**HEALTH COMMITTEE REPORT - MARCH 2019**

Since the January 2019 conference call the focus has been on preparing the overview of the bilateral federal/provincial/territorial health agreements. Thanks to JoAnn Lauber for her work in developing a template and approach to collecting details pertinent in particular to seniors.

A better understanding of the jurisdictional challenges and approaches became evident, as did some of the similarities, in the process of going through each agreement. While not fully completed and “prettied up” for AGM sharing, what has been done to date is part of this report.

The interim report on pharmacare held some promising statements; however there were significant omissions. Much remains to be seen. It may be the federal budget will provide some insight, however the concern that a “fill the gaps” remains. It is **recommended** that after the budget we send member organizations a copy of the interim report and information, if any, from the budget.

As mentioned in an earlier email consideration to having someone from the Canadian Institutes for Health speak at the AGM may have merit, again reinforcing the importance of health care in the upcoming election, as it is that organization with which the provinces/territories had to work to develop common indicators and then report annually beginning in 2019.

In June 2018, the FPT health ministers endorsed indicators for measuring access. Note that Quebec was an observer and Ontario’s new government and had not endorsed them.

Recommended indicators for access to mental health and addictions services:

* Wait Times for Community Mental Health Services, Referral/Self-Referral to Services (those outside of emergency departments, hospital inpatient programs and psychiatric hospitals)
* Early Identification for Early Intervention in Youth Age 10 to 25 (to be defined)
* Awareness and/or Successful Navigation of Mental Health and Addictions Services (self-reported, to be defined)
* Rates of Repeat Emergency Department and/or Urgent Care Centre Visits for a Mental Health or Addiction Issue
* Hospitalization Rates for Problematic Substance Use
* Rates of Self-Injury, Including Suicide

Recommended indicators for access to home and community care:

* Wait Times for Home Care Services, Referral to Services
* Alternate Level of Care Length of Stay for Inpatients Discharged to Home Care Services
* Home Care Services Helped the Recipient Stay at Home (self-reported)
* Caregiver Distress
* (In)appropriate Move to Long-Term Care
* Death at Home/Not in Hospital (to be defined)

Respectfully submitted

Margaret Urquhart