

## HEALTH SERVICES COMMITTEE 2022 AGM

## Membership

Margaret Urquhart, Chair, Regional Representative-East Alyson Hillier RTO-NSTU Peggy Prendergast RTAM Bill Berryman RTO-NSTU Adeline Wuschenny STS Albert Legge NLTA Helen Sukovieff STS

## **Terms of Reference**

The Health Services Committee shall

- a) Provide Members with links to reliable information on personal health and well-being.
- b) Advocate for health goals identified in ACER-CART's strategic plans and Member resolutions.
- c) Prepare for the Executive proposals, position papers and appropriate recommendations related to health concerns.

The Health Services Committee held three meetings, hosted by the NBSRT Online Media Committee. Members contributed information/documents, ideas and perspectives they felt pertinent. They posed questions and presented additional topics for consideration. In addition, members shared information about activities and initiatives in their respective jurisdictions. Their active and diligent contribution to each meeting and the work of the committee is much appreciated and bears acknowledgement.

The Committee:

- a. Followed up on topics carried forward from 2020-2021
- b. Suggested letters/made recommendations to the Executive
- c. Reviewed documents related to health, particularly relevant to Aging in Place
- d. Provided the Political Advocacy Committee with 11 points to consider
- e. Prepared items for posting in "Latest News" on the ACER-CART website
- f. Noted 2022 federal budget items relative to Health Care and Aging in Place (see Appendix B)
- g. Noted items in the NDP/Liberal agreement relative to Health matters
- h. Identified additional topics for consideration
- i. Recommended ACER-CART support the draft Long Term Care Standards and legislation for Long Term Care. We recommended support for the elimination of for-profit care homes

Items for posting on the ACER-CART website under "Latest News were

a. Links to CanAge's report cards on vaccine status in each jurisdiction.

- b. Links to a document overviewing the Canada Health Act and a link to the Annual Report Cards, by jurisdiction, on the Canada Health Act
- c. Links to the Canadian Institute for Health report cards on the bilateral health accords including notification of additional agreements for Long Term Care Funds
- d. Notice that federal Medical Assistance in Dying legislation was passed and a link to the legislation along with the need for Members to determine the variations in access and application within their jurisdiction
- e. A link for Advanced Care Planning, a need exposed during Covid

Appendix A provides an overview of a documentary film Members may want to consider as a stimulus for discussion of senior issues, including senior mental health.

Recommendations to Member Associations are : that Members:

- a. Familiarize members with and keep abreast of Power of Attorney Legislation
- b. Determine if their jurisdiction has an independent seniors' advocate/ombudsperson and, if so, familiarize members with their role and, if not, promote the naming of one.
- c. Advocate for the high dose flu vaccine if it is not available in your jurisdiction through Medicare.

On the recommendation of the committee, a letter was sent to the National Seniors Council advising that ACER-CART is ready to engage and participate in contributing to the well-being of all seniors.

The Canadian Institute for Health Information, CIHIL, has been releasing, *Common Challenges, Shared Priorities*, a report on the bilateral health accords in May. The *Canada Health Act Annual Report*, publication date undetermined, provides details by jurisdiction. Members are encouraged to examine past reports, as referenced in a webpage posting, and regularly search for and check for the latest reports to remain current with progress in their respective jurisdictions.

While the federal government provides funding and some framework, it is the provinces and territories that make decisions on how and where health dollars are spent. A recent trend has been to sign bilateral agreements on a variety of matters. The mandate letter of the federal Minister of Health indicates the same for pharmacare. In response to questions regarding the federal budget and the agreement with the NDP relative to pharmacare Finance Minister Freeland noted the need to reach agreement with many parties with varied interests and approaches. It is, therefore, incumbent that each Member organization be actively aware of and engaged as the federal government develops dental and pharmacare plans and provides standards and guidelines for Long Term Care.

Looking forward reminds us to consider what has been achieved, or partially achieved, in recent yearsthe naming of Ministers with responsibility for seniors, movement on pharmacare, naming of senior advocates. Covid has led to the expectation of significant developments relative to Long Term Care. Bilateral agreements relative to Long Term Care Funding have been and are being made. National standards are under consideration. Long Term Care legislation is under consideration in some jurisdictions and is a matter for attention in the coming year.

Respectfully submitted

Margaret Urquhart