



Health
Canada

Santé
Canada

*Your health and
safety... our priority.*

*Votre santé et votre
sécurité... notre priorité.*

HEALTH CANADA EXTERNAL CHARGING GUIDELINES

Consultations

This is one in a series of documents developed to supplement the Health Canada External Charging Policy and provide Health Canada managers with guidance on issues related to the use of external charging.

REVISED: March 2007



Prepared by:
Revenue and Costing Section
Financial Operations Directorate
Chief Financial Officer Branch
Health Canada

In consultation with the
Public Affairs, Consultations and Regions Branch and
Health Canada Committee on External Charging

Canada

Health Canada is the federal department responsible for helping Canadians maintain and improve their health. We assess the safety of drugs and many consumer products, help improve the safety of food, and provide information to Canadians to help them make healthy decisions. We provide health services to First Nations people and to Inuit communities. We work with the provinces to ensure our health care system serves the needs of Canadians.

Published by authority of the Minister of Health.

Health Canada External Fee Guidelines for Consultation
is available on Internet at the following address:

http://www.hc-sc.gc.ca/ahc-asc/finance/frais-charg/index_e.html

Également disponible en français sous le titre :

Ligne directrice sur la Consultation

This publication can be made available on request on
diskette, large print, audio-cassette and braille.

For further information or to obtain additional copies, please contact:

Publications
Health Canada
Ottawa, Ontario K1A 0K9
Tel.: (613) 954-5995
Fax: (613) 941-5366
E-Mail: info@hc-sc.gc.ca

© Her Majesty the Queen in Right of Canada, represented by the Minister of Health Canada, 2007

Please add instruction notice here. See below.

HC Pub.: 7004
Cat. : H21-293/7-2007E-PDF
ISBN : 978-0-662-46426-6

CONSULTATIONS

1. Purpose and Scope

- 1.1. This is one of a series of guidelines developed to provide Health Canada managers with guidance on issues related to the use of fees. The guidelines are intended to be applicable to most Health Canada programs, but it is the responsibility of the user to consider the specific circumstances in each case and adapt the guidance accordingly.
- 1.2. This guideline explores issues related to the consultation process required before Health Canada fixes, increases or expands the application of an external fee or increases the duration of a fee. This Guideline should be read in the context of the Health Canada External Charging Policy, related Health Canada guidelines, the Treasury Board Policy on Service Standards for External Fees and the *User Fees Act*.
- 1.3. This guideline will complement Health Canada's Policy on Public Involvement - currently being drafted (March 2007).

2. Introduction

- 2.1. Health Canada is committed to public involvement, which is integral to decision making and providing quality service.¹
- 2.2. It is the policy of the Government of Canada to pursue and to promote consultation with Canadians in the design of programs and services.²
- 2.3. Consultation is required under Section 4 of the *User Fees Act*, and would be expected by stakeholders.
- 2.4. The *Policy on Service Standards for External Fees* requires consultation with paying and non-paying stakeholders for the development of service standards associated with fees.

3. Discussion

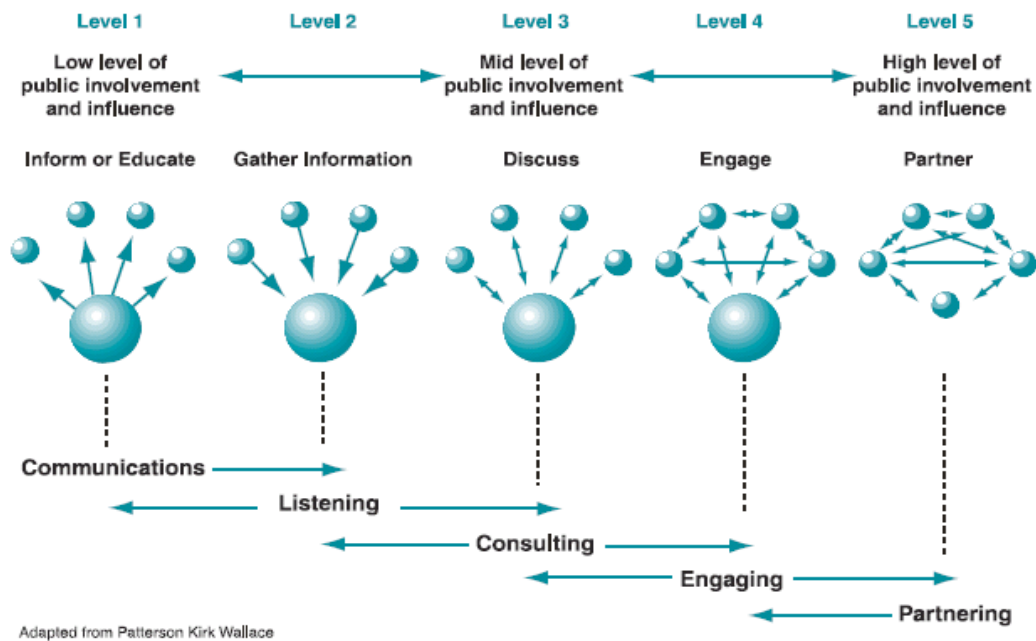
- 3.1. Section 4 of the *User Fees Act* requires that reasonable measures be taken to inform clients and other regulating authorities with a similar clientele of the user fee and the details surrounding it. This is good business practice and would be expected by stakeholders whether or not an external fee is subject to the *User Fees Act*.
- 3.2. A great deal of material is available internally and externally to guide managers in the consultation process. The purpose of this guideline is to draw the reader's attention to some of the sources available and to address some of the more pertinent issues to assist managers in carrying out consultations relevant to establishing external fees.

¹The Health Canada Policy Toolkit for Public Involvement in Decision Making – 1st principle

²Privy Council Office – – Consultation Guidelines for Managers in the Federal Public Service – December 21, 1992

4. Health Canada’s Public Involvement Continuum³

- 4.1. The delivery of health services is a complex, multi-jurisdictional responsibility. Success depends on collaboration and coordination among many partners and stakeholders, including federal, provincial and territorial governments; First Nations and Inuit organizations; the voluntary and community sector; health professionals; the private sector; and individual Canadians. Health Canada’s mission - to help the people of Canada maintain and improve their health - goes to the core of the federal role in health and highlights the collaborative nature of health service delivery in Canada.
- 4.2. The public involvement (PI) continuum illustrates the different levels of engagement and their relevant influences on decision-making. It is worth noting that consultation can, and often should, occur at different engagement levels during the decision-making process. The PI continuum provides guidance on when and how to engage stakeholders when fixing, increasing or expanding the application of an external fee.



³Health Canada’s five levels of public involvement, together with criteria for selecting each level, are highlighted in The Health Canada Policy Toolkit for Public Involvement in Decision Making.

5. Key Guiding Principles:

- 5.1. Consultation with Canadians is intrinsic to effective service to the public. It should be a first thought, not an after-thought.
- 5.2. Consultation should take place before a Department fixes, increases, expands the application of or increases the duration of a fee.
- 5.3. To be effective, consultation must be based on openness, trust, integrity, mutual respect for the legitimacy and point of view of all participants, and transparency of purpose and process.
- 5.4. The outcome of consultation should not be predetermined. Consultation should not be used to communicate decisions that have already been taken.
- 5.5. The initiative to consult may come from inside Health Canada or outside -- each should respond as constructively as it can.
- 5.6. Reasonable measures must be taken to notify stakeholders of the proposed action related to a fee to give them an opportunity to provide ideas or proposals for ways to improve the services to which the fee relates as well as provide input on service standards and fee levels.
- 5.7. Whenever possible, consultation should involve all parties who are interested or are affected by the outcome of the fee proposal.
- 5.8. Participants in a consultation should have clearly defined roles. Participants should have influence over the outcome and a stake in implementing any action agreed upon.
- 5.9. Effective consultation implies shared commitment: a clear, mutual understanding of the issues, objectives, purpose, and expectations of all parties is essential; the agenda and process should be negotiable; any constraints should be established from the outset
- 5.10. Participants should have a realistic idea of how much time a consultation is likely to take and plan for this in designing the process.
- 5.11. All participants must have timely access to relevant and easily understandable information, including how the fee is determined and the revenue and cost elements of the fee and commit themselves to sharing information.
- 5.12. Effective consultation will not always lead to agreement; however, it should lead to a better understanding of each other's positions.
- 5.13. Where consultation does lead to agreement, whenever possible, participants should hold themselves accountable for implementing the resulting recommendations.
- 5.14. Effective consultation requires follow-through. Participants are entitled to know what use is made of the views and information they provide; they should also be made aware of the impact their ideas and involvement ultimately have on decision-making related to the fee.
- 5.15. The skills required for effective consultation are: planning, listening, communicating, negotiating and consensus building. Participants should be trained and facilitators should be well versed in these skills.

6. Tools for Consultation

- 6.1. The Health Canada Policy Toolkit for Public Involvement in Decision Making provides principles, guidelines and information for the effective involvement of citizens in government decision-making on health issues. It is available at http://www.hc-sc.gc.ca/ahc-asc/pubs/public-consult/2000decision/index_e.html.
- 6.2. The Toolkit offers practical guidelines for planning, designing, implementing and evaluating a range of public involvement techniques.
- 6.3. The Toolkit also identifies a number of techniques used for involving stakeholders. It is important to match the technique used to the purpose and objective of a consultation activity.

7. Sources for Information on Consultations

7.1. Notification Sites:

- 7.1.1 Consulting With Canadians – Federal Government website www.consultingcanadians.gc.ca/
- 7.1.2 Canada Gazette – Federal Government website – www.canadagazette.gc.ca/

7.2. Resource Sites:

- 7.2.1 Public Involvement and Consultations – Health Canada website -www.hc-sc.gc.ca/ahc-asc/public-consult/index_e.html
- 7.2.3 Office of Consumer and Public Involvement – Health Canada website (HPFB) - www.hc-sc.gc.ca/ahc-asc/branch-dirgen/hpfb-dgpsa/ocpi-bpcp/index-e.html
- 7.2.4 Online Consultation Centre of Expertise – Federal Government website (PWGSC) www.pwgsc.gc.ca/onlineconsultation/text/links-e.html

7.3. International Reference Sites:

- 7.3.1 International Association for Public Participation – Australia – www.iap2.org/

8. Steps in Consultation

The Corporate Consultation Secretariat (CCS) is the corporate centre of expertise on public involvement activities at Health Canada. They can provide the advice, tools and resources required to conduct a wide range of public involvement activities. Programs are encouraged to contact the CCS at the early stages of planning the activity.

In addition, all consultation activities must be reported to the CCS and information on each activity must be posted to the Health Canada website in accordance with Treasury Board's Communication Policy. Please contact the CCS at ccs_scm@hc-sc.gc.ca, to be directed to the appropriate Consultation Advisor.

Some key points to consider when planning a public involvement activity follow:

- 8.1. Establish clear goals and objectives for the consultation activity
- 8.2. Identify stakeholders with whom consultations should take place (include paying and non-paying stakeholders).
- 8.3. Understand the stakeholder groups, including supporters and potential adversaries.
- 8.4. Consider initial consultation on the conceptual approach, followed by consultation on the detailed fee proposals.
- 8.5. Consider combining consultations where possible.
- 8.6. Decide on consultation approach (methodology/technique).
- 8.7. Plan logistics.
- 8.8. Develop consultations kit.
- 8.9. Consider bi-laterals with key stakeholders, where appropriate.
- 8.10. Determine possible fee mitigation candidates.
- 8.11. Report back to stakeholders on results of consultation process.
- 8.12. Evaluate consultations to gauge the effectiveness of the process.

9. Resolving Issues

- 9.1. If a fee is subject to the *User Fees Act*, an independent advisory panel must be established to address complaints submitted by a client regarding the user fee or change before the user fee is fixed or changed.
- 9.2. Effort should be made to resolve any issue identified during a consultation either by clarifying a position, detail or basis of decision or recommendation.
- 9.3. Consultation allows for the sharing of information and opinions, but does not always result in agreement between parties. Although input may be sought through consultations, ultimately the Minister is responsible for all decisions related to fees.
- 9.4. For further information on complaints and disputes, refer to the Guideline on Complaint Resolution and Dispute Management for External Fees.

10. Reporting

- 10.1. Clear feedback should be given to the participants on the overall findings of the consultation, how the consultations influenced decisions and the reasons behind the final decision.
- 10.2. Results on consultation efforts related to fees and associated service standards must be reported in the annual Departmental Performance Report (DPR) as per the Treasury Board Policy on Service Standards for External Fees. Reporting in the DPR related to external charging is coordinated by the Revenue and Costing Section. Information provided to the Revenue and Costing Section on consultations must be consistent with that provided to the Corporate Consultation Secretariat.
- 10.3. Reporting to the Corporate Consultation Secretariat is required.

11. References

User Fees Act

Health Canada Policy on External Charging

Guideline on Navigating the External Fee Process

Guideline on Complaint Resolution and Dispute Management for External Fees

Treasury Board Policy on Service Standards for External Fees

Health Canada Policy Toolkit for Public Involvement in Decision Making

Treasury Board's Communication Policy of the Government of Canada

Privy Council Office Consultation Guidelines for Managers in the Federal Public Service

12. Enquiries

- 12.1. Enquiries should be directed to:

Revenue and Costing Section
Chief Financial Officer Branch
rcs_src@hc-sc.gc.ca
Tel: (613) 952-9936
Fax: (613) 957-7759