



**NEWFOUNDLAND AND LABRADOR
MEDICAL ASSOCIATION**

NL Health Minister needs a lesson on the different roles of health care providers: NLMA

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St. John's, NL – The Newfoundland and Labrador Medical Association (NLMA) was alarmed and very disappointed by recent comments made by the Minister of Health about the scope of practice of family physicians. In a story published by CBC news yesterday, Health Minister Dr. John Haggie revealed that the provincial government intends to substitute nurse practitioners for family doctors.

“We are concerned that Dr. Haggie’s comments clearly indicate that this government has an agenda to reduce patient access to family doctors in this province,” said NLMA President Dr. Lynn Dwyer.

“His superficial remarks reveal he either misunderstands the role that family doctors play in the health care system or he has a complete disregard for the value of this profession. Either way, Dr. Haggie needs education on how family practice works in this province,” said Dr. Dwyer.

On January 2, 2018, the CBC quoted Dr. Haggie as saying “the whole big discussion point in health care is around scopes of practice. We have significant resources that could take a big part of the health care delivery away from simply a physician-centered/physician-delivered model without doing anything except actually increasing access and increasing quality.” He went on to say that “eighty per cent of a general, normal day’s work for a family practitioner can be managed perfectly well and in some respects with a better outcome by nurse-practitioners, for example.”

“The biggest flaw in Dr. Haggie’s comments is that nurse practitioners are not substitutes for the role played by family doctors. Nurse practitioners and family doctors have overlapping scopes of practice and we both provide benefits to patients in multiple health care settings. We are unaware of any primary health care model where removing family physician results in better health outcomes,” said Dr. Dwyer.

“Frankly, to hear this from another physician who should know better is not only disappointing to the physicians of this province, it is also disturbing. The Minister of Health seems to think that family doctors and nurse practitioners are interchangeable professionals. They are not. The nurse practitioners I know want to work collaboratively with physicians, not be physician replacements.”

The NLMA supports the move to collaborative team-based models of care, which includes family doctors, nurses, nurse practitioners, pharmacists, psychologists, dieticians, occupational therapists, social workers and others. Better outcomes are achieved when all health care providers are all working together as part of a coordinated effort.

In the absence of government investment in primary health care teams, family doctors have carried the burden. They provide the bulk of primary care services, keeping people healthy in their homes and out of hospital and coordinating their care with other providers. They are underpaid in comparison to their colleagues across Canada, their patient loads are heavy, they work long hours, and in many communities they multi-task in hospitals, emergency rooms, long-term care facilities, home visits, and palliative care. They provide all this value and yet are far more cost-effective than the rest of the health system (NL physicians cost 95% of the national average, whereas the rest of the NL health system costs 125% or more of the national average).

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“The minister’s comments are part of an ongoing attack against family doctors in a province where it’s already hard enough to recruit and maintain an adequate supply,” said Dr. Dwyer.

“Whether it’s the ill-conceived flu shot decision, the lack of consultation on prescription monitoring, or these comments today, family doctors feel woefully undervalued and demoralized by the minister. At a time when the government and the NLMA are trying to improve family practice through the Family Practice Renewal Program, the Minister’s comments are so disrespectful that they undermine this very activity.”

Similar comments were made by John Abbott, the Deputy Minister of Health, when he told the CBC in December that the province did not have a productive nursing workforce and that it intended to shift duties carried out by registered nurses (RNs) to licensed practical nurses (LPNs).

“The Minister’s rhetoric does nothing but pit one health care provider against another and, considering that all these providers are either in contract negotiations or entering contract talks, we see this as a deliberate attempt by the minister of health to divert attention away from the real issues facing health care delivery in this province,” said Dr. Dwyer.

“If the Minister really wants to deliver better care for less dollars, why has he not produced a comprehensive, evidence-based plan for health care reform? He talks about shifting roles of health care providers and yet he has failed to produce a health human resource plan for the province. If he has one, he certainly did not consult with the experts working on the frontlines of medicine in this province,” she added.

“The government needs to properly invest in integrated teams that include both family physicians and nurse practitioners. Otherwise, what the minister is proposing could deny patients access to a family doctor.”

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