The Canadian Nurses Association (CNA) is the national and global professional voice of Canadian nursing, representing 135,000 nurses in all 13 jurisdictions across Canada. Our aim is to strengthen Canada's health system and improve the health outcomes of Canadians by enhancing the role of nurses, advancing nursing leadership, advocating for healthy domestic and global public policy, shaping system-level improvements, and serving the public interest. Nurses play a crucial role in Canada's health system and their perspectives are essential in the development of effective health-care solutions and public policies. Nurses are among the most trusted professions in Canada. This public trust, combined with the profound collective experience and expertise of nurses, places CNA in a position to provide well-informed recommendations serving the needs of citizens.

CNA's recommendations outlined in this document are supported by nurses and patients alike. Our recommendations include proposals for federal policy development and investment in mechanisms to support caregivers. We also focus on digital technologies that enable virtual care outside of hospitals, national pharmacare, and strategies to mitigate the negative health impacts of climate change. Our recommendations are in line with domestic and global commitments, including the United Nations’ Sustainable Development Goals and the Declaration of Astana's pledge to build sustainable primary health care.

Nurses are the largest group of health professionals in Canada and the most prominent contact points for patients. Nurses have a deep and shared understanding of how health is affected by a myriad of external factors such as employment, income, education, living conditions and the environment. These holistic perspectives are embedded in CNA's recommendations, which offer solutions to several substantial challenges facing a significant number of nurses and patients.

CNA urges political leaders to consider the issues presented here and incorporate our recommended strategies into their party platforms and policies to improve the health and well-being of Canadians.

CONTACT INFORMATION

Sarah Nolan  
Lead, Government Relations  
snolan@cna-aiic.ca  
613-237-2159 ext 525

Eve Johnston  
Media and Communications Coordinator  
ejohnston@cna-aiic.ca  
613-237-2159 ext 114
The Canada caregiver credit is set at $6,986. Yet, many people only receive a fraction of that amount. Like other non-refundable credits, this benefit is less effective than it could be because it isn’t paid directly. It only reduces the taxes that eligible caregivers owe, and what they owe determines the amount they receive.

A refund would benefit many more people than the current structure (especially those with low-income) and would reduce the burden of care on the health-care system.

As a member of the Quality End-of-Life Care Coalition of Canada, CNA supports improving the flexibility of the compassionate care benefit by including a two-week period for bereavement. This new benefit will help people in Canada take the time necessary to heal, minimize economic hardships and ensure they take care of some of the more practical business following a loved one’s death. CNA is a strong advocate for high-quality palliative care, accessible to all Canadians, in settings that best suit each individual’s needs.

Support caregivers financially by amending federal tax laws:
- Make the existing Canada caregiver credit fully refundable
- Extend the federal compassionate care benefits to include a two-week period for bereavement

The Canada caregiver credit is set at $6,986. Yet, many people only receive a fraction of that amount. Like other non-refundable credits, this benefit is less effective than it could be because it isn’t paid directly. It only reduces the taxes that eligible caregivers owe, and what they owe determines the amount they receive.

CAREGIVING EXPENSES INCLUDE THINGS LIKE

- Private home care services
- Retrofits for homes or vehicles, technical aids and equipment
- Transportation for medical appointments
- Drug dispensing fees

A refund would benefit many more people than the current structure (especially those with low-income) and would reduce the burden of care on the health-care system.

It is estimated that by 2035, 24% of the population will be seniors aged 65 or older and that privately covered expenditures will increase to $23.5 billion for home and long-term care costs. This is concerning, as health-care costs for caregivers and care receivers are expected to become increasingly unaffordable.

In 2019, caregivers who look after seniors save Canada’s health-care system an estimated amount annually of $9.6 billion.

The federal government has a role to play and must make these small investments for the larger return.

THE COST

- An average of $5,800 out-of-pocket expenses a year to care for loved ones
- Expected to increase to $8,000 by 2035

33% of Canadians report caregiving expenses on their taxes.
CNA has a long-standing history of advocating for a national pharmacare program. We recommend a comprehensive, universal, public system offering affordable medication coverage that ensures access based on need, not the ability to pay.

CNA believes that people across Canada, especially those who are vulnerable, require affordable access to prescription medications that are vital for preventing, treating and curing diseases, reducing hospitalization and improving quality of life.

**CONSIDERATIONS FOR THE FEDERAL GOVERNMENT**

Recognizing that implementing a national pharmacare program will be complex, CNA understands that incremental steps may be needed to fully implement a universal, single-payer system.

**Therefore, we recommend that the following be considered throughout implementation:**

- A stable supply of clinically safe, cost-effective drugs
- A national formulary (i.e., the list of prescription drugs that would be covered)
- Purchasing strategies (e.g., ordering bulk supplies) to reduce drug costs
- Information and mechanisms to support appropriate prescribing and deprescribing practices in all jurisdictions
- Permitting patients to choose non-generic drugs (at their own expense) and prescribers to give reservation notes when substitution should not take place for medical reasons

**NEED FOR EQUITABLE ACCESS**

In a 2015 poll, more than 1 in 5 Canadians reported that they or someone in their household did not take their medications because of concerns about cost.

Canada pays 30% more than other OECD countries for prescription medications.
In the home care sector, technology plays a central role in enabling remote patient monitoring and interventions in a patient’s home rather than in a higher-cost institutional setting. This is particularly beneficial for many chronic illnesses that can be effectively managed in the home.

Chronic disease is the main reason seniors use our health system — not their age. Nearly four out of five individuals aged 65 or older have one chronic disease, while about 70 per cent have two or more.

**CONSIDERATIONS FOR THE FEDERAL GOVERNMENT**

- Expanding existing electronic record investment projects to include home and community-based care and ensure new investments are contingent on connectivity and interoperability with new models of care.
- Assisting jurisdictions to accelerate and deploy technology to support operational functions of home care, as well as advancing the scale-up of proven telehomecare solutions through a health-sector-specific allocation of resources under infrastructure bilateral agreements.
- Ensuring all Canadians have access to high-speed internet by 2030, including all rural, remote and northern communities.
- Educating Canadians on the safety and efficiency of these technologies to build trust and increase visibility of virtual care.

**IMPROVE ACCESS TO CARE**

- Virtual care
- Telehomecare
- E-consultation
- Electronic records

**CANADA HEALTH INFOWAY SURVEY CONCLUDED**

- 91% of respondents felt their health issues were appropriately addressed during videoconference appointments with their provider.
- 98% reported that these virtual visits saved them travel time.
- 47 million in-person visits could have been avoided if electronic access to health information was available.

New virtual care modalities have enabled timely access to health assessment and treatment in rural and remote communities and represent an opportunity to reach people across Canada who face difficulty accessing health services.

**COSTS AND THE CANADIAN ECONOMY**

- Chronic disease costs the Canadian economy: **$190 million**
- Daily cost of home care: **$55**
- Per day for long-term care: **$130**
- Per day for hospital care: **$1,000**

Since 2008, the number of people using home health care has grown by 55%.
Implement strategies that:

- Prevent and reduce the negative health effects of climate change
- Increase health research and public education
- Provide stable long-term funding to the health sector that addresses the effects of climate change

There are numerous public health threats related to climate change

- Prolonged pollen seasons
- Crop damage due to severe weather and drought
- Spread of Lyme disease
- Cardiorespiratory impacts due to worsening air pollution
- Heat stroke and death
- Increased risk of waterborne disease due to changing precipitation patterns
- Trauma and post-traumatic stress disorder from displacement due to wildfires and floods
- Widespread food insecurity in the Arctic due to increased temperatures that have decreased access to traditional Indigenous foods

Important steps have been taken by the government, but CNA believes we must do much more if we are to avoid the catastrophic effects of climate change. Many policies needed to fight climate change will produce immediate health benefits, reduce health-care costs, and improve social cohesion and equity in Canada’s communities.

By the numbers

- 9,500 deaths per year in Canada attributed to air pollution
- 3,400 extreme heat-related emergency department admissions in Quebec in 2010
- 104% increase in reported Lyme disease cases from 2016 to 2017

Considerations for the federal government

The federal government has a leading role to play in ensuring the health sector is prepared for climate change impacts.

- Increase resiliency, such as risk assessment and readiness (managing disease outbreaks when they occur)
- Promote the health benefits of reducing greenhouse gas emissions and air pollution
- Integrate research on health-care impacts into ongoing policy decisions
- Increase public awareness on the link between climate change and health impacts in real time and coordinate public education efforts across federal departments
- Increase funding towards research and best practice to fill data gaps and facilitate the sharing of information between regions

A 2017 Health Canada poll concluded

- 40% of Canadians believe climate change will be a health risk in the future
- 53% of Canadians accept that climate change is a current health risk
- 79% of Canadians believe climate change is happening