

Statement of Mandate 2015–2016



**Health and
Wellness**



NOVA SCOTIA

**ANNUAL STATEMENT OF MANDATE
FOR THE FISCAL YEAR 2015-2016**

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1.0 Message from the Minister and Deputy Minister

On behalf of government and the staff of the Department of Health and Wellness, we are pleased to present the 2015-16 Statement of Mandate.

The government is setting a new and exciting course for Nova Scotia's health system. Together with our partners, stakeholders and Nova Scotians, we will work toward a vision of healthy people and healthy communities for generations.


We have made great strides already. Having just consolidated nine district health authorities into a single, unified health system for the province, we can move ahead with our strategic priorities. This year, the Department will undergo its own redesign to better align government structure with the new system to ensure effective collaboration.

Under the renewed *Health Authorities Act*, the Nova Scotia Health Authority and IWK Health Centre have clear mandates and strong leadership and will work together to plan, deliver care, and strive for better health outcomes for Nova Scotians. We wish the NSHA's new volunteer board and leadership team all the best as they embark on their new beginning.

In the year ahead, we will continue to transform and modernize our system to respond to the health needs of the population. This means responding to the ever growing needs of our senior's population; strengthening access to primary health care, mental health and addictions services and surgical services; maximizing the use and distribution of our health providers in new and adapted models of care; advancing health promotion initiatives; and leveraging knowledge, information and technology solutions to support informed decision-making and quality care.

However, we are mindful that financial and human resources are finite, and so we are driven to find innovative solutions to our complex challenges. We have a great number of bright people who do this every day. This year, we will make significant progress on a province-wide Health Services Plan which will ensure we are using every dollar effectively. In addition, this year we will work with industry, academia and health system partners to develop an Innovation Strategy that will focus not only on health care delivery innovation, but also on how Nova Scotia can leverage economic opportunities from the health system.

With a vast team of dedicated professionals across the health and wellness system, we are looking forward to the possible advances we can achieve together in 2015-16.



**Honourable,
Leo A. Glavine**

**Minister,
Health & Wellness**



**Peter W. Vaughan,
CD, MA, MD, MPH**

**Deputy Minister,
Health & Wellness**

2.0 Mandate, Vision, and Mission of the Nova Scotia Health System

Mandate

The health and wellness system includes the delivery of health care as well as the prevention of disease and injury and the promotion of health and healthy living.

The Department is responsible for the following core program areas: mental health and addiction services; partnerships and physician services; pharmaceutical programs; primary health care; emergency health services; continuing care; acute and tertiary care; health system workforce; health care quality; public health; health services emergency management; health information and active living.

The *Health Authorities Act* establishes the roles and responsibilities of the Department, the newly established Nova Scotia Health Authority (NSHA) and the Izaak Walton Killam Health Centre (IWK).

- The Department is responsible for:
 - providing leadership for the health system by setting the strategic policy direction, priorities and standards for the health system; and
 - ensuring accountability for funding and for the measuring and monitoring of health-system performance.
- NSHA & IWK are responsible for:
 - governing, managing and providing health services in the Province and implementing the strategic direction set out in the provincial health plan; and
 - Engaging with the communities they serve, through the community health boards.

Department of Health and Wellness Phase

Vision	Healthy people, healthy communities for generations			
Mission	Working together to achieve excellence in health, healing and learning			
Health System Goals	<div style="border: 1px solid gray; background-color: #ADD8E6; padding: 5px; margin-bottom: 5px;">Health of the Population</div> <div style="border: 1px solid gray; padding: 5px; margin-bottom: 5px;">↑</div> <div style="border: 1px solid gray; padding: 5px;">Improve health and wellness through health promotion, disease and injury prevention, primary health and culturally competent chronic disease management</div>	<div style="border: 1px solid gray; background-color: #ADD8E6; padding: 5px; margin-bottom: 5px;">Health System Workforce</div> <div style="border: 1px solid gray; padding: 5px; margin-bottom: 5px;">↑</div> <div style="border: 1px solid gray; padding: 5px;">A workplace culture that fosters leadership, competence, collaboration and engagement</div>	<div style="border: 1px solid gray; background-color: #ADD8E6; padding: 5px; margin-bottom: 5px;">Experience of Care</div> <div style="border: 1px solid gray; padding: 5px; margin-bottom: 5px;">↑</div> <div style="border: 1px solid gray; padding: 5px;">Access to quality, evidence-informed, appropriate care</div>	<div style="border: 1px solid gray; background-color: #ADD8E6; padding: 5px; margin-bottom: 5px;">Resource Stewardship</div> <div style="border: 1px solid gray; padding: 5px; margin-bottom: 5px;">↑</div> <div style="border: 1px solid gray; padding: 5px;">Sustainable actions that support learning, research, innovation and effective use of resources</div>
Strategic Priorities	<ul style="list-style-type: none"> Improvement in, and more use of, community focused care for seniors and patients with chronic conditions Creation of supportive environments to promote the health of all Nova Scotians 	<ul style="list-style-type: none"> Optimal mix and distribution of health professionals working collaboratively to achieve the most effective and cost-efficient health system Employee Engagement focused on promoting leadership, competence, productivity and collaboration 	<ul style="list-style-type: none"> More coordinated team-based primary care, giving patients comprehensive non-acute services from services from practitioners such as doctors, nurses, nurse practitioners, dieticians and physiotherapists Increased use of evidence and data to inform planning and system learning to improve safety and service delivery 	<ul style="list-style-type: none"> Expanded development and use of innovative technologies Appropriate use of resources to achieve high performance outcomes Streamline administration and efficient and effective use of resources in the health system
Examples of Actions 2015-16	<ul style="list-style-type: none"> Continuing Care Strategy Dementia Strategy Together We Can: Mental Health & Addictions Strategy Thrive! 	<ul style="list-style-type: none"> Recruitment and Retention Health Human Resource Planning Employee engagement Attendance & Performance Management 	<ul style="list-style-type: none"> Collaborative Care Framework Health Services Plan Safety Improvement & Management System Access to Services 	<ul style="list-style-type: none"> One Person One Record Nova Scotia Health Innovation Strategy System Consolidation Department Review & Redesign Shared Services Pan-Canadian Pharmaceutical Alliance
Measures	Under Development in 2015-16			

3.0 Strategic Goals of the Nova Scotia Health System

The strategic goals included in the 2015-16 Statement of Mandate reflect the ways the Department is working with its partners to achieve its vision and mission.

Health System Goal #1: Health of the Population

Improve the health and wellness of Nova Scotians through health promotion, disease and injury prevention, enhanced primary health care and culturally competent chronic disease management

In 2015-16, the Department has established two priority areas for action under this strategic goal.

Strategic Priority: Improvement in, and more use of, community focused care for seniors and patients with chronic conditions

More and more Nova Scotians are telling us they want to stay in their homes longer and need the supports to do so. In response to this need, the Department will continue in 2015-16 to work with the NSHA and IWK to invest in home care and home supports, through:

- implementation of a refresh of the **Continuing Care strategy**, which will address the need to reduce long term care wait-times while balancing investment between long term care and home care;
- implementation of a **dementia strategy**, which will increase awareness and understanding of dementia and assist people living with dementia by making services for them accessible, culturally specific and responsive;
- initiatives like the **polypharmacy toolkit** which provide education and support to address risks associated with frail elderly patients taking multiple medications; and
- continued implementation of the **Integrated Palliative Care Strategy**, which aims to build capacity within primary care and increase choice of where care is received, including in the home.

Many Nova Scotians struggle with chronic conditions such as osteoporosis, hypertension and diabetes. In 2015-16, the Department will continue to work with its partners to implement intervention options related to these conditions, such as:

- improvements in care and treatment for those at risk of a second fracture through the **expansion of fracture liaison services** for individuals with osteoporosis; and
- improvements in the experience of youth living with diabetes through their transition to adult health services through the “**Moving on with Diabetes**” program.

Strategic Priority: Creation of supportive environments to promote the health of all Nova Scotians

Usually, first place is a coveted spot. Our experience tells a different story. Nova Scotia ranks first in health care spending, in average hospital stays, and in chronic disease rates. Despite spending almost half of the provincial budget on health care (41 %), Nova Scotia has some of the worst health outcomes in the country. Investing more money into the health system, in its current form, will not effectively address these concerns. Government, along with its many partners, has a role to play in creating supportive, culturally competent environments that promote Nova Scotians making healthy choices. The Department is working on a number of initiatives in line with this priority, including:

- Continued implementation of **Together We Can**, the province’s mental health and addictions strategy. This strategy is focused on intervening and treating early for better results, creating shorter wait times for better care, addressing the unique needs of diverse populations, working with our partners more collaboratively and reducing stigma;
- Continued implementation of **Thrive!**, which is focused on supporting a healthy start for children and families, equipping people with skills and knowledge for life-long health, creating more opportunities to eat well and be active, and planning and building healthier communities;
- Continued investment in **Early Intensive Behavioural Intervention** for pre-schoolers with autism, to ensure young Nova Scotians suffering from autism have access to early treatment which has been shown to have the best results.
- Continued investment in **sport infrastructure**. Active living is a key component of a healthy lifestyle and unfortunately, too many Nova Scotians do not get enough physical activity each day. Investment in facilities like the Membertou Sports Center is one of the ways in which the Department promotes opportunities for active living.

Health System Goal #2: Health System Workforce

A workplace culture that fosters leadership, competence, collaboration and engagement.

In 2015-16, the Department has established two priority areas for action under this strategic goal.

Strategic Priority: Optimal mix and distribution of health professionals working collaboratively to achieve the most effective and cost-efficient health system

The Department works with its many partners to analyze the needs of the health system and plans for and monitors the providers required to meet those needs. It is important that the health system has the right number, mix and distribution of providers and that those providers are doing the right things to ensure Nova Scotians are getting the best care in the most efficient ways. In 2015-16, actions in this area include:

- Continued provincial effort on **recruitment and retention** of professionals like nurses, physicians and other allied health professionals. While Nova Scotia has a sufficient overall number of physicians and nurses, there continue to be distribution challenges affecting equitable access for all Nova Scotians, especially in rural communities. The Department will continue to work with its partners, including Labour and Advanced Education, NSHA and IWK, Doctors Nova Scotia and labour unions to strengthen efforts to address these challenges.
- The Department will continue to work with its partners to ensure the right health professionals are doing the right things. For example, in 2015-16, the Department will work with its partners to:
 - set standards and criteria for **colonoscopy** and reduce inappropriate screening through maximization of the Colorectal Screening Program, as part of provincial planning for cancer services;
 - implement a renewed **Nursing Strategy** aimed at maintaining an adequate supply, mix and distribution of nurses in Nova Scotia with a focus on supporting the transition of new graduates into the workforce as experienced nurses retire and replenishing expertise in specialty clinical settings;
 - continue to enhance the **Physician Resource Planning**, which will help ensure that Nova Scotia has the right mix and distribution of physicians, focusing on the need for more physicians in primary health care and in rural areas; and
 - continue to monitor the supply and demand on **all health occupations** identified as priorities including: medical laboratory technologists, medical laboratory assistants, continuing care assistants, medical radiation technologists, psychologists and social workers.

Strategic Priority: Employee engagement focused on promoting leadership, competence, productivity and collaboration

The Department is committed to employee engagement in the Department itself as well as across the health system. The Department recognizes that a highly engaged workforce results in greater productivity and innovation, which in turn improves service to Nova Scotians.

- In a year of departmental redesign, within the **Department**, efforts continue to be focused on increasing productivity through: improving communication and prioritization within the Department, increasing cultural competence and providing employees with a variety of wellness options. The Department's efforts in employee engagement, attendance and performance management will be aligned with and guided by the Public Service Commission's Corporate Employee Engagement Strategy.
- In the larger health system, the Department will continue to work with key stakeholders, including the **NSHA and IWK** and the **Continuing Care** sector, to support initiatives that promote safe workplace environments which contribute to overall workforce health, efficiency, and productivity. This includes: supporting AWARE-NS, the health and community services safety association; and supporting the Soteria Strains Strategy, a musculoskeletal strains prevention strategy developed in partnership with the Department of Labour and Advanced Education, the Nova Scotia Health Sector Council, AWARE-NS, Workers' Compensation Board, NSHA and the IWK.

Health System Goal #3: Experience of Care

Access to quality, evidence-informed, appropriate care.

In 2015-16, the Department has established two priority areas for action under this strategic goal.

Strategic Priority: More coordinated team-based primary care, giving patients comprehensive non-acute services from practitioners, such as doctors, nurses, nurse practitioners, dieticians and physiotherapists

- The **Collaborative Care Framework** supports the improved health of generations of Nova Scotians through a person-centered, culturally responsive primary health care system that engages patients in the management of their own health and maximizes the contributions of all providers and staff. The roles and responsibilities of the Department, NSHA and IWK and collaborative primary health care teams are being defined and tools for accessible, quality primary healthcare are being developed. The Department will continue its efforts under this framework in 2015-16.

Strategic Priority: Increased use of evidence and data to inform planning and system learning to improve safety and service delivery

The Department uses evidence to inform decisions about what services are needed in the health system, how they can be best accessed and who should provide them. Evidence is used to proactively identify risks and improvements that are needed in the system. Five key initiatives in this area in 2015-16 are:

- The development of a provincial **Health Services Plan** enabled and required by the amended *Health Authorities Act*. This plan will establish what services should be offered in the health system, where those services should be provided and by who. This plan will serve as the foundation for many decisions in the health system and is vital to improving patient outcomes and effective and efficient use of system resources.
- Continued implementation of the **Safety Improvement and Management System** to support quality improvement efforts in the health system through tracking and reporting patient safety incidents. This system will provide the public with greater transparency with respect to patient safety events and will enable healthcare professionals to share lessons learned related to these events.
- Implementation of recommendations from the **Provincial Perioperative Advisory Committee** regarding surgical services to improve access to surgeries and more effective and efficient use of system resources.
- The continued monitoring and evaluation of wait times, which are one of the indicators of **accessibility of health services**. Wait times are an issue faced by all jurisdictions within Canada. While wait times have improved in some national priority areas, wait times for hip and knee replacement in NS remain challenging and are the worst in Canada. The Department will work with the NSHA and IWK to address access to care and improvements in wait times will be a key measure in the accountability agreements between the Minister and the Board Chairs.
- Support for the NSHA and IWK to implement the **National Surgical Quality Improvement Program (NSQIP)**. This program provides clinical evidence to support and inform actions that can be taken to ensure all Nova Scotians have access to the same high quality surgical care.

Health System Goal #4: Resource Stewardship

Sustainable actions that support learning, research, innovation and effective use of resources

In 2015-16, the Department has established three priority areas for action under this strategic goal.

Strategic Priority: Expanded development and use of innovative technologies and strategies

- Government is committed to development and investment in innovation that will improve health outcomes for Nova Scotians and contain costs in the health system.
 - A significant project that is in development is **One Person One Record (OPOR)**. Nova Scotia has a number of health information systems across the acute care, primary care, emergency health services, continuing care, public health and other health sectors. Each of these systems operate largely independently and do not easily communicate or interoperate with each other. OPOR would be a single person-centric information system that will provide a more cohesive and cost-effective operational environment. In 2015-16, the Department will invest in this project to determine how it could best proceed.
 - The Department is working with its partners to develop a **Nova Scotia Health Innovation Strategy**. This strategy would focus on health care delivery innovations that reduce growth in health care spending, leverage opportunities for economic growth and improve health services for Nova Scotians. This strategy will be developed by bringing together those delivering health care, government, industry and academia. In 2015-16, the Department will explore actions in the proposed strategy and begin implementation.

Strategic Priority: Appropriate use of resources to achieve high performance outcomes

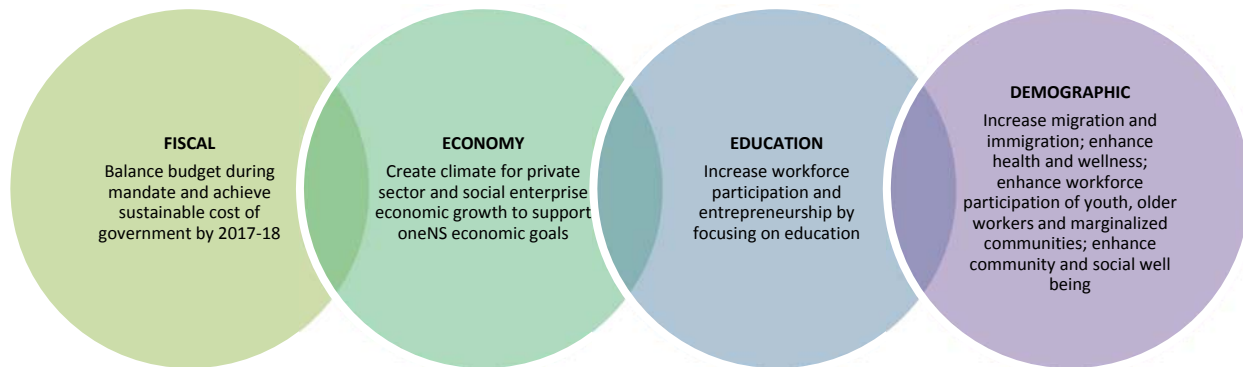
- In 2015-16, the Department, Government and the health authorities will be negotiating a number of **labour agreements**, such as those with physicians, nurses and other health professionals. The Department will be focused on ensuring that the agreements reached incent high performance from providers in the health system. For example, negotiations with physicians will occur within the context of implementation of a new Academic Funding Model that increases accountability for these contracts and physician performance. Contract deliverables are clear and connected to incenting performance in line with the strategic actions of the Department, which will lead to better patient outcomes.

Strategic Priority: Streamline administration and efficient and effective use of resources in the health system

- The amended *Health Authorities Act* enabled and required the **consolidation** of nine district health authorities into one, now known as the Nova Scotia Health Authority. As part of this consolidation, there was a reduction in administration costs to the health system. In 2015/16, the Department will work with the NSHA and IWK to find further efficiencies in the new structure that will result in better health care for Nova Scotians and better use of health funding.
- In response to the consolidation in the health system, the **Department** will be looking at its mandate and structures to determine what changes need to be made to align with the new health system. As with the health system consolidation, efforts will be focused on ensuring efficient and effective use of resources in the Department.
- Nova Scotia's population is aging, and because so many seniors prefer home care over living in a long-term care facility, demand for these services – and their cost to taxpayers – has increased significantly. On any given day, approximately 12,000 Nova Scotians receive services through the provincial Home Care Program. As the Department strives to further expand care at home and reduce reliance on residential care, it is imperative that the delivery of home care services be effective, efficient, and sustainable. In 2015/16, the Department will address the Auditor General recommendations related to the procurement of home care. The Department will be exploring the development of a **Request for Proposals for Home Care** support and nursing services provided under the provincial Home Care Program. The goals of a potential RFP would be to improve delivery and enhance quality of care; improve transparency and accountability through contractual arrangements; standardize service offerings across the province; comply with government procurement requirements; and reduce costs.
- Government created the Internal Services Department (ISD), which is responsible for the delivery of specific shared services. This organization houses provincial shared services for the public sector including health, education, civil service and some crown corporations. In 2015/16, **Shared Services** will continue to migrate services from public sectors including health and education. Connected to this initiative, the four Atlantic provinces are coordinating efforts around procurement to maximize savings and creating efficiencies. The expected outcome of these changes is significant savings within the health system over the coming years, beginning in 2015-16.
- The Department will continue its efforts with the **Pan-Canadian Pharmaceutical Alliance (PCPA)** to reduce drug costs. Over the past two years, the price of 10 commonly used generic drugs have been reduced resulting in an estimated annual national savings of \$150 million. In addition to the work on generic drugs, provinces

and territories have worked together through the PCPA to complete 32 joint negotiations achieving consistency in drug listings and improved value. As a result of this work, \$80 million in annual savings will be achieved for participating provinces and territories.

4.0 Government Priorities



The Department of Health and Wellness contributes to the government’s strategic priorities in many ways.

- **Fiscal**—The consolidation of nine district health authorities into one provincial health authority enables a more streamlined, cost-effective system that produces better patient outcomes by focusing on provincial approaches to care and distribution of resources (human and capital).
- **Economy**— The Department contributes to the economy through investment in innovation in the health system. The Department will develop a Nova Scotia Health Innovation Strategy which will aim to reduce the growth in health spending, leverage opportunities for economic growth and improve health outcomes in NS. This initiative supports the One Nova Scotia report by leveraging the health sector as an economic driver through the development of partnerships and leveraging private enterprise ventures.
- **Education**—The Department’s strategic focus on having the best, most cost-effective providers providing care, will involve investment in different models of care, focusing in areas like access to primary care and optimizing and expanding scopes of practice for health professions including physicians, pharmacists, nurse practitioners etc. These efforts will require a focus on education of current and future health professionals.

- **Demographic**—The Department is committed to enhancing the health of Nova Scotians, especially in the areas of primary care, mental health and addictions and chronic disease prevention and management. Healthier Nova Scotians make for healthier communities that can support social and economic development.

5.0 Budget Context

Department of Health and Wellness 2015-16

	2014-15 Budget (\$ thousands)	2014-15 Forecast (\$ thousands)	2015-16 Budget (\$ thousands)
Executive Administration	64,968	62,174	60,783
Physician Services	798,896	789,149	809,090
Pharmaceutical Services	264,869	265,757	270,796
Insured Services	32,414	34,984	33,814
Emergency Health Services	124,192	125,104	130,617
Continuing Care	3,101	3,154	3,180
Home Care Services	233,804	236,325	241,132
Long Term Care Program	560,094	554,922	566,971
Mental Health and Addictions	12,396	9,811	13,397
Active Living	10,563	11,100	10,230
Primary Care Program	19,340	15,881	14,530
Public Health Programs	17,459	16,612	16,048
Provincial Programs and Initiatives	134,730	130,054	134,849
Other Programs	23,405	23,520	23,654
Nova Scotia Health Authority & IWK	1,710,960	1,730,388	1,728,724
Capital Grants & Healthcare Amortization	93,729	73,971	79,926
Ordinary Recoveries	(110,857)	(108,648)	(108,419)
Fees & Other Charges	(13,516)	(12,797)	(13,393)
Ordinary Revenues	(59,553)	(57,034)	(54,651)
TCA Purchase Requirements	13,950	12,406	9,443
Total	4,104,920	4,082,906	4,137,741
Funded Staff (FTEs)	486.90	431.53	447.60
Staff Funded by External Agencies	(19.60)	(12.05)	(17.90)
Total FTE Net	467.30	419.48	429.70

6.0 Performance Measures

The Department is currently reviewing measures available to best assess the performance of the Nova Scotia health system. This involves identifying strategic outcomes and the sources of related data; selecting annual and ultimate target years where possible; and establishing trends.

In 2015-16, the Department will be implementing an accountability framework to better articulate what it expects from the Nova Scotia Health Authority and IWK Health Centre. The accountability framework will include key performance indicators that allow the Department to measure the system's performance in relation to its four health system goals stated in this Statement of Mandate: health of the population, experience of care, health system workforce and resource stewardship.

The measures will allow the Department to evaluate access to care, safety of care, health of the workforce, overall health of the population, experience of care, resource stewardship and innovation efforts. Examples of measures that are being considered are:

- **Access to Continuing Care**
 - This measure will assess the percentage of placements to long term care from hospital. This is an indicator of system performance as it measures the system's ability to coordinate and expedite patients from hospital to either a long term care placement or back home. In this case, the target is to improve the percentage by lowering the number of placements to long term care, thereby increasing the number of appropriate placements of patients back to their homes with the right supports.
- **Access to Ambulatory Care**
 - This measure will examine the hospital admission rate for chronic medical conditions that when treated effectively in community settings—should not, in most cases, advance to hospitalizations. This is an indicator of the success of primary health care. The target for this measure is to have a low rate of hospital admission for these conditions.
- **Immunization Rates**
 - This measure will monitor and track the percentage of Nova Scotians who are immunized. This measure is an indicator of the health of the population and the success of public health programming. The target will be to see steady improvement in the numbers of Nova Scotians who are immunized.

- **Administration Ratio**

- This measure will examine the ratio of staff in the health system who are considered administration as compared to those considered staff providing care to patients. This is an indicator of resource stewardship and effective use of resources. The target for this measure is to have a low percentage of administrative staff, so that more staff are dedicated to patient care.

In 2015-16, the Department will be refining the measures it will use to evaluate performance of the Nova Scotia Health Authority and the IWK. The Department will develop targets, first year goals, longer term goals and a tracking system to monitor the authorities' performance.

