

“At a Glance”
Synopsis of CCIH Proceedings
Session XIV, May 31, June 1, 2005, Montreal

CCIH Mission: The Canadian Council on Integrated Healthcare is dedicated to helping Canadians understand emerging healthcare issues.

CCIH Vision: Our vision is for an integrated healthcare system that balances quality, access and cost, and creates better health for Canadians.

Focus topic: Employer engagement in the Canadian healthcare system

Gathering information:

Invitational Employer Round Table

CCIH organized an employer round table to solicit thoughts and perspective from a group of Canadian employers of different sizes, different sectors, and from different geographic regions.

Employers at the table were:

- Caroline Brereton (Trillium Health Centre, Ontario)
- Martine Caplette (QIT-Fer et Titane, Quebec)
- Mike Lee (Moosehead Breweries, New Brunswick)
- Elaine Noel-Bentley (Petro-Canada, Alberta)
- Rod Nolan (Neil & Gunter Ltd., New Brunswick).

In his welcome, CCIH Chair Dr. Russell King provided the context for integration and suggested there is a real need to move from a project-oriented system to a different approach, including three areas of focus:

1. Healthy public policy as a mainstay
2. Public health approach – including social, economic and health
3. Integrated approach, linking in to CCIH viewpoint

The work of CCIH in this session builds on the continuum of care: home care -- acute care -- families and support systems -- workplace -- communities, all taking an integrated approach.

Dr. King introduced the purpose of the employer round table: to hear from employers on a series of issues and questions, and to produce a paper addressing the engagement of employers in the Canadian Health Care System.

The series of questions posed to the roundtable participants were organized in themes:

Theme 1: Employee health and wellness

- How important is employee health to company productivity/profitability?
- What are your main concerns re: current and future health of employees?
- Give examples of what works and what doesn't work re: employee health and wellness?

Theme 2: Workforce health and economic competitiveness

- What are your top 3 business and HR management issues?
- What economic and social policy changes do you think would help improve the long-term health of the workforce (e.g. childcare, education, social security, etc.)?
- To what extent is Canada's health system an economic advantage for your firm/sector?

Theme 3: Health system policy and sustainability

- Role/interest (or lack thereof) of employers in shaping public policy in health sector
- Respective roles/accountabilities of government, business, labour, individuals in the health of Canadians
- Main concerns about long-term sustainability of Canada's health system

The discussion was lively and informative. For additional information on the thoughts of participants, please see elsewhere on this website the CCIH paper that was written after the round table --“Let's Get Engaged: Getting Canada's Public Policy Makers and Employers Together on Healthcare”.

Engaging in reflection:

Chair's Summary of Themes

Over the working lunch following the roundtable, Dr. King highlighted the following five themes for consideration:

Leadership

- Government provides reference points
- Employers provide leadership – create healthy cultures
- Individual leadership in health

Accountability

- Individual accountability parallels employer accountability
- Need for education about accountability for health
- Role of the media in educating individuals

Wellness of employees

- Quality of life – individual/family/community
- Links to productivity and profitability

Sustainability/economics of public system

- Plan for future
- Address demographics, innovation
- Economic argument – by whom, for whom

Workplace/organization health

- Health
- Health care system
- Culture

Dr. King drew a preliminary conclusion following the employer roundtable in answer to the question, “are employers engaged”? He suggested they are, and they must be encouraged to be even more so by society and the media. Employers have an obligation and an accountability. Further, they have a definite self-interest as well, as quality of work life has a direct impact on productivity and profitability.

Taking action:

CCIH discussed the focus and format for a backgrounder paper on the issue of employer engagement. Considerations included audience, timing, objectives/outcome, and distribution strategy. Council was interested in pursuing a paper that would have an action-oriented focus.

Proposed title:

Optimizing value through public-private synergy in health care

Proposed thesis:

Opportunity exists for public and private payers to work synergistically to improve the model for a sustainable health continuum. Therefore, private payers should be more engaged in shaping the landscape of the Canadian healthcare system.

Proposed end result:

A payers' forum in 2006.

Council broke into two groups to look at engagement, and barriers and incentives to public payer-private payer collaboration. Council said it would like a review of how other international healthcare models deal with public/private collaboration/roles. This was planned as a future meeting topic. Council struck working groups for the paper and for the payers' forum.