



# BE A PUBLIC SERVICE VOTER

## Health Care Fact Sheet

Health care in Canada is a right, not a market commodity. But instead of focusing on public solutions to the challenges facing our cherished Medicare system, the Sask. Party government has weakened our public health care by pursuing privatization and contracting out.

### The Sask. Party track record:

- In 2010 the Sask. Party government begins contracting out certain day surgeries to privately operated for-profit clinics in Regina and Saskatoon. Waiting lists for many surgeries have increased in recent years, even before the COVID-19 pandemic struck. The Canadian Institute for Health Information reports that Saskatchewan is currently last among provinces in providing timely access to hip replacement surgeries.
- In 2011 the Sask. Party government spends \$40 million to hire Seattle-based John Black and Associates to institute “lean management” in the province’s health care system. A review published in *the International Journal for Quality in Health Care* finds that Lean does not improve patient satisfaction, health outcomes, or worker satisfaction and generates only \$1 in savings for every \$1,511 spent.
- In 2013 the Sask. Party government privatizes the majority of the province’s hospital and health centre laundry services to Alberta-based K-Bro Linen Systems. A study by the CCPA-Saskatchewan estimates that the closure of these five regional laundries and centralization of laundry services will decrease the income of Saskatchewan residents by \$14-42 million over the next ten years in comparison to public options.
- In 2014 the Wall government announces that the new \$407 million Saskatchewan Hospital in North Battleford will be built using a public-private partnership (P3) model. Within months of facility’s opening in March 2019, it is discovered that the roof is leaking and needs to be replaced. Reports follow that the hospital’s drinking is unsafe due to high levels of lead or copper. In September 22, 2020, a construction audit identifies an additional 22 areas of concerns.
- In 2016, the Sask. Party government passes legislation, *The Patient Choice Medical Imaging Act*, which allows patients to pay out of pocket for private, for-profit MRI scans provided another scan is provided for free to someone on the public wait list. The MRI wait list doubles between 2015 and 2019. The federal government orders the provincial government to stop the practice of allowing people to pay for MRIs to jump the queue since it violates the Canada Health Act.



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- Despite the consolidation of 12 health regions into the Saskatchewan Health Authority in 2018, the province's Emergency Medical Services (EMS) remains fragmented and inefficient with 104 separate public and private ambulance services.
- Saskatchewan enters the COVID-19 pandemic without an updated, province-wide pandemic policy even though the SHA has been in operation for over two years.
- In the spring of 2020, the Sask. Party government and SHA indefinitely suspend acute-care admissions and emergency services in 12 rural hospitals to prepare for a surge in COVID-19 cases. An outcry from the affected rural communities pressures the government to speed up the re-opening of these services.
- The Sask. Party government refuses to extend the Saskatchewan Temporary Wage Supplement Program to all health care providers working during the pandemic.

### What Saskatchewan needs:

- Legislation to protect our public health care system from privatization and the reversal of policies that move our health care system towards a two-tiered system with MRIs and other health services.
- An end to costly and secretive P3 deals and contracting-in of all health services.
- Cancellation of wasteful and ineffective Lean programs and reallocation of savings into front-line staffing.
- The creation of one provincial, publicly delivered emergency medical service (EMS) with the establishment of full-time EMR positions in rural Saskatchewan to provide stable and faster response times to rural emergencies.
- A provincial government that will lobby the federal government to implement a national, public pharmacare plan that provides prescription drug coverage to everyone.
- Maintenance of high-quality acute-care and emergency services throughout rural Saskatchewan during the COVID-19 pandemic and beyond as well as concrete steps to address ongoing recruitment and retention issues.

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