



HealthCareCAN

Leading. Innovation. Together.



**HealthCareCAN's
Approach for Healthcare and
Health Research in Canada**

The need to rebuild health in Canada



Paul-Émile Cloutier
President & CEO

HealthCareCAN unites health organizations across Canada, networking their individual strengths to catalyze and capitalize on the disruptive innovation occurring in health.

There has been no greater disruptive force in health than COVID-19, and as Canada seeks to emerge stronger from the challenges thrown at us by the pandemic, a renewed healthcare and health research system will be the keys to our future success.

That is why HealthCareCAN and our member institutions from across the country believe that in this federal election Canadians want to hear from parties and candidates who are committed to charting the course forward for health.

We have some ideas, as outlined in this document, based on the frontline perspective and extensive experience of our membership. We are also ready to roll up our sleeves and help usher in a new era for Canadian health, one that acknowledges and learns from the difficult and sometimes tragic lessons learned during the pandemic.

Canada's new era for health begins now.

We represent

- Hospitals
- Health research institutes
- Health authorities
- Canadian health sector associations

Our members by the numbers

- 800,000 employees
- 60,000 volunteers
- 15,000 scientists
- 60,000 highly skilled researchers, staff and students

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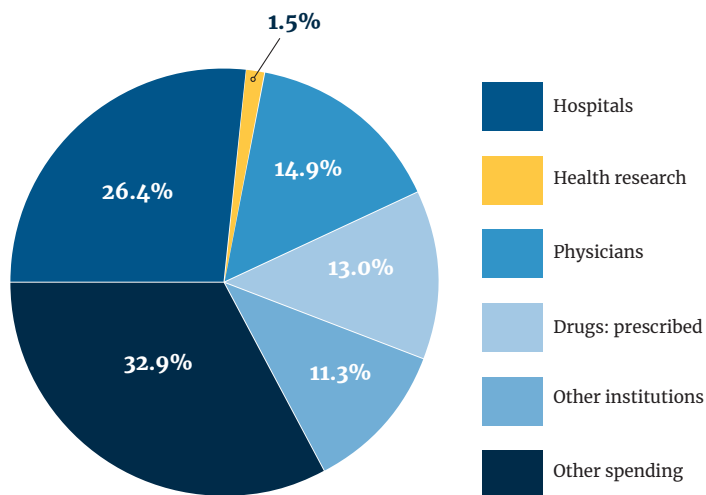
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Strengthen health research and innovation

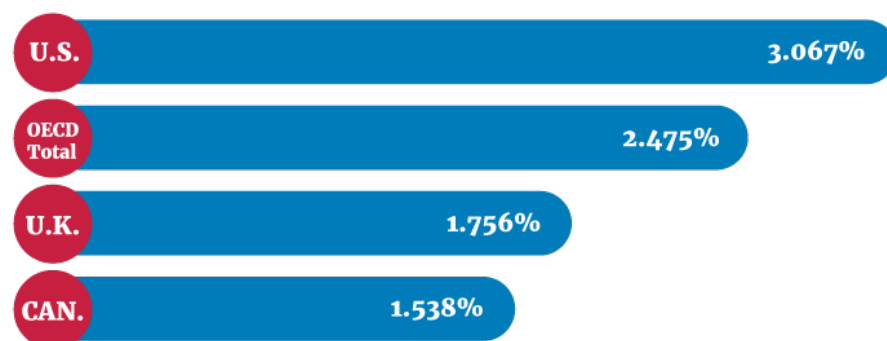
Through increased investments and opportunities for partnerships.

Spending on Healthcare in Canada

Canada spends only 1.5% of its total healthcare budget on health research¹



Investments in Health Research: How Canada Compares Internationally (% of GDP, as of 2019)²



COVID-19 & Canadian Health Research

Canadian researchers contributed significantly to the global fight against COVID-19, including by first profiling the body's immune response to the virus and developing the lipid nanoparticles to deliver mRNA to the body's cells – a breakthrough based on 40 years of research.

Economic Impact of the Health Research Sector



Contributes \$7.8 billion to Canada's GDP.³



Employs 3% of Canadians, approx. 492,000 Canadians.⁴



Creates spin-off companies.



Trains the next generation of highly qualified personnel.



Attracts top talent and global investments.

Academic healthcare organizations (AHOs) deserve equal access to federal funding



- AHOs bring together researchers, universities, patients, government and industry, and act as Canada's health innovation hubs keeping Canadians healthy and productive.
- However, the full potential of AHOs and the health and economic benefits of the vital work they do are not being realized because federal policies do not allow AHOs to compete directly for funding.
- This approach limits the research pursued and the partnerships that can be formed to advance health research and innovation, based solely on the type of institution where the research is conducted.

How can we take Canada to the next level?



- **Invest a minimum of 2% of public spending on healthcare (\$3.7B) on health research and innovation**, allocated equally between health research and strategic initiatives to tackle pressing social issues.
- **Provide AHOs direct and equal access to federal funding** to foster increased partnerships and ensure Canada's most promising research is being pursued regardless of where it is being conducted.
- **Create a policy environment that fosters innovation and partnerships in health research**, across institutions, provinces and territories, internationally and public/private industry.

Support better aging

Through improved home, community and long-term care services.

The Time to Reimagine Older Adult Care is Now

The pandemic exposed long-standing issues with older adult care in Canada, especially in LTC. With the number of older Canadians set to reach 21% of the population by 2028, the time is now to improve care for this demographic and ensure the proper programs and policies are in place to support healthy aging.

The Impact of Canada's Aging Population

606,000

Canadians requiring LTC by 2031, up from 380,000 in 2019 (↑ 60%).¹

199,000

The number of new LTC beds needed between 2017-2035.²

1.7 M

Canadians requiring home care by 2031, up from 615,479 in 2019 (↑ 53%).³

28% (and rising)

Canadians currently acting as caregivers.⁴

How do we fix the problem in older adult care?

- Develop a national approach to improve health and social services for older Canadians, supported by substantial investments to meet the current and future needs of Canada's aging population.
- Shift to providing more home and community care.
- Increase staffing and improve working conditions in long-term and home care.
- Create communities that allow older adults to age in place.
- Address the social determinants of health, like housing, transportation, and nutrition, that affect healthy aging.
- Provide better financial and social supports for caregivers.

COVID-19 & older adult care

69% of Canada's COVID-19 deaths occurred in LTC and retirement homes, 28% higher than the international average.⁵

86% of Canadians and 97% aged 65+ are concerned about the challenges faced by Canada's long-term care systems.⁶

85% of Canadians and 96% aged 65+ will do everything they can to avoid moving into an LTC home.⁷

Aging the Major Driver of Healthcare Costs

20%

The share of healthcare spending growth due to population aging over the next 10 years.⁸

\$12,000

Average annual healthcare costs for an older Canadian (compared to \$2700 for rest of population).⁹

\$93 B

Rise in healthcare costs due to population aging over the next 10 years.¹⁰

Modernize health infrastructure

As part of Canada's approach to improving healthcare, supporting virtual care and tackling climate change.

Healthcare facilities are among the oldest public infrastructure in use today

- ▶ **48%** built > 50 years ago¹
- ▶ **70%** in cities built > 50 years ago²

Over the last 20 years, Canadian capital investment in health infrastructure has fluctuated, with a noted decline in recent years despite overall healthcare spending increasingly steadily over this same time.³ This suggests that capital investments are being sacrificed to fund operational expenses, and the reality is that the need to continue redirecting funds to patient care will continue as Canada's population grows and ages.

Digital Health Infrastructure & Virtual Care Benefits

- | | | | |
|------------------|--|---|---|
| ✓
Convenience | ✓
Removal of barriers to access, like time and travel | ✓
Allows for remote patient monitoring | ✓
Increased efficiency and reduced operating costs |
|------------------|--|---|---|

According to Canada Health Infoway⁴, in 2019, virtual care:

Saved Canadians and the economy 11.5 million hours

Reduced CO2 emissions by 120,000 metric tonnes

If Canada sustains virtual visits at 50 per cent of primary care visits, Canada Health Infoway projects annual savings of 103 million hours for Canadians and the economy and an annual reduction of 325,000 metric tonnes of CO2 emissions.

What do we need to modernize Canada's health system?


Increase capital investments in healthcare to a minimum of 0.6 per cent of GDP to better align with Canada's OECD counterparts.


Impact of COVID-19

- Exposed the fragility of Canada's healthcare infrastructure, including how outdated infrastructure puts the health of Canadians at risk.
- Accelerated the adoption of virtual care, which Canadians embraced.
- Increased cyber threats in the health sector.

Health Sector's Environmental Impact

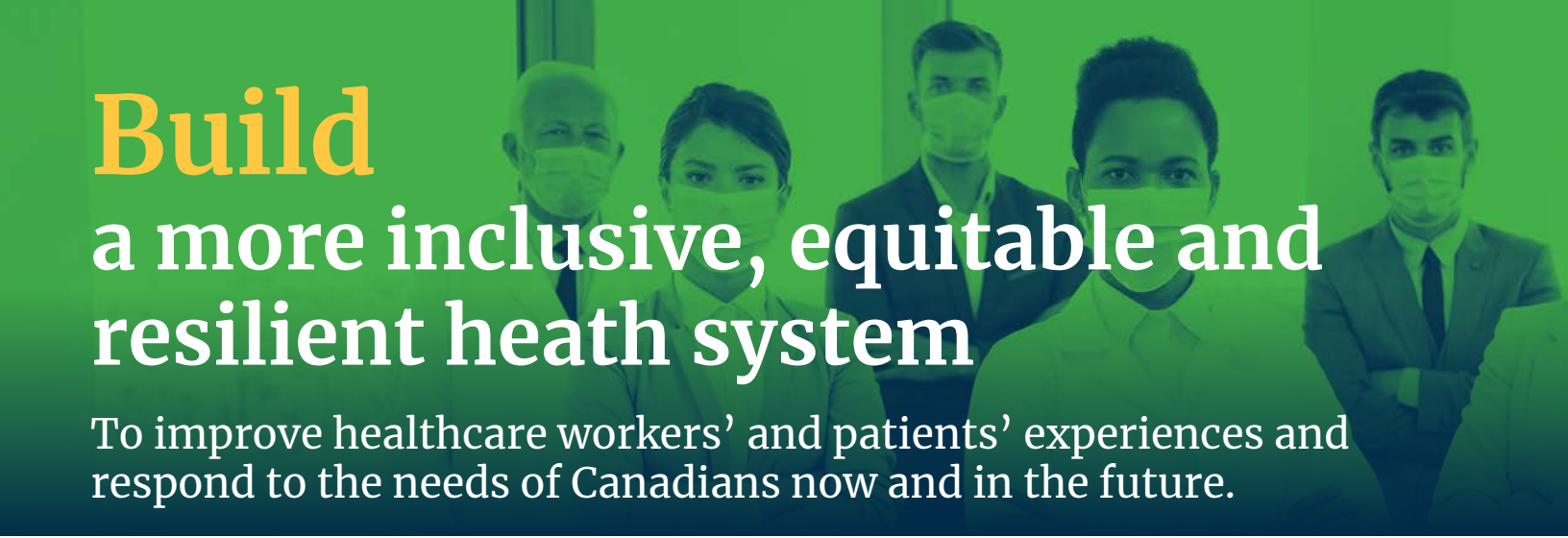
 3rd highest per capita GHG emissions from healthcare in the world.⁵

 4% of Canada's total emissions.⁶

 11% of non-business, non-household energy use in Canada.⁷

Did you know...?

A 2020 survey of HealthCareCAN members identified \$4.6 billion in pending infrastructure projects.



Build a more inclusive, equitable and resilient health system

To improve healthcare workers' and patients' experiences and respond to the needs of Canadians now and in the future.

Health workforce

Canada's healthcare workers are exhausted, stressed and burned out from the pandemic. They have taken care of us, now it is time we take care of them.

100,300

job vacancies in healthcare and social assistance at the end of 2020, a record level and up 57% from the previous year.¹

Thousands

of healthcare workers have left the health sector due to the pandemic, with more planning to leave once the pandemic is over.

Mental health

40%

of Canadians indicate their mental health has deteriorated since March 2020.²

66% & 70%

of youth two to five years old and six to 18 years old, respectively, experienced declining mental health since March 2020.³

33%

of healthcare workers report fair to poor mental health.⁴

77%

of healthcare workers working in direct contact with COVID-19 reported worsening mental health compared to pre-pandemic.⁵

Resilience and Equity: Impacts of COVID-19 on the health system

16M

Medical procedures delayed in Ontario alone.⁶

\$13B & 3.5 yrs.

The estimated cost and time to clear Ontario's procedure backlog.⁷

5.5% - 5.7%

Projected annual increase in health spending due to COVID-19 in Canada over the long-term.⁸

- COVID-19 demonstrated how unprepared Canada was to deal with a health emergency and highlighted the need to make sure we are prepared for the next one.
- The pandemic exposed and worsened health inequities for certain demographic groups, including Black people, Indigenous people, and people of colour, due to structural racism and discrimination present in our health and social systems.

Indigenous health



- Events of the last year and a half have starkly revealed to everyone in Canada the inequities Indigenous people have been dealing with for decades.
- Tackling systemic racism against Indigenous people in our health and social systems must be a priority for all levels of government, and solutions must be Indigenous-led.
- Implementing the Truth and Reconciliation Commission's Calls to Action and solutions put forward by Indigenous people to eliminate the gaps in health services and outcomes must be acted on immediately and financially supported by all governments.

How can we better support the health workforce and create a more resilient, inclusive health system?



- Develop a national health workforce planning strategy to tackle the shortage of health professionals; address the factors that contribute to stress, anxiety and burnout among healthcare workers; and improve diversity and representation in the health system.
- Better availability of and access to mental health supports for healthcare workers and Canadians.
- Prioritize and support Indigenous people, Black people, people of colour, LGBTQIA2S+ people, people with disabilities and others in developing and implementing solutions to address inequities in our health and social systems.
- Increase health transfers to provinces and territories to ensure consistent, long-term funding for healthcare that keeps pace with increasing costs, including from COVID-19; inflation; population growth; population health status; and population aging.

End notes

Strengthen health research and innovation

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Modernize health infrastructure

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Build a more inclusive, equitable and resilient health system

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