















VIA EMAIL

August 27, 2020

The Rt. Hon. Justin Trudeau, P.C., M.P. Office of the Prime Minister 80 Wellington Street Ottawa, ON, K1A 0A6

Re: Recommendations for Canada's long-term recovery plan

Dear Prime Minister Trudeau,

We would like first to thank and commend you for your leadership throughout this pandemic. Your government's efforts have helped many people in Canada during this unprecedented time and have prevented Canada from facing outcomes similar to those seen in other countries experiencing significant pandemic-related hardship and suffering.

We are writing to you with **recommendations as you develop a plan for Canada's long-term recovery and the upcoming Speech from the Throne** on September 23rd.

The COVID-19 pandemic has further exposed and amplified many healthcare shortfalls in Canada such as care for older adults and mental health-care. Added to that, the economic fallout is impacting employment, housing, and access to education. These social determinants of health contribute to and perpetuate inequality, which we see the pandemic has already exacerbated for vulnerable groups. Action is needed now to address these challenges and improve the health-care system to ensure Canada can chart a path toward an equitable economic recovery.

To establish a foundation for a stronger middle class, Canada must invest in a healthier and fairer society by addressing health-care system gaps that were unmasked by COVID-19. We firmly believe that the measures we are recommending below are critical and should be part of your government's long-term recovery plan:

- 1. Ensure pandemic emergency preparedness
- 2. Invest in virtual care to support vulnerable groups
- 3. Improve supports for Canada's aging population
- 4. Strengthen Canada's National Anti-Racism Strategy
- 5. Improve access to primary care
- 6. Implement a universal single-payer pharmacare program
- 7. Increase mental health funding for health-care professionals

We know the months ahead will be challenging and that COVID-19 is far from over. As a nation, we have an opportunity now, with the lessons from COVID-19 still unfolding, to bring about essential transformations to our health-care system and create a safer and more equitable society.

1. Ensure pandemic emergency preparedness

We commend you for your work with the provinces and territories to deliver the \$19 billion Safe Restart Agreement as it will help, in the next six to eight months, to increase measures to protect frontline health-care workers and increase testing and contact tracing to protect Canadians against future outbreaks. Moving forward, as you develop a plan for Canada's long-term recovery, we strongly recommend the focus remains in fighting the pandemic. Beyond the six to eight months rollout of the Safe Restart Agreement, it is critical that a long-term recovery plan includes

provisions to ensure a consistent and reliable availability of personal protective equipment (PPE) and large-scale capacity to conduct viral testing and contact tracing.

2.Invest in virtual care to support vulnerable groups

The sudden acceleration in virtual care from home is a silver lining of the pandemic as it has enabled increased access to care, especially for many vulnerable groups. While barriers still exist, the role of virtual care should continue to be dramatically scaled up after COVID-19 and Canada must be cautious not to move backwards. Even before the pandemic, Canadians supported virtual care tools. In 2018, a study found that two out of three people would use virtual care options if available. During the pandemic, 91% of Canadians who used virtual care reported being satisfied.

We welcome your government's \$240 million investment in virtual health-care and we encourage that a focus be given to deploying technology and ensuring health human resources receive appropriate training in culturally competent virtual care. We also strongly recommend accelerating the current 2030 target to ensure every person in Canada has access to reliable, high-speed internet access, especially for those living in rural, remote, northern and Indigenous communities.

3.Improve supports for Canada's aging population

Develop pan-Canadian standards for the long-term care sector

The pandemic has exposed our lack of preparation for managing infectious diseases anywhere, especially in the long-term care sector. The result is while just 20% of COVID-19 cases in Canada are in long-term care settings, they account for 80% of deaths — the worst outcome globally. Moreover, with no national standards for long-term care, there are many variations across Canada in the availability and quality of service. We recommend that you lead the development of pan-Canadian standards for equal access, consistent quality, and necessary staffing, training and protocols for the long-term care sector, so it can be delivered safely in home, community, and institutional settings, with proper accountability measures.

Meet the health-care needs of our aging population

Population aging will drive 20% of increases in health-care spending over the next years, which amounts to an additional \$93 billion in spending. When More funding will be needed to cover the federal share of health-care costs to meet the needs of older adults. This is supported by 88% of Canadians who believe new federal funding measures are necessary. That is why we are calling on the federal government to address the rising costs of population aging by introducing a demographic top-up to the Canada Health Transfer. This would enhance the ability of provinces and territories to meet the needs of Canada's older adults and invest in long-term care, palliative care, and community and home care.

4.Strengthen Canada's National Anti-Racism Strategy

Anti-Black racism exists in social structures across Canada. Longstanding, negative impacts of these structural determinants of health have created and continue to reinforce serious health and social inequities for racialized communities in Canada. The absence of race and ethnicity health-related data in Canada prevents identification of further gaps in care and health outcomes. But where these statistics are collected, the COVID-19 pandemic has exploited age-old disparities and led to a stark over-representation of Black people among its victims. We are calling for enhanced collection and analysis of race and ethnicity data as well as providing more funding under Canada's National Anti-Racism Strategy to address identified health disparities and combat racism via community-led projects.

5. Improve access to primary care

Primary care is the backbone of our health-care system. However, according to a 2019 Statistics Canada survey^{vi}, almost five million Canadians do not have a regular health care provider. Strengthening primary care through a teambased, interprofessional approach is integral to improving the health of all people living in Canada and the effectiveness of health service delivery. We recommend creating a one-time fund of \$1.2 billion over four years to

expand the establishment of primary care teams in each province and territory, with a special focus in remote and underserved communities, based on the Patient's Medical Home vision^{vii}.

6. Implement a universal single-payer pharmacare program

People across Canada, especially those who are vulnerable, require affordable access to prescription medications that are vital for preventing, treating and curing diseases, reducing hospitalization and improving quality of life. Unfortunately, more than 1 in 5 Canadians reported not taking medication because of cost concerns, which can lead to exacerbation of illness and additional health-care costs. We recommend a comprehensive, universal, public system offering affordable medication coverage that ensures access based on need, not the ability to pay.

7.Increase mental health funding for health-care professionals

During the first wave of COVID-19, 47% of health-care workers reported the need for psychological support. They described feeling anxious, unsafe, overwhelmed, helpless, sleep-deprived and discouraged. Even before COVID-19, nurses, for instance, were suffering from high rates of fatigue and mental health issues, including PTSD. Eurthermore, health-care workers are at high risk for significant work-related stress that will persist long after the pandemic due to the backlog of delayed care. Immediate long-term investment in multifaceted mental health supports for health-care professionals is needed.

We look forward to continuing to work with you and your caucus colleagues on transforming the health of people in Canada and the health system.

Sincerely,

Tim Guest, M.B.A., B.Sc.N., RN President

Canadian Nurses Association (CNA) president@cna-aiic.ca

Tracy Thiele, RPN, BScPN, MN,

PhD(c) President

Canadian Federation of Mental Health

Nurses (CFMHN) tthiele@wrha.mb.ca

La fallino

E. Ann Collins, BSc, MD

President

Canadian Medical Association (CMA)

Ann.collins@cma.ca

Miranda ferrier

Miranda Ferrier

President Canadian Support Workers Association

(CANSWA)

mferrier@opswa.com

gellert

Lori Schindel Martin, RN, PhD,

GNC(C)

President

Canadian Gerontological Nursing

Association (CGNA)

lori.schindelmartin@ryerson.ca

or. Cheryl Cusack, RN PhD Digitally signed by Dr. Cheryl Cusack, RN PhD cn=Dr. Cheryl Cusack, RN PhD, ou President, o= Community Health Nurses of Canada, email= president@chnc.oa Date: 2020, 08.20 13:55:54 CDT

Dr. Cheryl L. Cusack RN, PhD

President

Community Health Nurses of Canada (CHNC)

president@chnc.ca

Lenora Brace, MN, NP

President

Nurse Practitioner Association of

Canada (NPAC)

president@npac-aiipc.org

CC.:

Hon. Chrystia Freeland, Minister of Finance

Hon. Patty Hajdu, Minister of Health

Hon. Deb Schulte, Minister of Seniors

Hon. Navdeep Bains, Minister of Innovation, Science and Industry

Ian Shugart, Clerk of the Privy Council and Secretary to Cabinet

Dr. Stephen Lucas, Deputy Minister of Health

Dr. Theresa Tam, Chief Public Health Officer of Canada

Endnotes

i Medisys Health Group, Vivien Brown. (2019). How Virtual Care is Reshaping the Future of Canadian Benefits Programs. https://blog.medisys.ca/virtual-care-canadian-healthcare

ii Canadian Medical Association. (2020). CMA Pre-Budget Submission. https://policybase.cma.ca/en/viewer?file=%2fdocuments%2fBriefPDF%2fBR2020-12.pdf#phrase=false

iii National Institute on Ageing. (2020). Enabling the Future Provision of Long-Term Care in Canada. https://static1.squarespace.com/static/5c2fa7b03917eed9b5a436d8/t/5d9de15a38dca21e46009548/1570627931078/ Enabling+the+Future+Provision+of+Long-Term+Care+in+Canada.pdf

iv Conference Board of Canada. (2018). Meeting the Care needs of Canada's Aging Population. https://www.cma.ca/sites/default/files/pdf/Media-Releases/Conference%20Board%20of%20Canada%20-%20Meeting%20the%20Care%20Needs%20of%20Canada's%20Aging%20Population.PDF

v Ipsos. (2018). Just Half of Canadians Confident the Healthcare System Can Meet the Needs of Seniors. https://www.ipsos.com/en-ca/news-polls/Canadian-Medical-Association-Seniors-July-17-2018 vi 2019 Statistics Canada's Canadian Community Health Survey (CCHS)

vii College of Family Physicians of Canada. A new vision for Canada: Family Practice—The Patient's Medical Home 2019. Mississauga, ON: College of Family Physicians of Canada; 2019.

viii Niagara this Week. (2020). Canadian health workers on COVID-19 front line say they need mental health support, poll indicates. https://www.niagarathisweek.com/news-story/9954334-canadian-health-workers-on-covid-19-front-line-say-they-need-mental-health-support-poll-indicates/

ix Canadian Federation of Nurses Unions. (2020). Mental Disorder Symptoms Among Nurses in Canada. https://nursesunions.ca/wp-content/uploads/2020/06/OSI-REPORT_final.pdf