

Bill C-277, An Act providing for the development of a framework on palliative care in Canada



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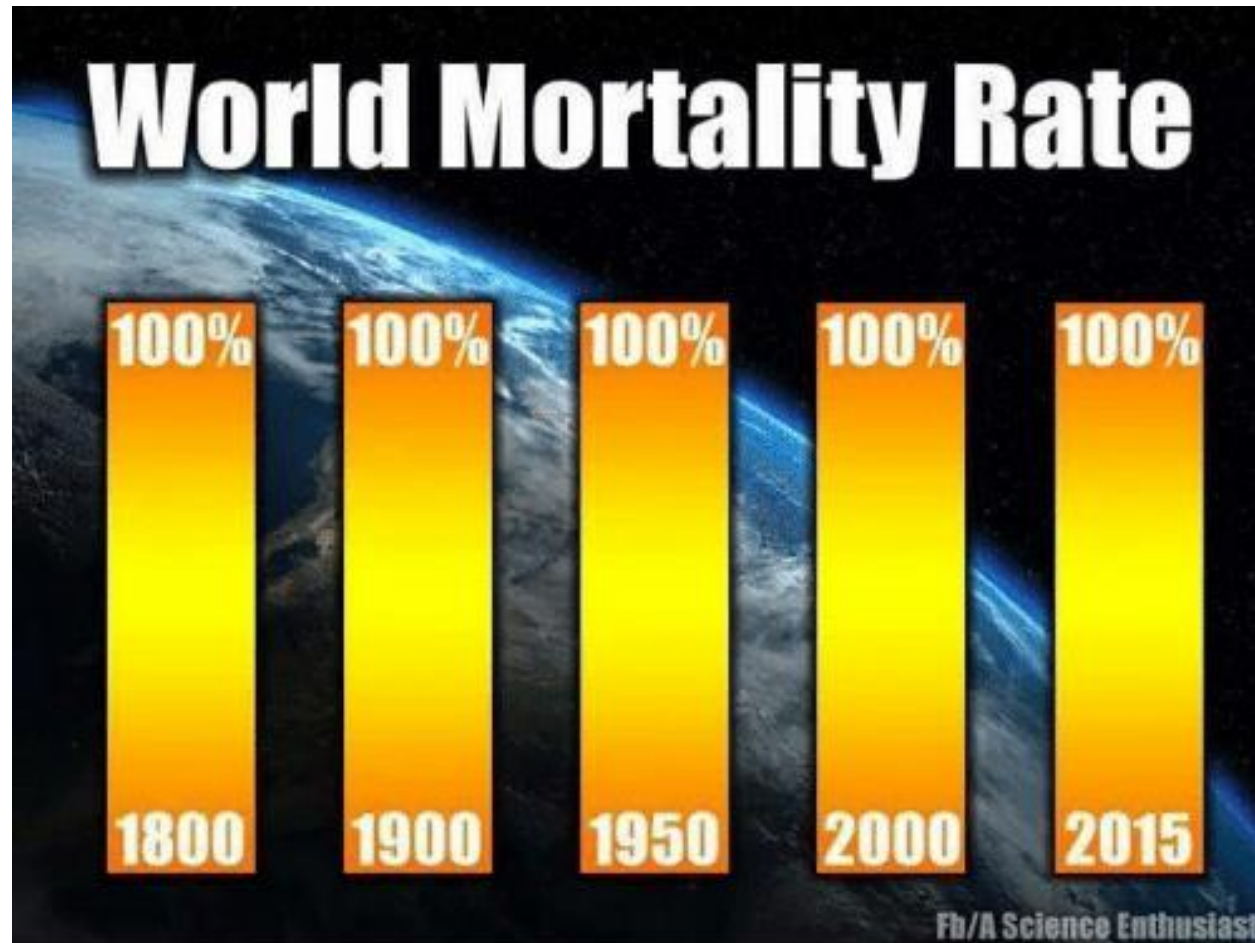
Oct. 19, 2017

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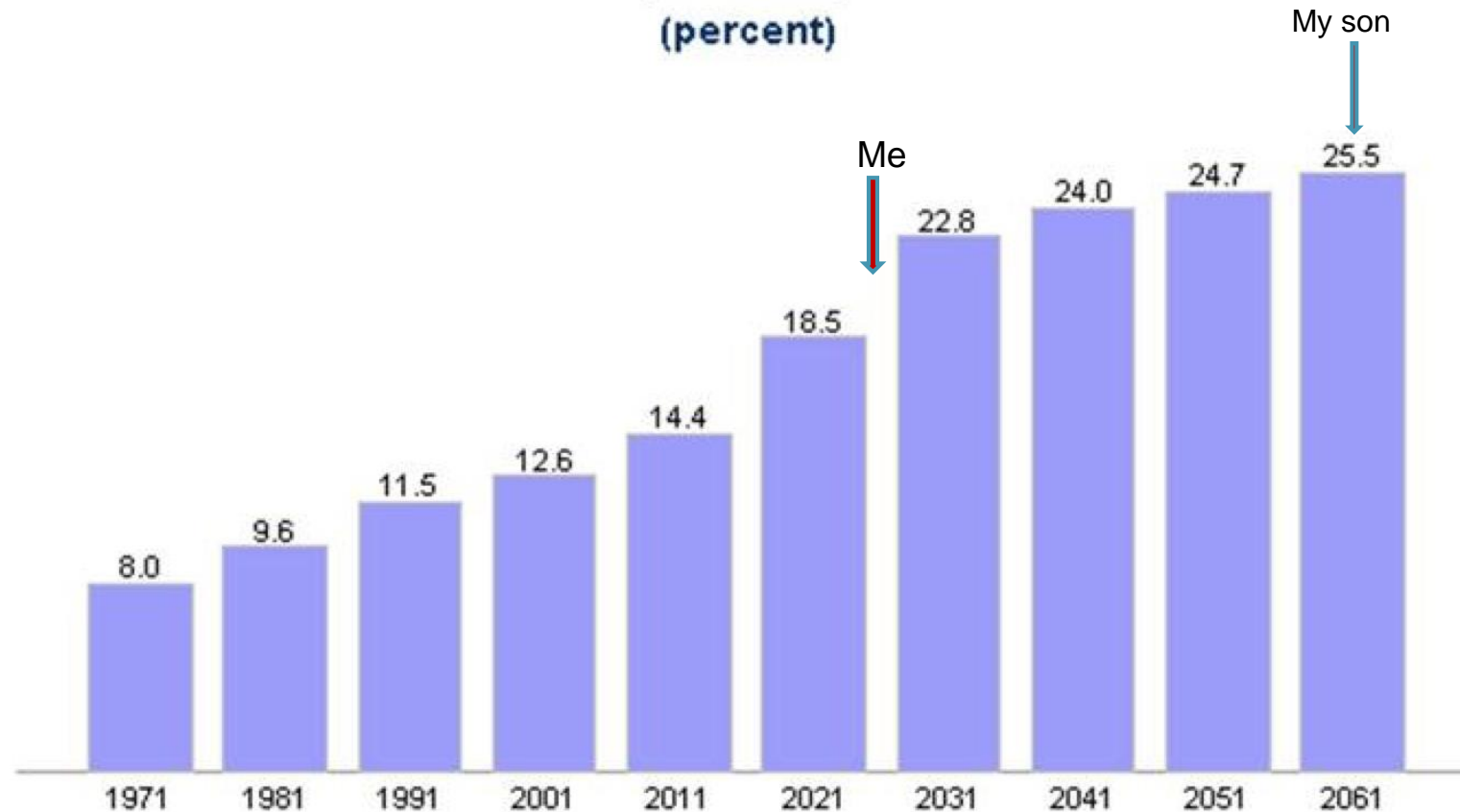
- ▶ The Canadian Society of Palliative Care Physicians recommends the **ACCEPTANCE** of Bill C-277

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Population 65 years and over, Canada, Historical (1971-2011) and Projected (2012-2061)
(percent)



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- ▶ Current Gaps - professional
 - ▶ Human resources
 - ▶ Skilled providers
 - ▶ Aging providers
- ▶ Current Gaps – public
 - ▶ Access
 - ▶ Higher complexity
 - ▶ Higher numbers requiring care
 - ▶ Lower numbers of care providers

Information Gaps

- ▶ National indicators
- ▶ National standards
- ▶ National reporting
- ▶ National oversight

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- ▶ Medical Assistance in Dying is not a choice when there is no other choice!

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- ▶ Bill C-277 would ensure that palliative care provided by the Federal government meets the same national standard as care that is provided by the provinces and territories. Groups under federal jurisdiction are First Nations people living on reserves; Inuit; serving members of the Canadian Forces; eligible veterans; inmates in federal penitentiaries; and some groups of refugee claimants.



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- ▶ The Canada Health Act states that all Canadians should have universal, comprehensive access to care. Approval of Bill C-277 would ensure that Canada sets standards for access to quality palliative care for all for all ages (**including children**), all geographies, and all diagnoses.



Steps to ensure that all Canadians have access to high-quality palliative care

- ▶ <http://www.cspcp.ca/wp-content/uploads/2016/11/Summary-How-to-improve-palliative-care-in-Canada-FINAL-Nov-2016.pdf>
- ▶ Implement a palliative approach to care, as outlined in the national framework document *The Way Forward*. This approach is a high-quality, cost-effective service delivery model that will help Canadians with life-threatening illnesses live as fully as possible.

Cost Effectiveness of Palliative Care

A vital service with clear economic, health and social benefits:

- ▶ <http://www.cspcp.ca/wp-content/uploads/2017/02/Economics-of-Palliative-Care-Final-EN.pdf>
- ▶ The report shows that strategic investment in palliative care can:
 - ▶ Reduce the cost of delivering care (30%)
 - ▶ Free up scarce resources in acute care, such as beds in Intensive Care Units (ICUs), for patients who truly need them.
 - ▶ Improve the quality of life and quality of care of patients with serious illnesses and their families.

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- ▶ Canadian Society of Palliative Care Physicians Recommends:
- ▶ Establish a well funded secretariat and form a small nimble high level working group made up from key national organizations to start working on implementation. Focus needs to be on administrative cost containment so funds see their way to delivery of services!
- ▶ Bring in additional stakeholders when and where required to develop efficiencies, gain insights and mobilize strategies.

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- ▶ What's needed.
 - ▶ Start with what we know!
 - ▶ Collect standardized national data
 - ▶ Set, monitor and enforce national standards and indicators for palliative care in Canada. Make accreditation of healthcare services (hospitals, long-term care homes, home care services, etc.) contingent on palliative care service provision to nationally accepted standards.
 - ▶ Standardize and insist on integration of core competencies in schools of health care professionals

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- ▶ And most importantly
 - ▶ Provide the rudder to steer this ship.



Discussion

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