

Doctors Nova Scotia's Community Listening Tour

Physicians in Nova Scotia are under pressure. Faced with large patient rosters and limited resources, they are worried about their patients, their practices and their personal lives. That's why this spring, members of Doctors Nova Scotia's (DNS) senior leadership team embarked on a province-wide listening tour. They attended 29 meetings with a total of 235 physicians in 24 communities – learning about the challenges of practising medicine in Nova Scotia from people who are experiencing them first-hand.

Doctors Nova Scotia held seven meetings in your zone. This report summarizes the discussion DNS staff members had with physicians in Port Hawkesbury, highlights key themes in your area and across the province, and outlines what DNS is doing to help.

Community Report: Port Hawkesbury

Meetings in Zone 3 – Eastern

Location	Date	# of physicians
Inverness – Inverness Consolidated Memorial Hospital	May 30	2
Sydney – Cape Breton Regional Hospital	May 30	10
Glace Bay – Glace Bay General Hospital	May 31	9
Sydney – psychiatry	May 31	5
North Sydney – Northside General Hospital	June 1	7
Port Hawkesbury – Maritime Inn	June 1	2
Antigonish – St. Clare Meeting Place	June 8	26
TOTALS	7 meetings	61 physicians

Issues in Port Hawkesbury

The physicians who participated in the Port Hawkesbury community meeting expressed concerns about the following issues. Here's what we heard:

Collaborative practice

- Physicians are satisfied with the current nurse practitioner (NP) that has just joined their practice, but they are concerned that the Nova Scotia Health Authority (NSHA) considers NPs to be equivalent to a physician, which is not accurate. In this case, the practice is down one FTE physician and while the NP is certainly a help, there is still a need to replace the lost physician.

Recruitment/retention

- Physician work overload is a real issue in this region and has been for a long time. It is more frustrating for the physicians because they don't know whether the NSHA is even recruiting to the area, even though they have asked them to put Port Hawkesbury on the recruitment needs list.

- One physician is considering leaving Port Hawkesbury, which emphasizes the need for recruitment to this area.

Nova Scotia Health Authority

- Dr. Patti Menard from the NSHA spends lots of time in the Port Hawkesbury area and has been helpful. But there is confusion remains about whether the NSHA is actively recruiting to the area.

Practice transition

- Physicians noted the Port Hawkesbury area used to benefit greatly from physicians participating in the Clinician Assessment for Practice Program (CAPP), who would come to Port Hawkesbury and stay for three to five years. Now that the CAPP program has been disbanded by the College of Physicians and Surgeons of Nova Scotia, the community can no longer access new physicians. Even though the CAPP physicians only ever stayed for three to five years, they provided meaningful relief in that time.
- Port Hawkesbury physicians are interested in the idea of a roving locum program, even if the locum physicians were cycling through the community for just a three-month rotation, as they are desperate for relief.

Issue themes across the province

Many of the issues discussed in your community reflect concerns DNS has heard from physicians across the province. These concerns can be grouped into five themes:

Fragility of the physician workforce

- Including the shortage of physicians in Nova Scotia, persistent recruitment and retention concerns, lack of succession planning, lack of support for new physicians, and physician stress and burnout

Loss of professional autonomy and satisfaction

- Stemming from a loss of local authority and decision-making at the Nova Scotia Health Authority (NSHA), a lack of clarity about how, why and by whom decisions are made, a feeling of disconnection from the NSHA, and a loss of connection within the physician community itself

Demise of comprehensive family medicine

- Including excessive workloads, the fact that comprehensive family practice is increasingly an unsustainable business model, unintended incentives away from

comprehensive family practice, and the absence of viable alternatives to the fee-for-service payment model

Unsustainability of rural specialty services

- Including unsustainable call schedules, recruitment and retention challenges, lack of succession planning and loss of local authority and decision-making

Lost opportunities to leverage technology

- Including the new non-face-to-face fee codes, which many physicians feel are cumbersome, and lack of compensation for physicians using MyHealthNS

Most of these themes reflect broad, systemic issues that are beyond the association's ability to resolve independently. However, even if DNS can't resolve the issue directly, the association can help members by ensuring that key health-system leaders understand the importance of resolving these issues in a timely manner.

Provincial next steps

- **Provincial report and recommendations** – Doctors Nova Scotia staff members are preparing recommendations on how best to address each of the themes identified above. In many cases, these recommendations will be based on solutions suggested by physicians. These recommendations will be outlined in more detail in the in-depth provincial community meeting report, which will be shared with physicians and key health-system leaders in September.
- **Advocacy** – Doctors Nova Scotia will continue its advocacy efforts on these priority issues that require collaboration with and leadership from other stakeholders, including the NSHA, the IWK, Dalhousie Medical School and the provincial government.
- **Community-specific issues** – Doctors Nova Scotia staff will continue to carry out any action items that are within the association's scope of work, and to advocate for resolutions to issues that are specific to individual communities.

Community support

These community meetings were a first step in the association's work to improve communication and connection with its members. Starting in September, each zone will have a dedicated DNS staff member. Their job will be to help DNS better understand your practice and community needs, and to help you solve problems and better navigate the system. This dedicated staff person will be your connection to DNS. If your concerns aren't reflected in this

report, your dedicated DNS staff member will be available to listen, advise and help you resolve the issue.

Your dedicated staff member is:

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Follow up

If you have any questions or comments on anything included in this report, please email community.outreach@doctorsns.com.