

# THE UPDATE

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News from Health Association Nova Scotia and our Member Forums

**JUNE 2023** 

#### **Continuing Care Council**

The restructured Continuing Care Council, comprised of the Chair and Co-Chairs of Long Term Care Nova Scotia, the Home Care Network, and Diverse Abilities NS, continues work on its renewed mandate. It has approved a social media strategy that



focuses on LinkedIn and introduces the Continuing Care Council in a controlled manner. Initially, the public messaging will focus on introducing the Council and raising awareness of the continuing care sector in general.

Continuing Care Council recently met with EHS Provincial Medical Director Dr. Andrew Travers to discuss how EHS and continuing care members can better cooperate to ensure appropriate decisions are made for residents/participants related to transport to emergency rooms. If you have any concerns about how an assessment was conducted by EHS, real-time investigations are available by contacting Dr. Travers. Further, there is an EHS Special Patient Program that outlines how to manage 9-1-1 calls to determine whether transport is required or not. Information on that program is forthcoming, so look out for it. Finally, Dr. Travers is available for face-to-face meetings with your teams if you feel it would be helpful.

Council has determined the human rights remedy released in April 2023 is a significant cross-sectoral issue and is an immediate priority for Council. At their last meeting, they met with Maria Medioli, who is the provincial government lead on implementation of the human rights remedy. It was an opportunity for Council to learn about the remedy and begin to better understand the implications not only in the DSP sector, but also the long-term care and home care sectors. Council will hold additional meetings with government officials on the remedy soon.

### Long Term Care Nova Scotia

Long Term Care Nova Scotia (LTC NS) has completed its strategic planning exercise and Action Planning has begun on three priority areas: funding for existing roles (eg. IPAC, LTCA) and administrative positions (eg. HR, IT), leadership development and succession planning, and attraction of employees to the LTC sector. Emerging sector specific issues that have been identified for LTC NS are rising food costs, physician coverage for long term care, the role of community pharmacists in providing LTC resident care, the placement policy, rising liability and property insurance costs, evacuation planning, and the growing concern of bad debt.

LTC NS recently met with Annette Elliott Rose, provincial lead for the HHR initiatives, and members of her team to provide feedback to support the overall workforce strategy planning the provincial government is developing to address health human resources as part of the Action Plan for Health. It was agreed Annette would meet with LTC NS on a regular basis to provide updates on progress. LTC NS also met with the Nova Scotia Therapeutic Recreation Association, who presented how they can support care delivery in LTC facilities. Representatives from the NSTRA are happy to meet with individual administrators.



If you would like to meet with a representative of NSTRA, please contact:

Tracey Preeper tracey.preeper@healthassociation.ns.ca or Vaughn Hammond vaughn.hammond@healthassociation.ns.ca





#### LTC Zonal Groups

Zonal groups continue to meet regularly to discuss common issues, many of which are elevated to LTC Nova Scotia. There have also been recent meetings with groups and stakeholders to share information and discuss opportunities for collaboration.

Recent issue discussions elevated to LTC NS include current and potential pharmacy services for LTC residents, physician coverage in LTC, food costs in LTC facilities, and ongoing challenges with Pathways and the placement process.

Zonal groups recently met with Lesley Hirst, Palliative Care Consultant for SPA-LTC (Strengthening a Palliative Approach in Long Term Care). Here zonal teams learned of resources available for LTC, including e-learning modules for staff and toolkits to support palliative approaches in long-term care. Updates were also received on recruitment and retention activities, refreshers on how to apply for professional development and innovation funds, and wound care updates (including information on HealthPro and the opportunity for facilities to order wound care supplies online with reimbursement from the DSLTC). Should zonal members have additional issues to bring forward or ideas for special guests you would like to meet, please feel free to reach out or join your next zonal meeting.



CENTRAL ZONE LTC ADMINISTRATORS



EASTERN ZONE LTC ADMINISTRATORS



NORTHERN ZONE LTC ADMINISTRATORS



WESTERN ZONE LTC ADMINISTRATORS

#### **Diverse Abilities Nova Scotia**

Members of Diverse Abilities Nova Scotia (DANS) are actively engaged in the release of the human rights remedy report in April 2023. The report outlines measures that will



fundamentally change how persons with disabilities will receive support in the future. It recommends actions to transition participants from large facilities to community living within the next five years. DANS recently met with Maria Medioli, provincial government lead on the implementation of the human rights remedy, to discuss the implications for the sector. In addition, individual members have been participating in various meetings held by the provincial government so they may learn more about the transformation process. At their last meeting, DANS heard a presentation from the Nova Scotia Therapeutic Recreation Association on how their members can support DANS members. As supported decision-making fundamentally determines how participants access the care and services they want, there may be a role for the NSTRA in successful system transformation.



## Did you know???

**Continuing Care Council and Diverse Abilities NS are on LinkedIn!**Give us a follow at:

https://www.linkedin.com/showcase/continuing-care-council/https://www.linkedin.com/showcase/diverse-abilities-ns/

#### **Home Care Network**



The Home Care Network (HCN) continues to focus on several initiatives stemming from its refreshed strategic directions. It continues to develop

renewed and more engaged relationships with community partners, including Caregivers Nova Scotia, the Alzheimer's Society of Nova Scotia and the CN Centre for Occupational Health and Safety out of Saint Mary's University. In April, Glenda Keenan and Cat Young from NSH provided HCN with a high-level overview of the "Equity, Culture & Language: Caring for Acadians and Francophones" training module, which will be circulated to the sector in the near future. Business continuity planning, LPN supervisor wage parity, and Alayacare software implementation continue to be top priorities and progress is being made in each of those areas. The HCN regularly meets with the Department of SLTC to discuss the various pilot projects occurring in the sector including programs targeting adult day programs, community OT/PT involvement, and cluster care.

The HCN recently collaborated with the CCA Program to implement updates to the CCA Placement Standards and Guidelines with respect to travel and transportation expectations. The HCN has created a working group to address challenges surrounding high risk home care work environments as well as the development of a streamlined process and form to address the duplication of data reported to the Department of SLTC. At the last HCN meeting there was discussion about in home camera use, as well as an overview of the newly launched NovaSafe.ca website (a safety resource hub not specific to the sector but includes helpful information) and the initiatives from the Canadian Home Care Association (e.g., national competency framework for palliative care).

The HCN recently participated in a successful professional development day held at the Best Western in Burnside which involved speakers from the Centre on Aging, Dalhousie University, Saint Mary's University, Canadian Association of Retired Persons, the Alzheimer's Society of Nova Scotia, and Caregivers Nova Scotia.







