

July 4, 2018

The Honourable Rachel Notley Premier of Alberta Chair, Council of the Federation 307 Legislature Building 10800 - 97 Avenue Edmonton, AB T5K 2B6 premier@gov.ab.ca

The Honourable Brian Gallant
Premier of New Brunswick
Incoming Chair, Council of the Federation
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Dear Premiers,

HealthCare CAN is the national voice of Canada's healthcare organizations, community and research hospitals across Canada. We represent over 600,000 employees, 45,000 volunteers, 8,000 scientists and 60,000 research staff and students in the healthcare setting. I am writing to the members of the Council of the Federation on behalf of our 42 members to bring to your attention a critical issue that is compromising hospital's ability to innovate and provide the best quality of care to patients, basically all of your constituents.

For many years, our country's community and research hospitals have not been able to access much needed infrastructure funding offered through the federal government's infrastructure programs. Senior officials from Minister Sohi's Infrastructure and Communities department have informed us that the provinces/territories have chosen not to include health facilities in the Infrastructure Bilateral Agreements with the federal government. Indeed, the following restriction (Schedule A, section D) appears in all the signed agreements, "Investments in health and education facilities are not eligible for contribution funding under this Agreement, except as otherwise specified in Schedule A.5 (Rural and Northern Communities Infrastructure)."

The 2016 Canadian Infrastructure Report Card, which assessed the state of municipal infrastructure, found health care facilities to be the oldest building types with 48% of the inventory being older than 50 years. Consequently, Canadian hospitals have a significant environmental footprint, accounting for 8% of public greenhouse gas emissions and 11% of total public energy consumption. Canada's hospitals also face an accumulated deferred maintenance (i.e., postponing maintenance activities such as repairs in order to reduce costs and/or meet budget targets) cost of roughly \$28 billion. While minimal infrastructure investments have been made in selected facilities in recent



years, old and outdated buildings, equipment and technologies are still very much in use when they should be upgraded and repaired in ways that are better for the environment and that improve the health care delivered to patients.

We fail to understand how our community and research hospitals and/or the provinces/territories can improve hospitals' physical infrastructure and its corresponding huge environmental footprint without access, on a competitive basis, to federal government funds.

Enabling our community and research hospitals to access federal government infrastructure funding under the Infrastructure Bilateral Agreements is not only a win for our hospitals, but also for the Council of the Federation. The Council will meet its goals and objectives of addressing present and future challenges faced by each province by: addressing deferred maintenance; creating jobs; stimulating the local and provincial economies; building more efficient and cleaner, greener facilities; advancing the way health care is delivered and in a more clinically, socially and spiritually healing environment; and by attracting the best healthcare and research talent to its technologically-advanced centres.

Canada's community and research hospitals are critical and strategic enterprises that support economic development and the health and well-being of Canadians, but they also have a significant negative impact on the environment. HealthCareCAN and its members highly recommend and urge those provinces/territories that have not yet signed the Infrastructure Bilateral Agreement to remove health facilities' as being ineligible to receive this infrastructure funding. For those provinces/territories that have signed, we ask that you work with your federal counterparts to amend this section of the Agreement.

HealthCareCAN would be pleased to meet and work with the Council's secretariat or arrange meetings between our member representatives and their respective Premiers to advance community and research hospitals' ability to access much needed infrastructure funding available through the Infrastructure Bilateral Agreements. The health and prosperity of our provinces/territories and its people depends on it.

Kindest regards,

Paul-Émile Cloutier President and CEO

cc: Rt. Hon. Justin Trudeau, Prime Minister of Canada

Hon. John Horgan, Premier of British Columbia

Hon. Scott Moe, Premier of Saskatchewan

Hon. Brian Pallister, Premier of Manitoba

Hon. Doug Ford, Premier of Ontario

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Monsieur Philippe Couillard, Premier of Quebec

Hon. Stephen McNeil, Premier of Nova Scotia

Hon. Wade MacLauchlan, Premier of Prince Edward Island

Hon. Dwight Ball, Premier of Newfoundland and Labrador

Hon. Sandy Silver, Premier of Yukon

Hon. Bob McLeod, Premier of the Northwest Territories

Hon. Joe Savikataaq, Premier of Nunavut

Hon. Ginette Petitpas Taylor, Minister of Health

Hon. Amarjeet Sohi, Minister of Infrastructure and Communities

Loretta O'Connor, Executive Director, Council of the Federation

David Diamond, Chair, HealthCare CAN Board of Directors