



MEDIA RELEASE

For immediate release

The Great Canadian Healthcare Debate *A deeper dive into mental health, Indigenous health and seniors' health* Showdown at St. John's gathering

OTTAWA (June 1, 2018) – The nation's health leaders will once again be asked next week to step up to the plate and identify the Canadian health care system's most pressing current need.

The annual exercise is being temporarily revamped to provide health leaders with updates on the progress achieved to date on the past three years' motion themes - mental health, Indigenous health and seniors' health - and to outline opportunities for further advancement in these areas. This will be the fourth iteration of the Great Canadian Healthcare Debate at the National Health Leadership Conference (NHLC), taking place in St. John's, Newfoundland and Labrador, June 4-5.

The Great Canadian Healthcare Debate was designed to identify the issue most in need of priority action by the nation's policy-makers. In 2018, the Debate will feature eight motions that fall within the three themes of mental health, Indigenous health and seniors' health. The Policy Resolution Committee, tasked with overseeing the process and recommend the top motions that go forward, identified these motions using the criteria of newsworthiness, potential for revealing new insights, appeal to Canadians, impact, ability to generate concrete outcomes and to create positive policy change. The process resulted in a list of the top 8 motions framed within one of the three topics. Delegates will have the opportunity to vote on their top policy resolutions – one per theme - to be put forth for the final vote. The 2018 Debate will be moderated by award-winning author and health columnist for the Globe & Mail, André Picard.

“All Canadians are in some way affected by at least one of these three issues,” said Sue Owen, Acting President and CEO of the Canadian College of Health Leaders. “I am very pleased to see all the progress that has been made in these areas, and anticipate a lively and deeply productive debate on June 5th.”

“These topics are a top concern for policy-makers and health leaders”, added Paul-Émile Cloutier, President and CEO of HealthCareCAN. “Improving access to mental health services, providing culturally appropriate care to Indigenous peoples and addressing the issues caused by Canada's ageing population are of utmost importance. Because of this, we wanted to dive deeper into these topics to sustain momentum and advance the conversations on these issues.”

Furthermore, the original motion sponsors provided op-eds describing the progress that has been made on each issue, highlighting what opportunities still exist, and offering guidance on what should be focused on going forward. These op-eds can be found at <http://www.nhlc-cnls.ca/the-debate/>

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The eight contenders (divided by theme) are:

MENTAL HEALTH

Achieving Universal Mental Health Care

Be it resolved that health leaders continue to support increased investments and policy changes to overcome the factors that impede achieving universal access to a full continuum of evidence-based mental health services and supports for all people in Canada.

Zero Suicide

Resolved that, Canadian healthcare leaders across the country work collectively to view every death by suicide, whether among those under care or those living in the community, as an unacceptable outcome and offer the necessary systems, programs (including culturally appropriate services and supports) and policies that strive to make suicide a “never event.”

Maternal Mental Health

Resolved that, the federal Ministry of Health working with the local, provincial and territories government develop a national strategy on Maternal Mental Health; this action would be achieved through the implementation of a national screening & treatment program for expectant and new mothers. The strategy should be ready by June 2020 and be put into action by the provinces in order to assist the 76,000 new mothers who experience a Postpartum Mood & Anxiety Disorder each year by providing early treatment to lessen the negative impacts on mothers, infants, and families.

INDIGENOUS HEALTH

Embedding Cultural Safety in Core Curriculum

Resolved that, all Indigenous people deserve to receive care from practitioners who are self-reflective/self-aware regarding their position of power and the impact of this role in relation to patients to ensure people feel and are respected and safe. All Provinces, Territories and the Federal Government support Indigenous communities in co-designing a mandatory national education program/curriculum that promotes cultural safety for all health providers, volunteers and students.

Indigenous Health

Resolved that, in order to understand and address the patient safety incidents experienced by Indigenous (First Nations, Metis, and Inuit) people, Canadian healthcare leaders and Indigenous communities will jointly develop a meaningful consultation process that respects diverse, holistic approaches to health, and recognizes the importance of strengthening health literacy and patient engagement as critical conditions for patient safety.

SENIORS' HEALTH

Family Caregivers of Seniors

Resolved, that Canadian healthcare leaders recognize and embrace family caregivers of seniors as valued members of the healthcare team by committing within the next two years to changing the culture in the healthcare system to actively involve family caregivers in care settings and by educating healthcare providers on the value of respecting and acknowledging the crucial role family caregivers play.



Advanced Care Planning

Resolved, that Canadian health-care leaders and provincial and territorial Ministries of Health commit within the next two years to adopt routine, early integration of Advance Care Planning (ACP), as an enabler for person-centred care, into the care of capable seniors in all care settings, by development of policies, care processes, training programs, funding models and a registry to boost ACP awareness and enhance the capacity for consistent initiation of ACP conversations, documentation storage and access throughout the health system.

High Quality Palliative Care

Resolved, that recognizing access to high quality palliative care is an important issue for Canadians, health care leaders promote Palliative Care Matters, adopt the Collective Impact Framework (CIF) and work together toward a framework for an integrated approach to funding and delivery of palliative care.

Issue briefs for each of the eight short-listed resolutions can be found at: <http://www.nhlc-cnls.ca/the-debate/>

NHLC is the largest national gathering of health system decision-makers in Canada, including representatives from health regions, authorities and alliances; hospitals; long-term care organizations; public health agencies; community care; mental health and social services; government, education and research organizations; professional associations; and consulting firms and industry. Visit www.nhlc-cnls.ca for more information.

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