AN ACT TO AMEND THE FOOD AND DRUGS ACT (BILL C-17)

Oral Remarks before the Senate Standing Committee of Social Affairs, Science and Technology

Bill Tholl

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Monsieur le président, membres du comité, bonjour à tous. Je vous remercie de nous donner l'occasion d'être parmi vous aujourd'hui. Ce matin, je vais partager mes commentaires avec ma collègue Myrella Roy de la Société canadienne des pharmaciens d'hôpitaux.

I am Bill Tholl, President and CEO of HealthCare*CAN*, the national voice of healthcare organizations across the country. We were formed in January of this year from the legacy organizations of the Association of Canadian Academic Healthcare Organizations and the Canadian Healthcare Association. We foster informed and continuous, results-oriented discovery and innovation across the continuum of healthcare.

With respect to Bill C-17, An Act to amend the Food and Drugs Act, I wish to make three overarching points:

First, our members are strongly supportive of this legislation. It will enhance patient and public safety and build on existing reporting systems. In addition, our healthcare organizations have policy and procedure manuals with respect to reporting adverse patient safety events and harm that include, but are not

limited to, adverse drug reactions and those related to devices. I remind the Committee that reporting practices are part of Accreditation Canada's certification. As well, HealthCare*CAN* has just launched a new Canadian Patient Safety Officer online program, designed to build a strong patient safety culture within our organizations. So we support the goals of Bill C-17.

Secondly, this legislation appropriately gives Health Canada and the Minister the powers to act more quickly to get dangerous drugs or devices off the shelves faster. HealthCare*CAN* is supportive of the additional powers afforded Health Canada and the Minister in terms of:

- **the provision of information from prescribed parties;**
- **requiring changes to packaging or labeling of therapeutic products; and**
- **ordering recalls and requesting injunctions.**

Finally, however, I would like to highlight our concerns. Specifically, we want to work with Health Canada so that the legislation not result in an undue increased administration burden on an already stressed healthcare system.

As you know, the devil is always in the details…in this case, the regulation details provided under Section 21.8.

In this regard, HealthCare*CAN* strongly recommends to the Committee that your report back to Parliament emphasize the importance of:

- **Clarity of definitions with respect to who are "prescribed healthcare organizations";**
- **What is the prescribed manner for reporting on critical incidents, including timing; and**
- **Clarity as to who is responsible for responding – and how quickly – to reports of adverse events. My members are worried about reports possibly going into a black hole.**

We believe that Health Canada will work with us and take all necessary steps to provide minimally disruptive reporting. Let's not re-invent the wheel. Let's build on existing programs such as the MedEffect Canada program.

The bottom line is we need a system that will work to advance the health of Canadians without undue additions of administrative burden.

Merci Monsieur le président, membres du comité. I shall now turn to Ms. Roy.