The need for accountability and transparency

The creation of an independent council to inform Canadians on health care matters while promoting accountability and transparency was among the central recommendations of the Romanow Commission on the Future of Health Care in Canada (November 2002).

In September of 2003 the Health Council of Canada was established by the Prime Minister and the Premiers in their Accord on Health Care Renewal. Its role was enhanced in the Ten Year Plan for health care that was agreed to in September 2004.

The Council’s primary role is to report on the implementation of the initiatives listed in the 2003 First Ministers’ Health Accord. In describing its mandate in its maiden report to Canadians, Health Care Renewal: Accelerating Change (January 2005), the Council emphasized its unique role, reporting independently to Canadians on health care renewal progress and system performance.

Health Council Chair, Michael Decter, has said the Council takes its independent role seriously and will exercise it by speaking out constructively on the issues and needs facing Canada’s health care system.

The Province of Quebec, while not a member, has agreed to collaborate with the Health Council of Canada. The Province of Alberta is also not a member.

The 2003 First Ministers’ Health Accord

In September 2003 the Prime Minister and Premiers stated that the Accord on Health Care Renewal was a “covenant” to ensure that:

- All Canadians have timely access to health services on the basis of need, not ability to pay, regardless of where they live in Canada.
- The services are of high quality, effective, patient-centred and safe.
- The health care system is sustainable and affordable.

The ultimate purpose of the Accord was to ensure that Canadians see their health care system as efficient, responsive and adapting to changing needs.

The establishment of the Health Council of Canada was another key element of the Accord. It was determined that the Council would be made up of representatives of federal, provincial and territorial governments and leading health care experts to assess system performance and progress towards renewal.

“There is a need for mechanisms to ensure accountability at all levels of government... for the principles, values and objectives of Canada’s health care system.”

Ecumenical Health Care Network
Submission to the Senate Committee on Social Affairs, Science and Technology
October 2001
Ecumenical Health Care Network (EHCN)

Perspective

The EHCN welcomes the establishment of the Health Council of Canada but is concerned that the council’s mandate may not achieve the broader public accountability that is essential to strengthening Canada’s public health care system.

- The Council needs to establish common indicators and report on the performance of the health care system, not simply the implementation of the 2003 Health Accord.

- The Council needs to be able to provide advice on critical health issues, and assess health care renewal options with the aim of promoting a public, not-for-profit system.

- Maintaining the independence of the council is essential – it must be seen by the public as operating at arm’s length from governments if it is to enhance transparency.

- The council should seek ongoing input and advice from the public.

- The Romanow Commission suggested that a health council could play an important role in assisting in the resolution of disputes concerning the Canada Health Act. The Health Council of Canada should be empowered and adequately funded to exercise such a role.

First Annual Report to Canadians

In January 2005 the Health Council, in its first annual report to Canadians, stated that Canada’s health care system must speed up the pace of renewal or risk losing the progress that has already been achieved.

In issuing the report, Council Chair Michael Decter warned that the way care is delivered in Canada must be transformed so it reflects the needs now and in the future. “Otherwise... there is no guarantee the plans and directions enshrined in three health accords will be delivered.”

The Council’s advice includes a call to:

1. Strengthen health human resources management to ensure an appropriate supply of health care professionals.

2. Accelerate the development of multi-disciplinary teams as the basis of primary health care reform. The council views collaborative health care delivery as being crucial to providing better care and access.

3. Immediately broaden the use of information technology – speeding up the implementation of a national electronic patient record.

4. Reduce health disparities – especially in Aboriginal communities.

This Fact Sheet is one in a set produced by the Ecumenical Health Care Network (EHCN). The Network is a project of the Commission for Justice and Peace of the Canadian Council of Churches and includes representatives from the Anglican Church of Canada, the Canadian Conference of Catholic Bishops, the Catholic Health Association of Canada, the Evangelical Lutheran Church in Canada, The Presbyterian Church in Canada, the Salvation Army, and the United Church of Canada.

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