

Health Care Forum St. Paul's United Church February 23, 2010 Questions from the Floor

Seniors

1. Long Term Care

- a.** Need for more long term care beds
 - i.** What is the plan for new beds? When will this begin?
 - ii.** Why do we continue to let expensive hospital beds be used as long term care beds, when they are needed for acute care?
 - iii.** Why was there a reverse decision that long term care beds would not be increased for at least seven years and now it is a top priority?
 - iv.** What is being done to control costs for private assisted living facilities, so that it is accessible to low income people?
- b.** Cost of assisted living facilities
 - i.** Why was an Alberta Health system assisted living facility allowed to increase accommodation rent by 45%? Are there no standards for percentage increase?
 - ii.** What is happening around the illegal fee increase to long term care made by the government?
- c.** Respite Care
 - i.** What plans are in place to provide better respite care for individuals who are taking care of family members?
- d.** Pharmaceuticals
 - i.** Why is the government targeting seniors and people in continuing care in relation to purchase of essential drugs?
- e.** Long term care and partners
 - i.** Why so few facilities for long term care patients? You named only one and I– I know of three.

2. Seniors health and well being

- a.** Why , when people turn 65, are they then subject to pharmaceutical costs, particularly those who have had their drugs paid for through AISH
- b.** Why do seniors pay an education tax?

Primary Care Networks

1. Access

- a.** How does one get access to the network if one does not have a family doctor?
- b.** How does the public get access to information concerning primary care networks?

2. Funding

- a.** Is funding for primary care networks private or public?
- b.** Is funding for delivery of primary care networks private or public?

Nurses and Doctors

Replacing RNs with LPNs

- a. Why is the health care system cutting back on RN's and replacing them with LPNs?
- b. Would prefer an LPN for primary health care. Is it possible to have a choice?

2. Acute Care

- a. Why is there no professional medical staff in medical surgical wards?
- b. How do we provide for more staff to meet all the necessary needs presently in our hospitals [surgeries and other health care]?

3. Education

- a. The public pays for the training of our medical people [nurses, doctors, technicians and others], yet they choose to be or are forced to seek employment outside the province. Does the government have a policy on this?
- b. LPNs do not have the same expertise as RNs and can make mistakes. Why are we replacing RNs with LPNs?
- c. With an annual attrition of medical staff [doctors at 250 a year] and yet we continue to reduce the number of students accepted into training and we are now 1500 doctors short. Is this correct? How do we encourage those making decisions to increase the number of training positions for doctors?

4. Employment

- a. There are not sufficient practicing RNs and yet we have a hiring freeze. Why?
- b. Many new graduates are forced to seek employment outside the province, while we have a shortage here. Why is this so?
- c. How do we both retain our existing staff and prepare for replacing those ready to retire?
- d. How do we or do we encourage doctors in training to consider becoming a family doctor rather than a specialist?

Private Health Care

1. Equal Access

- a. Why do we allow and even at points encourage people who can afford to go for private health care services to do so?
- b. Does allowing people to seek private care not disrupt or destroy the concept of equal access to health care services?
- c. Does not the move to private service funded publically not encourage professionals to turn to private care? Does this not also destroy the concept of equal access?

2. Government Funded Health Care

- a. How do we justify the continual shift to private services that are publicly funded?
- b. The Advisory Committee Report makes constant reference to publicly funded health care without reference to publically delivered health care. Why is this so?
- c. Is publicly delivered health care not better use of resources that funding privately delivered health care?
- d. What is your response to "publicly funded" and "publicly provided" health care?
- e. Why are we providing profit for privately owned health care systems?
- f. Why is the government funding private hospitals to cut down on wait times while public hospital beds, operating rooms and surgical wards are being closed?
- g. Please explain the private delivery of publically funded Home care Services?

- h. Would it be possible, as an interim measure to have health care funding follow the patient rather than the hospital or other provider?
- i. Has the Mayo Clinic helped Alberta Health Care to be more effective for Albertans? If so why? If not why not?

3. An Informed Public

- a. How does publically funded for privately provided health care services support the Canada Health Act?
- b. When will the general public be provided with information concerning the government's plans for what appears to be a continual move towards private health care? When will the public be able to access the information of these publicly funded contracts?
- c. Could we have one or two goals/directions that medical practitioners see as needed in Alberta Health?
- d. Will the increase now available to the government be used for private services or will it be used for public services?

Publicly Funded and Publicly Delivered Health

- 1. How can the government separate good business practices for efficient/effective use of resources in a publicly funded health care system from business practices that are only appropriate in the context of "for profit" business?
- 2. How can emergency departments make more efficient/effective use of patient's time?
- 3. Who can assist families in letting a family member die when in ICU and it is clear that the person will never recover? What rights do doctors and ethicists have?
- 4. In what ways do/can/should we encourage alternative therapies/ medicines when traditional methods are not working?

Laboratory Services

- 1. It now takes 3 weeks to a month to get an appointment for fasting blood work. What does the government plan to do about this?
- 2. Why is the government planning to close hospital laboratories and use only private clinics? This is an inconvenience to medical staff as well as to elderly people. Are there any plans to maintain clinics in larger hospitals?

Spiritual Care

- 1. When did we give up the idea of the well being of the whole person [body, mind and soul]?
- 2. There is growing evidence that spiritual care shortens the stay of many people in hospital. Why is the government now discouraging both the access to and the training of spiritual care workers?
- 3. Aboriginal spirituality is quite different than the spirituality of our Western culture. Will we continue to support and to reconsider the cuts to Aboriginal care givers?

Pharmacare

1. Seniors

- a. Why must seniors now pay for their drugs? This has frightened many seniors and has provided grave stress on many low income seniors.
- b. Can this policy of charging seniors, which is apparently now instituted be cancelled prior to its official start date of July 2010?
- c. Would it be possible to institute a Pharmaceutical Plan [Ontario] for seniors?
- d. Why such a big increase in salaries as well as the best health care system available, while we tax seniors – particularly those on low income?

2. Drugs

- a. Why has the government removed the accessibility of generic drugs?
- b. Is the government planning to contract out to private agencies the services in hospitals? Why? How will this be helpful?

3. Taxes

- a. Why are we taxing low, middle and upper income people premiums for their drugs, particularly when we have cut premiums?. Is this true? Can this decision be reversed ?
- b. Why are we cancelling premiums and then taxing seniors for their drugs?

Premiums

1. A suggestion that the premiums be reinstated to cover the current debt.

Funding/Taxes

1. Progressive Tax

- a. When will the government reinstate health care premiums and a progressive tax system?
- b. Why does the government insist on a flat tax when the disparity between rich and poor continues to grow, thus punishing those on low income?
- c. Would the government consider setting up a policy that uses our taxes for day to day operation, without using resource revenue, use a progressive income tax , corporate tax, reinstitute health care premiums for others than seniors, and a low sales tax. Use resource revenue for future infrastructure?
- d. Why do we attack businesses , when without business there is no wealth?

2. Taxes to Health care

- a. What percentage of our tax dollar is presently being used for health care? How does this compare to 35 year ago?
- b. The people have consistently maintained that they do not want either tax cuts or private health care. Why does the government continue to make tax cuts and to also foster private clinics and hospitals?
- c. Why do we not have performance indicators for outcomes [i] of past tax expenditure [ii] reduction of royalties and [iii] preference for supporting the rich with racecourses and golf courses?
- d. Would a progressive tax not provide support for better health care?
- e. Churches have historically run hospitals and other social services. Why do we not return to this practice? Why does government not let us take care of our own needs.

- f. How much does the government spend per person on [i] health care costs [ii] research costs [iii] education of health care workers [iv] new facilities and new technology? How does this relate to costs in other provinces?
- g. How about a Wellness Program tax credit?
- h. Why not base health care costs on Gross Domestic Product rather than total budget?

Mental Health

1. Alberta Hospital
 - a. To what extent is the closure of Alberta Hospital due to developers needs?
 - b. Has the government ignored the more than 30,000 signatures requesting that Alberta Hospital remain open including services, programs and beds?
2. Transferring patients
 - a. What is the planned completion date for the moving of patients from Alberta Hospital to Caritas Villa?
 - b. What are the total costs for developing Caritas Villa to receive these new geriatric psychiatry patients?
 - c. What are the total costs for redeveloping the same beds at Alberta Hospital?

Activity Based Funding

1. Today Alberta Health Services announced the move to activity based funding. This is a significant move toward a market system of health. Why would the government make such a move without consulting the public?
2. Ken Hughes stated that "dollars will follow patients". Is this a move to the neo liberal disaster they tried in England?

Consultation

1. What do you propose as a method of encouraging informed public discourse about health care, to replace the last decade of selective public polling and individual online surveys based on little, if any, real information?
2. What can an average Albertan do to facilitate engagement and change?
3. Will the government put on hold the new Pharmaceutical plan that is hurting middle class and low income families and seniors, until after the public consultations?
4. How are patients and families being encouraged to participate in their own health care, health policies and processes at both the Alberta Health Services and hospital levels?

General Questions

1. How were members of the super board chosen? What are their terms of office? What are their terms of reference?
2. Will the government for the sake of people's health and safety, say no to nuclear power in Alberta?
3. How much profit from private health care work goes into the election funds of the government?
4. When will we get rid of corporate election funding and back to citizen representation democracy?