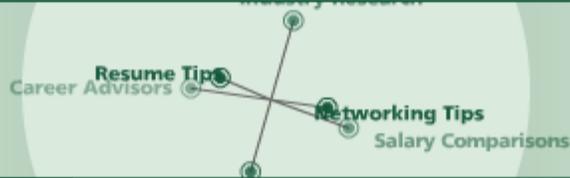


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Guarantee is one of those no-wiggle-room words that canny politicians seldom use.

Prime Minister Stephen Harper is a canny politician, but his usual mix of foresight and prudence seems to have deserted him on Dec. 2, 2005 when he pledged to bring in a Health-Care Guarantee, entitling every Canadian to essential medical treatment within clinically acceptable waiting times. If it wasn't available locally, a patient could go elsewhere at public expense.

The promise was ill-advised on three counts:

- It was unenforceable. The provinces manage health care, not Ottawa.
- It was unfunded. According to Harper, the provinces had enough money to pay for this new obligation. Even if that were true, the probability of 10 premiers adjusting their budgets to advance the Prime Minister's agenda was never high.
- And it was bound to disappoint millions of voters when they learned it didn't apply to their condition or there was no agreed-on waiting time for their disease. Official benchmarks exist only for cancer, cardiac care, joint replacement and sight restoration.

In fairness, the Liberals made much the same promise. But delivering on his commitments was never Paul Martin's strong suit.

After the election, the health-care pledge sat unfulfilled on the Conservative government's priority list for five months while Harper ticked off all the other items: an accountability act, a child-care allowance, a sales tax cut and tougher crime-fighting laws.

Then in mid-July, it suddenly lost its precedence. The Prime Minister stopped talking about medical wait times. Health Minister Tony Clement, while insisting he was making headway, could offer no evidence and suggest no target date. The media started labelling it a "broken promise."

It isn't broken yet. But the odds of a national health-care guarantee being in place before the next election are lengthening daily.

There was no money for it in Finance Minister Jim Flaherty's spring budget. The provincial health ministers have gone from being wary to being openly testy. And Dr. Brian Postl, the federal adviser on wait times, has just submitted a report to Harper warning that any meaningful guarantee of timely medical treatment will require a whole range of reforms, from eliminating needless layers of bureaucracy to shifting to team-based health care.

So what is Harper to do?

He could blame the provinces for thwarting his intentions. But Canadians have heard that excuse so often they're more likely to roll their eyes than sympathize. In any case, it raises an obvious question: Why did he make the promise when he knew that keeping it was beyond his control?

He could use the large surplus accumulating in federal coffers to buy provincial co-operation. That might allow the Prime Minister to patch together some sort of guarantee before heading to the polls. But there's a considerable risk of unintended consequences. With a large pot of money dedicated to shipping patients to other jurisdictions, the provinces would be strongly tempted to take that route rather than improving their own capacity to provide timely treatment.

He could introduce an array of ambitious new initiatives in the fall, hoping to eclipse the health-care guarantee. But he'd encounter two difficulties. The first is that the media and the opposition parties aren't going to let the unkept promise slip out of sight. The second is that the public considers it by far the most important of Harper's election commitments. A survey of 1,006 Canadians, released by SES Research last month, showed three times as much support for the health-care guarantee as for any of the Prime Minister's other core priorities. In Quebec, it outranked the rest five-to-one.

The best option would be to admit that setting an ironclad maximum on medical wait times was a mistake in the first place.

The provinces are all striving to shorten their queues for high-demand procedures. But a serious doctor shortage can't be reversed overnight. Hospitals can't be reorganized en masse. Lifting sick people out of their support network is a second-best alternative — one most provinces already allow doctors to use when necessary.

A health-care guarantee might sound appealing. It might dampen the most audible distress signal in Canada's medical system. It might even, with enough cash and arm-twisting from Ottawa, be politically feasible.

But it is an expensive short-term fix for a complex, long-term problem.

What the nation really needs is a leader who can pull Canadians together — across provincial borders, party lines and professional loyalties — to make real and lasting progress.

Carol Goar's column appears Monday, Wednesday and Friday.

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