

Health Reform: Dr. Melanson is right on!

On Tuesday, June 25, Dr. Serge Melanson, President of the NB Medical Society, re-iterated the call for an all-party approach to health care reform as had earlier been referenced by the Leader of the Green Party, David Coon. And in that call resides the wisdom that is required to effect meaningful change and modernization in the NB Health System.

This system is too important, too sacred, and too complicated for the instability caused by a succession of one term governments as we have had now for over 20 years.

Yet for decades, true progress has been hampered by the re-election attempts by a series of one term governments with public debate limited to superficial elements that really do not matter such as merging two health authorities.

The approach to true reform of primary care, for instance, cannot be relegated to debate in the legislature in which politicians, for purely partisan reasons, seek to undermine otherwise perfectly good ideas. It is a complex piece of business that requires serious reflection and re-alignment of positions and interests. Some of these positions are simply entrenched in tradition; some are rooted in legitimate professional practice and quality concerns.

The same could be said of the “Doctor shortage” or the Nursing shortage or the overcrowded emergency departments. Listening to debate in the legislature or in media on these topics one sees and hears complex ideas relegated to such a level of superficiality that real solutions to real problems never get discussed.

The issues are complex and cannot be dealt with in sound bytes or short op eds or media scrums.

Review of evidence, best practices, and negotiation of new relationships is not best done in the glare of TV cameras or in an environment heated by an up-coming election. On the contrary, the process of reform requires that people of good will come together in an atmosphere of trust and true collegiality to share and negotiate visions.

The process of true reform will then happen if political parties can, for a while, forget partisanship and one-upmanship in order to focus on the real issues. Professional staff and health leaders need to be able to share truth with an all-party committee that is committed to solving issues that the population wants fixed! The public cares not whether you are Tory, Grit, Green or Alliance; they just want good, efficient, quality care.

What would be an example of such truth? The competition for clinical services amongst New Brunswick cities prevents any hospital from becoming a true centre of excellence in any given discipline. Horizon Health Authority medical leaders have repeatedly observed, for years, the challenge of multiple sites doing chest surgery, as an example. One superb site with professional staff that wants to be the best in Canada would be preferred over multiple sites struggling to maintain basic service.

In the process of negotiating health reform, it is important that the decision-makers thoroughly understand all that has happened to get health care to its current position. The entire delivery of health Ken McGeorge, BS,DHA,CHE is a career health care executive and now consulting, based in Fredericton; he is a Telegraph Journal columnist. Please visit www.KenMcGeorge.com to learn more.

care services has changed over the last 50 years! In addition to the technological revolution in healthcare, massive changes have taken place in medical education, nursing education, the organization of care, the utilization of health facilities and much more.

As we re-shape health care we need to have the courage to look back on our origins to learn what we can from the past. There may be some “old practices” that need to be brought back. For instance, 50 years ago hospitals saw challenging behaviors by patients in the hospital setting. These behaviors were usually attributable to mental illness or intoxication. Straight jackets and strong male nursing orderlies de-fused situations that had the potential for violence. Today’s reported events may be more intense but the principles are similar and while we may not want to bring back the straight jackets, we might need to ensure that there are some other assets that serve to protect.

With the Nursing Shortage, until the 1980’s nursing education was conducted by hospital schools of nursing in which the relationship between the primary employer of graduates and those who trained them was very close. The shift to university preparation brought with it a sharp separation of responsibility and accountability leaving communication challenges in the system. Can we learn from history?

The changes needed to bring NBs health system into step with the country are challenging and complex requiring more than one four-year term for execution. For the past few decades, there have been only about a year in each cycle when things could get accomplished and very little has been done in health and long term care. It seems to have been the case that politicians feel that health generates too much political heat so it is safer to ignore. Wrong decision for the public.

Meanwhile, the voting public asks: why can I not get a doctor? Why does it take months to get my frail spouse to assessment for long term care? Why do I wait a year for hip replacement surgery? Why can I not get to the specialist that I need for my symptoms? Why do I wait 4-8 hours in Emergency for something that, to me, is urgent?

Our elected officials owe us, the public, the time to gather together, to learn the truth of the issues in health care, and be prepared to support each other and system leaders in leading a genuine reform process. A bit of pain, maybe! But there is absolutely no true leadership without pain so get over it!

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