

Canadian Alliance of
Community Health Centre
Associations



Regroupement canadien
des associations de centres
communautaires de santé

PROVINCIAL ELECTIONS 2011

What elected governments said and committed
regarding key steps to improve health and health care
across Canada

Responses from Elected Government Parties to questionnaire submitted by CACHCA
to all political parties in Manitoba, Newfoundland and Labrador, Ontario, Prince
Edward Island and Saskatchewan

NOVEMBER 2011

Overview

In August 2011, the Canadian Alliance of Community Health Centre Associations (CACHCA) submitted two key questions to the leaders of all political parties competing to form government during Fall 2011 provincial elections in Manitoba, Newfoundland and Labrador, Ontario, Prince Edward Island and Saskatchewan. These two questions are presented below. They are followed, in the subsequent pages, by the responses received by each of the parties elected to form government in these provinces. These are:

Manitoba – New Democratic Party of Manitoba (Page 3 below)

Newfoundland and Labrador – Progressive Conservative Party of Newfoundland and Labrador (Page 4 below)

Ontario – Liberal Party of Ontario (Pages 5-7 below)

Prince Edward Island – Liberal Party of Prince Edward Island (Page 8 below)

Saskatchewan – The Saskatchewan Party (Page 9 below)

For the sake of comparison, the full responses from all political parties in these five provinces are available online at <http://www.cachca.ca/news/news.html>

QUESTIONS SUBMITTED TO ALL POLITICAL PARTIES

QUESTION 1: Will your party commit to negotiating a renewed 2014 Health Accord in collaboration and concert with the other Provinces and Territories and the Government of Canada, including:

- a. A requirement from your government that the Government of Canada fulfill its stated commitment to a six percent increase in health transfers to the provinces and territories for the 10-year duration of the new 2014 Health Accord; and
- b. A requirement from your government that any new health transfers to the provinces and territories within the 2014 Health Accord not be subtracted by the Government of Canada from other, existing social transfers to the provinces/territories; and
- c. Including a provision within the Health Accord re-committing all Provinces, Territories and the Government of Canada to the five principles of the *Canada Health Act*; and
- d. Including a provision within the Health Accord adopting the following seven principles for health system transformation, as recommended by the Canadian Medical Association (CMA), the Canadian Nurses Association (CAN) and the Canadian Alliance of Community Health Centre Associations (CACHCA): "patient-centred"; "quality"; "health promotion and illness prevention"; "equitable"; "sustainable"; "accountable", and "community-oriented"; and
- e. Including a provision within the Health Accord identifying "access to appropriate primary health care" as a priority area for federal and provincial action, along with development of federal standards for primary health care and targeted funding to help provinces and territories achieve these standards.

QUESTION 2: Will your party commit to developing a time-bound plan to expand access in your province to Community Health Centre (CHC) services through a combination of new resources for existing Community Health Centres so that they may extend services and programs to community members most urgently in need, and funding for new CHCs in communities where needs cannot be met by an existing Community Health Centre.

MANITOBA



RESPONSE TO QUESTION 1: Yes we agree that the next Health Accord can and should include strong provisions related to the priorities you have identified. In discussions with the federal government we will certainly be looking for stable long-term funding. We are glad that Prime Minister Stephen Harper has committed to 6 per cent annual increases as part of the next Accord. In contrast, Hugh McFadyen [Leader of Manitoba PC Party] has proposed limiting health spending to the rate of economic growth. This would mean a \$756M cut to health care this year alone, and would have devastating consequences on patient care.

RESPONSE TO QUESTION 2: The NDP have unveiled a long-term vision to improve access to primary care and to ensure all Manitobans who want one will have access to a family doctor by 2015. As part of this plan we will introduce nurse-practitioner-led quick-care clinics and mobile clinics while expanding the successful Advanced Access care model. We are always open to discussing with your organization and members ways to bring team-based, quality care that Manitoba families need where they need it most.

NEWFOUNDLAND AND LABRADOR

DUNDERDALE



Premier Kathy Dunderdale and the Progressive Conservative Party chose not to respond to the survey.

ONTARIO



RESPONSE TO QUESTION 1: In 2004, provincial leaders came together with the federal government to shape an historic 10-year Health Accord. Ontario Liberals were a driving force behind that agreement and we are proud of the progress that has been made. In 2004, the major issue undermining confidence in the public health care system was long surgical wait times. The 2004 Accord provided stable funding to tackle wait times and placed clear accountability on provinces to deliver. The progress across the country, and particularly in Ontario, has been amazing. Our province now has the shortest surgical wait times in the country, with almost every surgical procedure delivered within the clinical benchmark. These results were delivered because we came together as Canadians and set clear priorities, made investment available and focused on results.

Ontario Liberals believe that we must build on the success of the 2004 Accord with a new 10-year agreement between our federal, provincial and territorial partners. While impressive progress has been made in recent areas like primary care reform and tackling wait times, our health care system still faces major challenges that will require strong and coordinated political leadership. Canada's population is aging and the demand for service is growing each year. More Canadians suffer from complex chronic disease than in the past. For our health care system to remain strong we need to realign our focus to address the increasing complexity of patients. We will work with our federal, provincial and territorial colleagues to negotiate a renewed Health Accord to meet this challenge. The PCs will be forced to make deep cuts to health care to fill the \$14-billion platform hole.

Ontario Liberals believe that the federal government needs to enter into a new long-term deal with the provinces and territories to help realign our system to deal with the demographic challenge. Since the founding of medicare, federal funding has slipped from covering 50 per cent of all health care costs in Ontario to only 23 per cent today. As costs continue to escalate, this erosion in federal funding must be reversed. Ontario Liberals are calling on the federal government to commit to durable, long-term annual increases in health transfers.

To date, the federal government has only committed to increase funding by six per cent for two years beyond the expiry of the 2004 Health Accord. This is not acceptable. The only way we can strengthen our health care system is with long-term planning and long-term sustainable funding. Ontario Liberals will continue to work on behalf of Ontarians to ensure the federal government assumes its responsibility to preserve a strong health care system and commit that the six per cent escalator will continue for the length of a new 10-year accord. The PCs will be forced to make deep cuts to health care to fill the \$14-billion platform hole.

Any increase in health transfers cannot come at the expense of existing social transfers to Ontario. There needs to be a net increase in fiscal transfers from the federal government, not simply a realignment of existing funding.

Ontario Liberals believe that a future accord must continue to adhere to the core principles of the Canada Health Act, principles that Ontarians overwhelmingly support. Some on the right argue that Canada can no longer afford a strong universal public health care system and that —experimenting with private options is necessary to improve health system performance. Ontario Liberals reject this. There is a reason why health care is consistently identified by Ontarians as the top priority — one that they want their government to focus on. They understand the importance of being able to access the care they need when they need it regardless of their ability to pay.

Ontario Liberals believe we can and must meet the growing demand for care. Where there are opportunities to do things differently or better, we are taking them. Since 2003, for example, we have led two major reforms of our provincial drug program, saving Ontarians almost \$1 billion per year. We are now working with other provinces to explore common pricing for pharmaceuticals to reap further savings. It is these types of innovative reforms within the public system that can deliver efficiencies — but these cannot come at the expense of protecting universal access and high-quality care for Ontarians. Tim Hudak [Leader of Ontario PC Party] would put our public health system at risk by his openness to illegal user fees. He would refuse to crack down on illegal user fees.

As we did in the 2004 negotiations, Ontario Liberals will focus on shaping a renewed accord that champions the values and priorities of Ontarians. We will continue to deliver change that improves patient outcomes with clear accountability for results. We will continue to transform health services within the principles of the Canada Health Act and maintain universal access to non-profit care.

A renewed 10-year Health Accord will ensure our health system remains strong through the next decade. During the next 10 years, 1.6 million Ontarians will retire. That is twice as many as retired between 1981 and 1991. As a population we are getting older, we are living longer and we are having fewer children. We need to ensure our health care system evolves to meet the changing needs of our population. Traditionally funding and attention were focused on the institutional care sector — hospitals and long-term care homes. Ontario Liberals believe that confronting the challenge related to our demographic shift will require us to move more care to the community and focus on ensuring smooth patient transition between providers. We have already begun this process through our \$1.1-billion Aging at Home Strategy. We are calling on our federal, provincial and territorial partners to work with us in shaping a new accord to make even more progress in this area.

We believe that building a strong coordinated primary care system will be critical to the success of health system transformation. Compelling evidence suggests that jurisdictions with strong primary health systems have better population health and lower health costs. In Canada, primary care has, for too long, operated with little interaction with the rest of the health care system. While we have made significant progress in this area since 2004, Ontario Liberals recognize that more needs to be done to coordinate primary care, and integrate it into the rest of the care system. The PCs will be forced to make deep cuts to health care to fill their \$14-billion platform hole.

RESPONSE TO QUESTION 2: Ontario Liberals believe in the Community Health Centre (CHC) model. We know that CHCs are uniquely designed to meet the needs of complex patients, particularly those from marginalized communities. In 2005, we moved to nearly double the number of CHCs in the province — from 54 to 103. To date, 101 are operational. Twenty-one are in new, custom-built facilities, four are in various stages of capital development — and, on August 19, 2011, we announced that another seven would receive approval to proceed with their capital projects in the 2011/12 fiscal year. We are fully committed to ensuring that all the CHCs announced in 2005 are completed and serving their target patient populations.

We recognize that there is further community demand for CHCs. While our priority is to fully operationalize the previously announced new CHCs, we will explore ways to meet emerging community needs. Our platform *Forward.Together.* includes a commitment to continue improving access to family health care in the province. We have allocated an additional \$65 million per year to improve same-day and after-hours access to care, bring back house calls, improve access to telephone and online consultations, and increase efficiencies to enable physicians and nurses to see more patients.

Ontario Liberals believe that Community Health Centres are well placed to help deliver these enhanced services to Ontarians – in fact many CHCs are already providing services such as house calls. We look forward to working with CHCs and other community partners to improve family health services across the province. The PCs \$14-billion platform hole means they will be forced to make deep cuts to health care and Community Health Centres.

PRINCE EDWARD ISLAND

Liberal

RESPONSE TO QUESTION 1: A Liberal Government will champion negotiations for a 2014 Health Accord. It is our belief that the 6% annual increase in health transfers should extend for the 10-year duration of the new Accord and these annual increases should not be subtracted from existing social transfers. The Liberal Party is fully committed to the 5 principles of the Canada Health Act.

Prince Edward Island will soon have 11 Community Health Centres and all Islanders will be within a 30 minute driving radius for one of these primary care networks. These Health Centres bring together family physicians, nurses and other health providers who collaborate to deliver first point of contact services to residents. Principle services include primary care for a full range of acute and chronic illnesses with an emphasis on diagnosis and treatment, health promotion through education, illness prevention and chronic disease management.

The Liberal Party will strive to uphold the seven principles for health system transformation as recommended by the Canadian Medical Association, the Canadian Nurses Association and CACHCA. Support for the delivery of primary care will continue to be a priority for a PEI Liberal Government.

RESPONSE TO QUESTION 2: Prince Edward Island currently owns 11 Community Health Centres (including satellite locations). Also outreach and collaborative services are offered at 8 other sites. The Liberal Government has made the expansion of this network a priority. Recent announcements of Community Health Centres in Murray River and Cornwall – which will bring the total number of Community Health Centres to 13 - will ensure that all Islanders will be within a 30 minute driving radius of one of these primary care networks. Health PEI has been making great inroads in the delivery of services at these centres, including expanded programs for those with chronic illnesses, health promotion and diagnosis and treatment of illnesses.

SASKATCHEWAN



Premier Brad Wall and the Saskatchewan Party chose not to respond to the survey.