

National Council and B.C. & Yukon Provincial Council

2016.04 Amend the *Canada Health Act* to Identify Palliative Care as an Insured Health Service

Whereas, High quality palliative care is neither included nor defined as an insured health service in the *Canada Health Act*; and

Whereas, Currently, there are no uniform standards for palliative care and its delivery in Canada; and

Whereas, Quality palliative care is only available to 16-30% of Canadians; and

Whereas, The World Health Organization defines that palliative care, "...provides relief from pain and other distressing symptoms, affirms life, regards dying as a normal process, intends neither to hasten nor postpone death, and integrates the psychological and spiritual aspects of patient care..."; therefore, be it

Resolved, That national council of The Catholic Women's League of Canada, in 96th annual national convention assembled, urge the federal government:

- to identify palliative care as an insured health service covered under the *Canada Health Act*
- to develop a national strategy for uniform standards and delivery of palliative care as defined by the World Health Organization; and be it further

Resolved, That the ten provincial councils urge their provincial/territorial governments to provide palliative care as an insured service covered under their provincial/territorial health act as deemed prudent/necessary.

1 **BRIEF: Amend the *Canada Health Act* to Identify Palliative Care as an**
2 **Insured Health Service**
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4 Palliative care is neither included nor defined as an insured health service in the *Canada Health Act*. Only
5 a small number of provinces have designated palliative care as a core service under their provincial health
6 plans. Other provinces may include palliative care in provincial home care or other health services but
7 this can leave funding vulnerable to budget reductions. Palliative care funding varies across Canada and is
8 dependent on where the services are provided, whether in a hospital, long-term care facility, or free-
9 standing facility. In-home palliative care may be covered by provincial or territorial health care plans as
10 part of a home care program, but what is covered varies widely (Healthwise). “Improving palliative care
11 in all settings—including outside the hospital—should result in more efficient use of healthcare dollars...”
12 (Canadian Cancer Society).
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14 The Canadian Hospice Palliative Care Association (CHPCA) reported in 2014 that, “Nearly every
15 Canadian believes that hospice palliative and end-of-life care are critical and should be available to
16 anyone in need, but most do not know what services are available—or how to access them. A
17 Harris/Decima survey reveals that while the vast majority of Canadians support hospice palliative care,
18 and integrating services as early as possible for people who are critically ill or aging, there remain many
19 barriers to connecting people with those programs and services across the country” (CHPCA Jan. 2014).
20 The February 2016 Report of the Special Joint Committee on Physician-Assisted Dying reported that
21 there was an overwhelming consensus among witnesses to the Committee that palliative care needs to be
22 improved. The report stated, “...that many Canadians do not have access to high quality palliative care
23 when they need it. All witnesses who addressed the issue agreed that Canada could and needs to do more
24 in this area...” (Parliament). “Only 16% to 30% of Canadians who die currently have access to or receive
25 tertiary or specialist hospice palliative and end-of-life care services—depending on where they live in
26 Canada” (CHPCA Oct. 2014).
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28 Section 3 of the *Canada Health Act* states, “...the primary objective of Canadian health care policy is to
29 protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate
30 reasonable access to health services without financial or other barriers” (Government of Canada 1985).
31 From 2001 to 2007 the federal government funded the Secretariat on Palliative End-of-Life Care (Health
32 Canada) with an annual budget of \$1M to \$1.5M dollars, but the Secretariat was disbanded in 2007, and the
33 government stopped work on a national palliative and end-of-life care strategy (CHPCA Oct. 2014).
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35 The World Health Organization defines palliative care, “as an approach that improves the quality of life
36 of patients and their families facing the problem associated with life-threatening illness, through the
37 prevention and relief of suffering by means of early identification and impeccable assessment and
38 treatment of pain and other problems, physical, psychosocial and spiritual. Palliative care: provides relief
39 from pain and other distressing symptoms; affirms life and regards dying as a normal process; intends
40 neither to hasten or postpone death; integrates the psychological and spiritual aspects of patient care;
41 offers a support system to help patients live as actively as possible until death; offers a support system to
42 help the family cope during the patients illness and in their own bereavement; uses a team approach to
43 address the needs of patients and their families, including bereavement counselling, if indicated; will
44 enhance quality of life, and may also positively influence the course of illness; is applicable early in the
45 course of illness, in conjunction with other therapies that are intended to prolong life, such as
46 chemotherapy or radiation therapy, and includes those investigations needed to better understand and
47 manage distressing clinical complications”(WHO).
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49 Canadians agree that palliative care is an important component of healthcare that needs to be accessible
50 and available to all. The federal government is urged to identify palliative care as an insured health
51 service covered under the *Canada Health Act* and to develop a national strategy for uniform standards and
52 delivery of palliative care as defined by the World Health Organization.

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1 **Action Plan**

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3 1. Write to the prime minister, federal minister of health and your member of parliament urging
4 them:

- 5 • to identify palliative care as an insured health service covered under the *Canada Health Act*
6 • to develop a national strategy for uniform standards and delivery of palliative care as defined by
7 the World Health Organization.

8 2. Educate members and the community at large on the importance of high quality palliative
9 care.

10 3. Monitor federal government's response to the request of this resolution.

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