THE COLLEGE OF FAMILY PHYSICIANS OF CANADA

# A submission to the Minister of Finance

# Pre-Budget 2016 Consultations

January 21, 2016

# The College of Family Physicians of Canada (CFPC) 2016 Pre-Budget Submission to the Standing Committee on Finance, January 2016

The College of Family Physicians of Canada (CFPC) represents over 35,000 members. The College is the voice of family medicine in Canada and advocates on behalf of its members to ensure high quality in the delivery of care. Education is a key element of our mandate, and the CFPC establishes standards for the training, certification and ongoing education of family physicians; it is responsible for accrediting postgraduate family medicine training in Canada's 17 medical schools.

On behalf of our family physician members the CFPC offers this brief to aid the deliberations leading to Budget 2016. Our recommendations focus on **home care, child and youth health**, and **the Patient's Medical Home**. Federal leadership and investment in these recommendations is crucial in achieving an increasingly robust health care system that meets the health needs of Canadians, especially more vulnerable populations.

#### Home Care

Many people living in Canada with ongoing health issues or complications receive institutionalized care, thereby separating them from their homes and communities. While care in an institutional setting can be entirely appropriate, the CFPC advocates for a broader array of options including home care.

- Establish a National Home Care Strategy
- Reinstate dedicated funding for home care
- Ensure adequate income support for seniors

#### Child and Youth Health

Investments in child and youth health have been shown to produce positive long-term outcomes throughout people's lives.

- Establish a National Child Strategy
- Eliminate child poverty by 2020
- Renew the 2006 agreement on child care
- Invest in making mental health care accessible to all children and youth in Canada
- Ban the advertising of unhealthy foods to children

#### Patient's Medical Home

The <u>Patient's Medical Home</u> (PMH) is the CFPC's solution to improving care for all in Canada. The vision is that every person in Canada will have access to a family practice/primary care setting that serves as their medical home. The PMH puts the focus on patients – enhanced participation in and access to care, better prevention and wellness, better health outcomes, in a caring and compassionate environment.

The Federal government must strengthen and support primary care in Canada through: 1) sufficient physician and health care provider resources, and 2) support the infrastructure and governance to promote the Patient Medical Home model nationally.

# INTRODUCTION

Through targeted investments in programs that focus on vulnerable populations within Canada, the federal government can demonstrate leadership and set national standards, uphold the standards it sets, and provide adequate funding to providers and programs.

### HOME CARE

Many people living in Canada with ongoing health issues or complications receive institutionalized care, thereby separating them from their homes and communities. While the care in an institutional setting can be appropriate, the CFPC advocates for a broader array of options including home care. Since home care is not considered a "medically necessary" service under the *Canada Health Act*, publicly funded home care programs vary greatly across the country in terms of eligibility, scope of coverage and user fees.

A federal Home Care strategy would highlight the importance of home care as a means to maintain independence and dignity. Seniors would benefit from the opportunity to remain in their homes longer. Reduced reliance on hospital care would in turn lead to reduced waiting lists for hospital beds and would result in potential cost savings as care delivered in the community, especially preventative care, has been shown to be more cost-efficient.

Dedicated home care funding was a part of the Health Reform Transfer with \$16 billion targeted to this area between 2003-2008. We were encouraged to hear that the Liberals committed \$3 billion on home care. Family physicians are ready to work with the federal government to inform and shape a home care strategy.

In addition to the Family Caregivers' Tax Credit and tax exemptions for home care services, we recommend **enhancing programs that ensure adequate income support for seniors**, especially those living in or at risk of poverty and financial instability.

With the increase in the proportion of people in Canada aged 65 and over, it is critical that the federal government take immediate steps to address changes in health care needs and patterns of utilization.

#### *Recommendations – Home Care*

- Establish a National Home Care Strategy
- Reinstate dedicated funding for home care
- Ensure appropriate stakeholder consultation, which includes collaboration with provinces and territories
- Ensure adequate income support for seniors

#### CHILD AND YOUTH HEALTH

Investments in child and youth health have been shown to produce positive long-term outcomes throughout people's lives.

Unfortunately, Canada lags on a number of measures relative to other Organisation for Economic Cooperation and Development (OECD) nations. For example, out of 30 OECD countries, Canada ranks 22<sup>nd</sup> in overall child health and safety and 27<sup>th</sup> in child obesity. Federal investment in early childhood development and the percentage of children in regulated spaces is particularly lamentable and Canada ranks near the very bottom.

Our members, through their family practices, witness firsthand how the social determinants of health impact children and youth. Early childhood development studies find that quality of life and the social environment during childhood have significant impacts on both social and physiological development of children. Social determinants of health, especially poverty, play a significant role in forming these environments and must be addressed.

The CFPC urges the federal government to establish **a National Child Strategy** that will support provinces and territories through setting national standards. The strategy:

- Creates a robust mechanism for collection of data on the health of children and youth, including such important areas as early childhood development and mental health
- Sets standards based on the data collected
- Provides appropriate leadership and support to ensure care providers across the country are equipped to meet the goals set

Current lack of standardization leads to a patchwork approach with great discrepancies between provinces and territories with respect to service availability.

Children living in poverty are at high risk for poor health outcomes. We encourage the government to **support the <u>Campaign 2000</u> drive to eliminate all child poverty by 2020**. The eradication of child poverty was supported unanimously in the House of Commons in 1989 and the CFPC asks that this issue be revisited with the same level of support.

The high cost of child care is a barrier for many Canadian families. We urge the government to **renew the 2006 federal/provincial/territorial commitment on child care** that was supported and signed by all First Ministers.

We must address the complexity which is so often a part of the reality of youth with mental health issues. Well-functioning teams that include an ongoing relationship of the youth with their family physician is an important element of the solution. Targeted investment into programs that make mental health services more universally accessible will have a positive impact in this important area.

To address childhood obesity, we commend the Liberals for campaigning on a **ban on advertising unhealthy foods to children.** 

# Recommendations – Child and Youth Health

- Establish a National Child Strategy
- Eliminate child poverty by 2020
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• Ban advertising of unhealthy foods to children

# PATIENT'S MEDICAL HOME

The sustainability of Canada's health care system depends on ensuring a strong foundation of primary care and family practice. Access issues, the lack of institutional and community support for patients with chronic health conditions, and changing demographics can lead to inefficiencies and be costly. To address the issues of health care at the core of health care delivery, systems for family physicians and patients must be strengthened.

International research provides evidence of the correlation of access to effective family practices with better population health outcomes.<sup>i</sup> A strong and high-performing primary healthcare system with an essential role played by family physicians has the potential to deliver better health care for the population as a whole and specific groups such as those with chronic diseases.<sup>ii,iii</sup>

The Patient's Medical Home (PMH) is the CFPC's solution to improving care for all in Canada. The vision is that every person in Canada will have access to a family practice/primary care setting that serves as their medical home, a central hub that connects them to all other parts of the health care system as required. The PMH puts the focus on patients – enhanced access to care, participation in one's care, better prevention and wellness, better health outcomes.

Through federal government support, every family practice can become a PMH, offering compassionate, comprehensive, coordinated, and continuing care to patients through a family physician working with health care teams. Teams may involve physically or virtually linked nurses, other specialists, and other health care providers depending on the needs of the patient community. The PMH is where patients can present and discuss their personal and family health concerns and receive a full spectrum of care. Relationships between patients and family physicians and other health care workers are developed and strengthened over time, enabling the best possible health outcomes for each person, the practice population, and the community being served. The focus on preventative care allows for an upstream approach that focuses on maintaining health rather than treating disease.

The PMH reflects and responds to the changing needs of populations in Canada. It also reinforces the physician–patient relationship and the importance of the <u>Four Principles of Family Medicine</u>. Further, through a PMH, child and youth health can be enhanced and home care services can be linked to and coordinated with a PMH.

The PMH in particular and primary care in general would see the following through robust federal government support:

- Timely Access: reduces waits in family practice by better use of teams and same-day scheduling
- *Health Promotion*: focusing on wellness and chronic disease management
- Value for money: patients with own family physician as a regular care provider have lower rates of hospitalization and better health outcomes <sup>iv</sup>
- *Sustainability*: better allocation of resources and funding, recognizing usage patterns such as a need for greater supports for home care
- *Efficiency*: investing in Canadians' health and improving access, for example in the early years of life, reduces strain on other parts of the health care system

The current application of PMH principles across Canada lacks standardization. Strong federal leadership and support of the principles of patient-centred, continuous care would help ensure uniform quality of care provided across provinces and territories. Dedicated support for the PMH implementation will ensure that the relevant systems can be established and developed as necessary to meet the needs of the communities they serve.

# Recommendation – Patient's Medical Home:

• The Federal government should move to strengthen and support primary care in Canada through: 1) sufficient physician and health care provider resources, and 2) support the infrastructure and governance to promote the Patient Medical Home model nationally.

# **CLOSING REMARKS**

The CFPC continues to advocate on behalf of our members to help improve care. We believe that by investing in both the beginning and the end stages of people's lives – that is through child and youth health and home care – the federal government will witness reduced costs in both health and social services.

By improving the health of Canadians through the Patient's Medical Home model, there will be fewer demands on the health care system, quality of care will be advanced, and we can work together to foster an efficient and effective health care system.

<sup>&</sup>lt;sup>i</sup> Starfield and Shi, "The Medical Home, Access to Care, and Insurance."

<sup>&</sup>lt;sup>ii</sup> Alan Katz, Richard H. Glazier, and Janani Vijayaraghavan, *The Health and Economic Consequences of Achieving a High-quality Primary Healthcare System in Canada – "Applying What Works in Canada: Closing the Gap,"* Improving Primary Healthcare in Canada (Ottawa, Ontario: Canadian Health Services Research Foundation, January 2010),

http://www.chsrf.ca/Programs/PrimaryHealthcare/ImprovingPrimaryHealthcareInCanada.aspx.

<sup>&</sup>quot;Hollander et al., "Increasing value for money in the Canadian healthcare system."

<sup>&</sup>lt;sup>iv</sup> Starfield and Shi. (2004). The medical home, access to care and insurance: a review of evidence. *Pediatrics, 113*(5), 1493-1498; Hollander, M.J., Kadlec, H., Hamdi, R., & Tessaro, A. (2009). Increasing value for money in the Canadian healthcare system: New findings on the contribution of primary care services. *Healthcare Quarterly, 12*(4), 30-42.