Health Accord for Newfoundland & Labrador

A 10-year health transformation
Our Vision

is improved health and health outcomes of Newfoundlanders and Labradorians through:

- acceptance of and interventions in social determinants of health,

and a higher quality health system that balances community, hospital, and long-term care services.
Our Objective

Use evidence, strategies and public engagement to create a 10-Year Health Accord that will improve health in Newfoundland and Labrador, and do so within the fiscal envelope of the province.
Integration
A compelling case for change

- Health crisis
- Substantial demographic change
- Sustainability of the current model of health care
- Fiscal crisis
- Climate change

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A 10-year health transformation
Rate of Medical Complexity per 100,000 Children and Youth, 2015–2016

Newfoundland and Labrador has the **highest rate in Canada** of children and youth with multiple health care needs.

This means that **1,000 children in our province have complex health care needs.**

The rate of medical complexity in NL is **34% higher than the national average.**
The Avalon is the only region of the province that has seen a population increase in the last 30 years.

Overall, NL has seen a major decrease in population over the last 30 years.

This loss in population is most evident in rural and coastal communities, especially on the South Coast, Northern Peninsula, Burin and Notre Dame Bay.

A 10-year health transformation...
The percentage of our population under the age of 15 has seen a dramatic decrease over the last 30 years, especially in rural communities.

Despite an overall increase in population on the Avalon, there has been a 32% decrease in the number of children under the age of 15.

The most extreme reduction (70% and higher) has been in Notre Dame Bay, Burin, the South Coast and Northern Peninsula.
Over the last 30 years, every region of the province has seen a large increase in the number of seniors. Labrador has seen a particularly large increase in the number of seniors. The senior population of our province will continue to increase over the next 20 years.

A 10-year health transformation
Let’s Face the Facts About Poverty and the Economy

1. Poverty = ill health
2. Poverty is very expensive
3. Big public spending on consequences, not causes
4. Child poverty is unjust. Its economic and financial costs last a lifetime
5. Economic Development
   Healthy Society
Temperature Change in Newfoundland and Labrador

Source: Government of Newfoundland and Labrador; Memorial University
Let’s recall how we are reimagining health in Newfoundland and Labrador

https://youtu.be/uRcTnAzOpqc
Actions

Social Determinants of Health

Implement basic income, address food security and housing security

Strengthen the poverty reduction strategy and facilitate access to income support and MCP

Increase awareness and immediate action on a Provincial pathway for inclusion (including anti-racism)

“Nothing about us without us”

Speed up implementation of Government’s climate action plan

Strengthen the impact of the move to the green economy through a “Just Transition”
Actions

Social Determinants of Health

Integrate child health in schools and health system

Provide multi-disciplinary care to children and youth in care or with medically complex needs

Implement a health-in-all-policies approach within Government, municipalities, and public and private sector organizations
Address ageism and build age friendly communities

Pass legislation to provide appropriate, quality and accessible care and protection for older persons

Implement an integrated continuum of care that starts in community and goes through to end of life care
Implement new community teams to improve health and social system care starting with high priority areas, including rural areas and regions without good access to primary care, using start-up funding from the federal government.

Team: doctors, nurse practitioners, nurses, allied health professionals including social workers, elder care, mental health workers, others

Integration with the 23 health centres and the hospitals

Formal links with social program teams and community organizations

Optimal catchment population 6000-7000 and up

All providers for a catchment area digitally connected to each other and to the people
Let’s see how the Community Teams will work

https://youtu.be/NluYzqas-zU
Actions

Hospital Services

- Provide 3 levels of hospital services – community (from 10,000 to 40,000), regional (over 80,000), tertiary (over 500,000)

- Level of services depends on needs of the catchment population, number of people, geography, and ability to recruit and retain health professionals

- Sustainability is important where volume of patients requiring a specialty service is small

- Access to specialists is enhanced by virtual care and by visiting specialists
Engage with communities in the integration of new community teams and provision of services within health centres, community, regional and tertiary hospitals

Align the number of acute care beds with the objective of having 85% occupancy, length of stay similar to Canada, and reduction in alternate level of care
Start a formal Frail Elderly Program centred in regional hospitals with outreach to community hospitals and community teams.

Include in the Frail Elderly Program prevention of frailty in the community, stroke care and restorative care in hospitals.

Reduce ‘alternate level of care’ beds in hospitals and health centres by appropriate management, proactive restorative care, and better access to long-term care beds.
A model of collaborative, urgent care in individual health centres based on the distance from a hospital emergency room, the size of the catchment population, geography and sustainability of health teams

Fast transport to the 13 hospitals, all of whom have a CT scanner

A 24-hour, integrated, province wide air/ground ambulance system, staffed by advanced care paramedics

A virtual emergency room supported by doctors and nurse practitioners

Actions

Emergency Services
Actions
Digital Technology

- Modernize the provincial Health Information System
- Give priority to improvements in virtual care provision
- Link social and health systems
Create a Provincial Health and Social Sector Human Resource Plan inclusive of:

- Workforce Transition Guiding principles and plans
- Health and social sector environment enabling all providers to work to highest scope of practice
- Strategic recruitment plan to ensure providers to provide support and care
- Strategies to engage, stabilize, and retain the current and future health and social system workforce

Create an environment that values leadership and management and inspires those with potential to lead
Actions
Education

Apply guiding principles in health education development and delivery initiatives.

Develop and deliver an integrated, inclusive and collaborative care model for health education where practitioners learn and practice together.

Update and renew curriculum for health and social system practitioners to better prepare them to deliver equitable, multi-disciplinary care to the full scope of their practice.

Provide education and resource support to the people of the province to facilitate their full participation in a modernized learning health and social care system.
Create a provincial authority to govern province-wide elements of health system (information systems, ambulance, recruitment and retention, procurement, standards of care, health education)

Provide regional structures to deliver health programs and services, to link with other systems that influence health, and to engage with members of the public and community groups around health-related issues

Establish a new regional approach to ensure the integration of health-related services (health, social care, justice, education, recreation, health promotion, municipalities, health education sector, community organizations)

Establish a statutory Council for Quality and Performance

Implement a new governance model for health and social information
Actions for Engagement with the Federal Government

Develop a provincial strategic plan to immediately engage the federal government for funding on:

- poverty reduction (including approach to basic income, housing and food security)
- climate change
- childhood development
- meeting the needs of the aging population
- community teams
- broadband penetration
Now let’s look at how this reimagined system will impact the people of Newfoundland and Labrador

https://youtu.be/MCTIsObJBoY
The Health Accord
The Calls to Action

Delivered January 20, 2022

Includes the Calls to Action — Directions that will transform health in NL
Agreement among the Stakeholders

The Implementation Plan
The Blueprint

Delivered February 2022

Includes:

- short-, medium-, and long-term actions
- an implementation timeline
- framework options for implementation
- costing information
Guiding Principles for the Implementation Plan

- An Accord
- Healthy People, Healthy Environment
- Diversity and Inclusion
- Intersectionality
- Sustainability
- A Self-Reflective Health System
- Ripple Effect
- Health in All Policies
Making Health Accord NL Happen

Promise ◗ Commitment ◗ Leadership

Intelligent and committed leadership at the highest political and executive levels of government and of our health and social systems.

Wise and energetic leadership from the community sector, private sector, health education sector, municipalities, and Indigenous governments.

Continued engagement and persistent demands from every one of us that the calls to action be answered and Health Accord NL be implemented.

Our province. Our health. Our say.