

[ CHECK AGAINST DELIVERY ]

Speaking Notes for  
Michael B. Decter, Chair  
Health Council of Canada

Healthcare Renewal in  
Canada: *Accelerating Change*

See the Health Council of Canada's first full report here: <http://hcc-ccs.com/index.aspx>

Breakfast with the Chiefs  
February 09, 2005, Princess Margaret Hospital Auditorium

**Thank you everyone for being here today.**

- **Canada's First Ministers announced the Health Council of Canada as part of their 2003 Accord on Health Care Renewal.**
- **Just over a year ago, we began our work.**
- **Our first report was formally released on January 27 in Ottawa at a luncheon attended by leaders in the health care field.**
- **The feedback has been very encouraging. There is an appetite for change.**

- **The Council has a unique mandate - to independently monitor and report to Canadians on progress being made towards health care renewal and on the status of health of Canadians as set out in the First Ministers Accords on Health Care.**
- **The Council is now organized to carry out its mandate and to do so in partnership with the federal, provincial and territorial governments and health care providers across Canada.**
- **Our work supports accountability and transparency in advancing health care system renewal and improving the health of Canadians.**

**The Council takes seriously its independent role and we will exercise it to benefit Canadians.**

- **We intend to speak out constructively on the issues and needs facing Canada's health care system.**
- **We want to provide Canadians with information about the reforms being implemented and the challenges of achieving change.**
- **In doing so, we want to encourage the participation of Canadians in determining how best to achieve renewal and to get the best value out of the funding in place.**
- **We see our job as one of witness and advisor – to provide a dispassionate view of the pace of progress, to highlight obstacles and to suggest ways to resolve them and accelerate renewal.**
- **Our first report speaks to this commitment.**

**Our message is clear: Progress is being made towards renewing health care.**

- **We are going in the right direction. Some very worthwhile practices and programs are being tested and implemented across the country.**
- **However, we believe that we are not getting to the point of achieving a broad-based renewal fast enough.**
- **We must accelerate the pace of renewal and implementing the reforms contained in the three Health Care Accords.**
- **In two words we say we need to “HURRY UP”!**
- **Otherwise, we risk losing the progress that is being made and the confidence of Canadians.**

**If we want to achieve the objective Canadians hold of having a sustainable, high quality health care system, we need to move faster.**

- **Our report speaks about the successes to date, but also to the urgent challenges we face.**
- **The Council has visited a number of regions and gathered information on activity across Canada.**
- **We are impressed by the interest and commitment to health care innovation.**
- **Today, we will share with you a few of those stories.**

**These are stories about people and organizations pushing hard to improve patient access and safety...**

- **...committed to building a more sustainable health care model – people who are accelerating change.**
- **But unfortunately, these examples are only exceptions, not the standard.**
- **We need to look at these practices as potential models for renewal.**

**To strengthen and sustain the health care system and improve the health of Canadians, our report identifies four strategic areas that need to be addressed:**

- **They are:**
  - 1. Strengthening health human resources management so that we have the health care work force we need throughout Canada.**
  - 2. Accelerating the creation of multi-disciplinary teams as the basis of primary health care reform.**
  - 3. Immediately broadening the use of information technology for patient health records and care.**
  - 4. Reducing health disparities particularly among the First Nations, Inuit and Métis, our Aboriginal peoples.**

**First, I will speak to our health human resources challenges.**

- **Quite simply, we don't have enough health care providers to meet our needs in the future.**
- **Canada requires a comprehensive strategy for its health care work force.**
- **Renewal begins with proper planning and education and training.**
- **Otherwise, we will not have the work force with the skills needed for multi-disciplinary team delivery to achieve primary health care reform, to reduce wait times and to meet ever-increasing service demands.**
- **Without enough professionals - be they technicians, nurses, doctors, home care personnel or pharmacists - all other renewal efforts will flounder.**

**The Council believes strongly that Canada needs a human resources strategy in the health care sector.**

- **We will sponsor a summit this June in Toronto to determine practical steps that can be taken to improve the situation.**
- **We will bring together representatives of key stakeholders - governments, labour, professional associations, regulators, educators and health care organizations - to identify ways to make the human resources effort more effective.**
- **The summit will be a forum for identifying action on a health human resources plan that results in a sustainable work force.**
- **It will be based on the directions for renewal expressed in the Accords.**

**The sooner we have a sufficient number of well-trained health care personnel in all parts of the country, the sooner we will have the capacity to deliver the health care Canadians want and expect.**

- **Today, as an example, we have more MRI units, but not enough people trained to operate them.**
- **We cannot go on this way.**
- **We hope that an important summit outcome will be better support for provinces and territories, all of which report shortages of qualified, trained personnel.**

**Our next key point is adopting multi-disciplinary teams as the basis of primary care reform.**

- **The Council believes that we need to be moving much quicker to create and implement multi-disciplinary teams as the basis of primary care reform.**
- **The team approach is the vision of future health care delivery.**
- **Already there are programs in place which are benefiting health care consumers and showing great promise for communities across Canada.**
- **Our first presentation shows two excellent models using the team approach.**

**RUN VIDEO – segment one:  
[Integrated Palliative Care in PEI/Saskatchewan Surgical Care Network]**

**I am struck by Dr. Paul Kelly's comment in the PEI story that 90 per cent of people want to die at home and less than 10 per cent are actually supported at home.**

- **It shows poignantly how far we need to take our health care system.**
- **Consider how many hospital beds we could free up for those waiting if we had more end of life care at home.**
- **Clearly, we need to better understand and respond to the needs of Canadians.**
- **Further, we need to be educating enough providers to work in a team environment to deliver care.**

**To get there sooner and so that Canadians have better access to care and services they desire, we need more people trained in team delivery.**

- **We need to work harder to remove the professional barriers that prevent the broad implementation of team care.**
- **These are essential steps if Canadians are to have the health care system and access to the services they want and need.**
- **There are other examples of successful team approaches – the Winnipeg Women’s Health Centre, and the CLSC’s in Quebec which are noted in our report.**

**Our third recommendation is to immediately broaden the use of information technology.**

- **Our banking system leads the world in using technology.**
- **It is time for our health care system to do the same!**
- **Accelerating the use of information technology will result in more timely and effective delivery of quality health care to Canadians.**
- **For example, people in rural, northern and remote communities will have a higher quality of service and access through Tele-health technologies.**
- **Next, reports from British Columbia, Saskatchewan and Ontario that show how technology is improving patient safety, creating efficiencies and improving care.**

**RUN Video – segment two  
[Group Health Centre Sault Ste. Marie/UHN in Toronto]**

- **These are powerful stories of how technology is being successfully harnessed to improve health care services.**
- **It is important to remember we are not talking about possibilities.**
- **These technologies are already in use in some areas and have demonstrated their value.**
- **Imagine what can be accomplished if practices like these are applied throughout Canada!**

- **The most important element of the information technology agenda is establishing an electronic patient record.**
- **A modern, secure and efficient electronic patient record for storing and sharing patient information will pay huge dividends in improving the quality of health care for Canadians.**
- **It will improve patient safety and save lives.**
- **It will help avoid potentially life-threatening errors.**
- **It will help deliver more timely access and care by simplifying the transfer of records and patient information and by reducing duplication of tests and lab work.**

- **Another benefit will be to improve information sharing critical to supporting team care.**
- **Canada Infoway is moving forward on its agenda to have an electronic health record in place for 50 per cent of the country by 2009 and completed by 2020.**
- **The Council believes we can and need to get there a lot sooner.**
- **Providers and governments need to have the electronic health record in place quicker.**
- **The Council believes we can achieve this goal in five years, not fifteen with some additional investment and resolving privacy issues.**

- **Now, to the very pressing challenge of reducing health disparities.**
- **We cannot renew health care without reducing health disparities especially those too long endured by Canada's First Nation, Inuit and Métis communities.**
- **The Council's meeting in Nunavut last September showed us the difficulties of attracting and retaining qualified staff, developing teams and the difficulties of adapting technology in a remote, economically challenged community.**

- **The gaps in health status are equally daunting.**
- **For Aboriginal peoples, life expectancy is lower and suicide, infant mortality and diabetes rates are all higher than those of other Canadians.**
- **Again, promising developments are taking place.**
- **As we see in the next video, Nunavut's Tele-health program, *Care Closer to Home*, and the North Network serving remote northern Ontario communities is having a positive impact.**
- **Both initiatives show potential for adaptation in communities and regions in all parts of Canada.**

**RUN Video – segment three  
[Health Disparities – Nunavut and NORTH Network]**

- **The Council believes that two important actions are required.**
- **First, developing an First Nations, Inuit and Métis health work force.**
- **Second, investing effectively beyond health care funding-- in housing, education, training and social programs that will help to address the socio-economic determinants of health and reduce the gaps in health status.**

- **I have covered the four main areas the Council has identified to advance health care renewal.**
- **Our report notes several others for attention.**
- **Drug program costs are increasing at a rate faster than inflation or population growth.**
- **Critical to managing these costs is developing an information resource for physicians, pharmacists and patients that is *independent* and supports appropriate drug prescribing and use.**
- **We also believe that Canada needs to define a minimum standard for drug coverage with application across the country.**
- **This will mean that Canadians have access to the same basic drug plan coverage.**

**Another area under pressure is home care.**

- **With an aging population and more demands on the health care system, home care can relieve pressure on hospitals while supporting independence in the community on the part of those needing support.**
- **The Council specifically urges that community mental health home care be treated within primary health care and that support is not limited to a two week period.**
- **Managing wait times is a challenge for governments and providers.**
- **Efforts to manage placements through a wait time measurement, monitoring and management program are showing promise.**
- **I would also draw to your attention the wealth of comparative data is presented in our report.**
- **The information shows how jurisdictions across Canada are beginning to move on these and other issues.**

- **Sufficient funds are in place to significantly advance health care renewal in Canada.**
- **We are headed in the right direction. Progress is being made.**
- **We urge all those health system managers governments to accelerate the pace – to HURRY UP.**

- **The Council believes that addressing the needs it has identified will result in better access for services, a reduction in health disparities and, ultimately, we will improve the health of Canadians.**
- **Canadians have been lead to believe that the health care will be improved.**
- **All of us are accountable to Canadians who need to know that the right improvements are being made.**
- **To this end, the Council will engage Canadians on the directions for health care renewal.**

- **We will be guided in the belief that all efforts and resources are geared to achieving and maintaining sustainability, accessibility, affordability and quality in our health care system.**
- **We will shed light on what is working, how obstacles can be resolved and urge that efforts be accelerated in those areas to make reform a reality and improve accountability.**
- **We will work with governments, health care providers and Canadians *to push for accelerated change* to modernize our health care system sooner.**
- **There are no speed limits on the road to excellence!**

- **This annual report is the basis for our activity over the coming months:**
  - **We will engage in a conversation with Canadians about health care renewal and their expectations as health care consumers.**
  - **We want to hear from stakeholders on the issues raised in our report and look at areas where we can work together to resolve challenges and advance renewal.**
  - **We will organize the Health Human Resources Summit in Toronto in June and look forward to your support.**

- **We will produce a series of public reports highlighting innovative practices in primary health care, home care, pharmaceutical management, health human resources planning and reducing wait times.**
- **Finally, we will also gather information to report on the funds being spent on health care renewal and to provide advice on the benefits that have been gained.**
- **Our agenda is full and challenging.**
- **On behalf of the Health Council of Canada, thank you providing me with this opportunity to speak to you this morning**

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