### ROMANOW CHECKLIST - HOW DID HE MEASURE UP?

Roy Romanow released his final report on the Future of Health Care in Canada. In B.C., we are making changes now to ensure a healthier future for our children. Here you will see a comparison of B.C.'s position on critical issues against what Romanow has said.

ROMANOW **FUNDING** ACCOUNTABILITY Ottawa must pay its fair share of health costs We are accountable to British Columbians X ...all provinces need stable and predictable funding ...we don't need more federal bureaucracy - National Councils or Health Commissions will only add red tape, not help patients Higher federal taxes for health care are not necessary ...the federal government should use its surplus for health care Waitlist quarantees are impractical ...we say let's not spend extra money on unrealistic or arbitrary We should stay away from user fees waitlist expectations ...we agree, user fees for insured medical services aren't the A healthy lifestyle is the best health insurance answer ...Ottawa should lead and support public health awareness and education to help people make healthier life choices We need new equipment for hospitals now ...hospitals need to replace unreliable and outdated equipment to **SERVICES** give patients the best treatment and save lives We must have enough nurses and doctors ...we need a national plan and more money for training and **RFFORM** recruiting more nurses and doctors The sustainability of health care is at grave risk Mental health services need funding ...we need more money, and we need to change the way we do ...Ottawa can help fund quality mental health programs in communities to prevent people from falling through the cracks things to make the system sustainable The private sector has a role to play in public health care Support is needed for Aboriginal health care X ...we say new partnerships can improve care and access and ...Ottawa must support our efforts to provide aboriginal people lower costs at the same time with more responsive health services The current Canada Health Act says it all Rural areas need better access to care × ... we say adding new red tape is unnecessary when we've got five ...Ottawa must support innovations that link medical services to give people better care and access wherever they live solid principles to guide us already Pharmacare costs are too high and growing too fast ...we need Ottawa to help us find new approaches that address

rising drug costs so patients have access to needed medication

### B.C. is taking action...

#### We have:

- concluded three-year pay-raise deals to attract and retain nurses and doctors – our nurses and doctors are among the highest paid in the Canada
- added 1,266 new nursing training spaces and set up satellite medical training schools in Prince George and Victoria to almost double the number of doctors trained
- provided \$30 million to enhance the B.C. ambulance service with new defibrillators in every ambulance in B.C., and we have increased education and training for paramedics
- funded new CT scans and MRI machines in Nanaimo, Kamloops, Kelowna, Prince George and North Vancouver and new kidney dialysis units around the province
- set new standards of public safety for our drinking water, seniors facilities and health-care professionals
- streamlined our health system from 52 local authorities to six health authorities
- set performance and service standards for health care
- implemented a \$263 million mental health plan with new care homes in Kamloops, Prince George and Victoria, and more to come
- identified measurable aboriginal health-care goals
- \* attacked tobacco use through a major awareness program

# Where Ottawa can help...

## We need money urgently from Ottawa for:

- new seniors care facilities that offer more independence and choice
- new equipment so that hospitals will have the tools they need to help patients, and that sometimes can mean the difference between life and death

## We need ongoing funding from Ottawa for:

- training nurses, doctors and health professionals
- new approaches to chronic illnesses like diabetes, asthma, congestive heart failure and depression
- research for innovations in health care and service delivery