

## BCHC 2011 Annual Report

The BC Health Coalition works to empower our members and supporters with the resources they need to advocate for public health care in their communities.

This year is especially important for public health care advocates: it marks the 50<sup>th</sup> anniversary of Medicare. From its beginnings in Saskatchewan in 1962 to the passing of the Canada Health Act in 1984, our national health care program has come to represent some of the most important values shared by communities across the country.

Canadian Medicare governed by the five tenets of the **Canada Health Act** – universality, portability, accessibility, comprehensiveness, and public administration – ensures that care is available to all regardless of ability to pay.

This is something to be proud of. Indeed this report outlines much of the invaluable work that the BCHC has done in the past year to ensure that Medicare remains strong for another 50 years.

And while these accomplishments inspire us to remain committed to our goals and maintain optimism in the face of difficult challenges, it is also true that 2012 presents challenges that perhaps have not been seen since the fight for Medicare began.

The promoters of privatized, for-profit health care and their allies in government have a different vision. They are looking back 50 years to a time when families had to choose between putting food on the table and paying for medically necessary health care.

Patients, families community leaders and health care workers all have an important role to play in countering this vision with a positive, evidence-based agenda in the months and years ahead – and the BCHC will be there, empowering them every step of the way.

### A new federal reality

Events of the past year have signaled the growing the need for greater coordination and cooperation between public health care advocates from across Canada.

As this year's annual report goes to print, it is becoming increasingly clearer that the federal government intends to use its new majority in the House of Commons to make dramatic structural changes to federal policies and programs that go far beyond the limited mandate it received in the May 2011 general election.

This was made clear with Ottawa's surprise announcement in December 2011 that the annual increase in federal transfers to the provinces for health care will be cut by

up to 50 per cent beginning in 2016-2017. A new funding formula will tie future federal funding directly to the rate of economic growth and will eventually return the country to where it was in 2002 — with Ottawa putting little into Medicare and the federal government losing all ability to enforce the national standards that Canadians expect.

The federal government also announced that it will not be sitting down with the provinces and territories to craft meaningful national standards, and will place no restrictions on how the provinces spend the \$30 billion a year they receive in federal health transfers — effectively reducing the federal role in health care to cheque-writing.

Research in Canada and around the world continues to show that a universal health care system is the fairest and most cost-effective way to provide care. Yet ironically, all of these moves are premised on the need for “fiscal responsibility” and prudent economic management.

The BCHC has been working closely with the Canadian Health Coalition and our provincial counterparts since the federal government’s announcement and we are preparing to address this threat head-on in the coming year.

### **Toward a renewed 2014 health accord**

Now is the time for all of us make our voices heard loud and clear: Canadians treasure our universal, public health care system and want to see it expanded, not reduced.

In January of this year the BC Health Coalition helped lay the groundwork for a concerted national push for a renewed health accord when we gathered in Victoria with allies from around the province and the country during the national premiers’ meeting on health sustainability. Our message? Public health care is sustainable - it’s private care that we can’t afford and governments must invest in positive, public solutions to strengthen Medicare.

We called on the premiers to stand together to keep the federal government at the health care table and acknowledge that the provinces benefit from federal oversight and coordination in order to implement the national standards and programs we all need.

The day began with a youth action outside the meeting (see sidebar: Engaging Youth) and included a news conference and afternoon roundtable meeting on the future of Medicare.

The day ended with a packed evening town hall meeting that saw loud calls for leadership on the health accord and a demand that the provinces and federal

government work together to address growing spending on for-profit care and negotiate a new health accord that reflects Canadian values.

The BC Health Coalition is now taking a lead role in working with allies across the country to mount a broad campaign that will impel Ottawa to work with the provinces to ensure the integrity of Medicare.

We will be demanding that renewal of the health accord must be negotiated through transparent multilateral negotiations with all of the provinces and based on predictable, sustained funding with a commitment to a federally financed Canada Health Transfer equalization formula.

### Calling for public innovation and national coordination

Ottawa is also encouraging the provinces to increase private, for-profit delivery of health care under the guise of “innovation” and “cost-control.” Despite this pressure, the BCHC believes it is critical that the premiers’ Health Care Innovation Working Group announced in January build on the many positive public solutions that make Medicare stronger and avoid unaffordable for-profit care.

The BCHC and allies will be monitoring the premiers’ working groups in the year ahead and calling on the provinces to look for ways to build the capacity of public non-profit health care delivery and protect the great gains in equality, access, fairness and efficiency that are the hallmark of our public health care system.

Meaningful innovation also requires the leadership and participation of the federal government. It is the premiers’ responsibility to demand that Ottawa continue to play a central coordinating role in ensuring national care standards.

### Coming together: Regional Gathering 2012

This March the BCHC and the Kamloops Health Coalition co-hosted our “Moving Medicare 2012 Regional Gathering”. A beautiful weekend in Kamloops saw public health care supporters from around the province come together to address the issues that matter to them.

The two-day event included workshops, networking and resource sharing. Participants developed skills and strategies to take back to their communities and build our collective capacity to resist for-profit health care and strengthen our public health care system.

We were delighted to welcome BC Ombudsperson Kim Carter as the keynote speaker for this event. Ms. Carter talked about her office’s systemic investigation into seniors’ care and discussed her recent report, ***The Best of Care: Getting it Right***

***for Seniors in British Columbia (Part 2)***. This historic report provides a roadmap to improving care for seniors in our province—and the event participants agreed that it is going to take all of us to see the report through to implementation.

### Improving home and community care

The past year has been busy one for the BCHC's "Home and Community Care. Saves Money Saves Lives" campaign as we continue to demand quality and accessible health care for seniors and people with disabilities.

The BCHC played a key role in putting the Ministry of Health on the defense this year for its failure to act on key recommendations to improve care.

In November 2011, we led a delegation of seniors, family council members and care aides to deliver a message about the state of seniors' care in B.C. at the Victoria Legislature: We said that seniors deserve "grade A" care and B.C. must improve its grades.

The delegation met with Health Minister Michael de Jong and presented him with the results of our report card on the government's record to-date: one "C" and two "D"s. The grades reflected the lack of progress that the government had made to date to implement the BC Ombudsperson's recommendations to improve seniors' care.

The group made significant ground in convincing the province to improve the grades. The minister told the group that he would create a seniors advocate position. He also agreed to consider a number of measures to strengthen support for resident and family councils and improve access to information about residential care facilities.

The opposition critic for seniors and long term care also raised the poor grades in the house and voiced her support for improved access to information about residential care facilities and regular monitoring of the rights of seniors' in care.

Thousands of campaign postcards calling for full implementation of the recommendation in the Ombudsperson's Part 1 report have since been delivered to the government on behalf of concerned seniors and their families.

The BCHC also played a key role in coordinating and supporting community-based responses to the Ombudsperson's final report on seniors' care. Our campaign sent thousands of messages from individuals across B.C. to the Ministry of Health calling for action on both reports.

Communities across B.C. including Parksville, Nanaimo, Prince George and in the Lower Mainland, have organized public forums to discuss the B.C. Similar forums are planned for coastal, interior and northern communities. The public forums and public

education efforts throughout the summer will set the groundwork for a full provincial response to the report as we head into election season.

### Pushing for a seniors advocate

The BCHC has been working for a long time to see the establishment of a seniors' advocate in B.C. In response to this pressure, the Ministry of Health has agreed to create this new position.

We are now activating our provincial networks to participate in public meetings and send input to the ministry to ensure that the mandate and scope for the advocate works for seniors in B.C.

### Protecting patients from unlawful user charges

Our "Medicare: it's got us covered" campaign continues to raise awareness about the growth of for-profit health care and to mobilize public pressure to ensure the provincial government invests in our health care system and enforce our health care laws that ensure everyone can access the care they need.

Many British Columbians are now aware of Vancouver's Copeman Healthcare Centre as a result of the ongoing work of the BCHC and our push to see the facility remove its unlawful mandatory membership fees for physician care.

Copeman charges patients an up-front access fee of \$3,900 that allows for preferred access to medical practitioners working there. Most of these practitioners also bill the public health insurance plan for their services while only seeing patients who are members of the exclusive clinic.

Public outcry has mounted since the BCHC's June 2011 discovery that the provincial authority did not perform a test of access during its 2007 audit of Vancouver's Copeman Healthcare Centre.

Information obtained by the BCHC through Freedom Of Information shows that provincial auditors failed to verify Copeman's claims that there was no preferential treatment at its member-only primary care clinic. This confirms our worst suspicions: the very body that is responsible for ensuring that all B.C. residents have the kind of equal access to medical care required under our health care laws, appears unwilling or unable to protect that access.

Members of the public continue to be denied insured medical services for choosing not to pay, or being unable to pay, the Copeman Centre's annual or other fees. We have lost confidence in the ability of the province to act on complaints filed by patients to effectively enforce the **Medicare Protection Act**.

Since our discovery, over 1000 letters have been sent to Health Minister de Jong through the BCHC website demanding that provincial government enforce our health care laws calling for an independent review into the ability of provincial auditors to enforce them.

We will continue to pressure the province to act and work through other channels until businesses like Copeman are forced to abandon their unfair and unlawful practices.

### Working at the municipal level

Municipal governments can play an important role in protecting public health services in their communities – and the BCHC's Private Clinics working group continues to work with allies on municipal councils.

In 2011 we gained the support of the cities of Victoria and North Vancouver who brought forward a resolution to the Union of BC Municipalities Annual Meeting that calls on the province to stop the expansion of for-profit surgical and MRI/CT clinics.

Support for this resolution is just one of the ways that municipal officials can take a stand to protect and improve our public health care system and promote the development of a public, not-for-profit health care facilities.

The pro-public healthcare resolution will be on the agenda again at the 2013 UBCM Annual Meeting. If it passes it will send an important signal to the provincial government and the private, for-profit clinic owners who are setting up shop in B.C.

### Defending our Medicare

Promoters of for-profit health care system are determined to open Medicare up to US-style medical insurance corporations – and they are using the courts to do it.

The BCHC and our pro-Medicare partners continue to participate as intervenors in the pivotal BC Supreme Court case launched by the for-profit Cambie Surgery Centre.

Cambie is aiming to sell necessary health services to patients who can afford to pay a premium to jump the queue and open up BC to US-style health insurance. Our intervenor standing in this case will ensure the public's interest is well represented while we continue to remind the government that of its duty to mount a vigorous defense of the universal public health insurance we all rely on.

Together we will continue to stand up for what the vast majority of British Columbians, and Canadians, want: a strong, universal public system that is accessible to everyone.

### Making sure our health care isn't gambled away

The BCHC is very concerned about the effects of the proposed Canada-European Union Comprehensive Economic and Trade Agreement (CETA) in light of a new economic assessment which shows that CETA could increase the cost of public and private drug plans by as much as \$2.8 billion per year.

There is also concern that services and investment provisions in CETA may undermine the North American Free Trade Agreement's (NAFTA) already weak protections for public health care and health insurance.

Last year we began working with the Council of Canadians and others in calling on the province to stop negotiating CETA with the EU and instead carry out a transparent public assessment on CETA's potential impacts on health care.

### Focus on fundraising

BCHC's fundraising program continued to grow this year – with over 800 people now counted as donors! We always tell potential supporters that one of the strongest ways to show support for our work is to become a monthly donor.

These contributions are increasingly important for the BCHC. Even a small amount each month makes a real difference in our ability to plan and prepare for any opportunity or challenge in our work as public health care advocates.

Anyone can sign up to become a donor on our website, or contact the office to get a form.

### Volunteers: the face of BCHC in the community

Health Coalition volunteers are an invaluable resource to our organization. Volunteer work both challenges and provides real learning experiences. This year saw dozens of volunteers staffing outreach tables at festivals and parades, conferences and convention, street events and shopping malls, protest marches and seniors' meetings.

Volunteers never know who they are going to meet or what kinds of discussions they might find themselves in - but they do know that it keeps them on their toes and ready with the information and perspectives that will help engage and inspire people to get active on public health care issues.

New volunteer activities this year included "Health Care Drinks", a regular networking and community building event that brings together doctors, nurses, students, activists, union folks, lab techs and even a chiropractor or two to connect in a pub over a pint or a handshake. The inspired and creative results that have flowed from the shared interests and concerns of these people have been truly lovely to see –

wherever the event has been held – from Vancouver, to Kamloops and Victoria.

We encourage you to think about volunteering with BCHC and welcome your involvement in any way - small or large. Contact us to talk about your skills and interests. It's a great way to contribute to your community, learn new skills, make new connections and be engaged with a lively group of people.

### Voting for public health care!

The 2011 municipal elections were an important opportunity for the BCHC to show candidates that British Columbians value public health care, and to remind them that municipal governments can play a key role in protecting public health services and speak out against privatized, for-profit health care in their communities.

We developed an amazing on-line tool that allowed voters to quickly send personalized e-mails to local candidates of their choosing telling them how much they value public health care and asking them to show their support by taking our Public Health Care Champion pledge.

Over 160 municipal candidates across B.C. pledged to help strengthen and expand public health care services in their communities and were included on our list of "Public Health Care Champions" that was circulated to our supporters, the public, and media throughout B.C. prior to the November 19 election.

We will be rolling out our "Vote Public Health Care" campaign in advance of the spring 2013 provincial election and working hard to ensure that support for public health care remains a vote determining issue for all British Columbians.

### The year ahead

These are critical times for public health care advocates – and we will be faced with many challenges in the year ahead.

The federal omnibus budget bill - Bill C-38 - introduced in the spring 2012 parliamentary session, shows that we have our work cut out for us. It is hard not to conclude that the proposed amendments contained in Bill C-38 signal federal government's intent to walk away from its historic role in health care, erode Medicare as we know it and ultimately open the doors to privatized for-profit health care that most Canadians can't afford.

At the same time, we are looking forward to the opportunity of working with fair-minded people in communities across the province and the country and increasing support for our campaigns. The BCHC will be at the front lines of public health care developments in the months to come—and will be backing our demands with evidence.

Experience shows that we will make our public health care system stronger when we invest and expand on proven public solutions and in doing so we can continue to have one of the best health care systems in the world.

Alice Edge

Rachel Tutte

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BC Health Coalition