



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.

A compelling case for change

Health crisis

Substantial demographic change

Sustainability of the current model of health care

Fiscal crisis

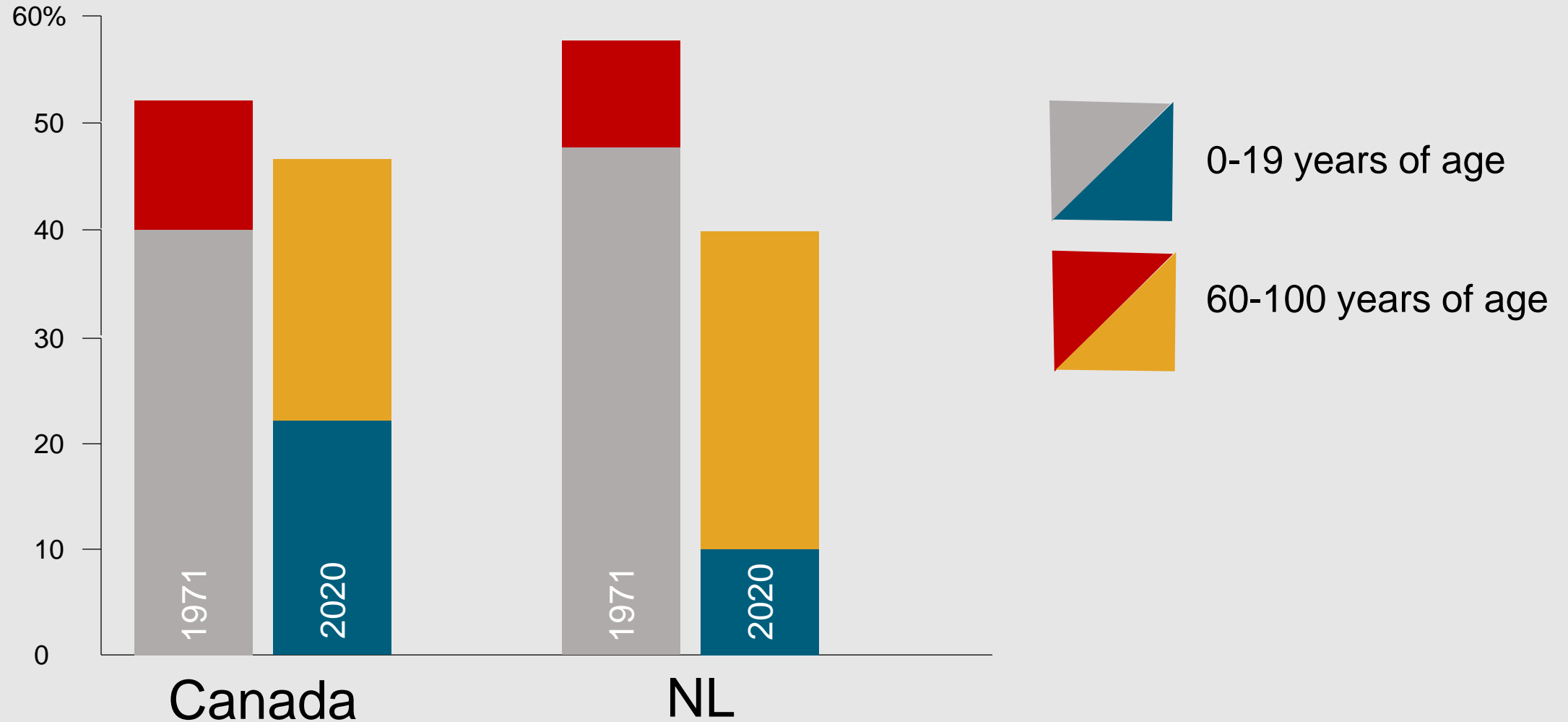
Climate change

Canada Indigenous Population **I hope I live a happy, long life.** 74.8 years

NL Total Population **I hope I live a happy, long life.** 79.5 years

Canada Total Population **I hope I live a happy, long life.** 82.1 years

Distribution of population based on age, 0-19 and 60-100 years, NL vs Canada (1971 & 2020)



Framework to Improve Health

Action on the
social
determinants
of health

Better,
integrated
elder care

New
community
teams

Reimagined
health centre
model of care

New
emergency
services model

Hospitals to
respond to the
needs of their
catchment
population

A stronger
sustainability
model

Improved
virtual care



Actions for Social Determinants of Health

- ✓ Systemic racism
- ✓ Poverty reduction
- ✓ Universal basic income
- ✓ Early childhood development
- ✓ Housing insecurity
- ✓ Food insecurity
- ✓ Environment including water

Actions for Elder Care

- ✓ Non-ageism
- ✓ Aging-in-place with innovative solutions in the community
- ✓ Better management of the frail elderly
- ✓ Integration across care models
- ✓ Better end-of-life care

Framework for Community Teams

- ✓ Team: doctors, nurse practitioners, nurses, allied health professionals including social workers, elder care, mental health workers, others
- ✓ 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
- ✓ For smaller catchment populations, a solution to the provision of community services is necessary

Framework for Emergency Services

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

Framework for Health Centres

- ✓ Contribute to the community team
- ✓ Provide a model of urgent care consistent with the needs of the community
- ✓ Provide a holding bed or acute care beds as needed by the community
- ✓ Contribute to long-term care as currently provided

Framework for Community Hospitals

- ✓ Partnership between the community team, health centres and the community hospital all linked virtually
- ✓ Base services include emergency, medical, elder care, mental health, diagnostic imaging, laboratory testing, and pharmacy
- ✓ Further services depend upon the need of the community, distance from a regional hospital, geography and availability of providers
- ✓ Link between community hospitals and secondary and tertiary services

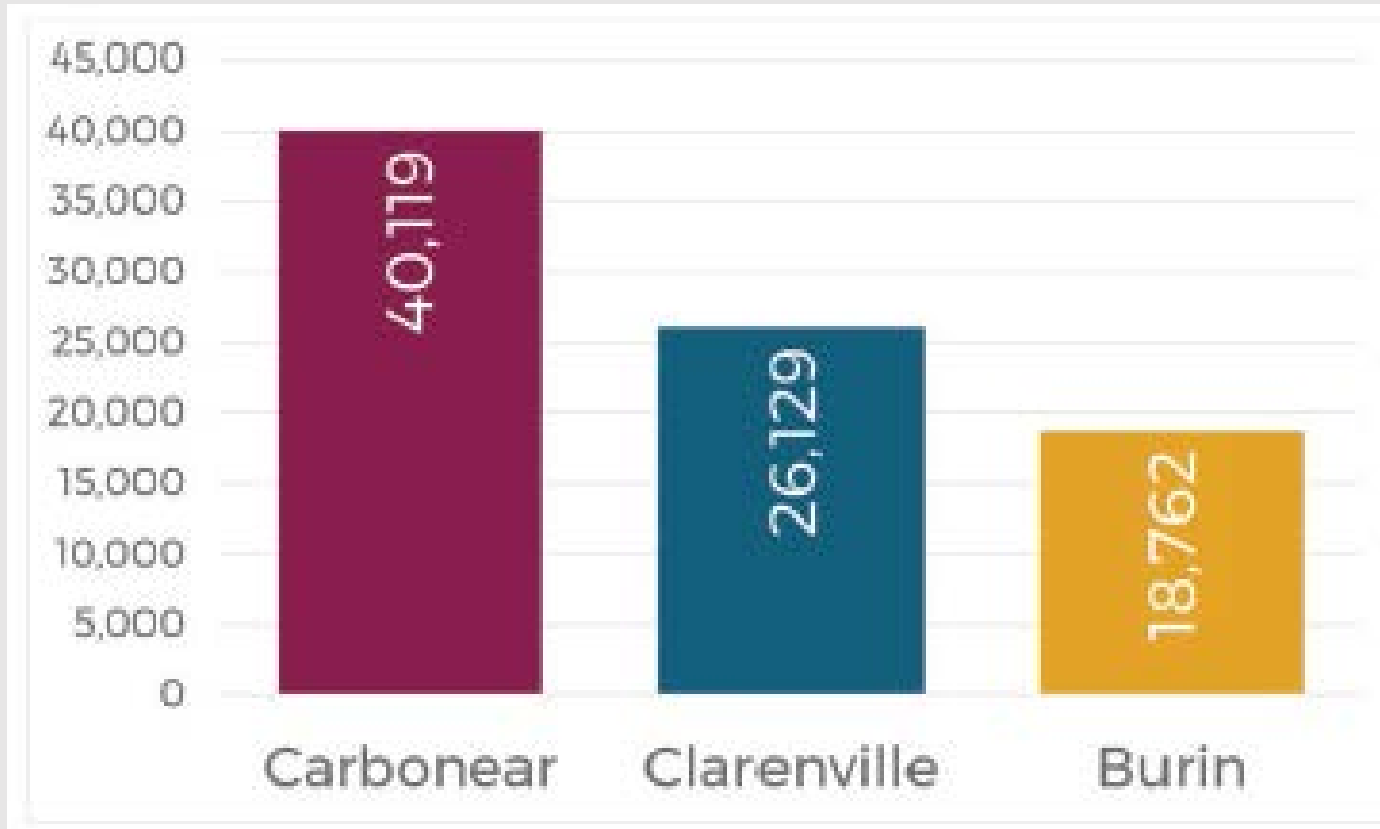
Framework for Level of Services in a Hospital

- ✓ 3 levels of hospital services – community (from 10,000 to 40,000), regional (over 80,000), tertiary (over 500,000)
- ✓ Level of services in regional hospitals also 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

Actions for Digital Technology

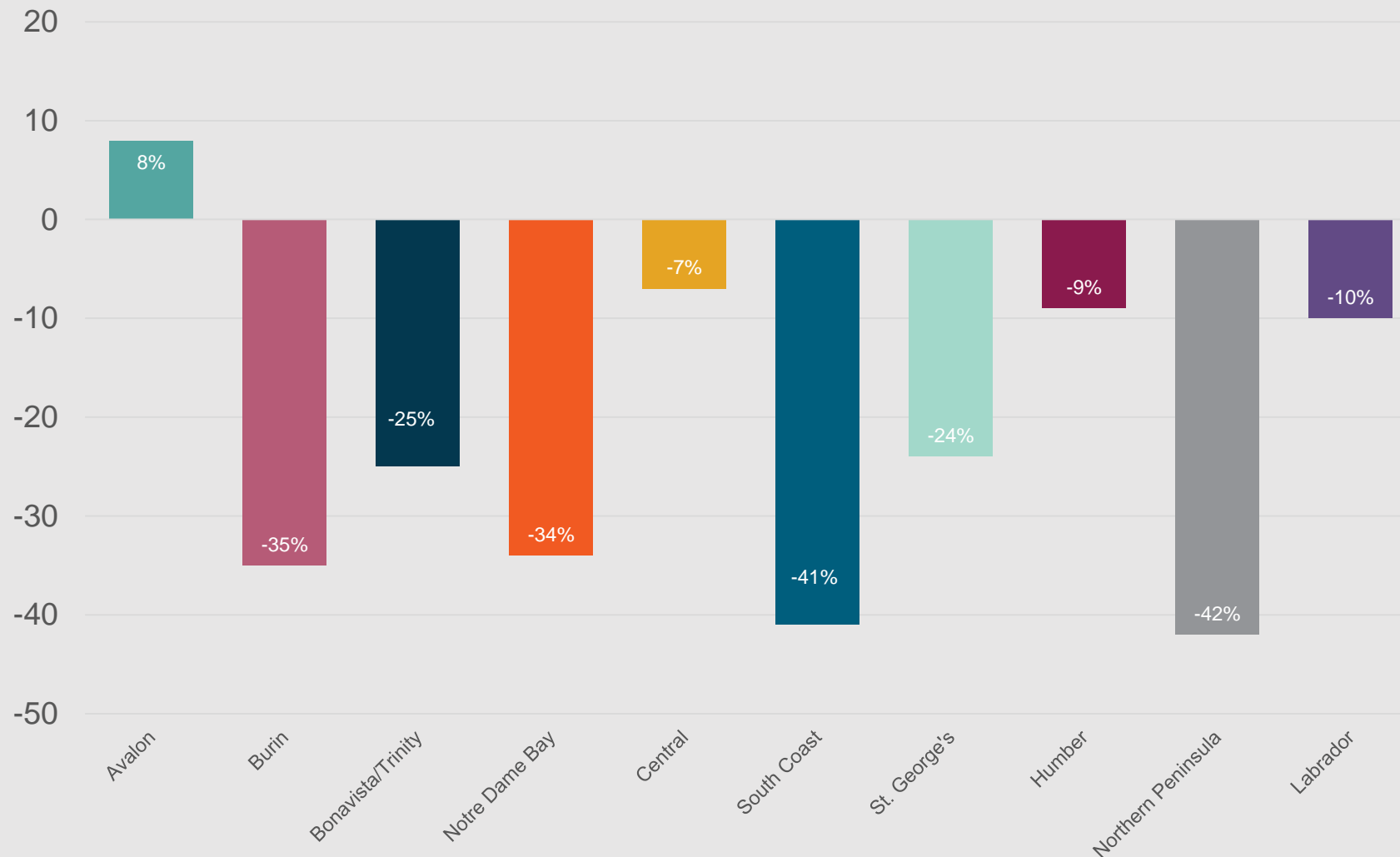
- ✓ Virtual care is a reality and likely to benefit this province with its extended geography and high rural: urban population distribution
- ✓ Penetration of broadband 50/10 is currently at 72% of households, estimated to increase to 98% by 2026
- ✓ Province-wide, integrated, health information system

Catchment Population of the 3 Rural Hospitals in Eastern Health

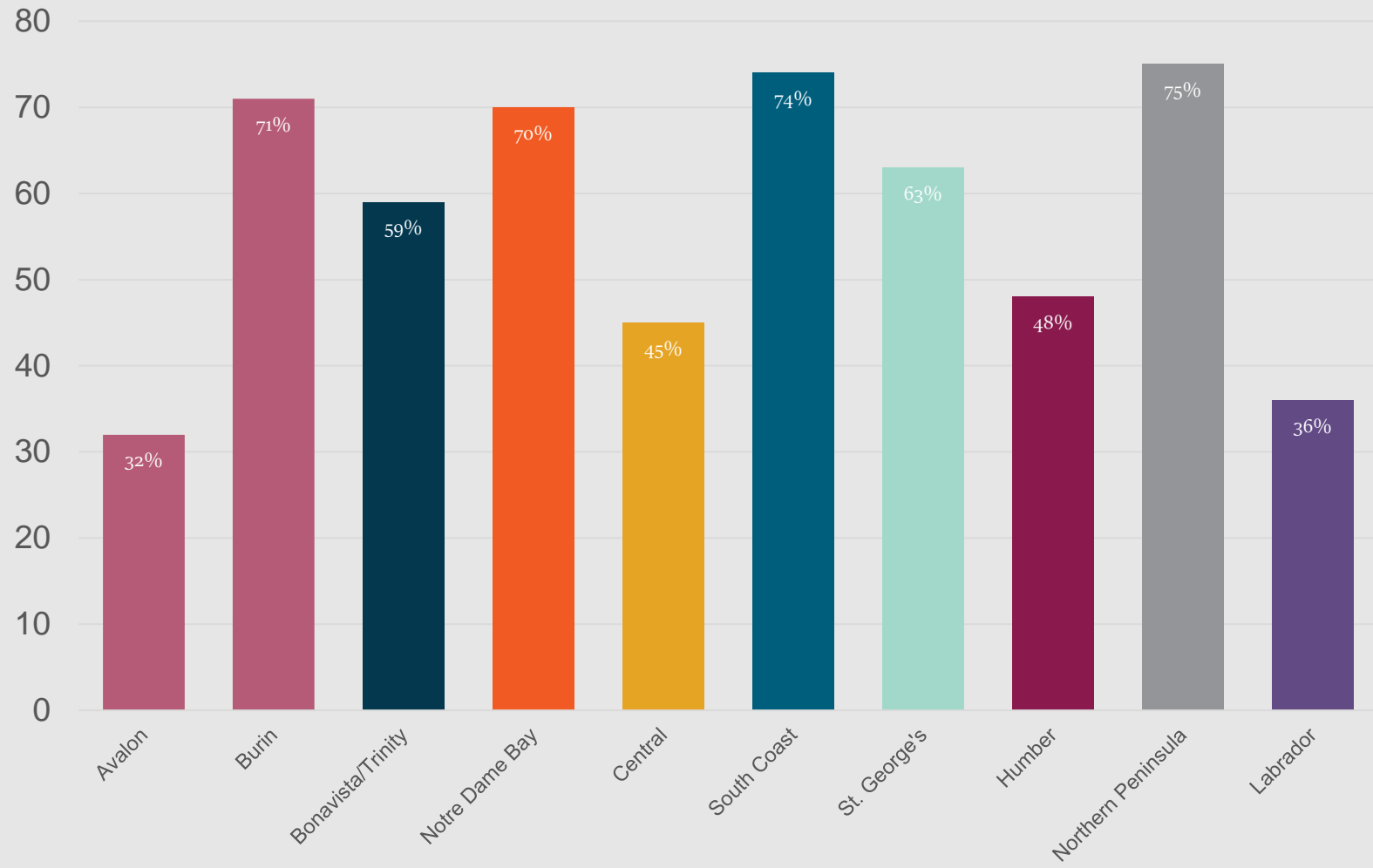


- There are 85,010 people in this region, similar in population size to that of Central Health and Western Health.
- In this scenario, the Southern Shore, Placentia area, St. Mary's Bay area, and Conception Bay South are in the St. John's catchment area not in this rural region.
- In this rural region of Eastern Health, there are 4 health centres = Old Perlican, Bonavista, St. Lawrence, and Grand Bank

Percent Change in Population by Region (1990-2020)

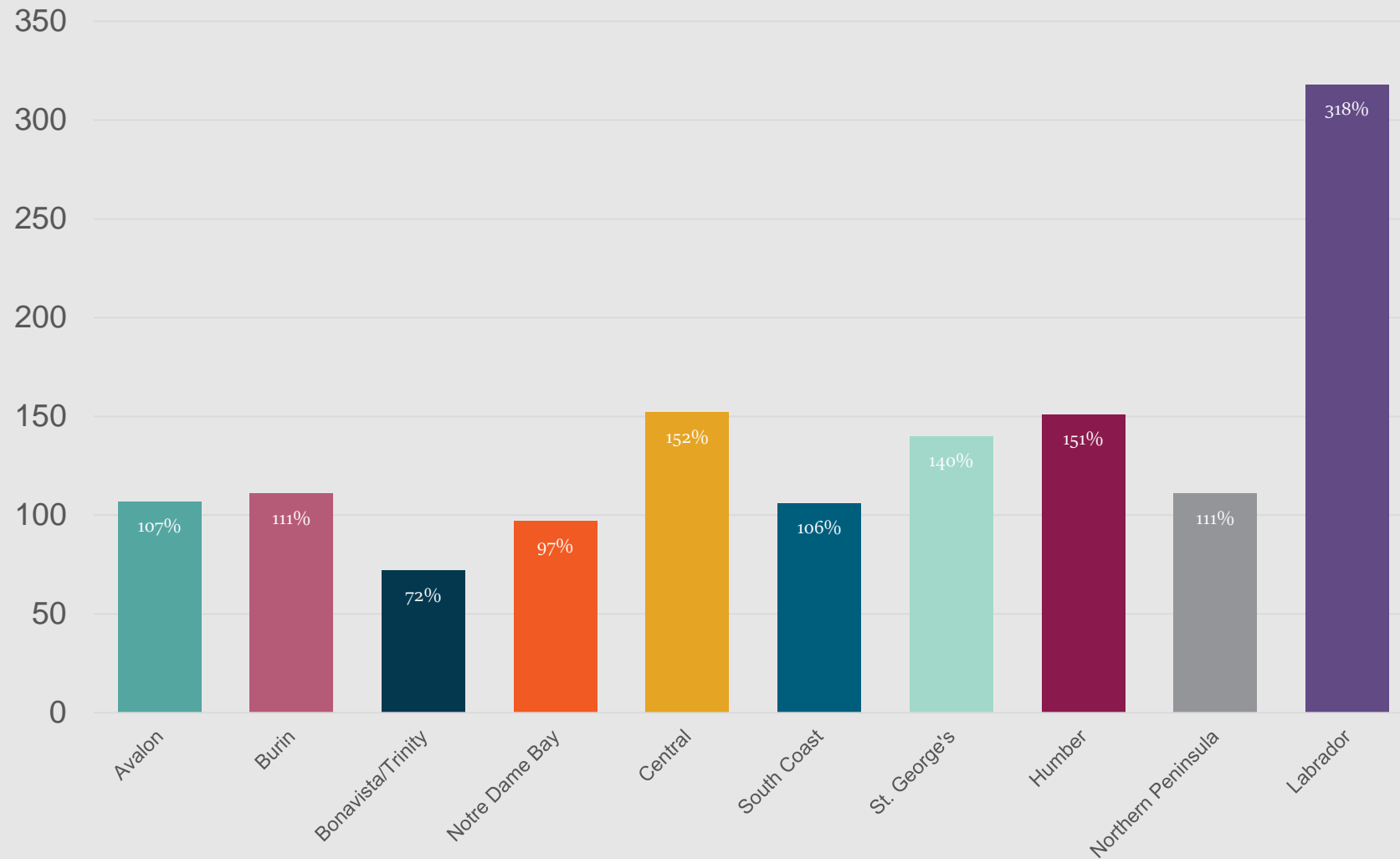


Percent Reduction in Children Aged <15 years by Region (1990-2020)

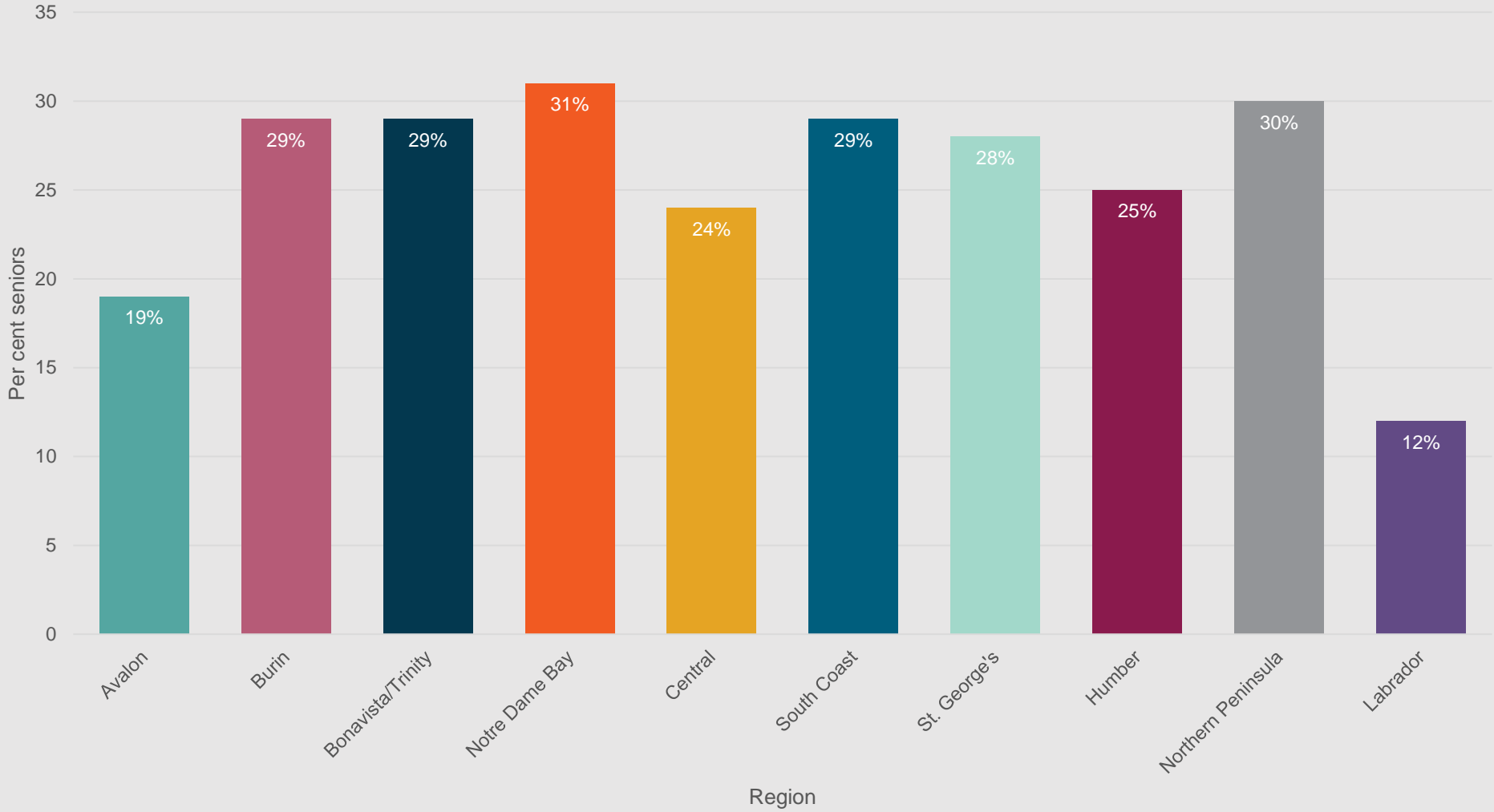


Source: Dr. Wade Locke

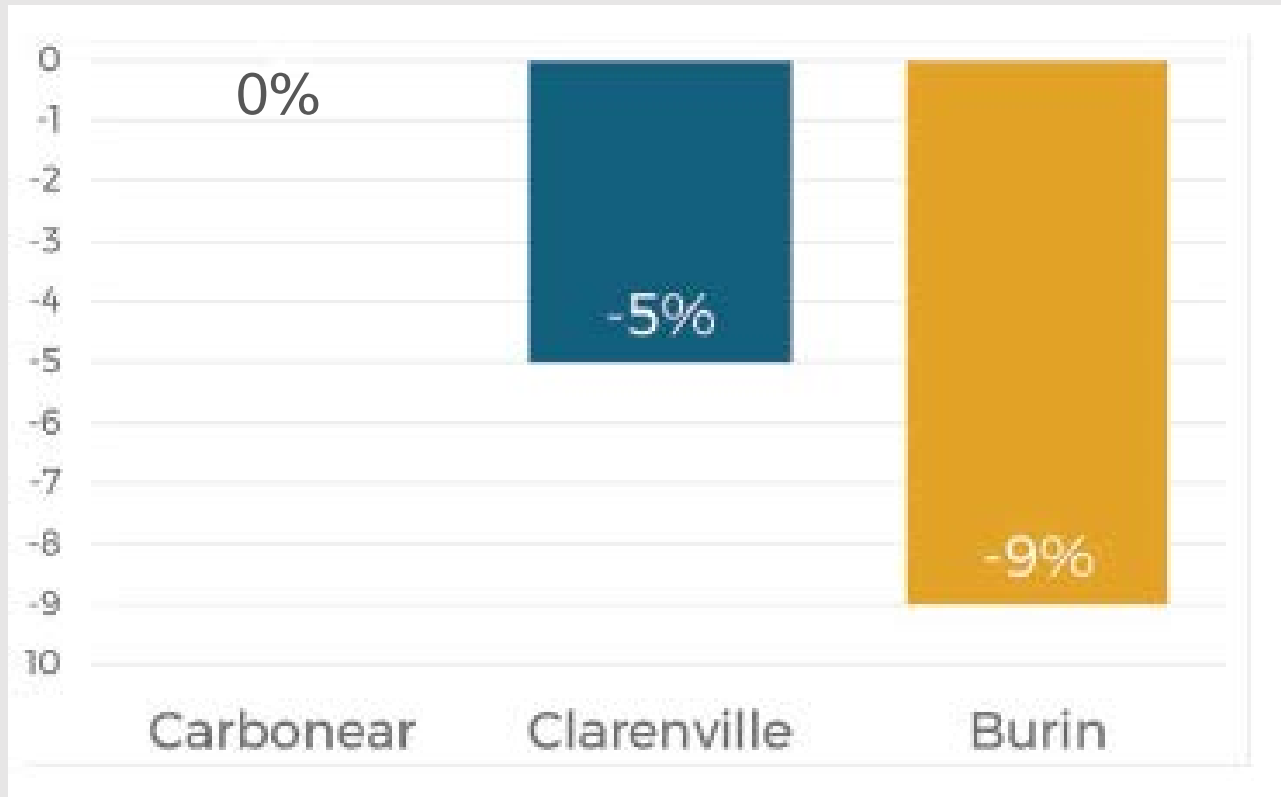
Percent Increase in the Number of Seniors by Region (1990-2020)



Percent of Seniors in the Population by Region in 2020



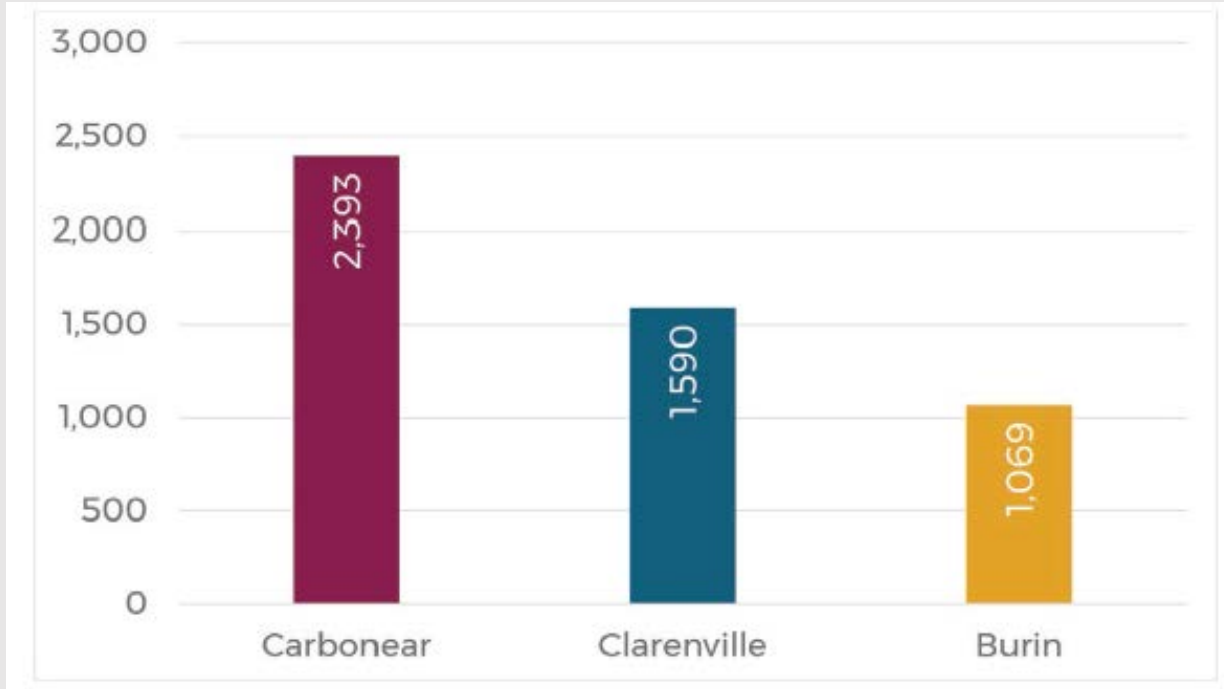
Predicted Population Change From 2020 to 2030



- The Catchment Populations of Burin and Clarenville are predicted to decrease.

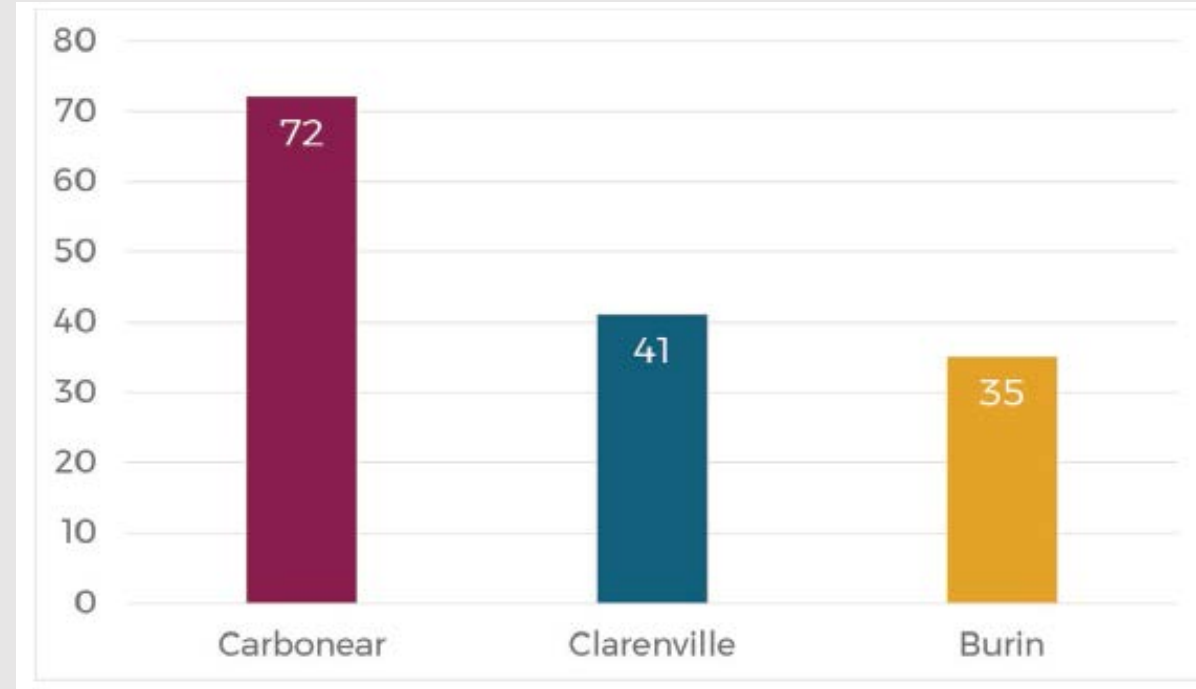
Hospital Utilization in the 3 Rural Hospitals of Eastern Health

Annual Number of Stays 2019/2020



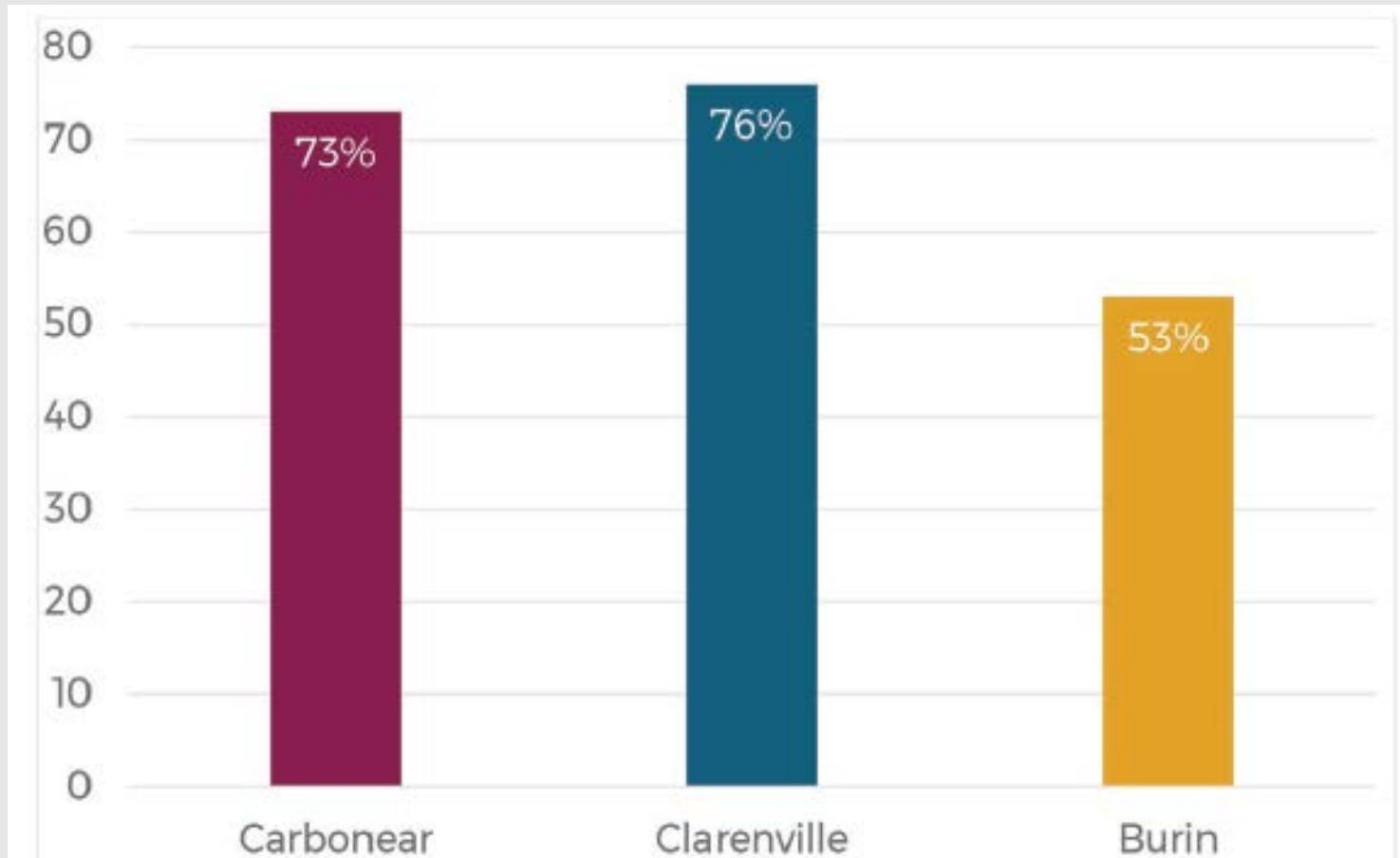
- The number of hospital stays/1,000 population is similar in the three catchment populations (57-60)

Number of Beds



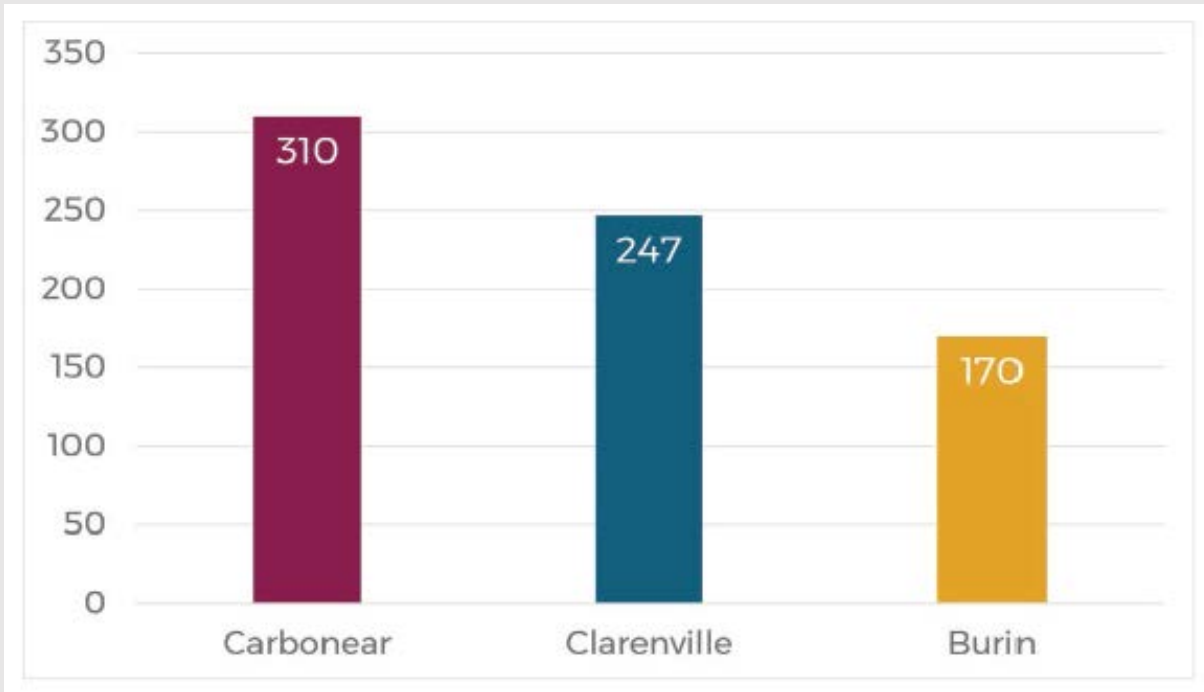
- The number of beds/1,000 population is 1.8 in Carbonear, 1.6 in Clarenville and 1.9 in Burin

Per Cent Occupancy 2019/2020



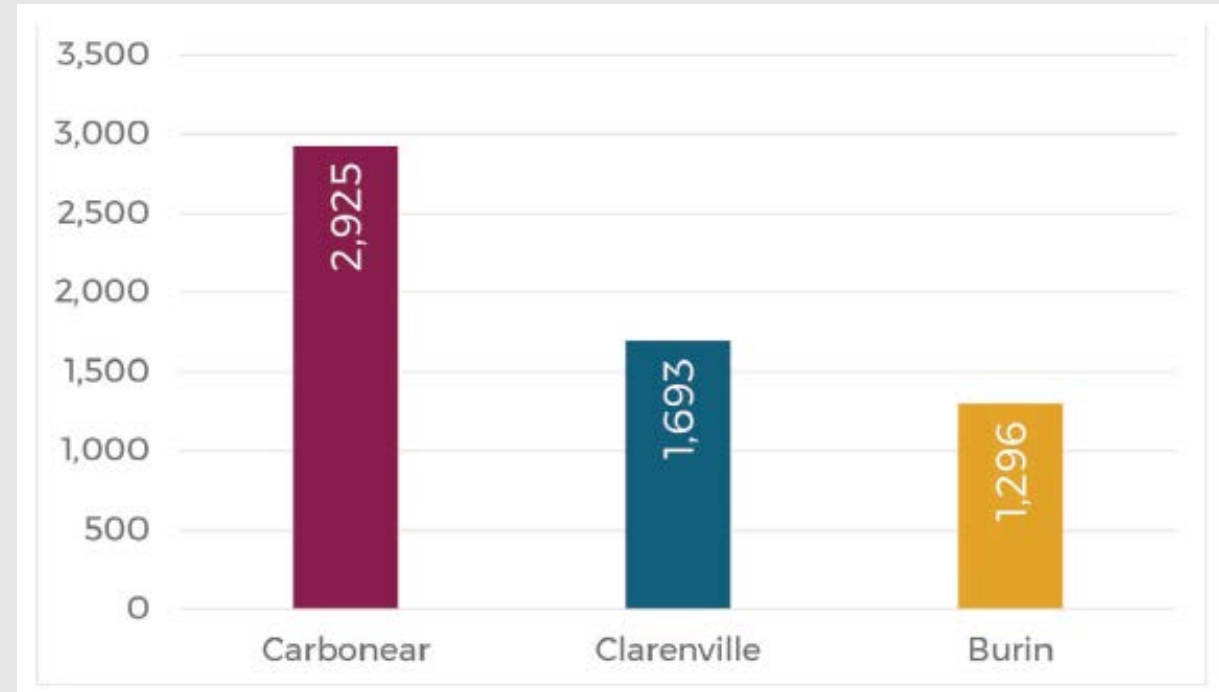
- The occupancy rate for all three hospitals is low

Annual Number of Stays for Surgery Reason 2019/2020



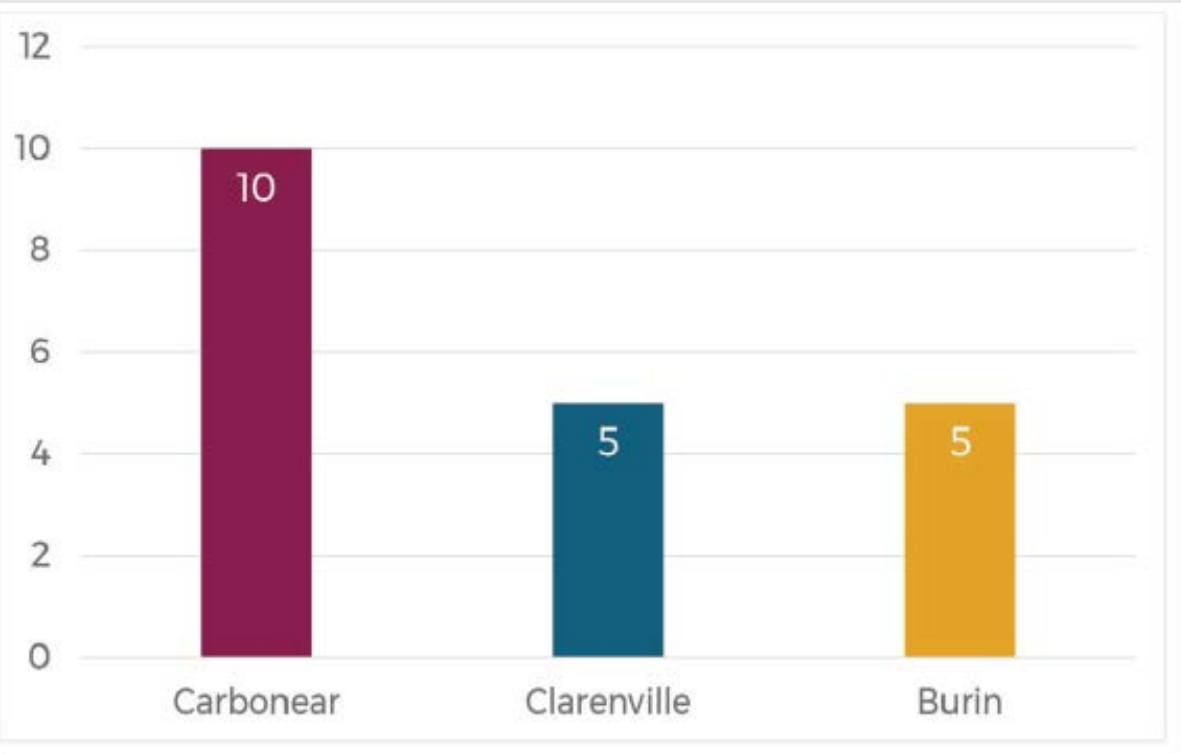
- Number of stays for surgery was <math><1</math>/day for each of the three hospitals.

Number of Same Day Procedures 2019/2020

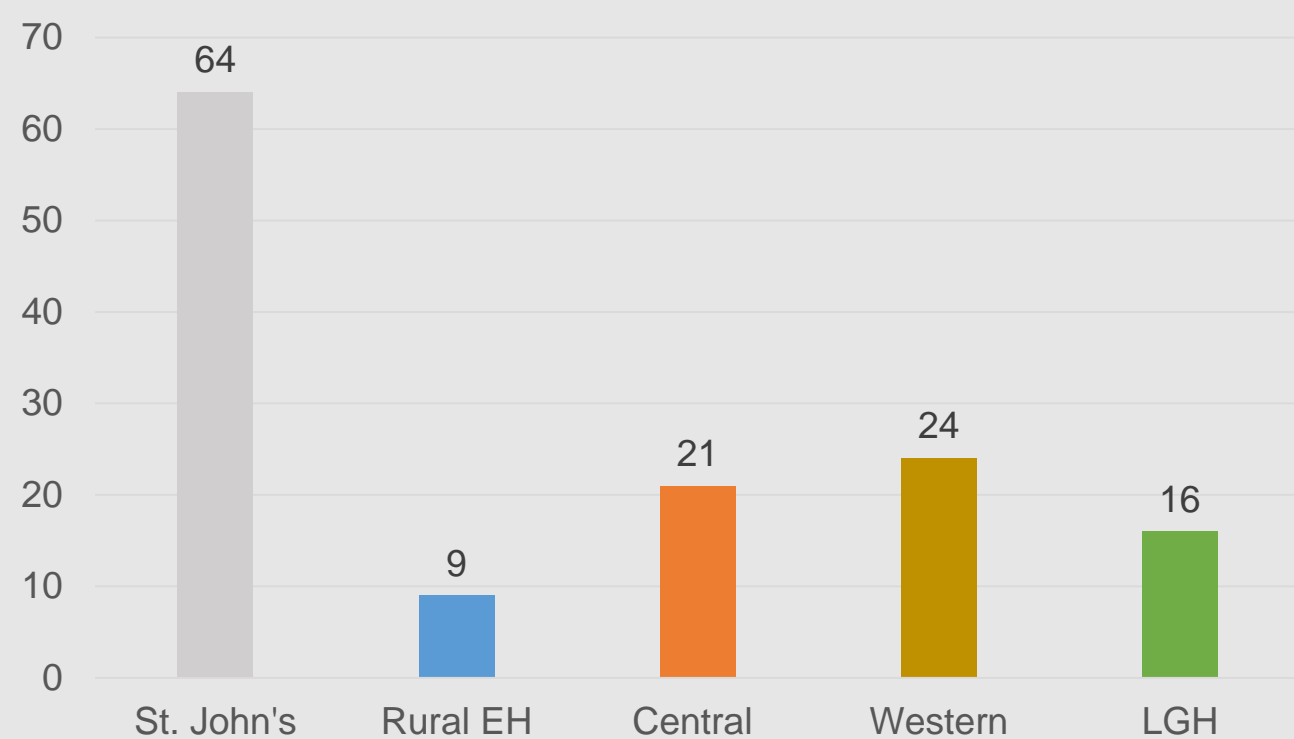


- The number of same day procedures/1,000 population was 73 in Carbonear, 65 in Clarenville and 69 in Burin.

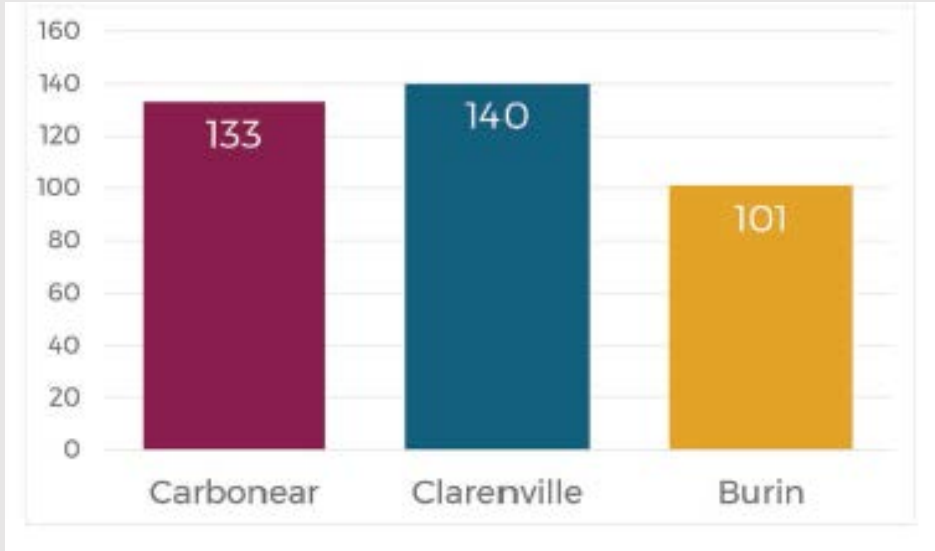
Number of Surgeons and Anesthetists Funded 2019/2020



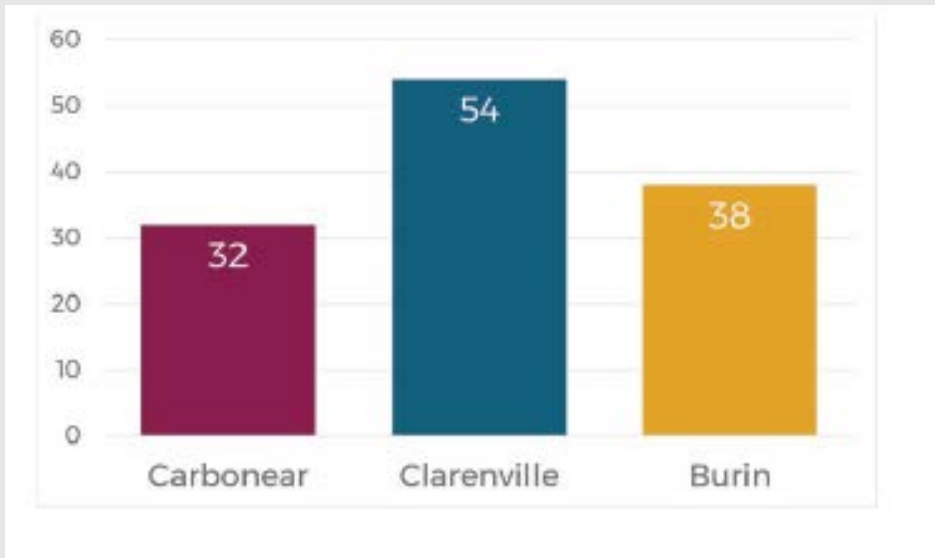
Annual Rate /1000 population of in-patient not-low-risk surgical procedures by Region



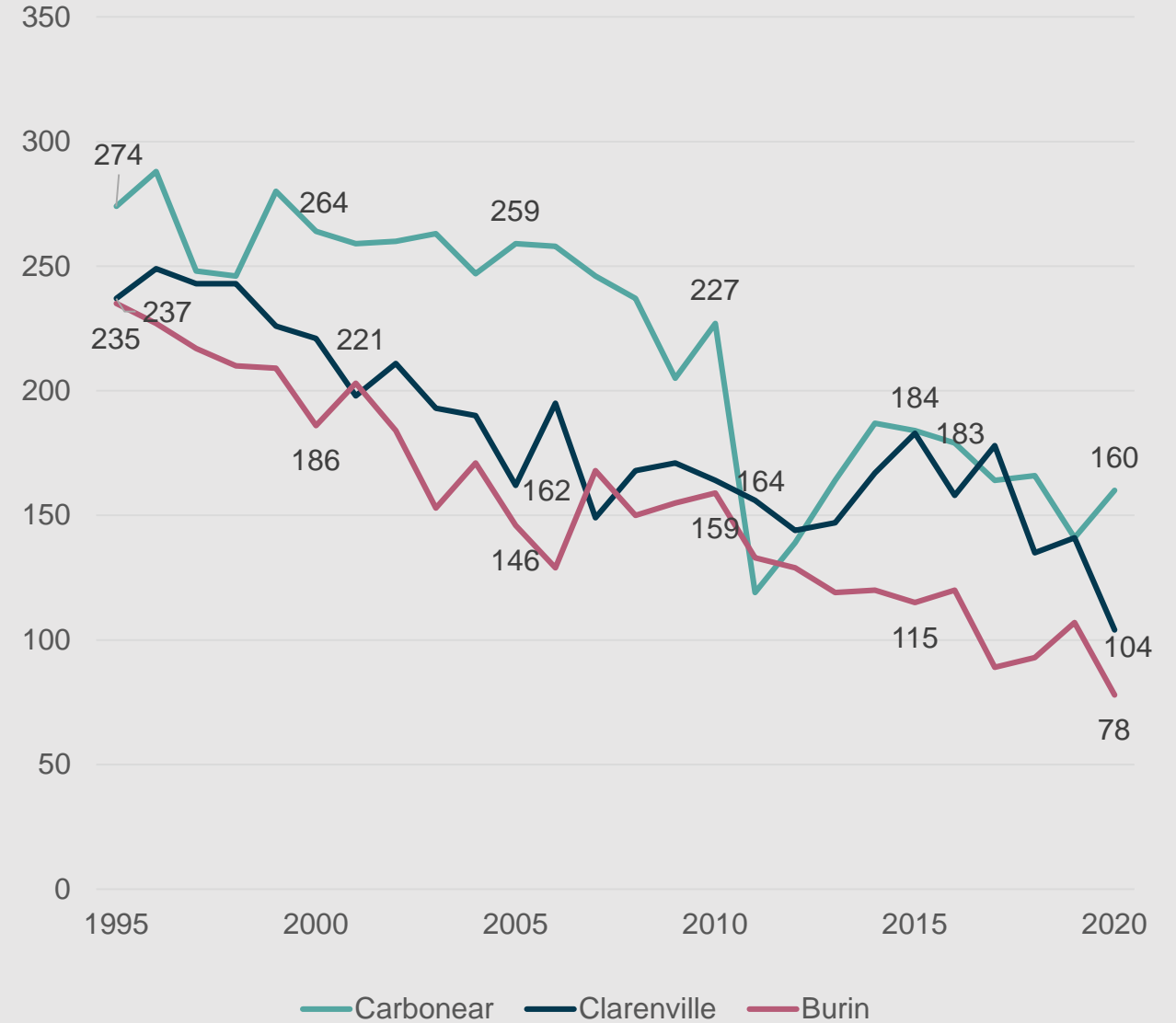
Annual Number of Deliveries 2019/2020



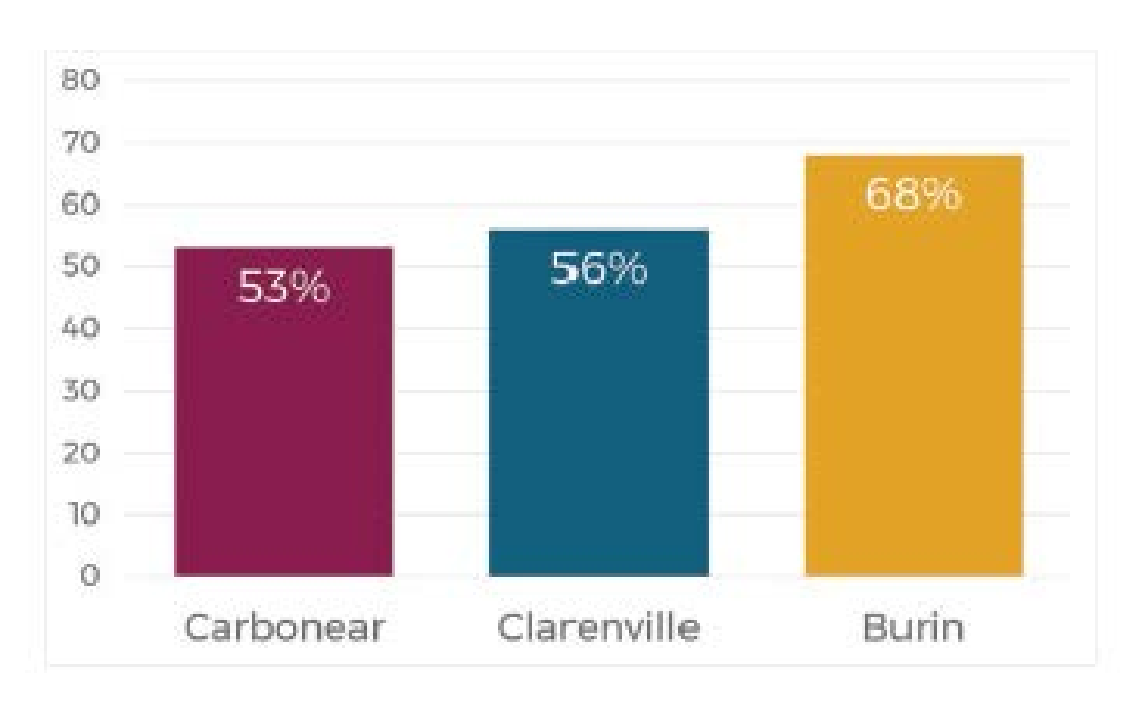
Annual Number of C-Sections 2019/2020



Deliveries Over Time in the Three Rural Hospitals of Eastern Health

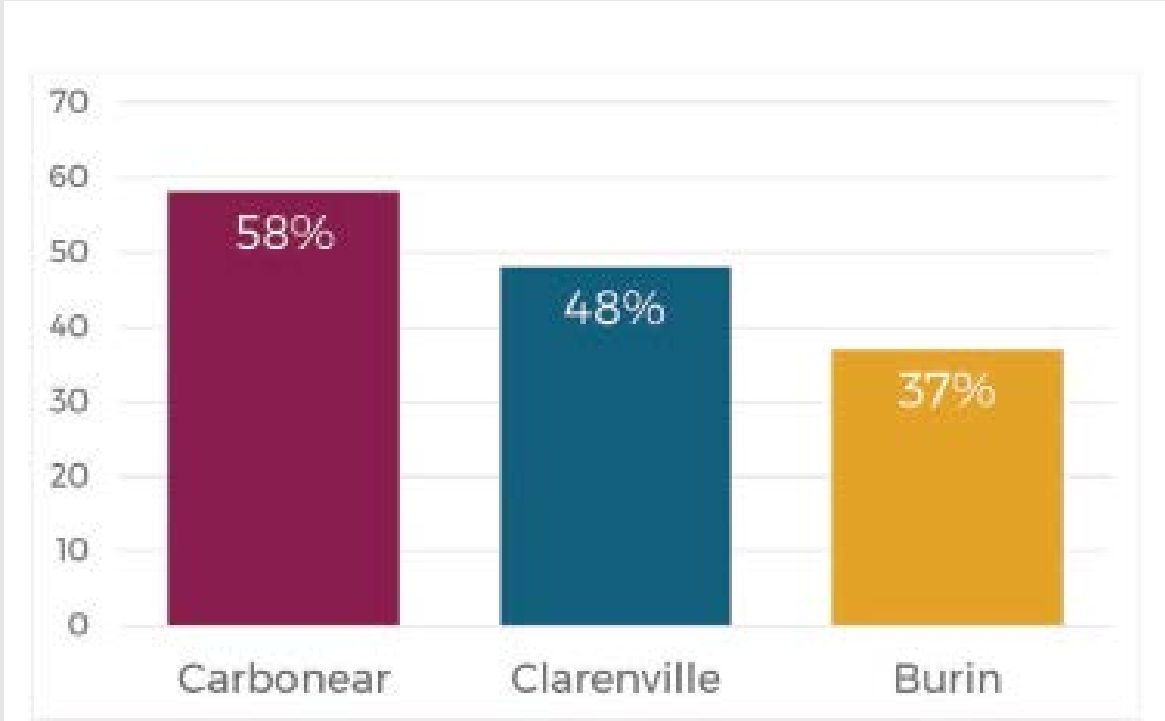


Per Cent Turnover of Physicians in the Past Three Years 2018-2021



- The turnover rate was high (number of times positions were filled in the three years plus number of vacancies/total positions funded).

Per Cent Retention of Physicians for Longer Than Three Years



- The retention of physicians for greater than three years as a percentage of the total positions funded ranged from 37% in Burin to 58% in Carbonear.

Potential Solutions

Suggested in Engagement Sessions

1. On the Burin Peninsula, provide a strong inter-disciplinary community team with a focus on mental health and addictions, chronic disease prevention and treatment, management of the frail elderly, integration of social care, and removal of silos.
2. Strengthen linkages between community teams and community hospitals.
3. Provide a model of urgent care services in health centres dependent on distance from a hospital ER, geography, the size of the catchment population and available providers.
4. Provide full service surgical and obstetric teams in Clarenville, in partnership with Burin to provide same-day surgery and gynaecology, and pre/post-natal care in Burin Hospital.
5. Create a strong virtual care program along with visiting specialists from tertiary care.
6. Design a health system structure attractive to NL-born health providers.
7. Integrate and enhance recruitment processes for the province, and modernize retention endeavors.



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