

Background: Green Plan for making long-term investments in public healthcare

1. Boost funding to provincial pharmacare by \$18 million to match the Canadian average per capita investment in pharmacare.

The Canadian Institute for Health Information (CIHI) estimates that PEI had the lowest per capita provincial government drug expenditure of any Atlantic Province in 2020.

In 2022, it was estimated that 16.9% of Canadian prescribed drug expenditures are out-of-pocket expenses. On a per capita basis, that is \$196.06.¹ Assuming all else is equal², the estimated total cost of out-of-pocket drug expenses on PEI would equate to \$33,860,334.³

A Green government would make an immediate investment of \$18 million into provincial pharmacare programs to improve access and eliminate unnecessary fees. This would help close the gap between the Prince Edward Island and Canadian average per capita expenditures on pharmacare. Included in this commitment is free access to contraceptive care.

2. Provide Islanders with comprehensive and timely mental health and addiction services including finally building a new mental health hospital, establishing Psychiatric Urgent Care Clinics (PUCCs) outside of Charlottetown, and increasing the number of guidance counsellors in schools.

Construction of the new mental health hospital:

First promised by the Liberal government in 2018. The Conservatives promised “shovels in the ground on day one” in 2019 even though they knew this was not possible. Construction has yet to begin. A Green Government commits to actually building the new mental health hospital.

Increase the number of guidance counsellors in schools:

As of 2022 only 39 of the Island’s 62 schools had a full-time counsellor. All schools should have a minimum of one full-time-equivalent counsellor. Some of our bigger schools may require more.

Expand access to counselling services:

The current cap on the number of counselling sessions a patient can access per year is not a patient-centred policy. The number and frequency of counselling sessions a person needs should be determined by the person and their healthcare provider. A Green Government will review this policy with the aim of increasing the number of sessions available per year.

¹ CIHI National Health Expenditure Series.

² It should be noted that private-sector prescription drug expenditures, which includes out-of-pocket expenditures and private insurers, is 54.3% of drug expenditures in PEI, vs 48.6% in Canada. Provincial data is not comprehensive enough to break down private-sector prescription drug expenditures.

³ Assuming population of 172,707 * \$196.06.

Establish Psychiatric Urgent Care Clinics (PUCCs) outside of Charlottetown:

The PUCC was established during the pandemic and rapidly became an award-winning service. Shortly afterward it was shut down. A Green Government would reestablish the Charlottetown PUCC and open additional sites across PEI.

3. Expand homecare services to seniors and other Islanders in need.

Most older adults want to stay in their home for as long as possible, but it is sometimes hard to get services. Even though some services are available, some older adults and their families don't know they exist or how to get them. Plus, living in a community far away from the city can add to the difficulty of finding services.

Not receiving services at home when in need can mean that older adults will not be able to stay in their home. Without proper support, older adults may need to go to the hospital for care or to a nursing home before it is time. That will cost more than having services at home.

The local nursing homes across the province can help provide support (extending some of the services they offer their residents to those living in the community) and offer information on existing services to older adults who want to stay in their home.

4. Create a withdrawal management (detox) facility in Summerside and expand residential and outpatient treatment options Island-wide.

Healthcare services should be relevant to the communities receiving those services. Summerside has particularly acute challenges with addictions and would be well served by the provision of withdrawal management (detox) services close to home.

A new withdrawal management facility in Summerside will also help ease backlogs and shorten wait times at the existing provincial addictions facility in Mount Herbert. This would be an expansion in the overall provincial capacity, as such, we would not expect a corresponding reduction in capacity in the Mount Herbert facility or the planned mental health campus.

Cost estimate: approximately \$10 million over three years.

5. Improve our Island long-term care system by offering low-interest loans to private long-term care facilities to make capital improvements, seeking an ownership stake in funding agreements to begin the transition away from for-profit care, and building more public long-term care beds.

Infrastructure issues have been identified as one of the contributors to outbreaks of respiratory illness in long-term care. A Green Government will provide low-interest loans to private long-term care facilities to ensure that private facilities can make the necessary capital improvements to protect the health of residents and improve patient care.

The Green Party believes PEI should move toward a public long-term care system. There is a body of research that shows the public system achieves better health outcomes and invests more in direct patient care than the private, for-profit system.⁴⁵⁶⁷ Despite this, a 2021 analysis by the Canadian Institute for Health Information showed that PEI had one of the highest percentages of private, for-profit care in the country.⁸ A Green government would move toward a greater public system by seeking equity in private long-term care facilities as a component of future funding agreements, and would commit to the creation of new long-term care beds in the public system.

Finally, a Green Government will legislate the recent national standards for long-term care, which would promote improved patient care and outcomes for our Island seniors.

7. Create a Perinatal Mental Health strategy;

Each year an estimated 15%-30% of new and expectant mothers in Canada are diagnosed with Postpartum Depression or Perinatal Mood and Anxiety Disorder (PMAD). However, PMADs - a term which encompasses mental health disorders experienced from conception to one year or more postnatally - are all too often not diagnosed. The consequences of undiagnosed and untreated mental health distress not only affects a new mother's overall emotional and physical well-being, but it can also significantly impact children, families, and society. Far too many women are dying from PMADs while doing the essential work of raising the newest members of our society - our children.

A Green Government will develop a perinatal mental health strategy to provide clear guidelines and protocols for the prevention, assessment, and treatment of perinatal mental health disorders.

8. Create a restorative care unit at the Queen Elizabeth Hospital.

Restorative Care services work with patients and families to restore an individual to as independent a life as possible following an illness or injury. The program includes physiotherapy, occupational therapy, exercise, leisure, therapeutic activities, and education/information sessions.

⁴ Stall et al. "For-profit long-term care homes and the risk of COVID-19 outbreaks and resident deaths". Canadian Medical Association Journal. 17 Aug. 2020.

<https://www.cmaj.ca/content/192/33/E946>

⁵ Office of the Seniors Advocate (BC). "A Billion Reasons to Care: A Funding Review of Contracted Long-Term Care in B.C." 2020 <https://www.seniorsadvocatebc.ca/osa-reports/a-billion-reasons-to-care/>

⁶ Comondore et al. "Quality of care in for-profit and not-for-profit nursing homes: systematic review and meta-analysis". <https://www.bmj.com/content/bmj/339/bmj.b2732.full.pdf>

⁷ McGregor et al. "Staffing levels in not-for-profit and for-profit long-term care facilities: Does type of ownership matter?". Canadian Medical Association Journal. 1 Mar. 2005. <https://www.cmaj.ca/content/cmaj/172/5/645.full.pdf>

⁸ Canadian Institute for Health Information. "Long-term care homes in Canada: How many and who owns them?" 10 June, 2021.

<https://www.cihi.ca/en/long-term-care-homes-in-canada-how-many-and-who-owns-them>

Emergency Rooms are often filled with patients waiting for longer-term beds in the hospital. Additional restorative care beds, especially at the Queen Elizabeth Hospital, will help transition patients more quickly out of the ER and reduce wait times. Restorative care generally requires lower staffing levels and less highly trained staff than emergency departments. This makes it a more efficient use of limited staff resources than keeping patients for longer stays in emergency.