

Elizabeth Smith-McCrossin
MLA Cumberland North



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Députée Cumberland North

Nova Scotia Legislature

February 4, 2025

The Honourable Michelle Thompson, M.L.A.
Minister of Health and Wellness
Department of Health and Wellness
Barrington Tower
1894 Barrington Street
P.O. Box 488
Halifax, Nova Scotia
B3J 2R8

Dear Minister Thompson,

Thank you for agreeing to serve the people of Nova Scotia as Minister of Health and Wellness.

Governing is about people. On November 26th, 2024, Nova Scotians entrusted us with a mandate to shape a brighter future. We believe in the strength of our communities, the ingenuity of our industries, and the rich heritage that defines Cumberland County. Together, we will harness this potential to foster economic growth, improve healthcare, and elevate the quality of life for all residents.

Cumberland County stands on the precipice of tremendous opportunity. By investing in our people, supporting innovation, and ensuring sustainable development, we can unlock prosperity and lead Nova Scotia into a new era of progress. Our collective success hinges on collaboration, bold action, and a steadfast commitment to addressing the unique needs of our communities.

As Minister of Health and Wellness, your leadership will be pivotal in addressing the healthcare challenges facing Nova Scotians. Your work will be critical in improving access to healthcare, addressing staffing shortages, and ensuring a robust and responsive healthcare system for all.

Specifically, I ask that you prioritize:

1. Infrastructure investment is needed urgently. CRHCC is over capacity daily, placing strain on the healthcare staff, patients and families. Expanding the number of acute care beds at CRHCC and hospitals across Nova Scotia is needed now.

2. Addressing the shortage of doctors and nurses by increasing recruitment and retention efforts, including providing competitive incentives and streamlined credential recognition for internationally-trained healthcare professionals. Currently, internationally trained nurses are not being supported by NS Health to practice in clinical areas. Please address these deficiencies.

3. Improve governance of healthcare in Nova Scotia by strengthening the governance of Nova Scotia Health. Consider amending the Health Authorities Act as in Bill 376. These amendments focus on enhancing governance and quality assurance in healthcare. They mandate timely appointment of board members, quality improvement committees, and interprovincial collaboration for health services planning. Additionally, they set criteria for the appointment of the Chief Executive Officer and establish governance structures for regional hospitals. https://nslegislature.ca/legc/bills/64th_1st/1st_read/b376.htm

4. Local decision-making is needed in healthcare. An amendment to the Health Authorities Act, as outlined in Bill 248, would give regional hospitals control and management of the recruitment and hiring of medical, nursing and allied healthcare professionals and hospital support staff; and, require regional hospitals to submit a clinical health-services plan to the Minister of Health and Wellness https://nslegislature.ca/legc/bills/64th_1st/1st_read/b248.htm

5. Cumberland County is the most northern county in Nova Scotia and borders the province of New Brunswick. Healthcare is governed by the Canada Health Act and one of its principles – portability - ensures Canadians can cross provincial borders and receive healthcare. There is a need for our Maritime provinces to establish a maritime health network ensuring seamless access to various healthcare services across provincial borders. Additionally, it requires annual reviews to enhance efficiencies and reduce barriers to healthcare access. Last session, a Bill was tabled entitled the **Maritime Clinical Health Service Strategy** Act Bill 181. The Maritime Clinical Health Service Strategy Act would mandate collaboration between Nova Scotia, New Brunswick, and Prince Edward Island to lobby for equitable federal healthcare funding. https://nslegislature.ca/legc/bills/64th_1st/1st_read/b181.htm

6. Every Nova Scotian is not equal. Some have a family doctor and others do not. Every person should have a primary care provider – either a nurse practitioner or family physician. Recruitment efforts are not producing the results that are needed for the people of Cumberland County.

Physician Recruitment companies can produce the results needed for our province and could be contracted to assist in the hiring of primary care providers in this province. Despite local Cumberland business owners' willingness to hire a recruitment company to help recruit doctors to Pugwash and Amherst, NS Health management **would not work with local entrepreneurs**. This was discouraging considering the high needs of our people. We must take measures to give everyone a primary care provider.

Securing family physicians now and into the future is important. Please consider the Securing Family Physicians for Nova Scotia Act which is a Private Member's Bill tabled last session. This Bill states the Minister will assign medical school seats to Nova Scotian students committing to four years of family medicine practice in their home region, based on projected needs and regional population. The Minister would cover tuition and provide an annual wage of \$30,000 to students fulfilling this commitment; failure to comply results in repayment of tuition, wages, plus 10% interest. This Act will ensure future Nova Scotians will have family doctors.

7. The Medical Act should be amended to require that, where a complaint to the College of Physicians and Surgeons of Nova Scotia involves allegations of sexual assault or sexual misconduct, **advance notice be given to the complainant before disclosure is provided to the respondent medical practitioner** that could allow the respondent to identify the complainant.

The Minister should also examine the legislation that allows a medical practitioner to continue practicing medicine in Nova Scotia even after being found guilty of sexual assault of a patient or co-worker.

8. Emergency Medical Services must be improved in Nova Scotia. No more patients must die waiting for care in the Emergency Room.

Wait times in Emergency Rooms across the province could be lessened if more people had a primary care provider and if **After Hours Clinics** were located adjacent to ERs where level 4 and 5 triage patients could be sent for diagnosis and treatment. At the Cumberland Regional Health Care Centre and likely at other hospitals across the province, Ambulatory Care Units could be used in evening hours to provide space to meet this need.

9. Confidence in the Emergency Ambulance Services must be restored. The Provincial Ambulance Service Act would improve the delivery of care and restore the confidence of Nova Scotians in ambulance services by mandating a strategy that will lead to the creation of a provincial ambulance service. This is exactly what paramedics in our province have been asking for.

https://nslegislature.ca/legc/bills/64th_1st/1st_read/b338.htm

10. Our province should lead Maritime collaboration to more effectively deliver health care services such as ambulance services. The **Cross-border Emergency Ambulance Services Strategy** Act is a Private Member's Bill that would assist with this. The Minister of Health and Wellness, in collaboration with the Minister of Health for New Brunswick, would develop a cross-border emergency ambulance services strategy.

11. Accurate data on wait times for emergency services is important to know. The Department of Health should require Medavie Blue Cross to report on monthly key performance indicators. This has been tabled in Bill 192

https://nslegislature.ca/legc/bills/64th_1st/1st_read/b192.htm

12. Increasing funding for mental health services and integrating mental health care into primary care to ensure comprehensive support for patients. **Therapists should be integrated into primary health care clinics** and offer therapeutic services on-site with medical teams.

13. Implementing measures to address healthcare worker burnout including mental health support and workload management programs.

14. . **Developing a province-wide strategy to address surgical backlogs** and reduce wait times for critical procedures. Operating rooms and other diagnostic services should be operated **12 to 18 hours** a day. Surgeons want more OR time and providing them with it will reduce wait times in Nova Scotia.

15. Strengthening rural healthcare infrastructure, including upgrading facilities and expanding telehealth services to ensure equitable access to care. Virtual care can only be successful if people have **access to internet services** and right now there are too many areas in rural Nova Scotia with no access.

16. Cumberland County needs to have designated palliative care beds to help manage our aging population and high incidents of Chronic disease. In addition, there is a local group committed to building a **permanent hospice facility**. They need a commitment from the government to endorse and support this goal. **Given the ongoing and growing problems of overcapacity, the funding of operating costs for a hospice for Cumberland would help to alleviate the capacity problems.**

17. Remove financial barriers for patients that require medical management. Many patients do not take pharmaceutical medicines as prescribed by their healthcare practitioner due to the financial barriers. The Minister should **consider removing late fees** for Pharmacare as more and more seniors are working past the age of 65 and cannot afford the late fees. Bill 359, an amendment of the Fair Drug Pricing Act states:

Notwithstanding anything contained in this Act or the regulations,

(a) no late enrolment penalty; and

(b) no copayment,

may be charged to persons enrolled in the Seniors' Pharmacare Program with respect to the Program. https://nslegislature.ca/legc/bills/64th_1st/1st_read/b359.htm

18. Healthcare should consider the holistic needs of patients and families. Since your government has been in power, chapels have been closed in several hospitals including Cumberland Regional Health Care Centre. Please pass this Bill Hospital Chapel Act <https://nslegislature.ca/legislative-business/bills-statutes/bills/assembly-64-session-1/bill-484>

19. The Patient Safety Act should be amended to make needed improvements. It is recommended that NS Health maintain a comprehensive and responsive system for receiving, investigating and **resolving patient complaints** respecting adverse events; and the Minister of Health and Wellness should appoint a patient safety and quality advisory committee.

The current practices of NS Health receiving patient complaints is not effective. Most often complaints do not receive a response and in almost all cases, there is no satisfactory follow-up with patients or families that provides assurances that improvements will be made for future patients and their families.

20. Circle of Care for those with Mental Illness. Last year I worked with several mothers who have lost adult children to suicide. In almost all cases they were not contacted by healthcare professionals to try and **provide a circle of care**. They have asked for legislative changes as found in Bill 474. Please consider making these legislative changes.

<https://nslegislature.ca/legislative-business/bills-statutes/bills/assembly-64-session-1/bill-474>

21. Chronic Disease Management - **Adopt the Diabetes Framework** for Nova Scotians and **hire more Family Practice Nurses** to work collaboratively with family physicians to assist in meeting the clinic guidelines for persons with Diabetes.

Improving Access to Primary Care with Nurses in Family Practice Act

Nurses in family practice would deliver collaborative and comprehensive care alongside nurse practitioners and family physicians, covering various aspects including illness

prevention, patient education, early screening for conditions like cervical cancer and osteoporosis, and management of chronic diseases such as diabetes and cardiac disease. https://nslegislature.ca/legc/bills/64th_1st/1st_read/b251.htm

22. Cancer Care in Rural Nova Scotia is needed in each regional hospital. Bill 252, the Improved Cancer Care Act would establish comprehensive cancer care centers in each regional hospital, providing both virtual and in-person services including screening, diagnosis, chemotherapy, and access to specialists. Additionally, the Minister must ensure the portability of cancer treatments, allowing residents near provincial borders to access treatments, like radiation therapy, in neighbouring provinces with closer proximity. Although improvements have been made at Cumberland Regional with the hiring of Dr Don Rowe and a nurse to administer chemo, the **required physical hood has yet to be installed therefore delaying the ability to administer chemo treatment at CRHCC**. This should be prioritized so patients and families do not have to travel for chemo. https://nslegislature.ca/legc/bills/64th_1st/1st_read/b252.htm

Additionally, technology is now available to detect melanoma with AI equipment. Early detection **melanoma skin cancer clinics should be established** at each regional hospital to aid in early detection and reduce the mortality rates of melanoma.

23. **Improving health care for new and expectant mothers** should be prioritized in Nova Scotia. Bill 16 would ensure the following is offered throughout Nova Scotia:

(a) initiate a public education program for new and expectant mothers on

(i) the prevention of fetal alcohol syndrome,

(ii) the prevention of postpartum depression,

(iii) breastfeeding, and

(iv) pelvic floor therapy;

(b) create a support line to help new mothers with postpartum depression; and

(c) develop breast milk banks across the province to assist new mothers with breastfeeding

https://nslegislature.ca/legc/bills/64th_1st/1st_read/b016.htm

24. Healthcare Infrastructure projects too often are delayed due to procurement problems. Improve clinical procurement and speed up projects in healthcare by creating a Medical Procurement Officer who is responsible for a **new Clinical Procurement Office**. This is the norm in other Canadian provinces.

Amend the current Public Procurement Act to reflect the content of Bill 286.

https://nslegislature.ca/legc/bills/64th_1st/1st_read/b286.htm

25. Changing the toxic workplace culture within NS Health is a more critical need than anything else. Nurses especially feel isolated and alone. They express to me regularly that they are muzzled and do not have a supportive workplace. Retention of nurses will only occur with a change in the current culture. Nurses and all healthcare workers need and deserve to have a supportive management team. Trust is important in healthcare. The situations that the healthcare team find themselves in require support and trust as well as managers who provide consistent listening and response to concerns of standards of care and ethical care being compromised.

I would like to request a meeting with you at your earliest convenience to discuss these important priorities and how we can work together to address the unique challenges and opportunities in Cumberland County. Collaboration is key to ensuring that we deliver meaningful results for our communities, and I look forward to engaging with you to advance these goals.

I look forward to working with you to build a stronger, more vibrant Cumberland County. Together, we will seize the opportunities before us and create lasting positive change for generations to come.

Sincerely,



Elizabeth Smith-McCrossin
MLA for Cumberland North