

LETTER TO THE EDITOR – Submitted to letters@herald.ca

February 26th, 2016

Dear Mr. Howse,

RE: Nova Scotians Cannot Afford for Infection Prevention and Control to be Left to Chance

Late last month, the provincial government announced it would be eliminating 100 jobs within the Department of Health & Wellness, saying the cuts are a continuation of the plan to restructure the provinces health boards under the single banner of the Nova Scotia Health Authority (NSHA). While this story and changes to seniors pharmacare made headlines, the restructuring also includes changes that will jeopardize quality and safety in Nova Scotia’s healthcare system across its entire spectrum of services by undermining system-wide infection prevention and control measures.

Under the newly proposed structure, the Department of Health & Wellness will lose Infection Prevention and Control Nova Scotia (IPCNS) and its mandate will be absorbed by the NSHA. This body, which is primarily focused on setting standards and monitoring of healthcare-associated infections was established in 2009. While a casual observer might see this as a rational step, what they don’t see is the enormous consequences of losing infection prevention and control oversight at the departmental level.

The role of IPCNS is to ensure that there is enhanced coordination, integration and consistency in the practice of infection prevention and control across all of Nova Scotia’s healthcare provider organizations and to monitor, measure and critically evaluate infection control indicators. This coordination has improved the capacity of Nova Scotia’s system, the competency of its care providers, and the regulations and protocols that assist healthcare professionals in every setting, not just within acute care facilities. People living in long-term care facilities, those travelling by ambulance, and others being treated by practitioners in allied health care professions like dental offices and rehabilitation facilities will all be left without the safeguard that the Department of Health & Wellness is working to ensure infection prevention and control is a priority consistently adhered to across Nova Scotia’s spectrum of health care.

This issue is too important for the government to take a gamble on its next steps. In fact, in 2012, the Auditor General commented that IPCNS was “not sufficiently staffed to allow implementation of its objectives for infection prevention and control in the province,” and that “Without monitoring it is impossible to hold the districts accountable and to ensure consistent infection prevention and control practices across the province.” It is unconscionable that an even leaner system could provide an adequate degree of protection or support to Nova Scotians in all care settings.

Bacteria, viruses, and other pathogens don't care whether or not the provincial government is balancing its books. The removal of IPCNS from the department will limit coordination between healthcare sectors when it comes to preventing the spread of disease, and will take monitoring of infection prevention and control processes and performance measures out of the government's hands. This is a tremendous accountability issue but more importantly, if infection prevention and control is left to languish, it has the potential to put even greater pressure on hospitals and acute care facilities. To prevent these unintended consequences the government should take the immediate step of re-evaluating its decision to cut IPCNS from the Department of Health & Wellness.

Gerry Hansen,



Executive Director, IPAC Canada