CANADIAN ALLIANCE FOR
SUSTAINABLE HEALTH CARE

JULY 2016

A Healthy Contribution.



The Conference Board of Canada
Le Conference Board du Canada

> “Health care is both a significant component of the Canadian economy as well as an area of public policy fraught with weak information and combative observers. The Conference Board has avoided these pitfalls.”
>
> **David Walker**, President,
> West-Can Consultants



Message From the President and CEO



Health touches all Canadians. Every one of us has a relationship with the health system in one way or another. After decades of debate, significant increases in public funding, and ongoing efforts to reform services all across the country, the state of health and health care is a top concern for Canadians. An absence of clear goals, a system designed for a previous era, inadequate use of innovative technologies and modern management tools, and a misalignment with the needs of an aging population are just some of the weaknesses of the status quo.

The Canadian Alliance for Sustainable Health Care (CASHC) is the Conference Board's program of research and dialogue about health, wellness, and health care. Since 2011, CASHC has set out to examine health issues from a holistic perspective, incorporating the viewpoints of patients, practitioners, governments, and employers.

We combined our quantitative economic analysis tools and skills with our organizational performance and public policy expertise. Additionally, we utilized the Conference Board's unparalleled capacity to bring together leaders from all sectors of the health system and beyond. Our meetings, conferences, and presentations produced engaging dialogue on the health and wellness challenges faced by Canadians.

The work of CASHC is far from complete. CASHC will soon publish *A Road Map to Health System Sustainability*, which will serve as a synthesis of five years of insights. In addition, the Conference Board will be setting in motion its next generation of health research by developing a plan for priority areas from 2017 to 2021.

Daniel Muzyka
President and CEO
The Conference Board of Canada



Goals of CASHC

Five years ago, the Canadian Alliance for Sustainable Health Care (CASHC) set out to provide Canadian business leaders and policy-makers with insightful, forward-looking, quantitative analyses of the Canadian health care system and all its facets.

CASHC aims to:

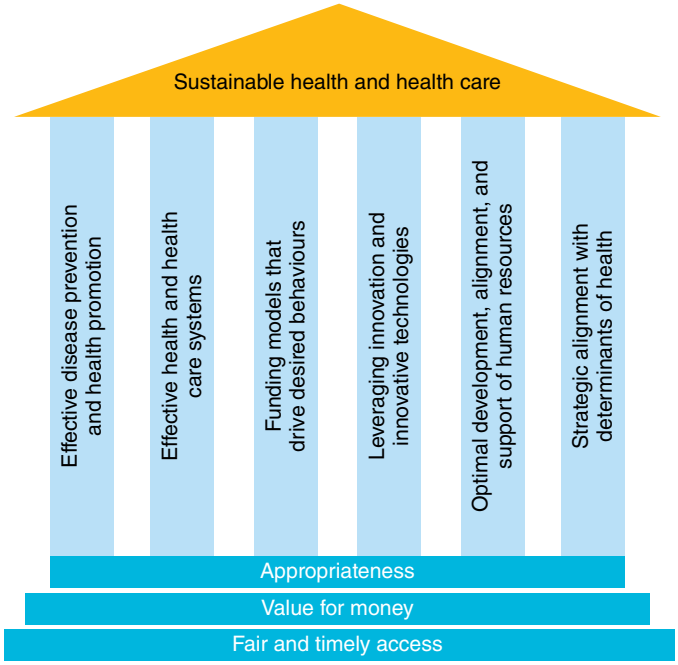
- Help Canadian leaders and the public better understand how Canada's health care system can be made sustainable, both financially and more broadly.
- Improve the functioning of the Canadian health system as a whole, as well as health and wellness practices within individual organizations.
- Help close some of the research gaps and bring value to the national discussion.

Based on these goals, CASHC set out to define, develop, and illuminate a broader view; thus, we produced the Framework for Sustainable Health and Health Care. (See Exhibit 1.) The six pillars and four guiding principles form the basis for our research, partnerships, and dialogue.



Exhibit 1

CASHC Principles of Sustainable Health Care



Source: The Conference Board of Canada.

> “CASHC has been a tremendous resource to us in the work that we do on behalf of the sport, physical activity, and recreation sector in Canada.”
>
> **Bob Elliott**, CAE, Senior Leader, Sport Matters Group



Inaugural Summit Featured Influential Speakers

André Picard, public health reporter for *The Globe and Mail*, authored *The Path to Health Care Reform: Policy and Politics* as part of his mandate as the CIBC Scholar-in-Residence in 2013. He was the Chair of the Healthy Canada conference series in 2015–16.



Philippe Couillard, the current Premier of Quebec and previously the province's Minister of Health, was a panellist at The Conference Board's 2012 Scholar in Residence Lecture: The Path to Health Care Reform—Policy and Politics.



Dr. Danielle Martin is the Vice-President of Medical Affairs and Health System Solutions at Women's College Hospital and faculty member at the University of Toronto. She was named one of the Toronto Star's "13 People to Watch" in 2013.



Fred Horne served as Alberta's Minister of Health from 2011 to 2014. A frequent speaker on health system issues in Canada and abroad, Fred is currently an adjunct professor at the School of Public Health, University of Alberta.



Our Impact

On Research

From the outset, a core priority of CASHC has been to undertake a holistic approach to all of our research studies. Understanding that health comprises much more than the formal health care system, CASHC recognizes that many of the factors affecting health and health care come from outside the system, ranging from health promotion and disease prevention to restoring health and supporting the elderly and end-of-life care. Critically, sustainable health and health care must strive to achieve optimal outcomes for current generations of Canadians without compromising the potential for future generations to meet their own health and health care needs.

When CASHC was launched, it was clear that there were three primary ways in which the research could impact health policy and practices:

- With topics that have been under-examined or even ignored, CASHC set out to fill the knowledge gaps.
- Where there were disagreements about what should be done and how to proceed, CASHC could offer fresh evidence and perspectives.
- Where there was consensus about the benefits of broad approaches, CASHC could examine the practical barriers to their implementation and subsequent improvement.

Filling Knowledge Gaps

The Conference Board's economic analysis tools allow CASHC to assess the impact of changes in health policies or practices on society and the broader economy. This unique advantage is critical to helping fill gaps in existing knowledge in topic areas such as:

Healthy active living: The groundbreaking series on healthy active living calculated the economic and fiscal impact of increasing physical activity and reducing sedentary behaviour. Even small enhancements to physical activity levels and modest reductions in sedentary behaviour showed positive impacts on the economy, government finances, and labour force productivity.

An economic growth engine: Measuring the contribution of health care spending to economic growth, employment, and government revenues showed that spending can be seen as more than a cost. Expenditures can, in fact, serve as a countercyclical force that helps lessen the impact of economic downturns.

Future care for seniors: Using unique forecasting tools, CASHC was able to assess the economic footprint of the senior-care sector and create a base-case forecast of demand for seniors.

Producing Fresh Evidence

Much of the research under CASHC to date has generated new insights on topics that have not been well-articulated or where there was debate and disagreement among health system stakeholders.

Medical tourism: In CASHC's assessment of the emotionally charged issue of medical tourism, we set out principles that can guide governments and administrators in striking a balance between opening Canada's health services to international patients and ensuring access for Canadians.

Smoking cessation: A series on smoking cessation and the workplace included the role of employers in providing for quitting smoking and the barriers they face in trying to introduce or implement effective programs.

Workplace disability management: Several reports and case studies on workplace disability management offered the perspectives of employees and supervisors on their organizations' disability management programs and provided employers with advice and guidance on how to manage absenteeism more effectively.

Breaking Down Barriers

Even where there is widespread agreement within the health care system about best policies, practices, and processes, barriers to adoption can exist. CASHC's research and dialogue set out to identify these obstacles and develop solutions to overcome them.

Primary health care: Compared with other developed countries, Canada's primary health care sector is poorly organized and inadequately supported. Interprofessional primary care teams (groups of professionals from different disciplines who work together to care for a patient population in a primary care setting) can lead to significant improvements in health and wellness for patients with chronic conditions and risk factors. The research series Improving Primary Care Through Collaboration provides guidance for optimizing interprofessional and collaborative primary care in the Canadian health care system.

> “Since health care is a mission-critical element within the workers’ compensation system, we viewed our involvement in CASHC as an opportunity to develop our understanding of the real challenges we face.”
>
> **Dennita Fitzpatrick**, Director
> Health & Extended Benefits, Workers’ Compensation Board of Nova Scotia



Top Publications

Media Coverage

1. *Ontario's Economic and Fiscal Prospects: Challenging Times Ahead*
2. *Paving the Road to High Performance: Benchmarking Provincial Health Systems*
3. *Smoking Cessation and the Workplace: Briefing 3—Benefits of Workplace Programs*
4. *Moving Ahead: The Economic Impact of Reducing Physical Inactivity and Sedentary Behaviour*

Downloads

1. *Measuring Success: A Framework for Benchmarking Health Care System Performance* (2012)
2. *The Canadian Health Care Debate: A Survey and Assessment of Key Studies* (2012)
3. *Improving Primary Health Care Through Collaboration: Briefing 1—Current Knowledge About Interprofessional Teams in Canada* (2012)
4. *Health Matters: An Economic Perspective* (2013)
5. *Home and Community Care in Canada: An Economic Footprint* (2012)

Highlights by the Numbers

Generated almost **1,600** print, broadcast, and online media stories

Hosted 10 strategic investor meetings

Obtained 180 million print, broadcast, and online media impressions (potential audience reach)

Hosted 8 public health conferences

Drew over 1,000 leaders to our conferences

Produced over **50** research reports and briefings

Published 26 online blogs and op-ed commentaries for the Conference Board's Hot Topics in Health

50 Engaged almost 50 organizations to fund our activities

Presented **28** webinars

Our Impact

On Dialogue

Using research as a basis for dialogue, CASHC helps leaders come together to discuss pressing and structural issues within the health care system, as well as health care practices within firms and organizations. The objective is to provide policy-makers and organizations with best practices for improving the Canadian health system as a whole.

To date, CASHC has hosted eight major conferences, beginning with the first Summit on Sustainable Health and Health Care in October 2012 in Toronto. This conference brought together more than 200 health care leaders and led to the publication of *The Inconvenient Truths About Canadian Health Care*, one of CASHC's most popular documents. Following that, CASHC hosted two more summits in Toronto, as well as three Western Health summits tailored specifically to the Western Canadian audience.

CASHC also partnered with the Conference Board's Scholar-in-Residence Program to produce both a lecture and a book on health care by André Picard, *The Globe and Mail*'s highly respected public health reporter.

CASHC insights extend well beyond its members and events. Over the past four years, CASHC experts have given more than two dozen presentations to industry and professional associations, private companies, not-for-profit organizations, international delegations, and academic gatherings.

On Partnerships

Partnering with other organizations in the health and wellness space has been a core value of CASHC since its inception. By developing partnerships for research, events, and communications, CASHC has been able to amplify its research and insights with well-established institutions. Some of the partnerships have included:

- 9,000 Points of Care Initiative
- B.C. Institute for Health System Transformation and Sustainability
- B.C. Personalized Medicine Initiative
- Canadian Academy of Health Sciences
- Canadian Institute for Health Research—Institute for Health Services and Policy Research
- Canadian Society of Exercise Physiology
- Centre for the Study of Living Standards
- Healthy Active Living and Obesity Research Group at the Children's Hospital of Eastern Ontario
- ParticipACTION
- Public Health Agency of Canada
- Vivo for Healthier Generations

As CASHC moves into its next phase, our commitment to strengthen these relationships and develop new collaborations, both with other institutions and with CASHC member organizations, will remain a priority.

> “The findings in *Moving Ahead: The Economic Impact of Reducing Physical Inactivity and Sedentary Behaviour* have informed some of the most important decisions made by ParticipACTION in the last year.”
>
> **Katherine Janson**, Director of Communications & Public Affairs, ParticipACTION



Research 2011–16

The following is a list of research reports produced by CASHC. To access any of the reports, go to www.conferenceboard.ca/cashc/research.



Foundational Studies

- *Inclusive Growth: A New Approach to Economic Evaluation of Health Policy* (2016)
- *Defining Health and Health Care Sustainability* (2014)
- *Health Care in Canada: An Economic Growth Engine* (two-briefing series; 2013, 2015)
- *The Inconvenient Truths About Canadian Health Care* (2012)
- *The Canadian Health Care Debate: A Survey and Assessment of Key Studies* (2012)
- *Who's Doing What in the Canadian Health System: A Selected List of Research Organizations* (2012)



Population Health

- *Moving Ahead: Healthy Active Living in Canada* (four-briefing series; 2014–15)
- *Améliorer les habitudes de vie : des retombées importantes pour la santé et l'économie du Québec* (2014)
- *Reducing the Health Care and Societal Costs of Disease: The Role of Pharmaceuticals* (2013)
- *Health Matters: An Economic Perspective* (2013)



The Functioning of the Health Care System

Organization Design, Alignment, and Performance

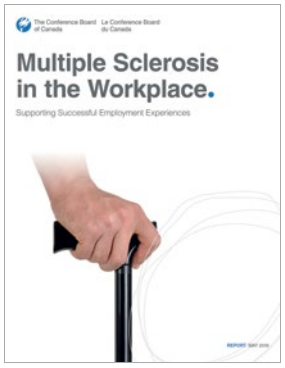
- *"Lean" in Canadian Health Care* (three-briefing series; 2014–15)
- *Family Doctor Incentives: Getting Closer to the Sweet Spot* (2014)
- *Future Care for Canadian Seniors* (two-briefing series; 2013, 2015)
- *Improving Value in Hospitals Through Process Management* (2013)
- *Home and Community Care in Canada: An Economic Footprint* (2012)

Health Care Service Delivery and Spectrum of Care

- *Next Generation Health Care: An Innovative Approach to Sustainability* (2016)
- *Paving the Road to Higher Performance: Benchmarking Provincial Health Systems* (2013)
- *Improving Primary Health Care Through Collaboration* (four-briefing series; 2012–14)
- *Measuring Success: A Framework for Benchmarking Health Care System Performance* (2012)

Financing

- *Financial Models and Fiscal Incentives: Proceedings From the Healthy Canada Conference* (2016)
- *Improving Access to Canadian Health Care: The Role of Tax Policies* (2016)
- *Funding Canadian Health Care in 2035: Strategic Foresight Scenarios* (2016)
- *Ontario's Economic and Fiscal Prospects: Challenging Times Ahead* (2012)



Workplace Health and Wellness

- *Multiple Sclerosis in the Workplace: Supporting Successful Employment Experiences* (2016)
- *Healthy Brains at Work* (four-briefing series; 2015–16)
- *Disability Management in Practice—Case Studies* (ten-briefing series; 2013)
- *Disability Management: Opportunities for Employer Action* (2013)
- *Creating an Effective Workplace Disability Management Program* (2013)
- *Missing in Action: Absenteeism Trends in Canadian Organizations* (2013)
- *Smoking Cessation and the Workplace* (three-briefing series; 2013)
- *Making the Business Case for Investments in Workplace Health and Wellness* (2012)

CASHC Member Organizations 2011–16

Listed organizations' duration of membership varies between one to five years.

Champion Level

- Deloitte & Touche LLP
- Ontario Ministry of Health and Long-Term Care
- Palix Foundation

Lead Level

- CIBC
- Ministère des Finances et de l'Économie (Québec)
- Pfizer Canada Inc.
- Provincial Health Services Authority (PHSA) of British Columbia
- Sun Life Financial
- Workplace Safety and Insurance Board of Ontario

Partner Level

- Alberta Health
- British Columbia Ministry of Health
- CML HealthCare
- Green Shield Canada
- Health Canada
- IBM Canada
- Johnson & Johnson Medical Companies / Janssen, Inc. Canada
- LifeLabs Medical Laboratory Services
- Loblaw Companies Limited
- Mercer (Canada) Limited
- Scotiabank
- TD Bank Financial
- The Co-operators Group Limited
- The Great-West Life Assurance Company
- Workers' Compensation of Nova Scotia
- Xerox Canada Ltd.

Participant Level

- AbbVie Corporation
- Alzheimer Society of Canada
- Canadian Association for Retired Persons (CARP)
- Canadian Blood Services
- Canadian Dental Association
- Canadian Medical Association
- Canadian Nurses Association
- Canadian Partnership Against Cancer
- Centric Health
- Consumer Health Products Canada
- HealthPartners
- Hospital for Sick Children
- Innovative Medicines Canada
- Manitoba Health
- Neighbourhood Pharmacy Association of Canada
- Saskatchewan Ministry of Health
- St-Boniface Hospital Foundation
- The Arthritis Society
- Trillium Health Partners
- VON Canada
- Wawanesa Insurance
- Workplace Safety & Prevention Services

> “The finding [of the report *Reducing the Health Care and Societal Costs of Disease*] that the costs of pharmaceutical innovation are offset by reductions in other health care costs and productivity losses associated with disease is important.”
>
> **Shurjeel Choudhri**, Senior Vice-President and Head, Medical and Scientific Affairs, at Bayer HealthCare



Contact Information

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- Specialists in economic trends, as well as organizational performance and public policy issues.
- Not a government department or agency, although we are often hired to provide services for all levels of government.
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The Conference Board of Canada

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