SUBMISSION TO THE
FEDERAL ADVISORY PANEL ON HEALTH CARE INNOVATION

Building a strong foundation for health care innovation in Canada, now and into the future

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The Royal College is dedicated to improving the health and care of Canadians by leading in medical education, professional standards, physician competence and continuous enhancement of the health system.
Introduction

The Federal Government must be commended for putting Canada’s finances in order and its investment in research in Budget 2014. The $37-million annual increase to the three research councils (CIHR, NSERC and SSHRC) is promising movement forward.

However, CIHR’s budget has fallen 6.4% since 2009, NSERC’s has dropped by 5.7%, and SSHRC’s by 6.8%. As the Government of Canada focusses on its innovation agenda, building a strong base will be central to ongoing success.

Without a strong research system and a more in-depth and cohesive view of the health workforce, the hub of our health care system, health care innovation will continue to be incremental and piecemeal.

The projected surplus in 2015-2016 and the Federal Government’s innovation agenda provide good underpinning to build a strong foundation for health care innovation in Canada, now and into the future.

Innovation must be linked to a strong research base

Health care innovation is not only about implementing and adapting what has been done elsewhere in Canada and internationally, as stated in the Advisory Panel’s mandate. Innovation is also about introducing new ideas, devices and methods generated through research.

Current, promising and proven areas of innovation in health care will eventually become outdated. Ongoing research will ensure that innovation will continue to meet Canadians’ needs while reducing growth in health spending.

As Canada heads for a surplus budget in the next year, the time is ripe for the federal government to increase its investment in Canada’s innovation, research and discovery agendas.
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Targeted investments, such as increasing funding to the Canadian Institutes of Health Research (CIHR) to 1% of total public healthcare spending will not only put Canada on a comparable footing to other international jurisdictions, it will also help ensure that CIHR is able to retain world class health researchers and cultivate future generations of researchers and innovators.

Planning the right health workforce: the key to creating and implementing health care innovation and affordability in health care

Health care delivery is very labour intensive. In fact, health personnel costs account for more than one quarter of health care expenditures in this country. Despite the large proportion of spending on the health workforce, it is widely recognized that much more could be done to optimize its functioning.

A number of promising models of care are now being implemented across the country, including new interprofessional and collaborative approaches to patient care, novel use of technology and new health professional roles. Yet, it is widely recognized that timely access and health care spending can be greatly improved across the country.

Further, the cycle of personnel shortages and surpluses continues, the distribution and mix of health personnel remains problematic in most jurisdictions, and it is difficult to ensure that the skills and competencies of our health workforce keeps pace with developments in health care delivery and scientific discovery.

Although we are making some positive strides in the area of “health workforce science”, lack of systematic analysis and information sharing on the benefits and outcomes of new approaches to health care delivery, and poor coordination of efforts across the country perpetuate the problems experienced in every Canadian jurisdiction.

Establishing a pan-Canadian health human resources (HHR) bureau, agency or institute could support implementation of innovation in health care delivery throughout the country by providing much needed information and data on the workforce mix, and skills and factors needed to support successful implementation of new models of care and scaling up across the country.
The HHR agency would ultimately lead to a better mix and distribution of health personnel, aligned with the most efficient and effective health care delivery models.

The Agency would not encroach on provincial and territorial authority; it would support jurisdictional efforts by providing much needed evidence and data, bringing together multi-disciplinary experts to fill knowledge and information gaps.

An affordable, sustainable and fit-for-purpose health workforce can only be achieved through intelligence-informed innovative reforms\textsuperscript{iv}.

**Conclusion**

While the Advisory Panel will collect ample information and evidence about cost effective and promising areas of innovation in Canada, sustaining innovation in health care needs a strong foundation.

The Federal Government can help ensure the success of our nation’s health care innovation agenda by further bolstering research in Canada and creating an HHR agency to optimize the contribution of our health workforce, the hub of health care delivered to Canadians.

\textsuperscript{i} Research Canada. Retrieved from \url{http://www.rc-rc.ca/blog/budget-2014-research-canadas-analysis}

\textsuperscript{ii} The Panel mandate states it will: “Identify the five most promising areas of innovation in Canada and internationally that have the potential to sustainably reduce growth in health spending while leading to improvements in the quality and accessibility of care.”. Retrieved from \url{http://www.hc-sc.gc.ca/hcs-sss/innovation/terms-mandat-eng.php}


\textsuperscript{iv} Adapted from Des Gorman. Towards a sustainable and fit-for-purpose health workforce — lessons from New Zealand. MJA Open 2012; 1 Suppl 3: 32-36.