



MEETING SD 39-20-24

STANDING COMMITTEE ON SOCIAL DEVELOPMENT

**THURSDAY, NOVEMBER 14, 2024
DET'ANCHOGH KÙÉ - EAGLE ROOM / ZOOM
1:30 PM**

AGENDA

1. Call to Order
2. Prayer
3. Review and Adoption of Agenda
4. Declarations of Conflict of Interest
5. Public Matters:
 - a. Public Briefing on Healthcare Sustainability and Accountability with Lisa Little Consulting
6. In Camera Matters:
 - a. Debrief
 - b. Confidential Correspondence:
 - i. 24-10-30 Goba Care
 - c. Workplan
7. New Business
 - a.
8. Date and Time of Next Meeting: Friday, November 15, 2024 10:30 a.m.
9. Adjournment

Speaking Points

By

Lisa Little, RN, BNSc, MHS, FCAN

CEO, Lisa Little Consulting

1st Vice President, Board of Directors, International Council of Nurses

To

Standing Committee on Social Development

Northwest Territories Legislative Assembly

Study On Sustainable and Accountable Healthcare

November 14, 2024

Thank you Madame Chair and members of the Standing Committee on Social Development, for the invitation to present to you on the topic of Healthcare Sustainability and Accountability. My name is Lisa Little and I have spent 35 years as a registered nurse in clinical, management, education, policy and leadership positions both here in Canada and globally. I spent 10 years at the Canadian Nurses Association leading their research and policy work on nursing and health human resources, as well as many health system challenges such as accessibility, affordability and sustainability. I have been working as a consultant for a northern healthcare system in Canada for the last 5 years. I currently serve as the 1st Vice President of the International Council of Nurses, which represents more than 130 national nurse associations and 28 million nurses globally.

I want to begin by saying the challenges that the NWT is experiencing is not unique as it relates to nursing and healthcare systems. Half of the world's population do not have access to universal health care, the world's population is aging, and non-communicable diseases or chronic diseases account for 71% of deaths worldwide. And unfortunately, the world is experiencing a global nursing shortage estimated to be anywhere from 10 to 30 million nurses. Without a health workforce there is no health system or healthcare. Nurses comprise 70% of the health workforce in Canada. Investing in nursing is key to ensuring health system sustainability and improving the quality of care, life, and wellbeing of residents and healthcare staff in the territory.

I would direct you to ICN's latest International Nurses Day report this year **Our Nurses. Our Future. The economic power of care**, available on our website.

In the report economists reveal the true, full value of nursing to societies – how elevating the nursing profession can catalyse transformative improvements in health care delivery, economic development, and societal well-being. What they have told us is what we already knew: that investing in nursing jobs, education and leadership results in an excellent return on investment that means every dollar spent pays for itself many times over. Nursing is not a cost to the health system, but rather it is an investment in the health of populations and health systems.

And ICN believes investment in nursing jobs should be prioritized in primary care and embracing a primary health care approach. The key to health system sustainability is to invest in the principles of primary health care as first articulated in Alma Ata in 1978 including- illness prevention and health promotion, team based care, appropriate use of technology,

intersectoral collaboration. This means investing in more care outside of hospitals, that is integrated across settings and providers, is patient focused and with special consideration for reaching underserved communities and populations.

More nurse practitioners and nurse led models of care can transform the health system and improve access to care and improve the health of the population. We have decades of research to show this. And we know that this is definitely a reality in the territories, where nurses provide the bulk of healthcare. Prioritizing investments to enable healthcare workers to work to their full scope of practice, including Advanced Practice Nurses and nurse led models of care, improves health system efficiency and effectiveness. According to the OECD, seventy-six percent of doctors and 79% of nurses reported being over-skilled for the roles they were performing in their day-to-day work. This means supporting nurses with more administrative support, and unregulated providers to assist with non-nursing tasks. Research

shows that 30 % of what nurses do does not require nursing education- like paperwork, faxing, stocking shelves, finding equipment. Given the cost and length of education programmes for doctors and nurses, this represents a huge waste in human capital.

This also means connecting nurses in territory with nurse specialists outside of the territory through telehealth. Clinical nurse specialists in the area of wound care, gerontology, mental health and addictions, women's health. These are just a few examples. They can be supporting direct care through nurse to nurse consultations, but also supporting the ongoing continuing education of nurses in the NWT.

The ICN **Charter for Change** presents **10 vital policy actions** that governments and employers must take to create and sustain health care systems that are safe, affordable,

accessible and responsive, and to shift the paradigm and align nurses to be visible, valued and vital for the health of our countries and to nurse the world and profession back to health.

I encourage you to read it. I would like to highlight just a few. We know that nurse burnout is a common phenomena post COVID, with rates of greater than 80% in Canada and it requires immediate attention. ICN urges governments to urgently address and improve support for nurses' health and well-being by ensuring safe and healthy working conditions and respecting their rights including zero tolerance for violence in the workplace and creating psychologically safe work environments. And have work environments that support the health of nurses through stress relieving activities and fitness equipment. And most importantly, put in place systems to ensure safe staffing levels to meet population health needs, never allowing nurses to work alone.

Investing in nursing also means supporting them to excel at their job. ICN urges employers to uphold positive practice environments that listen to nurses and provide them with the resources they need to do their job safely, effectively and efficiently. Invite nurses to the decision making tables – they have solutions to many of the system’s health challenges. For too long, their voices have been absent. I urge you to consider funding recognition programs and professional development activities across career trajectories. Nurses need enhanced digital literacy to help transform healthcare into the digital age. The appropriate use of technology is key to healthcare sustainability and supporting accountability with an abundance of digital health and health system data. I urge you to also support flexible models of employment and scheduling. Our colleagues in Australia have shown us how job shares and fly in/out models of employment can serve rural and remote settings. Ultimately, nurses want to feel valued and respected. Ask them what they want – what is meaningful to them?

I cannot understate the importance of nurse retention and I urge you to review the Nurse Retention Toolkit released by Health Canada under the leadership of the Chief Nursing Officer, with practical, evidence based examples. The best nurse recruitment strategy is an effective retention strategy.

One aspect of recruitment and retention that I think you may find helpful to your rural and remote setting is the work of an Australian researcher Cathy Cosgrove who speaks to the importance of professional, social and personal integration. This requires creating a seamless orientation and professional onboarding experience that helps new healthcare professionals settle in quickly and comfortably within your organisation in terms of their role and responsibilities. This means ensuring that new staff feel supported, valued, and motivated from day one, laying the groundwork for long-term retention. It also means settling and

connecting new employees and their families into the local community events, schools, churches, etc. And for the individual it means understanding what motivates them, what do they personally seek out of their life in NWT and to provide them with information to make that a reality.

The other principle underlying a recruitment and retention strategy is for it to resonate with the five generations we now have working in our health systems. What attracts 20-year-olds is not the same as what attracts 40 year olds. And the same applies for retention. One thing we notice with the younger generation is that they are not necessarily looking for a 20 or 30 year career with one employer, like my generation did. They will most likely work for you for a few years, gain the skills they want, explore your wonderful landscape and then move on. And we have to accept that and build into our workforce planning.

And key to it all is developing nursing and health workforce plans that take into consideration community health needs, primary health care including a shift to greater illness prevention and health promotion, emerging models of care, team based care and enhanced technology, all integrated across the continuum of care. ICN urges you to create workforce self sufficiency with your government partners across Canada and follow the WHO Global Code of Practice on the international Recruitment of Healthcare Professionals, not relying on recruitment of nurses from other countries who are also experiencing a nursing shortage, often in worse positions than us.

Health system accountability will continue to strengthen as you embrace evidence based health care and decision making, and use the abundance of digital data to annually or

quarterly report on key indicators for the health system goals you have set for your territory. And that includes nursing specific data to show the impact of nursing care. Investment in electronic data systems is key. As Peter Drucker has stated, “you can’t manage what you can’t measure”.

Thank you for the opportunity to share a few thoughts with you today and I would be happy to answer any questions.