

Proposals



Health Care Crisis **The Time to Act is NOW**

December 2022

New Brunswick Health Coalition



Health Care Crisis: The Time to Act is NOW!

Our public healthcare system is something we can be proud of, but it is currently in crisis. The COVID-19 pandemic has only exacerbated a situation that has been predictable for decades: a shortage of medical staff and an aging population. We need to find solutions quickly to overcome this crisis.

Unfortunately, in New Brunswick, Premier Blaine Higgs and his cabinet members are proposing to solve the problem by opening the door to private companies, instead of making the necessary efforts to improve our public health care system.

We strongly believe in the following five basic principles of the *Canada Health Act*.

Public Administration: The provincial and territorial plans must be administered and operated on a non-profit basis by a public authority accountable to the provincial or territorial government.

Comprehensiveness: The provincial and territorial plans must insure all medically necessary services provided by hospitals, medical practitioners and dentists working within a hospital setting.

Universality: The provincial and territorial plans must entitle all insured persons to health insurance coverage on uniform terms and conditions.

Accessibility: The provincial and territorial plans must provide all insured persons reasonable access to medically necessary hospital and physician services without financial or other barriers.

Portability: The provincial and territorial plans must cover all insured persons when they move to another province or territory within Canada and when they travel abroad. The provinces and territories have some limits on coverage for services provided outside Canada and may require prior approval for non-emergency services delivered outside their jurisdiction.

These principles ensure that everyone with a Medicare card can receive health services free of charge.

Today, the New Brunswick Health Coalition is very worried by the discourse and actions of the Higgs government in support of opening our public system to private non-profit and for-profit companies. This government is using the present health crisis to try to convince citizens that there are no other alternatives.

We beg to differ.

There are numerous ways to strengthen our present healthcare system that if implemented will allow us to emerge from this crisis even stronger.

Our proposals

We support the fact that our healthcare system is managed by two separate health authorities, Horizon and Vitalité.

We also support the New Brunswick *Official Languages Act*, which guarantees everyone the right to receive government services in the official language of their choice. This must include private nursing homes, special care homes and home care services.

We strongly believe that citizens must be at the heart of our health system: we are the owners, partners and patients.

Decision-making

The present government is making major changes to our public healthcare system which will have significant impacts in the future.

We believe that any changes to our healthcare system must be based first and foremost on a thorough understanding of each community to be served, on the specific needs and resources of each one, on an ongoing evaluation of outcomes and on a subsequent adjustment of resource allocation based on outcomes, as well as on the principle of community equity.

Any changes to the healthcare system must be decided by all stakeholders, not by a small group of bureaucrats, politicians and consultants. Doctors, employees, patients and their families, unions in the healthcare sector and concerned community organizations must sit at the table where decisions are taken. All of these groups have a vested interest in making our public system work.



**Consult
Consult
Consult**

We also believe that to have an efficient and modern system, it is very important that the public have a greater say in what happens in our public healthcare system. Under the *Regional Health Authorities Act*, health authorities are responsible for consulting with the population they serve to develop their regional health plan.ⁱ

This is why we propose that Vitalité and Horizon Health Networks have a fully elected board of directors with real decision-making power. The CEO of these boards must be chosen by the board members, not by the government.

Integrated healthcare system

We currently have a fragmented healthcare system. On the one hand, we have the public system with 23 hospitals, several public Community Health Centres, a hybrid system of 71 nursing homes (some for-profit, some not-for-profit), 475 for-profit special care homes (some for-profit, some not-for-profit) and numerous for-profit home care services. In

addition, Medavie Blue Cross manages the Extra-mural hospital, Ambulance NB, Tele-Care NB and NB Health Link. Finally, doctors also have their own private practices, some paid by the government, others paid by patients or their private insurance.

Currently, healthcare services are managed by the Department of Health, the Department of Social Development, the not-for-profit private company Medavie Blue Cross, and a myriad of for-profit companies. This complex system is making it difficult to properly coordinate all these services. The government's intention to allow private for-profit companies to perform surgeries outside of hospitals would only add complexity to the system.

To ensure continuity and coordination of services, we propose that all health services be brought under one roof, the Department of Health. This would shift responsibility for the care of seniors from the Department of Social Development to the Department of Health. In order to take into consideration the increasing demographic weight of seniors and their specific challenges, we propose the addition of a deputy minister responsible for seniors. We propose bringing back to the Department of Health the services that are presently managed by Medavie Blue Cross. We also propose that all organizations or companies operating nursing homes, special care homes and home care services be gradually brought under the public system.

Presently it is mainly the Department of Social Development, as well as the Department of Health and the Department of Justice and Public Safety that are responsible for conducting inspections of nursing homes and special care homes. As several reports have shown,ⁱⁱ this is not working. We propose the creation of a new government agency with the power to make inspections, issue penalties, administer fines and close facilities that are not meeting the proper health standards.

Home Care

Presently, home care services are partly funded by the Department of Health and by the Department of Social Development. These services are provided by the Extra-Mural Program (managed by Medavie Blue Cross) or by home care agencies (non-profit and for-profit) or private individuals.ⁱⁱⁱ This present disconnected system does not work for the citizens of New Brunswick.

The 2019 report of the NB Health Council stated that in 2017 there were 38,000 citizens who needed home care services. The majority (57%) were from 18 to 64 years old and the others were seniors. The same report goes on to explain that close to half (42%) of these citizens said that some of their needs were unmet. The proportion of unmet needs is much higher in the three northern health zones of Restigouche, Bathurst/Acadian Peninsula and the Madawaska/North-West Area. These zones are mainly francophone and are under the jurisdiction of Vitalité Health Network.^{iv}



**42%
unmet
needs**

We know that New Brunswick citizens want to stay in their home as long as possible. Experts agree that this is the best way to keep them healthy. It would certainly cost less to enhance home care services than building, managing and staffing new nursing home or special care homes.

We propose, in the short term, to invest significantly more in home care services (salaries and benefits to caregivers, home equipment and technology, etc.), to implement provincial standards and to better coordinate the delivery of services. We support the expansion of the Nursing Home Without Walls program wherever it is possible to do so. In the medium term, we propose that home care services become integrated to the Department of Health.

Caregivers

Numerous family members and friends are providing unpaid care for a loved one and are making it possible for them to stay at home and in their community. In 2018, if these New Brunswick caregivers had received a minimum wage, they would have made 300 million dollars. ^vThe Canadian Institute for Health Information specifies that in Canada, one in three unpaid caregivers is distressed^{vi}. The government needs to provide adequate financial support to caregivers, and put in place respite services to prevent caregiver burnout, a problem that impacts not only the caregiver and the person being cared for, but also the healthcare system. If we don't offer these essential supports, both will end up needing health services and it will cost more.

**1 in 3
caregivers
distressed**

Health care professionals

The concept of each doctor having their own private office, working in silos, is probably not the best way to utilize their talents. We believe that certain tasks currently performed by them should be provided by other health professionals, such as nurse practitioners, nutritionists, pharmacists, psychotherapists, etc. in a more collaborative way. We support the expansion of public multidisciplinary community clinics affiliated with a hospital to better respond to the citizens' health needs and provide continuity of care.^{vii} As each region has specific needs, these structures need to be adapted accordingly. We propose that in these clinics, everyone be salaried and not paid on a fee-for-service basis. This will promote better management of patients, including those with chronic and complex problems who often need more time with health care professionals.

Electronic Health Record

Our health care professionals need to rely on efficient technology to access patient information. We strongly support the expansion of a publicly managed digital patient record system for all doctors in the province so they can easily have access to patient information at any time, regardless of where they are in the province. We propose that

patients also have access at all times to their personal electronic medical record. Government management of the system will avoid rampant private cost increases and the risk of confidential data being used for private company interests. These records are too important to be left in the hands of a private company.

Prescription Drugs

Citizens in Canada spent \$34 billion on prescription medicine in 2018. The Final Report of the Advisory Council on the Implementation of a National Pharmacare Program explains that we have 100 public prescription drug plans and more than 100,000 private plans. The report also informs us that Canada is the “only country in the world with universal health care that does not provide coverage for prescription drugs.”^{viii} Presently, we have to rely on inadequate government-run drug insurance programs, employer/employee private company drug plans or pay out of our pocket to access prescription drugs. A high number of citizens on low or fixed income cannot afford these private company premiums. We support a public universal single-payer national Pharmacare program which will provide everyone with proper access to prescription drugs and will save citizens and governments billions of dollars annually.

**\$34
Billion**

Staff retention and recruitment

One of the major challenges we are faced with today is staff retention and recruitment. **This should be the number one priority of the government.**

The pandemic has highlighted the shortage of staff at all levels of our health care system, here as in other provinces. The consequences have been horrific for health care workers as well as for services to patients and the general public.

To help staff retention, we are proposing that our health care system:

- respect and value the work of all workers who are keeping the system going in hospitals, nursing homes and special care homes;
- offer a financial compensation to all employees whose workload has increased due to staff shortages;
- strive for a work-life balance for all workers;
- stop using for-profit health agencies to supply health professionals to our public system: this deteriorates the work environment;
- immediately implement the same salaries and benefits for workers in the non-profit and for-profit nursing homes and special care homes as well as home care;
- implement the *Pay Equity Act* for all health care workers, regardless of where they work.

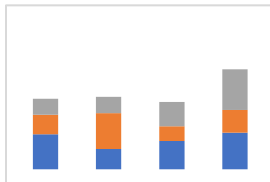
The replacement of employees who are leaving will take time, but we need to start recruiting now.

We propose that the Department of Health implement programs for out-of-province health care professionals and those who come from other countries to give them the opportunity to undergo adaptation training upon arrival to better integrate them as quickly as possible.

We also propose that the province increase the number of seats for medical, nursing and other health care students. Potential candidates should be encouraged to enroll by offering them generous bursaries on the condition that they successfully complete their studies and agree to work for at least three years in New Brunswick once they have graduated. If not, they would have to reimburse the total amount of their bursaries.

Funding and transparency

The federal government has promised investments in primary care over the next three years, including more primary care doctors and nurses, mental health support, more home care and better data.^x The Government of New Brunswick must hold the federal government accountable for its commitment to increase its investments in primary care, and the federal government must ensure that the funds provided to New Brunswick are actually used to improve the public healthcare system. It is crucial that we learn how the money is spent, where it is spent and what the outcomes are, so that the public and policymakers can make informed decisions. We propose that New Brunswick put in place mechanisms to ensure public accountability, including public quarterly reports on how the funds are being spent.



Virtual Health Services

Virtual consultations have increased during the COVID-19 pandemic and have their place, but they should be part of the public system and one of the tools available to health care professionals. Medavie Blue Cross is currently managing Tele-Care 811 and NB Health Link. The province has also signed a contract with the for-profit company eVisitNB for virtual consultations with health care professionals. For-profit companies such as Maple or eVisitNB are attracting staff from our public system, increasing the demand for unnecessary tests, which results in more work and expenses for our public system.^x They now have access to patients' personal health data. This becomes a real problem, as some of these companies have financial links to corporations like Loblaws, a company that owns pharmacies.^{xi} This is not acceptable.

The increased usage of these for-profit companies in health care also undermines continuity of care in two ways. The patients do not see the same professional each time, so they are not familiar with the patients' situation and the focus is on volume, seeing as many patients in the shortest time possible. The result is no continuity of care, less quality and the incentive for health care professionals to neglect in-person consultations. We know in person consultations are key to good health care, especially with citizens who

have complex health problems or seniors. We propose that eVisitNB and other Virtual care services be brought under the public healthcare system.

Prevention

In addition to having access to adequate health care services, we believe more should be done to promote health and prevent diseases. The better we know the needs of the community we serve, the better we can adjust interventions accordingly, and through ongoing evaluation of outcomes, move towards a healthier community. Social determinants such as adequate income, fair employment standards, access to healthy food, affordable housing, education, and an environment that is free of discrimination and pollution all contribute to our collective wellbeing. We propose that our government promote good health by implementing public policies that improve our quality of life.

The government should support agencies, organizations or institutions whose mandate is to promote health and prevent diseases. They, as well as individual citizens, have a role to play in the adoption of a healthy lifestyle.

We understand this proposal is far-reaching, but we need bold changes if we want to live in a healthier and more just society.

Mental Health

We have not addressed the issue of mental health in this paper. This is an area of utmost importance that has been neglected for decades. There is an urgent need for the provincial government, in conjunction with the federal government, to develop services to address the critical needs in this area by identifying, as with other health services, the needs and resources required in each community to address them most effectively.

Conclusion

The NB Health Coalition believes that the best way to solve this healthcare crisis is by strengthening our public healthcare system. A coordinated system will allow a seamless continuity of care for all New Brunswickers while costing less to the taxpayer. We believe all New Brunswickers should receive proper care by professionals who know their medical history and who can satisfy their needs as they evolve. Opening the door to the private sector means creating silos, thus contributing to the discontinuity and deterioration of care, increasing regional inequities, increasing costs, and losing control over our healthcare system.



Submitted by the members of the NB Health Coalition:

Association francophone des aînés du NB, Marcel Larocque, President

Canadian Labour Congress, Serge Landry, Representative

Canadian Union of Public Employees-NB Division. Steve Drost, President

NB Common Front for Social Justice, Janelle LeBlanc, Coordinator

NB Council of Hospital Unions, Norma Robinson, President

NB Council of Nursing Home Unions, Sharon Teare, President

NB Federation of Labour, Daniel Légère, President

NB Federation of Union Retirees, Wayne Brown, President

NB Nurses Union, Paula Doucet, President

NB Seniors Citizens Federation, Percy Huntington, President

NB Union, Susie Proulx Daigle, President

**The New Brunswick Health Coalition is a provincial organization
dedicated to defending and improving our public health system.**

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- ⁱ Regional Health Authorities Act, Article 30 and 33 (1), (2). 2011
- ⁱⁱ Most NB special care homes didn't have requires annual inspections this year. CBC, December 11, 2020. New Brunswick's Elders-Neglected and Forgotten. Association francophone des aînés du Nouveau-Brunswick. 2022. Page 15
- ⁱⁱⁱ Home Care Services in New Brunswick: Are We Meeting the Needs of Citizens. New Brunswick Health Council. 2019. Page 3.
- ^{iv} Home Care Services in New Brunswick: Are We Meeting the Needs of Citizens, New Brunswick Health Council. 2019. P.7
- ^v New Brunswick's Elders-Neglected and Forgotten. Association francophone des aînés du Nouveau-Brunswick. 2022. Page 10
- ^{vi} Canadian Institute for Health Information. 1 in 3 caregivers in Canada are distressed. (story). August 6, 2020
- ^{vii} NB Health Council. In search of a better access to primary services in New Brunswick. 30 November 2021, Page 10
- ^{viii} A Prescription for Canada: Achieving Pharmacare for All. Final Report of the Advisory Council on the Implementation of National Pharmacare. June 2019. Summary, Page 7.
- ^{ix} Federal Budget, 2022. A Plan to Grow Our Economy and Make Life More Affordable. Chapter 6: Strong Public Health Care.
- ^x Virtual Health Care Privatization, National Union Report. December 2021. The concerning rise in corporate medicine. Andrew Longhurst. CCPA and the BC Health Coalition. August 2022.
- ^{xi} Shoppers Drug Mart, "Shoppers Drug Mart to expand Canadians' access to virtual care through \$75 million investment in Maple", September 15, 2020.
