

Intelligence MEMOS



From: Tom Mulcair
To: Canadian Healthcare Observers
Date: June 5, 2023
Re: **BEWARE THE FALSE GOD OF PRIVATE HEALTHCARE**

Ontario's Bill 60 was introduced last winter and it's the latest stealthy attempt to subvert Canada's public healthcare system by letting for-profit care creep in.

You will never know it by reading the title or anything in it because it all talks about integrated community healthcare.

Good luck trying to find the word private in there anywhere.

But we all know that that's where this is headed.

So it might be helpful to look a little bit at the history of how we came to our present system and what needs to be done to make the system much better for the future and for our kids.

We've always liked to compare ourselves to the Americans, but now we have to start looking at ourselves and what we're actually delivering. Because the only thing that matters is results. All the rest is debate. We like debate, but we like results even more.

Some history: In the late fifties, Tommy Douglas is in his last election as the premier of Saskatchewan. He promises to bring in universal medical care. His successor actually brought it to life because Tommy marched off in 1961 to win the leadership of the newly formed NDP.

Meanwhile in Ottawa, John Diefenbaker's Conservative government knew the power of the prairie populist. Diefenbaker was from Prince Albert and knew what Douglas and the new party could represent in Ottawa.

So he put Supreme Court Justice Emmett Hall in charge of a massive commission of inquiry to come up with a healthcare scheme that could extend Saskatchewan's model to all of Canada. Over three years the Hall Commission held 80 full days of hearings across the country. It ordered up 26 major studies, received submissions and presentations from more than 400 institutions and groups.

Then the Liberals came in. Lester Pearson's in power.

He starts the work with the provinces and ultimately, in 1966, Medicare as we know it was introduced across the country. That work took five years.

And I would dare say that this is what's singularly missing in Ontario's rush to Bill 60. Because if you go through the legislation, there's lots of regulatory power. But you could drive a Mack truck through some of the holes in what's being proposed.

Licensure is going to be made easier. We're talking about competition, but do you really want competition from people who don't have the qualifications? Enforcement is a key driver of all these things.

If you have a rule, you have to enforce it. And in Canada we're not good at enforcing. When I was the head of the Quebec agency that oversaw the licensing bodies for more than 50 professions, not just in healthcare, but lawyers, accountants and even urban planners and engineers. Its job is to make sure each licensing board is doing its job of protecting the public.

I was the first Canadian on the board of something called the Council on Licensure Enforcement and Regulation, which had badges. This is enforcement. This is a subset of the police power of the state. Americans don't fool around with this stuff.

We don't enforce in Canada, as we learned during the pandemic, whether it was the privately run Herron residence in Montreal where 47 seniors died in Covid's first wave or in Bobcaygeon where another 29 people died in a private care facility.

This was private care, but there was no enforcement because both provinces had actually reduced the number of people overseeing long-term care.

And private care is not unimportant in these matters. Consider the Oxford University study [published](#) in the Lancet last summer.

"Private sector outsourcing corresponded with significantly increased rates of treatable mortality," was the conclusion.

That's evidence for those seeking evidence-based decision making. And it should shut down the sloppy thinking that has folks saying, well somehow competition will magically produce better results.

And as we all know, private providers cherry-pick their cases, leaving the tough stuff to the public sector. And if a patient has been in private care and the private care has received the money from the government, guess what, if they develop an infection, they're right back to the public system.

So any reform of our system has to be based on evidence. It has to be done step by step, and it has to be done, dare I say, the same way the first system was introduced: thoughtfully.

Tom Mulcair is the former federal Leader of the Official Opposition. This Memo is drawn from his argument at the C.D. Howe Institute's last [Regent Debate: Be It Resolved: Competition Will Save Canada's Broken Healthcare System](#).

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