

Wait Times: The Facts, the Politics and the Solutions

National Roundtable organized by the Canadian Health Coalition
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REMARKS BY
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Good Morning!

Welcome to Ottawa and the CHC's National Roundtable on Wait Times.

I want to thank each and every one of you for taking time to attend the round table.

I am pleased to report that we have participants from all the provinces, including Quebec.

We have representatives here from the Health Canada and the Government of Manitoba, including Health Minister Tim Sale, representatives of health care employers, and providers, seniors, academia, labour and provincial health coalitions.

The fact that this roundtable has attracted over ?? participants during the last week of a crucial federal election is significant. Obviously there is a need and a desire to examine the facts, the politics, and the solutions to the wait times issue.

As we start I want to thank our co-sponsors who helped make today possible:

- Canadian Federation of Nurses Unions
- Canadian Labour Congress
- Canadian Union of Public Employees
- Congress of Union Retirees of Canada
- The Council of Canadians
- Medical Reform Group
- National Anti-poverty Organization
- Seniors on Guard for Medicare

Representatives of the media have been invited to attend and we welcome their presence.

As a quick introduction to today, I want to indicate that the CHC takes its role as “watchdog” of Canada’s health care system seriously and has acted as a strong advocate of Canada’s publicly funded, publicly delivered health care system very seriously over the past 30 years.

We have never been defenders of the status quo for Medicare. We have never denied the need for change. We have called for meaningful improvement and transformation based on sound peer-reviewed evidence. We researched the sustainability of Canada’s health care system- it is sustainable. We were engaged in The National Forum on Health, the Romanow Royal Commission, present during Health and First Ministers’ Meetings leading to the 2004 Health Accord, intervened in the Chaoulli Supreme Court case. We have proposed progressive reforms and real solutions to the challenges facing health care.

We, along with all Canadians witnessed the manufacture of a crisis in Canada’s crown jewel of social programs – Medicare. We analyzed the impact of the draconian cuts to the CHST from 1993 that lead to hospital and hospital bed closures, decreased operating room and diagnostic capacity, massive layoffs of health care providers, contracting out of housekeeping, dietary, and other support services. Increasing wait lists for diagnostics and care. With the created crisis came the calls from long time supporters of for-profit health emerged with “solutions”- an option to private for profit care, a call for Care Guarantees.

One of the strongest proponents of the care guarantee has been Senator Michael Kirby. Senator Kirby, in addition to his Senate duties manages to squeeze in time as a Board member and shareholder of the for-profit health care company Extendicare, whose slogan is “Health Care is our business.” Extendicare operates for –profit nursing homes and provides home-care services. In March of 2005 Senator Kirby filed disclosures that he held 22,500 shares worth \$414,000 at today’s stock prices, and has options on another 58,000 shares worth a gross value of more than \$1 million. Is this a conflict of interest with his Senate Committee study of the health care system? We think so.

We believe that the wait times issue and care guarantees have become the Trojan Horse for for-profit health care. How does luring the short of health care practitioners from the public system alleviate wait times in the system? A parallel for–profit system provides faster care only for those who can afford to pay.

In the election campaign, the Liberal Party has proposed benchmarks for medically acceptable waiting times starting with cancer, heart, joint replacements, sight restoration, diagnostic procedures based on evidence. If timely care can not be achieved, a guarantee with funds for travel and accommodation for the patient and family member is proposed. The Liberal platform indicates that the fund will provide assistance to obtain care in a public facility in another province.

The Conservative platform calls for evidence based benchmarks for medically acceptable wait times starting with cancer, heart, diagnostic imaging procedures, joint replacements, and sight restoration. The Conservative Patient Wait Times Guarantee would ensure that Canadians receive essential medical treatment within clinically acceptable waiting times or be treated in another jurisdiction. The Conservative health platform would allow for a mix of public and private delivery as long as health care remains publicly funded, universally accessible. Delivery doesn't make in their eyes, but we know the difference.

There is strong peer-reviewed evidence that for-profit health care facilities:

- ❖ Have higher death rates than not for-profit facilities
- ❖ Cost more – after all you have to provide profit for shareholders
- ❖ Provide lower quality services
- ❖ Engage in schemes to cheat taxpayers
- ❖ Compromise access to public services
- ❖ Provide less nursing care than not for-profit nursing homes, long term care facilities

That's why every dollar of public funding must go to care and not one penny to profit.

It's not based on ideology – it's based on evidence.

The New Democratic Party platform indicates that they will oppose the privatization of Canada's health care system by making stable long term federal transfers for health care contingent on a commitment from provinces/territories that no federal money directly or indirectly will be used to subsidize a new, separate, profit-making insurance system covering medically necessary services, by making stable long term federal transfers for health care contingent on no federal money being used to cover the salaries or costs doctors and other medical personnel involved in a new, separate, profit-making insurance system, and by committing to monitor and enforce these new rules as well as the Canada Health Act.

With that as background let us begin our examination of the facts, the politics and the solutions to the wait times issue.

When you registered this morning you received a binder that is rich in resources and will provide valuable reference.

Tommy Douglas frequently talked about courage, but he also talked about backbone. I want politicians with the backbone to stand up for Medicare and the Canada Health Act. Tommy's daughter Shirley is here with us today.

The CHC is proud that Shirley serves so capably as a spokesperson and a patron of the Canadian Health Coalition.