



**“At a Glance”**  
*Synopsis of CCIH Proceedings*  
**Session XII, October 1 and 2, 2003, Toronto**

\*\* No session was held in spring 2003 due to SARS

**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.

**Gathering information:**

**Topic consideration – Children’s health**

*Expert resources:*

The CCIH asked three experts to present, as follows:

Early child development and health, learning, behaviour through life:

**Dr. Fraser Mustard, Companion of the Order of Canada**, Founding President and Fellow, the Canadian Institute for Advanced Research

Brain development and the early years – the evidence:

**Robin Williams, Niagara Regional Medical Officer of Health**, and Co-Chair of the Early Years Action Group-Niagara Region

The long term social and economic consequences of child development:

**Jane Bertrand, Executive Director at the Atkinson Centre for Society and Child Development**, OISE/UT and Early Childhood Education faculty member

Members considered this topic and began to discuss its implications and possible CCIH interest. The following themes emerged:

- How to increase priority or move the issue forward
- Targeting and measurement
- Economic argument
- Early child development in integrated continuum
- Possible implementation strategies for early childhood development
- Value argument
- Outcomes
- Gaps in our knowledge

**Topic consideration – Health reform**

*Expert resource:* **Marcel Saulnier, Director of Policy Research, CMA** (CCIH observer)

- Mr. Saulnier reviewed status of current health reform initiatives in many areas including: accountability, balanced spending, catastrophic drug plan design and pharmaceutical management, Health Council of Canada, health human resources, home care, prevention and consumer education, primary care, private sector role, rural and remote health services, public health, and patient safety.

Council considered possible roles and actions for CCIH in the evolution of health reform. A background document written by CCIH councilor Chris Bonnett provided context for this discussion.

## **Engaging in reflection:**

In further topic development, two breakout groups identified core issues and key messages for each of four focus topics in the area of **health reform**, summarized below:

### *1. Catastrophic Drug Coverage*

#### **Core Message**

- Establish minimum floor of coverage – for public and private sectors, across Canada

#### **Four key messages:**

- Accessibility
- Easy mechanism to access funding for prescriptions outside minimum floor
- Definition of catastrophic – income? Sliding scale? Look at Quebec plan
- Multi-stakeholder input on who pays and how (provinces, feds, employers, consumers, unions)

### *2. Health Care Human resources*

#### **Core Message**

- Healthcare HR is at crisis levels

#### **Four key messages**

- Need long term HR plan – education, importation, retention (quality of working life)
- Availability of GPs, RNs and other health care professionals – major driver of dissatisfaction among Canadians
- Need more efficient delivery systems – impact of scopes of practice boundaries
- IT solutions

### *3. Home Care*

#### **Core Message**

- Currently insufficiently supported
- Home Care is a deficit in the current continuum of care
- Complimentarity with acute care system

#### **Four Key Messages**

- Expanding need
- Family roles
- Legal, legislative, moral, ethical issues
- There is not a proper home care alternate (complementarity)

### *4. Public Health*

#### **Core message**

- Valued core part of Canadian society
- High priority; proper funding needed for prevention of disease and monitoring and maintaining health

#### **Four Key Messages**

- Workplace is a “place” of public health
- Includes mental health, obesity, illicit drug use
- Physical environment – water, air, earth
- Immunization

## **Taking action:**

*Status/review of ongoing action initiatives*

### ***Genomics paper***

Having written a paper on this topic in 2001, Council reviewed current status of topic (Bill on human reproduction (stem cell research) still before parliament; looming prospect of designer drugs and costs). Council reflected on the importance of Genomics -

- Interface between public and private sectors in this issue – highlighted genomics as an example of challenges that are coming
- Need for game plan across public and private sectors
- Flagging this issue for healthcare system

Council agreed it wished to have an update on this topic from an expert at an upcoming meeting, plus it considered additional distribution channels for the paper, including federal health departments and contacts.

### ***Workplace Health paper***

Council reviewed distribution of paper and ongoing distribution strategies.

### ***Health Council outreach***

CCIH agreed to have Executive correspond with Health Council Chair M. Decter to see if he would be interested in sitting on CCIH. Further linkages with Health Council also discussed.