

## **Launch of the Conversation on Health**

Premier Gordon Campbell

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### *Check against delivery*

There is no question that we all value British Columbia's health services. The Canada Health Act creates one of the most important social frameworks that we have in the country. When it was passed in 1984 it represented Canadians' commitment to one another and it reflected the progress that had been made since 1947, when Tommy Douglas first introduced public health care in Canada. It reinforced the public health initiatives that had been introduced in British Columbia: the hospital insurance program and B.C. medical plan, and the Medical Care Act introduced and passed by W.A.C. Bennett's government.

So much has changed in the intervening years. Each government has added new services, new technologies and new treatments. Incredible new procedures have been introduced in the intervening decades. And each year, those benefits bring new pressures and new demands.

In the last five years since 2001-02, our population has increased 4 percent. Our health costs and budgets have increased at a rate ten times faster. Those costs are continuing to go up. We have had a 4 percent population growth, but some of the most common surgeries have risen between 7 percent and, for knee replacements, 84 percent.

It's not just the increases in procedures that have driven up costs. It's big increases in pharmaceutical costs as well. Over the past decade our population has increased by half a million — about 13 percent. In that same period, our Pharmacare costs have more than doubled, from \$375 million to \$890 million.

But the health care dilemma is not just about the cost of care. It's also about the quality of care. We are working to improve patient care by improving regional health delivery, primary care, telehealth, ambulatory care and assisted living. The new 300-bed Abbotsford Regional Hospital and Cancer Centre is on track to open in 2008. The Vancouver General Hospital tower that sat empty for a decade now has 459 additional beds. The new 11-storey Academic Ambulatory Care Centre will be opened this year.

We're adding new beds at Surrey Memorial Hospital and a new state-of-the-art emergency care facility. A new 148,000-square-foot outpatient hospital to relieve pressure on Surrey Memorial is being added. We've expanded hospitals in Kamloops, Kelowna, Cranbrook, Terrace, Victoria, Prince George and Nanaimo.

The Conference Board now rates our health care system as the best in the country. B.C.'s income-sensitive Fair Pharmacare program is now widely recognized as Canada's best. We have the best immunization program. We're leading the nation in creating new nurse

and physician training positions at our universities and colleges across the province. Our cancer care has been recognized across the country both by practitioners and patients alike.

Our leading health care system is supporting a healthier population. Life expectancy in British Columbia at birth in B.C. is 81 years — higher than the Canadian average and higher than many western nations. Indeed, if British Columbia was an independent nation, our life expectancy in this province would be the second-highest of any of the nations in the world.

We're seeing improving outcomes all across the health spectrum. Mortality rates for all causes are down since 2001 — down over 18 percent for heart disease, down over 15 percent for stroke. We've more than doubled the number of MRI machines from nine to 19 since 2001. We've added ten new CT scanners, for a total of 41 in hospitals across B.C. We've increased the number of dialysis stations by over 60 percent since 2001.

But pressures on the system are continuing to increase. Within the next 25 years the number of people in B.C. over 65 will almost double. Fully 24 percent of all citizens in our province will be over 65. And it's critical for us to remember as we talk about ourselves as a society that our caregivers — doctors, nurses, physiotherapists — are also aging, are also thinking of retirement, and that requires us to have an aggressive human resource strategy to try and ensure that we have the caregivers that we require.

This translates into direct impacts on health care, as an aging population uses more health resources. Per-capita health costs skyrocket as we age. Those of us currently in our 50s use an average of about \$2,100 in health care each year. When we get to our 70s, that more than doubles to \$5,700. And if we're lucky enough to get into our 90s, we'll use about \$22,000 in health services — ten times what we used in our 50s. And we know today, with the new health care and the new qualities of health care that we can provide, many, many more people will be in their 90s ten, 20 and 30 years from now.

We all want a public health care system that will be there for us as we age but also a public health care system that will be there for our children. What can we do today to prepare for the massive increases in costs that are built into our aging population? How can we protect our fundamental health services for our children and grandchildren without having health costs inundate the other essential public services? We can improve, and we will, but we will have to do it together.

Here are some facts. We will spend over \$3.6 billion more this year in health care than was invested in the year 2000. There is a \$12.8-billion health care budget this year — over 40 percent of the entire provincial budget.

Those numbers can just roll by, so let's stop here and think of this for just a second. Health expenditures since the year 2000 are up almost 40 percent. That is about ten times what our population growth is. That's \$35 million every single day of the year, or \$1.5

million every hour. If we don't act, health spending could consume 71 percent of the provincial budget by 2017.

Challenges clearly remain. We still have pressures in our emergency rooms. That's why we're building out-patient hospitals in Surrey and Abbotsford and Vancouver. For the first time, we're training nurse practitioners, an essential new health practitioner who will help deliver fast and effective treatment in places or at times when doctors may not be available. Just this year the first class ever of nurse practitioners was graduated in British Columbia.

Expanded access to primary care services keeps people healthier and takes the pressure off our hospitals, but sustainable health services are more than about just providing care. It's also about reducing our needs for care. That is why health promotion is so important.

There is so much each of us individually can do to relieve the pressures on health care simply by living healthier lives.

How can we put new knowledge to work in all of our lives, and how can we put that new knowledge to work for the benefit of our children? These are critical questions, and it's one of the reasons why the government has launched ActNow BC initiatives: to increase wellness as an important part of reducing illness.

As the demand for services is continuing to outpace our ability to supply evermore funding for technologies, for drugs, for facilities and professionals; as we age as a society; the caregivers we depend on are aging, too. Many are planning retirement, and we have to prepare to replace them. We've doubled the numbers of doctors in training. We've added 3,000 more nurse training spaces across the province.

But it takes ten years for a student to become a doctor and four years for a nursing student to become a registered nurse. You can't create new doctors and new nurses overnight.

But you can attract more qualified doctors and nurses from other jurisdictions. Today B.C. attracts more doctors from other jurisdictions across Canada than any other province.

But we will need to train medical technologists, physiotherapists, dieticians, and many others in the health services.

Just as in the 1960s we invested millions to provide the education needs of the baby boomers, so now we face a new set of challenges. The baby boomers have become grandparents, and we must find ways to meet their health needs.

There is much that we can do and much that we can learn from one another.

We want to strengthen B.C.'s public health care system in ways that are sustainable and consistent with the Canada Health Act. We want great health care service to be there for our children and our grandchildren.

Achieving that goal requires an open, honest conversation with British Columbians – a real Conversation on Health. The Conversation on Health will be the most inclusive, exhaustive public discussion on healthcare ever in Canada. It will be a year-long provincial conversation on every facet of healthcare with one purpose in mind: to improve public health services today and to protect public health services for future generations.

This is a chance for British Columbians to ask tough questions. Indeed it's a chance to ask some of the questions that we have not been willing to face up to in the past. We will explore those questions, debate them, and search for honest answers together.

What do we mean by a system of public health care that is truly accessible, universal, portable, comprehensive, and publicly administered? How can we improve health care delivery to live up to the principles of the Canada Health Act and clearly define them by law in the province of British Columbia?

We will define each of those five principles, and we will add a sixth, the principle of sustainability, to guarantee that our public health care system does not implode for lack of innovation and action. This is important.

No one knows more about your health than you do. No one knows better the advice that they would give government about how to improve the system and sustain it in the long term than the people of British Columbia. We're going to seek ideas from all British Columbians: from our own experts, from experts around the world, from professional groups, from patients, from citizens.

This is a conversation we should take part in because it will affect all of our lives. The citizens of British Columbia pay for these services, and they deserve a direct say in how those services should work for them.

Today I am asking all British Columbians who want to be part of the conversation to get involved. Go to [www.bcconversationonhealth.ca](http://www.bcconversationonhealth.ca), or, if you prefer, call a toll-free number: 1-866-884-2055. The website and the 1-800 number will allow you to register to participate in web surveys and to receive e-newsletters, podcasts, and other updates. It allows you to submit questions and suggestions to help guide the conversation. On the website, British Columbians can join the conversation through on-line forums that are unprecedented for government; they can have real discussions about real questions, without any editing from government, so long as they follow basic rules aimed at respecting privacy and ensuring a civil debate. It's a real forum for real discussion that will invite all citizens to discuss the issues that matter to them and to put their ideas out for public discussion in a way never before done by any government in B.C. People can

suggest the questions that they think we should be asking each other, and many will be put up for discussion in web forums at the site.

On the website, people will also find lots of information about their health system and ideas for improvements we get from others, throughout the conversation.

One of the critical components of the Conversation on Health will be what we've called "regional forums", which we intend to hold in each of the 16 health delivery service areas. These forums will be comprised of residents from within each region who are willing to invest time and energy and do a little bit of homework required to contribute to the conversation.

If we have more than a hundred people that apply or register to be part of a regional forum, the participants will be selected randomly.

Travel costs to get to those regional forums will be covered by government to ensure that there are no inhibitions to people in terms of participation.

Anyone interested in putting their name forward to participate in those regional forums may register via the website or the 1-800 number. The participants will be randomly selected, as I mentioned, and they will be notified of the forum before their area is scheduled.

In addition, all MLAs will be encouraged to hold other community forums that give all citizens a chance to express their ideas and suggestions.

At a provincial congress on October 10 we will give MLAs, MPs, senators, mayors from major municipalities, and first nations leaders a chance to participate and to hear about the Conversation on Health and discuss how we can include their constituents and those that they represent.

Other regional and community forums will be held with health professionals, with patients, with first nations leaders, and with academics.

Reports will be provided from those forums on the website so that we can keep all British Columbians up to date on the discussions that are taking place.

Practitioners of traditional medicine, chiropractors, naturopaths, and other alternative therapies will also be encouraged to participate.

It may well be worthwhile to invite experts from around the world to share their advice and knowledge at an international symposium on health care renewal.

When all is said and done, we want to renew public health care delivery so it's there for our citizens today and so it's improving to be there for our citizens tomorrow.

As I mentioned earlier, we now spend \$1.5 million every hour on health care in B.C. In any given hour that goes to a wider range of services than ever before: from treatments for cancer, care for seniors, setting broken bones, and delivering babies.

In fact, on the average, there are four babies born every hour in our province. Our goal is to ensure that B.C.'s health care system is there for them, not just today when they enter the world but throughout their lives.

This conversation is about more than dollars and statistics. The measures I outlined here today are the first steps of many that will grow and respond accordingly as the conversation progresses. They're aimed at stimulating a larger Conversation on Health that goes far beyond a specific discussion between government representatives and their citizens. Our aim is to include people in this conversation in a way that touches them all over the province.

There are many people in the province that are members of book review clubs. Maybe they should review a book on health and health improvements. We've got run and gun clubs, sports clubs, recreation clubs — people across the province, all of whom we hope will engage in this discussion.

And we hope the media will engage in this discussion in a constructive way, as well. They have a long tradition of offering ideas and observations beyond the news in editorials and columns and opinion pieces. So today I invite them to join many of their colleagues who have already started this conversation in contributing to expanding British Columbians' knowledge and sense of the opportunities that health care presents for all of us.

This is an ambitious endeavour. It is a conversation about the quality of our lives and what we want for our families. It's a conversation about improving and protecting one of our most valuable public services so it's there for the future, for our children.

We all care about healthcare. We can strengthen the Canada Health Act. We can improve things and protect them for the future.

But to succeed, we will have to be open to one another's ideas. We will have to learn from one another. We will have to listen to one another. We will have to encourage different voices and new thoughts and different ideas. It is time for a constructive conversation where all British Columbians talk with one another, listen to one another, and learn from one another.

This is a conversation that we all need to have, and it's a conversation that I encourage all British Columbians to be part of.