

## NDP Responds

Note: We have yet to release our full platform but here are the answers to date outlining our commitments.

## **Arthritis Consumer Experts**

Will your government increase funding to the Canadian Health Transfer to address higher arthritis healthcare costs associated with the elderly population?

**NDP Response:** New Democrats are strongly committed to rejuvenating the relationship between the federal government, provinces and territories in order to provide Canadians with the health care they need. Respecting provincial roles, we will lead strategies to fill gaps left by the *Canada Health Act* and make public health care more sustainable over the long term.

The NDP will offset Stephen Harper's reckless, unilateral cuts to the health transfer that threaten our system's stability by sucking billions of federal dollars out of our future health services.

With respect to seniors care, a New Democratic government will invest \$1.8 billion over four years to help provinces provide stronger home care, more nursing home beds and better palliative end-of-life care. This funding, which is part of our plan to reverse Stephen Harper's health cuts, will:

- Expand comprehensive home care services to 41,000 more seniors;
- Help provinces build 5,000 more nursing home beds; and
- Establish a \$30 million palliative care innovation fund to help provinces improve access to end-of-life resources, services and support.

A New Democratic government will work closely with provinces and territories, respecting their role in health care delivery, to target these much-needed resources to areas each province identifies as a priority.

Does your party think standardized model of arthritis care is necessary? If so, what should the key components of this model be?

**NDP Response:** As you have noted, the responsibility for the delivery of health care services for arthritis patients lies with the provinces and territories. That said, the New Democratic Party – unlike the Harper Conservatives – recognizes that the federal government has a pivotal leadership responsibility to ensure all Canadians have equitable access to quality health care, irrespective of where they live or what their financial status may be.

New Democrats have a vision of a modern, well-funded public health care system that puts patients first, providing integrated team-based care for Canadians in their communities across the country.

Unfortunately, there are still gaps and variations across the country in accessing the appropriate arthritis treatment at the appropriate time, pointing to the need for a higher level of co-ordination nationally. A 'standard model of arthritis care' appears to be a promising tool in building this national capacity.

Given the complexity and changing nature of arthritic conditions, no single model of care for arthritis is practical, of course. However, in assessing and mapping an arthritis patient's negotiation through the health system and identifying and responding to gaps, the 'standardized model of care' concept holds promise. The extensive groundwork provided in the Arthritis Alliance of Canada's *Pan-Canadian Approach to Inflammatory Arthritis Models of Care* speaks to the essential elements required in such an approach.

A New Democratic government will examine the potential of a standardized model of arthritis care further and engage the arthritis community in exploring the possible role of the federal government in this context.

An NDP government will, meanwhile, be strengthening our health care system on several fronts with changes that will benefit arthritis patients now and enhance a national standard model of arthritis care in the future.

## These improvements include:

- providing \$2.6 billion in new federal funding focused on universal public drug coverage, along with \$80 million in dedicated funding to improve provincial-federal capacity for drug reviews, listing, joint pricing negotiations and improving safety by reducing inappropriate prescribing;
- investing \$300 million to support clinic construction and a further \$200 million to create recruitment grants to complement successful provincial programs helping to connect health professionals with Canadians who don't have timely access to a family doctor, improving the focus on prevention, screening, chronic disease care and early detection so health concerns are caught earlier when they are more easily treated;
- devoting \$1.8 billion over four years to help provinces improve seniors care, including stronger home care, more nursing home beds and better palliative end-of-life care, working closely with provinces and territories, respecting their role in health care delivery, to target these much-needed resources to areas each province identifies as a priority; and
- investing \$1.3 billion to expand EI sickness benefits from 15 weeks to 45 weeks and \$200 million annually to expand the definition of who may access compassionate care benefits to include non-terminal illnesses, increasing the number of Canadians who would qualify for compassionate care benefits.

A New Democratic government will also make it a priority to re-energize the search for a pan-Canadian Health Human Resources Plan, which is currently stalled after a decade without federal leadership under the Harper Conservatives. It is critical to head off the impending crisis of inaccessibility to health professionals specializing in arthritis treatment, compounded by our aging population. Provinces and territories continue, on their own, to collaborate to an extent, but the lack of federal leadership in meeting these challenges is undermining the development of an effective pan-Canadian HHR strategy.

New Democrats will also revive efforts to supplement HHR initiatives within Canada by restoring the \$30 million in unspent funding for the Foreign Credential Recognition Program and offering grants to professional bodies to develop a harmonized national standard for credential recognition, with a single point of contact.



## How will your government participate in the development of a national pharmacare program that will ensure Canadians have equitable and consistent access to medically necessary medications?

**NDP Response:** The NDP will work in consultation with provinces and territories toward a plan to support universal comprehensive public drug coverage for all Canadians, regardless of where they live or where they work. Our goal is that Canadians will have access to the prescription medicines they need at little or no cost.

We will work to achieve this by delivering \$2.6 billion in new federal funding focused on universal public drug coverage, to be phased in over the next four years.

We will work with provinces and territories based on the following key principles:

- Work to ensure every Canadian, regardless of age or health condition, will be included;
- Reduce prescription drug prices through proven, evidence-based policies;
- Improve public drug coverage in every province.

This commitment does not depend on matching funds from provinces.

The NDP will work *with* provinces, pool our resources and leverage our combined strength so that together we can:

- Negotiate lower drug prices that are more in line with other developed countries;
- Bulk purchase prescription drugs at better prices; and
- Streamline the drug review and listing process, reducing duplication and overhead costs for the provincial and federal governments.

By partnering with provinces on these initiatives and building on successful provincial initiatives like the Pan-Canadian Pharmaceutical Alliance, we can drive down drug costs by an average of 30 per cent, getting much better value for public money. This has the potential to translate into \$3 billion in annual savings for provinces, which can be re-invested into improved public drug coverage.

To support this partnership, we will, in addition, dedicate \$80 million over four years to improve provincial-federal capacity for drug reviews, listing, joint pricing negotiations and improving safety by reducing inappropriate prescribing.

What will your government do to improve the healthcare of Aboriginal Canadians living with arthritis?

**NDP Response:** A New Democratic government is committed to making significant progress in raising the standard of Aboriginal health in Canada.

The health status of Aboriginal Canadians – in many categories in addition to arthritis – is at the bottom end of the health scale and will continue to languish there under Conservative rule. A New Democratic government will work in partnership with Aboriginal communities and leadership to start closing the gap in health outcomes.

First Nations communities are still handcuffed in dealing with intolerable conditions by the punitive 2% cap on annual funding increases for programs and services unilaterally imposed by the previous Liberal government. We will eliminate this cap. A New Democratic government's nation-to-nation approach will enable the collaborative development of practical, community-based strategies to deal with poverty and its health consequences.



According to Public Health Agency of Canada estimates, the arthritis rates among First Nations adults living both on-reserve and off-reserve and for Metis adults is 1.3 to 1.6 times higher than for non-Indigenous Canadians. Although we know that arthritis numbers are higher, an accurate survey of Aboriginal Canadians living on-reserve is not available.

A New Democratic government will work on a nation-to-nation basis with First Nations and within that framework we will promote the collection of survey data on the extent and nature of arthritis today in on-reserve First Nations populations. We will move to integrate such data into inter-governmental discussions toward improving the health status of First Nations, Inuit and Métis Canadians.

Education, prevention and early detection are key in addressing the challenges of arthritis in Aboriginal populations, as in any other. A New Democratic government will promote arthritis screening and care, in a manner respectful of the cultural competency issues highlighted in the Health Council of Canada's *Empathy, Dignity and Respect* report. We will make every effort to ensure the trust and openness necessary for the successful implementation of timely screening and treatment programs for arthritis. This will apply equally to on-reserve and urban Aboriginal communities where we will be providing additional, focused health funding.

A New Democratic government will strive to improve the delivery of federal health services in areas under our jurisdiction and will engage Aboriginal partners along with other levels of government as we address the social determinants of health.

