Inaugural Speech

Dr. Chris Simpson
Incoming President

August 20, 2014
My friends,

Words cannot begin to describe the emotion I feel - and my gratitude to you all - for entrusting me with this role - following a long line of presidents of the Canadian Medical Association.

Before I begin, I want to acknowledge the contributions of our President, Dr. Louis Francesccutti. Louis has served with determination, commitment, and with an altruistic spirit. He has been a supportive mentor and an effective change agent. Thank you, Louis, for your service to the CMA and to all Canadians.

I want, as well, to particularly single out our Board of Directors and its Chair, Dr. Brian Brodie. Our Board represents the very best in governance excellence – and I will look forward to their advice and guidance over the next year.

To the provincial and territorial medical associations, represented here today by their caucuses, and to all our affiliates and other partners – I have had the great privilege of getting to know you better over this past year in my president-elect role and I will meet many more of you over the next year.

J’ai eu le privilège de collaborer de près cette année avec nos associations médicales provinciales, nos affiliées et nos partenaires. Votre engagement envers notre profession et nos patients m’inspire à chaque jour.

I must say, the commitment you have all shown to our profession and to our patients inspires me every day. I am grateful to you all for your service.

To Julie, whose support has always been unwavering – I couldn’t do this without you. To my children, whose graceful acceptance of my crazy travel schedule always means so much – and they always make my time with them count….I am grateful. To my brother Rob and his wife Holly and their boys – you’ve always been there for me – a source of great consistency in my life.

And my parents. My parents taught me, through their example, about the importance of public and community service. They brought grace, dignity and nobility to their public service roles over the years, and it is they who have implanted in me whatever good is in here.

Let’s talk about our health care system.

The Commonwealth Fund recently released their report on the quality of health care systems in different countries. Canada finished next to last. Ahead only of the US. Measuring things like equity, access, quality, value for money, and healthy lives. We are next to last. The top three countries? The UK, Switzerland and Sweden.
What do these successful countries have that we don’t? Is it more private care? Well, no – they have about the same level of private health care investment that we do – about 30% of all health care spending comes from the private sector – just like us. And the US, with the most private care, is doing the worst. So that’s not it.

Looking carefully at these more successful countries, it becomes clear that they have three key factors in common: they have ambitious system improvement goals and targets, they have buy-in and leadership from doctors, and they have strong leadership from a committed federal or national government.

We know that Canadians highly value their health care system. In poll after poll, Canadians consistently identify our health care system as a defining characteristic of our nation; something to be proud of. And, to be sure, there are many great things about Canadian health care. But we continue to slip in world rankings with respect to performance. And Canadians are increasingly worried about the quality, the safety, the timeliness of care, and the sustainability of the system.

When we start to think about what we need to do, and where we need to start, it becomes clear, I think, that seniors care is the paramount health care issue of our time. And so I’d like to take some time to talk about seniors care. And I would like to make the bold assertion that if we can improve the way we care for our seniors, we will go a long way to creating a high-performing health care system.

The average Canadian life expectancy today is 81 compared to 51 at the beginning of the 20th Century. AND, once Canadians reach 65 years of age, they can expect 20 more years of life ahead of them with 17 or so in relatively good health.

As my friend Dr. Samir Sinha has said, “Aging is not a disease, it is a triumph.” And it truly is.

This new reality is transforming our society. Today, 15% of Canadians are 65 and older. But our older population will double over the next 20 years, while the 85 and older group is set to quadruple.

What does this mean for health care? Well, today, we spend almost half of all our health care dollars on seniors. Looking into the future, how can our resources possibly keep up with the silver tsunami?

In the 1960s, when Tommy Douglas and the other architects of medicare envisioned universal health care for Canadians, the average age was 27. Today it is 47. The health care landscape in 1960 was one of acute disease – so they built hospitals and made health care about hospitals.

Today, the landscape is different. We are older. Our illnesses are different. We still get acute diseases and we still need hospitals, but we also have, in great numbers,
Canadians with chronic diseases who require long-term management. Unfortunately, our health care system has not changed to meet the needs presented by this new reality. The result? Overburdened acute care hospitals – overflowing at the seams, with patients who would be better served elsewhere. Seniors with complex polymorbidities who aren’t acutely ill but are in hospitals because there is nowhere else to go. Long wait times for Canadians for nearly every non-urgent test, surgery, procedure and treatment – because the beds needed are filled with patients who don’t need to be in hospitals. Overcrowded Emergency Departments packed with people waiting for beds upstairs......around 15% of those beds being occupied by seniors waiting to go to another facility, like Long Term Care, or even waiting to go home – delayed because the Home Care Support systems are under-resourced. 3 million bed-days are used up every year in Canada by the Alternate Level of Care or ALC patients – a third of those patients have dementia. They’re in a place where they shouldn’t be. They’re getting less than optimal care. Instead of focusing on getting them back to their baseline and back to their independence, we put them in beds....because that’s what we do in hospitals......isn’t it? We put people to bed instead of putting them in a care environment that lifts them up and restores them and helps them live a dignified life. And so here they are....they’re in expensive hospital care beds that are needed by others. In hospital beds that are designed for people with different needs.

It seems crazy, doesn’t it? No one would ever design a health system like this.

By our calculation, the warehousing of seniors in hospital beds is costing $2.3 billion a year unnecessarily. A patient in a hospital bed costs the system about $1,000 a day. Long-term care costs about $130 a day. Home care about $55 a day. We believe it is time all levels of government do the math and spend smarter.

Looking across the Atlantic, we can see what some of the solutions could be. It comes down to long-range planning and strategic investment. In Denmark, for example, they have invested strategically in home care – they spend 1.16% of their GDP on home care – we spend 0.24% of our GDP on home care – and what they have achieved is remarkable. They have managed to avoid adding any new long term care beds for two decades – and have actually closed thousands of hospital beds – by investing strategically in home and community services.

So you see, the failure of our system to recognize how our country has changed – how health care is now increasingly about chronic disease management, how the health care needed by our seniors is so different from what was needed in 1960 – our failure to recognize this impacts every single Canadian family. Our failure to change to meet our seniors’ needs impacts every single component of the health care system. It affects you, it affects me, it affects your neighbours and friends, and it affects every single Canadian. Our system doesn’t deliver the quality that it should. It doesn’t deliver the timeliness that it should. And it doesn’t deliver the value for money that it should. Canadian patients deserve better. Canadian taxpayers deserve better. We all deserve better.
If we can fix seniors’ care, we will go a long way to fixing our health care system.

We need to harness the full potential of the triumph of aging.

We need a national seniors care strategy. And we need it now.

We are entering a federal election year.

So here is my challenge: To the Conservative Party of Canada; To the New Democratic Party of Canada; To the Liberal Party of Canada; To the Green Party of Canada:

Canadians are telling you that seniors’ care is of paramount importance to them. They know that if we develop the best seniors care strategy in the world, that we can have the best health care system in the world. They’re tired of excuses as to why the federal government can’t take action.

Les Canadiennes et les Canadiens vous disent que les soins des aînés sont d’une très grande importance. Ils savent que si nous mettons en place la meilleure stratégie sur les soins des aînés, nous pouvons avoir le meilleur système de santé au monde. Les Canadiennes et les Canadiens ne veulent plus d’excuses – ils veulent que le gouvernement fédéral agisse.

Show us that you are nation-builders and that you believe in a Canada that is greater than the sum of its parts.

Commit to the development of a national seniors care strategy. Tell us what that looks like – and challenge Canadians to vote for you because you have a vision for how we can transform Canada’s health care system into one that isn’t next to last in the Commonwealth Fund rankings, but instead, the best in the world.

Only 16% of Canadians who will die this year will have access to quality palliative care. How well you die depends a lot on your postal code. Tell us how you will help to improve Canadians’ access to quality palliative care.

We are one of the only G7 countries without a dementia strategy. This must be a key component of a national seniors care strategy. Tell us how you will guide us into a future that successfully helps and manages the hundreds of thousands of patients who are afflicted with this memory-robbing disease.

What could a national seniors care strategy achieve?

- Well, for starters, it could address social determinants of health including housing, transportation, and poverty reduction with appropriate government support at all levels.
• It could foster greater investment in health promotion and prevention for older Canadians.
• It could encourage all provinces to support greater provision of access to a primary care provider and to primary care including house calls.
• It could prioritize current and future investments in home, community and long-term care and supporting the informal caregivers – family members struggling to care for their aging parents at home.
• It could encourage greater investment in affordable housing services.

There are so many things we could do – so many places to get started. But we do have to get started.

Again to our elected political figures: If there is any doubt in your mind about the importance of seniors care to Canadians, then let me tell you about a recent Nanos poll that we commissioned.

• When we asked Canadians in key “swing ridings” – those won by less than 3% of the vote - if Ottawa was ready for the future health care needs of our aging population, only 23% said yes.
• Some 87% supported the need for a pan-Canadian seniors strategy.
• And, importantly, almost six in 10 said they would switch parties if their current political party failed to make seniors a priority in the next federal election campaign.

Commit to the development of a national seniors care strategy. Tell us what that looks like – and challenge Canadians to vote for you because you have a vision for how we can transform Canada’s health care system into one that is the best in the world.

And in return, here is my commitment to you – and to all Canadians:

The Canadian Medical Association will work with any government – of any political stripe – that commits to a comprehensive national seniors care strategy. We understand all the constitutional nuances that are involved – “health care is a provincial responsibility”, says the constitution – but we all know that a committed federal government is a necessary ingredient for success. Health and the building and maintenance of a healthy Canada is the responsibility of every level of government – and federal leadership has never been needed more. We’ll work with you, honestly and sincerely, giving you our very best advice, if you are willing to show the brave political leadership that is needed to get us moving forward.

To all of my colleagues, here and across the country:

Every day, we are given the great privilege of being invited into our patients’ lives. We are with patients when they are born and when they die; we provide advice and
comfort; we prevent illness and treat and manage disease. Our patients trust us and we have always taken our advocacy role very seriously. It is part of the essence of our professionalism.

But today we must also embrace our civic professionalism: our duty to Canadians collectively – to help transform our health care system into one that is truly worthy of their confidence and trust; one that provides the highest quality, safety, and value for money. One that provides timely access for all. One that embraces innovation and uses innovation to drive change. And a system that honours the great Canadian values of equity, compassion, and protection of the most vulnerable in our society.

We have a social contract with Canadians to honour. This means taking responsibility. It means embracing accountability. It means assuming a mantle of leadership and a commitment to partnerships that serve greater society. It means working relentlessly to earn and maintain the trust that Canadians have placed in us.

Nous avons un contrat social avec la population du Canada. Cela veut dire que nous devons assumer nos responsabilités. Cela veut dire que nous sommes imputables. Nous devons faire preuve de leadership et nous engager dans des partenariats qui profiteront à l'ensemble de la société. Cela veut dire de travailler sans relâche pour maintenir la confiance que les Canadiens nous ont accordée.

As we call on governments to act with political bravery, we must also show courage in our leadership. In our practices, in our communities, in our organizations, and in our partnerships with patients, agencies, other health professionals and governments, we will be honest brokers and agents for positive change. We will show our commitment to Canadians and Canadian values. We will honour our social contract. And we will keep our patients at the centre of everything we do.

Thank you. Merci.