



Canada's technology and aging network

October 9, 2020

Re: How to support innovation and choice in Canada's health care sector

The following submission provides insights from the AgeTech sector on ways we can better support innovation and choice in Canada's healthcare system, especially for older Canadians and their caregivers. This submission is a joint collaboration between AGE-WELL, Canada's technology and aging network and two AGE-WELL National Innovation Hubs focused on policy and digital health, respectively. Both published research evidence and innovation expertise from our network inform the answers to your consultation call.

1. Policy Barriers and Solutions

Several policy barriers are preventing choice and access to digital health care solutions including:

- **Compensation models and fee structures for physicians acting as disincentives** for the use of telemedicine and other virtual health care technologies. There are many discrepancies across Canada and internationally, as current models remain focused on compensating in-office visits.¹
- **Policies surrounding licensing and interoperability of services remain unclear.** Some jurisdictions require a special license for the practice of telemedicine, while others have practice limitations on externally licensed physicians.²
- **Privacy legislation regarding personal health information limits uptake of virtual health technologies.** Where electronic health records are involved, many jurisdictions are grappling with the legal options and ramifications of storing, using, and disseminating health information in a digital format. While there is a desire to digitize health records both from the healthcare system and from the patient perspective, progress has been slow, particularly due to policies that prevent the sharing of information between government entities.
- **Lack of national guidance on which digital health solutions are best** suited to provide services to patients while keeping them safe. Currently, we have a fragmented system both nationally, as well as within most provinces and territories, where purchasers vet solutions individually. This leaves startups and Canadian health technology developers with little interest in selling in their own country, and health care professionals hesitant to implement digital health solutions.³
- **A primary focus on service quality and patient safety over implementing innovations** where there are limited incentives for government and para-governmental agencies to pursue new technologies. For most agencies, the primary emphasis is on continuing to provide high-quality care to Canadians. This leads to lost opportunities not pursued in the name of mitigating risk.

Solutions to these barriers involve continuing to update compensation models and fee structures, which changed overnight during the COVID-19 pandemic, to reflect healthcare systems that are increasingly going online. Licensing and privacy legislation policy also needs to keep pace with increased demand for virtual care services.

The AgeTech sector, led by AGE-WELL, is poised to provide guidance on cutting-edge digital health solutions and is looking internationally for innovative practices and implementation models. Agencies that focus on health services provision need to adopt policies that compare their performance not only against other Canadian agencies but also against those in other, similar nations.

In order to address these policy barriers, we need standardized Canada-wide practices around soliciting, procuring and evaluating new digital care solutions. This will ensure innovation targets are a key part of regular operations and advance Canada's innovation profile to match that of our international counterparts.

2. Additional Barriers and Facilitators

Digital health care is becoming more common, specifically in the context of supporting an aging population. While many research programs and health services have shown positive outcomes for patients using virtual interventions, several barriers to full adoption remain including:

- **Lack of accessible infrastructure:** Access to affordable and reliable internet remains a challenge for many Canadians, especially those in rural and remote communities.⁵ This digital divide combines with a significant socioeconomic divide, which makes it difficult for low-income Canadians to access devices that would be suitable for virtual consultations such as a home computer.³ The lack of accessible and affordable digital health infrastructure may deepen these divides and exacerbate existing health inequities if not properly considered in the rollout of innovative policies, programs, and services in health.
- **Low digital literacy among older and low-income seniors:** The 2020 AGE-WELL poll conducted by Environics Research shows an increase in the use of technologies by older Canadians for social connection, entertainment, health care, and activities of daily living as a result of the COVID-19 pandemic. In fact, in the last 3 months, 52% of Canadians aged 50+ had a telehealth appointment.⁵ While these results demonstrate a positive trend toward enhanced digital literacy of the aging population, barriers remain for those who have limited experience with technology, especially the “oldest old” and low-income older adults.³
- **A shortage of human resources and a lack of buy-in to implement digital health solutions:** Not only is a shortage of geriatricians and personal support workers limiting innovation and choice for older Canadians,⁶ but a lack of buy-in from physicians is resulting in difficulty accessing virtual services. Canada Health Infoway reports that only 4% of family physicians offer electronic booking, 24% offer email communications, and 4% offer video visits.⁷ Although the pandemic has likely increased these numbers, sustaining this change will require more permanent policies and processes.
- **Canada’s federal system makes it difficult to innovate across multiple jurisdictions:** Every health authority has a unique senior population with diverse technology needs where older adults may have declining physical or cognitive health issues. Determining technology appropriateness and meeting the need of each health authority is an uphill challenge for innovators who struggle to obtain investors and purchasing agreements with health institutions. Regulations and procurement processes also vary across provinces and territories making access for innovators, companies and ultimately patients challenging.
- **Health care innovation leaders responsible for ensuring continuity of care are risk averse.** New technologies are seen as inherently risky, and must show return on investment and meet strict safety requirements, leaving little room for emerging innovations to be tested and scaled up. Although Canada is a country of great innovation and research capacity, this aversion to risk and change can often put us behind our international counterparts when it comes to adopting new digital health solutions.

Reducing these barriers involves addressing the digital determinants of health by investing in accessible internet infrastructure and devices for seniors regardless of their income, geographic location or race. Digital literacy training and subsidized access to devices and the internet can go a long way to facilitate more choice and innovation in accessing health care.

Achieving buy-in from physicians and other health care providers starts with addressing their technology adoption concerns such as perceived increase in workload, patients’ information security, insufficient remuneration, and technical troubleshooting. New virtual options must come with additional education and training for health care professionals and anyone in the circle of care including caregivers and the individuals receiving care themselves to ensure sustainable adoption.

Finally, government grants funding health innovation need to incorporate implementation and partnership metrics that ensure new research and technology is applied and scaled up for the benefit of all older Canadians.

3. Further Approaches on Improving Access to Virtual Care

Canadian jurisdictions have taken different approaches to improving virtual care access during the COVID-19 pandemic. An [InfoSheet on Virtual Health Care Solutions in Canada](#), published in October 2020, summarizes these approaches.

AGE-WELL's International Scientific Advisory Committee is closely monitoring virtual care approaches at a global scale and further commentary on specific jurisdictions is available upon request.

4. The Impact of COVID-19 on Innovation and Choice

The COVID-19 pandemic accelerated the adoption of virtual health technologies by Canadians, as well as by provincial and territorial governments. Canadians completely altered the way they access the healthcare system. Previously, they had been seeking advice from a physician in-person 61% of the time. Since the pandemic began, Canadians have only been meeting with their physician or other health care professional in-person 10% of the time.⁸

For their part, provincial and territorial governments and medical regulatory bodies have also adapted quickly to the physical distancing requirements of the pandemic through enhanced adoption of virtual health services. For example, in New Brunswick, eVisitNB launched to provide patients with secure virtual services for their primary care needs. Regulatory bodies in British Columbia and Ontario developed a telemedicine essentials tool as a means of assisting physicians in the use of telemedicine for medical care.⁹

The COVID-19 pandemic has made it no longer acceptable to "wait and see" on virtual and digital health. This has necessitated a frank look at the costs of institutional care - both in terms of dollars spent but also inherently limited service and quality of service to Canadians. We generally view the COVID-19 pandemic as having a net positive impact on innovation and choice in Canada's healthcare sector. This is sadly, incomparable against the numerous Canadian lives lost to this pandemic - especially the preventable deaths of older adults in long-term care settings. We must continue to consider how we can catch up to providing modern and effective digital and virtual health tools in the face of multiple policy and implementation barriers and a second wave of the pandemic.

About AGE-WELL

AGE-WELL is a pan-Canadian network that brings together researchers, older adults, caregivers, partner organizations and future leaders to accelerate the delivery of technology-based solutions that make a meaningful difference in the lives of Canadians. AGE-WELL researchers are producing technologies, services, policies and practices that improve quality of life for older adults and caregivers, and generate social and economic benefits for Canada. Currently, AGE-WELL includes more than 250 funded and affiliated researchers from 42 universities and research centres across Canada, 420 industry, government and non-profit partners who work closely with us on solutions for healthy aging, 760 trainees who are the next generation of leaders in the field of technology and aging. AGE-WELL launched in 2015 through the federally funded Networks of Centres of Excellence (NCE) program.

Learn more: www.agewell-nce.ca

About APPTA - Advancing Policies and Practices in Technology and Aging

Launched in 2017 with a single goal in mind, the AGE-WELL National Innovation Hub APPTA is putting innovative aging and technology research into the hands of the people who can use it. We know that it takes on average 17 years for research to translate into action. By bringing together a diverse and dynamic team of young professionals to support an integrated network in research, policy, and innovation, APPTA aims to bridge that gap and mobilize aging and technology research in ways that can improve the lives of older Canadians.

Learn more: www.agewell-nih-appta.ca

About Digital Health Circle

Launched as an AGE-WELL National Innovation Hub, the Digital Health Circle offers unique, not-for-profit support for the creation of innovative new digital health technologies. Using scientific expertise and cutting-edge tools, we help innovators create solutions that meet the needs of diverse healthcare stakeholders. Our mandate is to bring together stakeholders and empower patients (seniors) to participate in generating solutions that support independence and quality care for all Canadians.

Learn more: www.digitalhealthcircle.ca

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