

Northern Policy Institute

Institut des politiques du Nord

Presentation to Laurentian Health Policy
Students

30 January 2014

A QUICK (recent) History of NPI

- Common Voice Northwest submitted 148 recommendations for Northern Growth Plan, a key one being creation of NPI
- Oct 2009: Proposed Growth Plan for Northern Ontario includes establishment of a Northern Research & Policy Institute
- March 2011: Release of *Growth Plan for Northern Ontario, 2011* included NPI
- August 2012 MNDM Announcement of NPI

NPI Status

- NOHFC approved \$5 million funding – August 2012
- NPI Incorporated – December 2012
- Founding board chosen and appointed – February 2013
- CEO Search complete – appointed June 2013
- Contract with NOHFC signed – July 2013
- First funds received – August 2013
- Offices opened - September 2013
- First staffing and project commissioning – Sept/Oct 2013

NPI Letters Patent

- Proactive, evidence-based and purpose driven policy options that:
 - Deepen the understanding of the unique challenges facing Northern Ontario
 - Ensure the sustainable development and long term economic prosperity of Northern Ontario
- Research and analysis of
 - Existing and emerging policies relevant to northern Ontario
 - Economic, technological and social trends affecting northern Ontario
- Formulation and advocacy of policies that:
 - benefit northern Ontario and first nations communities
- Other complementary purposes not inconsistent with these objectives

What is a “think tank” anyway?

“It ain't what you don't know that gets you into trouble. It's what you know for sure that just ain't so.”

- Mark Twain

“Politics is the art of the possible.”

- Winston Churchill

“If you want to change the world, forget politics, win the war of ideas.”

- Friedrich Hayek

How do think-tanks succeed?

Ultimate success for a policy think tank is marshalling the evidence, forming a recommendation from what the evidence tells you, and having that advice followed.

If you say a policy should be changed, killed or created, success is having that policy changed, killed or created.

MANY roads to that success

- Parade Marshal
 - Where is EVERYONE ELSE going
- Cheerleader
 - What do we BELIEVE
- Permission Giver
 - What does the EVIDENCE say

The NPI role

- To identify what we “know” that just ain’t so
 - Avoid “executive paternalism” - If it sounds good – it must be good, right? Wrong.
 - Just because you want it...needs v wants, and prioritizing needs – that’s the tough part
 - Learn from the mistakes, and successes, of others

How?

- Research if necessary, but not necessarily research
- Ideas advocacy, not partisan, or ideological, but evidence driven
- **HAVING** an idea, is only step one, **COMMUNICATING** ideas is the primary role of Policy Institutes

Educate and Engage

- Community education and engagement
 - Get evidence into hands of public and decision makers
 - Comment on current and potential future policy directions
- Listen, learn and adapt to the evidence

BEFORE they call us

- There is a BIG difference between:
 - “working WITH a Policy Institute” and “HIRING a consultant”
- Independent means just that - look at terms of reference, ie:
 - “impact assessment of provincial owned and operated road to ring of fire” = consultant, decision predetermined, decision based evidence seeking
 - “assess WHETHER the province should own and operate a road to the ring of fire” = independent policy work, evidence based advice for decision making

Permission giving = LONG game

- Short term:

- Are people listening?
- Are people debating your ideas?

- Medium Term:

- Are people sharing your ideas?
- Are people advocating for your ideas?
- Are people ASKING for your ideas?

- Long Term:

- Are people implementing your ideas?

Areas of Focus - broadly

- Northern Growth (note NOT Northern Growth “PLAN”):
 - 1. Economy
 - 2. People
 - 3. Communities
 - 4. Infrastructure
 - 5. Environment
 - 6. Aboriginal peoples

Three Key Goals for NPI

1. Enhance Measurement, and the availability of those measures to all stakeholders
2. Building SUSTAINABLE community capacity: skills, knowledge, private capital.
3. Enhancing self-sufficiency
 1. Of individuals, communities, sub-regions and the region as a whole

How do we choose projects?

- Key questions:
 - Is it an important public policy issue?
 - More on that in a minute
 - Can we make a difference?
 - If everyone else is doing this work, we don't need to
 - Can we find the resources?
 - Data, research capacity, funding
 - **SECRET** – fourth question

Is it an important policy issue?

- This is where you come in:
 - Are people talking about it
 - Headlines, letters to the editor, direct feedback via NPI online consultation tool
 - Government Initiatives
 - Federal, provincial, municipal
 - Stakeholder and interest groups
 - Industry and professional associations, Unions, Chambers, Grassroots community orgs, opposition parties
 - Experts DO know
 - “ivory tower” academics, “bureaucrats”, “vote obsessed” politicians; all good and reliable leading indicators of future issues

NPI Projects Commissioned

- Review of federal aboriginal education act
- Northern data bank – NOHFC, MNDM, Fednor, NODN, Norcat have ALL agreed to work with NPI to release as much data as possible (now working with Statscan and other local data holders)
- Land use planning driven locally and oriented to growth vs driven centrally and oriented towards control
- Anti-poverty efforts – GAI vs the min wage
- A better way to “set” minimum wage – average industrial wage vs GDP
- Income splitting for parents with children under 18 – a(n) (Northern?) Ontario mirror to the federal 2015 plan
- Potential for Port/Airport Authority model to fund, build and manage Ring of Fire infrastructure

RFPs in development

- Online community consultation tool
- Shared Internships to build local policy capacity in small rural, remote and First Nations communities
- NPI website – “evidence portal”
- Demographic trends – and policy directions
- Lessons in local control and entrepreneurship
 - Membertou model
 - Westbank First Nation – Medical Tourism
 - Subsidiarity in the EU – lessons for NO
- Wealth transfer and “balance of payments” (update and analyze trends and any potential policy responses)

Projects under discussion

- Northern performance measures – community level
- Looking at the cost of smaller class sizes – sizes in line with the literature on 15 or fewer in early grades
- Looking at potential applicability and cost for Netherlands approach to community based elder care
- Potential framework for community development or benefits negotiations/agreements with proponents **IN** their community or **IMPACTING** their communities
- MANTARIO series – we can't be a province **BUT** can we be: free trade zone, special economic zone, special tax zone, signatory to New West Partnership

Projects under consideration

- Defining selection criteria for setting infrastructure priorities, then applying them to the ring of fire specifically, and the northern inter-modal plans more broadly
- Analyzing best practices for funding infrastructure and applying those to the ring of fire and the multi-modal plan
- Looking at the potential applicability and cost of having our children “sleep in boxes” like the Finns
- The recent PISA results and what that says for how our kids should learn math (and other previous lessons ignored from PISA)

Synergies with University Partners

- **Students:**

- Access to NPI – lectures, research, mentoring – Lakehead Economics
- Publication opportunities – Laurentian Health Policy students
- Co-ops and Internships – First applications for Jan 2014
- Employment – Comms Manager is a Laurentian Grad

- **Faculty:**

- Access to NPI – lectures, research, mentoring
- Research and publication opportunities

- **Programs:**

- Northern Development, Economics, Political Science, Health Policy, Administration, Management, etc.
- Build demand for training and expertise and provide supply of jobs and opportunities to use those skills

Where do Students fit?

- YOU are members of the community too:
 - So ideas, approaches, volunteer, participate
- Requests for papers:
 - Not limited to your professors
- Internships – with us and with our partners:
 - Growing community capacity
- Student publication platforms:
 - Blogs
 - Student papers

We are “up and running”

- Give me a call or drop me an email:

- 807-632-7999

- ccirtwill@northernpolicy.ca

- Snail mail:

Northern Policy Institute

c/o EDI Office (No 0002)

Lakehead University

955 Oliver Road

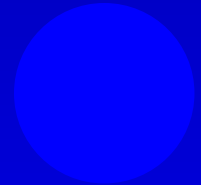
Thunder Bay, Ontario, P7B 5E1



*Any Questions
about NPI?*

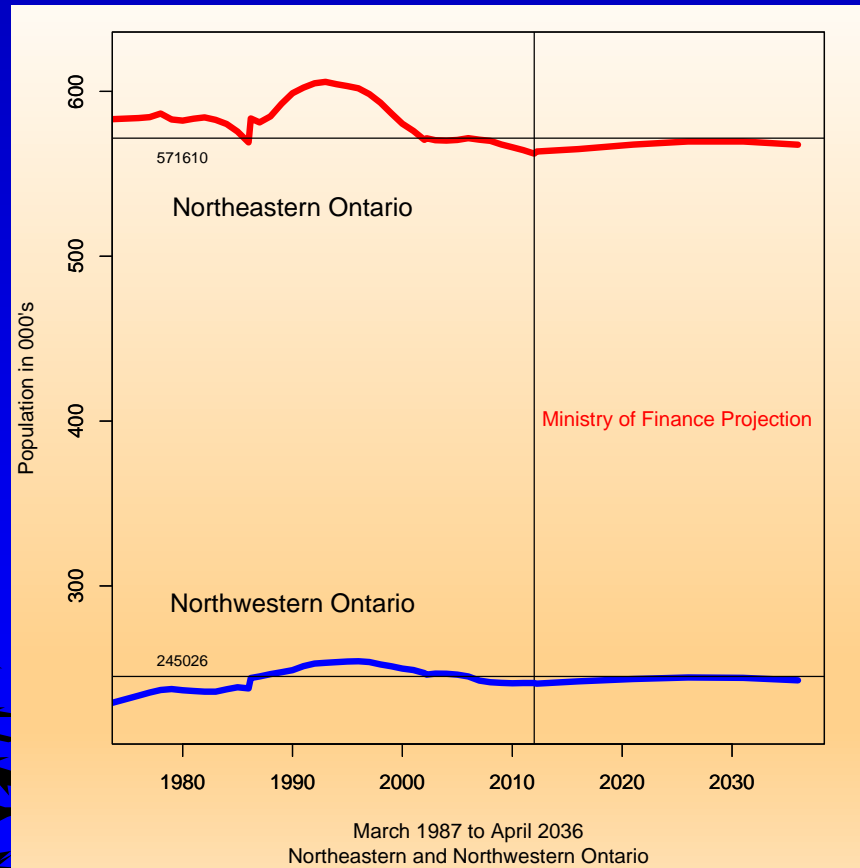
Health Policy Issues “on the horizon”

1. Demographics
2. The Information Age
3. Drugs and Medical Technology
4. Social Determinants of Health



Demographics 1

Population: Flat Lined



The Issue?

- Sustainable SUPPLY

- as population ages have fewer working age people

- Fewer doctors, nurses, technicians, pharmacists, physiotherapists, counsellors, case workers...

- taxes are lower

- Fewer workers, lower earnings, lower taxable revenue

- Solutions?

- Scope of practice (nurses, pharmacists, patients, policy wonks)

- “how to be a doctor in six months” (one day?)

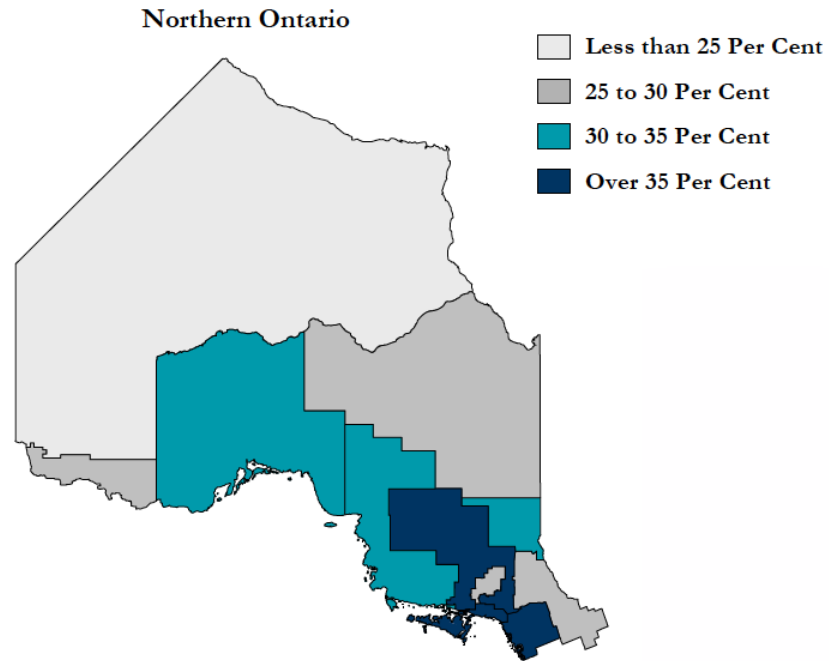
- Community collaborative care centres (not your mother’s emergency room)

- Telehealth (star trek, today – tricorders, hyposprays, AI physicians)

Demographics 2

Population: Aging

Share of seniors in population by census division in 2036



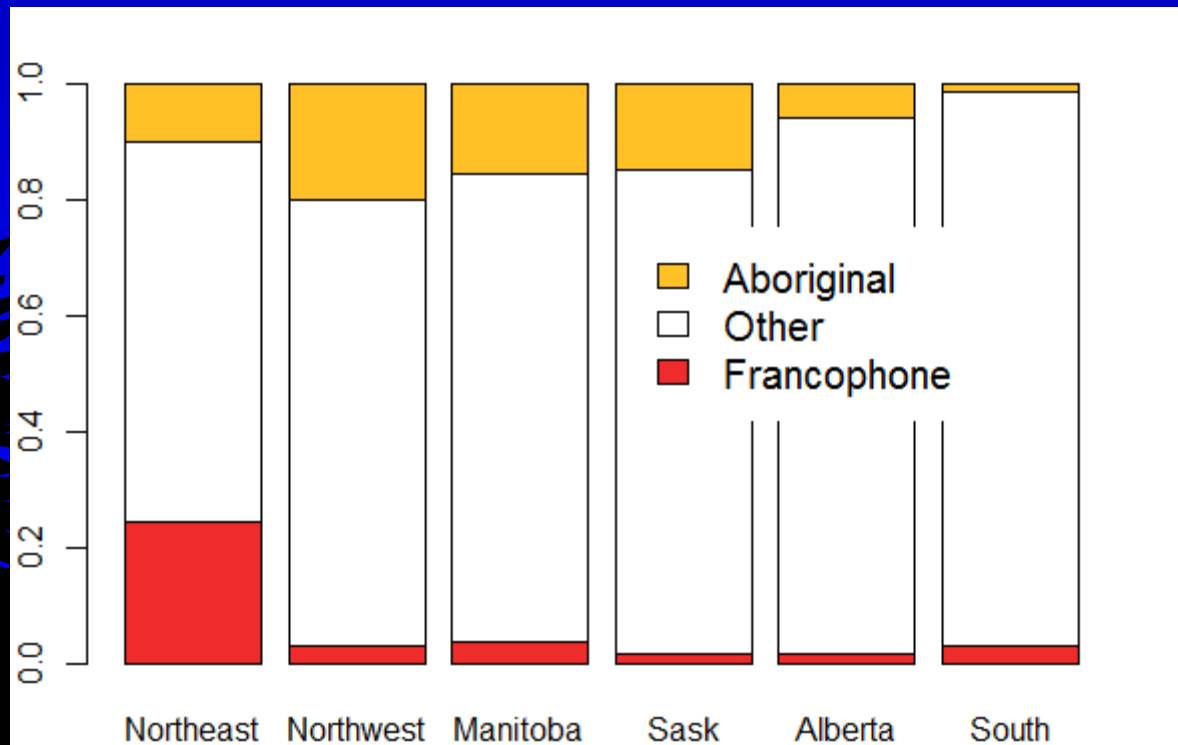
Source: Ontario Ministry of Finance projections.

The Issue?

- End of life care
 - Chronic care
 - Home care
 - “Medical aid in dying” – bill 52
- Boomers buy stuff
 - Public/private debate
 - Expanding private supplements (especially online – the Dr. is ALWAYS in – NS Coop council)
 - Expanding public coverage (Boomers vote too)

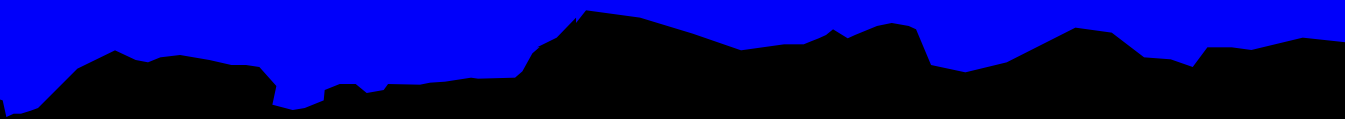
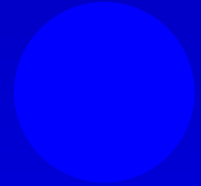
Demographics 3: Significant Aboriginal Population

Source: Dr. David Robinson



The Issue?

- Unique population health issues
- Rural and remote communities
- Younger (note earlier slide)
- Culture conflict



The Information Age

Do we know too much or too little?

- Management

- Hospital Administrator wants patients to know what their care costs:
 - <http://www.cbc.ca/news/canada/windsor/david-musy-j-wants-patients-to-know-cost-of-their-health-care-1.2493845>
- “Operating in the dark”:
 - Can’t manage what you don’t measure
 - Wait times but not value added (comfort and function)
- <http://informatics.medicine.dal.ca/files/Operating%20in%20the%20Dark.pdf>

- Consumption

- The Good?: Self diagnosis/medication/treatment
 - “There’s an app for that” – drug management, vital signs, symptom analysis
- The Bad?
 - Over use (I paid my taxes)
 - Under use (don’t need help THAT bad)
 - Misdiagnosis? Follow up and follow on care?

Drugs and Medical Technology

Are some “advances” TOO expensive?

- Cost v value:
 - How much is one day more worth?
 - Quality of life v life itself
 - Death Panels? CDR and other “comfortable” names
- Centres of excellence/innovation
 - Clusters, collaboration, creativity
 - Nintendo is in! (following on Microsoft, Google, Apple...)
 - Economic/profit motive?:
 - job creation
 - product listing agreements
 - CETA
- So, are we talking patients, profits or politics?

Social Determinants of Health 1: Getting it Right

Dr. Murray Trusler, profiled by Jon Kay (National Post)

Four types of physician interaction with northern communities:

- medical voyeur
- doctor/patient focus
- engage in the community
- push for broader change

<http://fullcomment.nationalpost.com/2013/01/10/jonathan-kay-whats-wrong-with-remote-native-reserves-lets-ask-a-doctor-who-worked-there-for-43-years>

43 Years = 10 point plan

1. Access to Provincial Public Health Services
2. Access to Provincial Housing Standards
3. Access to Provincial Water Standards
4. Access to Provincial Policing Standards
5. Access to Provincial Education Standards
6. Access to Infrastructure
7. Access to Alcohol and Drug Prevention Funding
8. Access to Family Health Teams (FHTs)
9. Access to Electronic Medical Records (EMRs)
10. Access to the Chief Medical Officer of Health for Ontario

Social Determinants of Health 2: Getting it Less Right

How to attack poverty

- “Doctors, nurses petition for \$14 minimum wage, say poverty ‘biggest barrier to good health’”
 - <http://globalnews.ca/news/1082355/doctors-nurses-petition-for-14-minimum-wage-say-poverty-biggest-barrier-to-good-health/>
- Economists, however:
 - Stephen Gordon (Laval), Morley Gunderson (U of T), Kevin Milligan (UBC), Mike Moffat (Ivey), Lindsay Tedds (Uvic) and many, many more:
 - Consensus: Minimum wage does not alleviate poverty
 - Want to help the poor, give them money: direct transfers like WITB, GAI, UCCB,
- Result? Good politics, bad policy

European Average Income and Unemployment With and Without Minimum Wage

Source: American Enterprise Institute

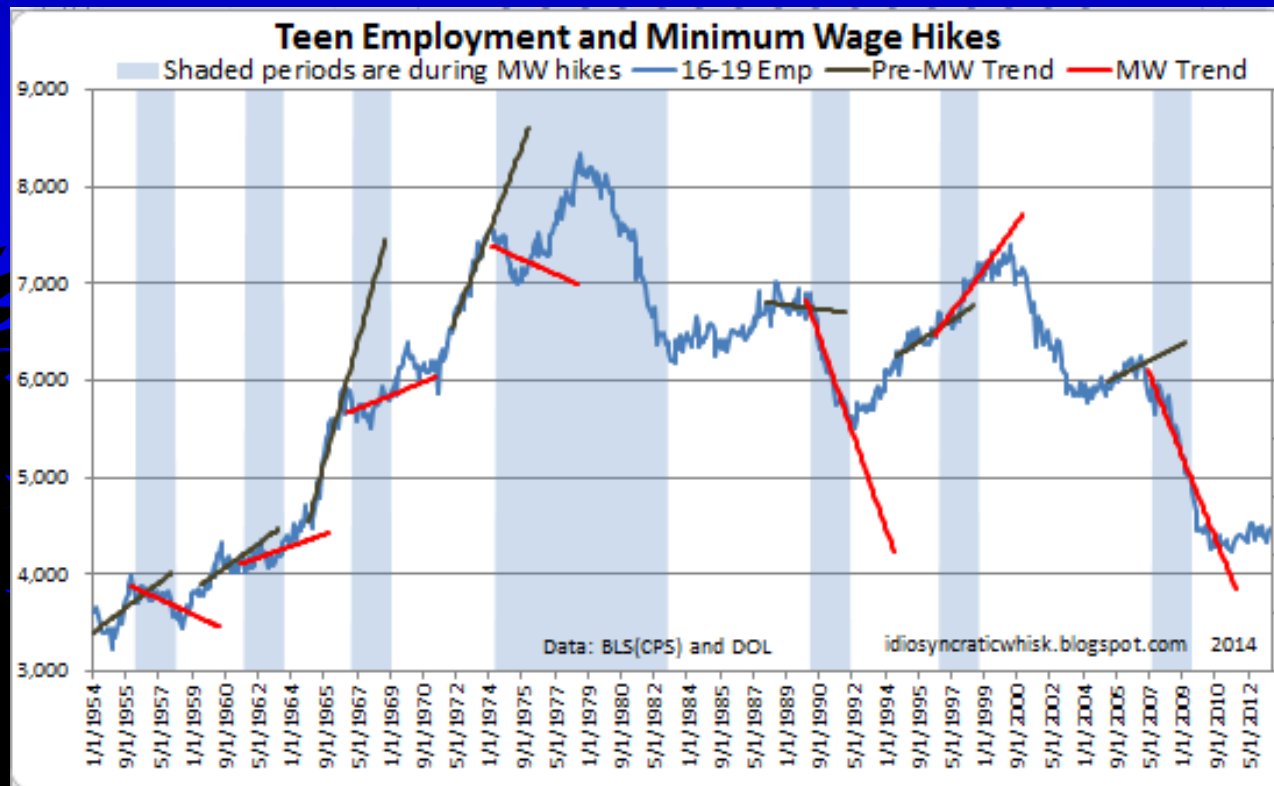
Western European countries with No minimum wage:

Austria –	29,008	4.8%
Denmark –	27,974	6.9%
Finland –	25,747	8.4%
Germany –	24,174	5.2%
Italy –	23,194	12.7%
Norway –	32,620	3.5%
Sweden –	28,301	8.0%
Switzerland –	35,471	3.1%

Western European Countries with a Minimum Wage:

Belgium –	25,642	8.4%
France –	27,452	10.8%
Greece –	21,352	27.4%
Ireland –	41,170	12.4%
Netherlands –	29,269	6.9%
Portugal –	17,170	15.5%
Spain –	26,856	26.7%
United Kingdom –	33,513	7.4%

US Teen Employment and Minimum Wage





*So, what issues are on your
minds?*