infrastructure with the Department of Public Works, Nova Scotia Lands, and the Health Authorities.
- Through collaboration with the Health Authorities, we will advance the development of a Healthcare Infrastructure Strategic Plan to guide priorities and investments over the medium and long-term.
- We will continue to advance the QEII New Generation Project, Cape Breton Regional Municipality Redevelopment, South Shore Regional Health Centre, IWK Emergency Department Redevelopment, and North Cumberland Hospital Redevelopment projects, and continue redesign and development work at Yarmouth Regional and Cumberland Regional Hospitals.
- Across the province, DHW will invest in the replacement and expansion of capital medical equipment and explore new approaches to enhance local access to renal dialysis.



## **Department of Health and Wellness Business Plan 2022-23**

### **Expanding Public Health Capacity**

- Through new investments, public health capacity will be enhanced at the Health Authorities and DHW.
- Additional resources will better equip the system to respond to public health issues and address the factors that contribute to health and wellbeing to improve outcomes for Nova Scotians.
- New investments will support enhanced resources for epidemiology (surveillance) and services for children, youth, and families.

### **Supporting Federal, Provincial and Territorial Relations**

- We will continue to contribute to and benefit from strong collaboration with the federal government and other provinces and territories.
- This year, we will support discussions on federal funding for continued investments in mental health and addictions through bilateral negotiations on existing agreements such as the Home and Community Care and Mental Health and Addictions Agreement.
- We will provide advice to the Department of Intergovernmental Affairs as they support the Premier on discussions for the Canada Health Transfer.

# Department of Health and Wellness Business Plan 2022-23

## Section 4: Accountability and Performance

The Department of Health and Wellness is working in collaboration with our health system partners to activate a Multi-Year Health System Accountability Framework. This framework will guide planning and action, as the basis for the measurement of success against intended results. It will have both a long-term and short-term focus, reflecting not only current government priorities, but also broader health system and population outcomes.

Moving forward, the planning and reporting for the health system will be based upon improving the overall Population Health Outcomes, and making progress against the following six Health System Outcomes:

The Health System will work to be:

1. Available and Timely
2. People-Centred and Inclusive
3. Safe and Effective
4. Affordable, Sustainable, and with Value
5. Equitable
6. Efficient and Integrated

We will also publicly report on a series of Key Performance Indicators (KPIs) that will track the immediate effects of changes to the health system. These KPIs will be aligned against the Population and Health System Outcomes above, guiding results-based transformation.

The Department will continue to work with the Health Authorities on their annual Accountability Framework Agreements and produce our own annual Accountability Report.

# Department of Health and Wellness Business Plan 2022-23

## Section 5: 2022-23 Budget

### Health and Wellness Budget 2022-23

#### Departmental Expenses Summary

(\$ thousands)

<b>Programs and Services</b>	<b>2021-22 Estimate</b>	<b>2021-22 Forecast</b>	<b>2022-23 Estimate</b>
General Administration	2,485	2,567	<b>2,539</b>
<b><u>Strategic Direction and Accountability</u></b>			
Public Health	6,229	5,500	<b>6,818</b>
Client Service and Contract Administration	4,718	4,638	<b>4,862</b>
Corporate and Health Workforce	13,626	11,517	<b>14,346</b>
Digital Health, Analytics and Privacy	7,788	5,986	<b>6,560</b>
System Strategy and Performance	2,557	2,790	<b>3,185</b>
Quality and Patient Safety	877	795	<b>579</b>
<b><u>Service Delivery and Supports</u></b>			
Physician Services	1,003,386	999,904	<b>1,038,560</b>
Pharmaceutical Services and Extended Benefits	355,304	366,314	<b>373,715</b>
Emergency Health Services	168,721	178,614	<b>180,674</b>
Other Programs	287,096	421,519	<b>305,672</b>
<b><u>Health Authorities</u></b>			
Nova Scotia Health Authority	1,812,811	1,807,183	<b>1,913,522</b>
IWK Health Centre	204,751	204,552	<b>211,294</b>
<b><u>Capital Grants and Healthcare Capital Amortization</u></b>			
Capital Grants and Healthcare Capital Amortization	155,556	97,380	<b>204,000</b>
<b>Total - Departmental Expenses</b>	<b>4,025,905</b>	<b>4,109,259</b>	<b>4,266,326</b>
<b>Ordinary Recoveries</b>	<b>113,220</b>	<b>109,589</b>	<b>104,794</b>
<b><u>Funded Staff (# of FTEs)</u></b>			
<b>Total - Funded Staff</b>	<b>264.5</b>	<b>237.1</b>	<b>264.3</b>
Less: Staff Funded by External Agencies	(10.8)	(10.5)	<b>(10.8)</b>
<b>Total - Departmentally Funded Staff</b>	<b>253.7</b>	<b>226.6</b>	<b>253.5</b>

#### Note:

For Ordinary Revenues, see Estimates and Supplementary Detail Book, Chapter 2

For TCA Purchase Requirements, see Estimates and Supplementary Detail Book, Chapter 1