

A Canadian Healthcare Policy Framework for Clinical Care at the End and the Beginning of Life: Prioritization, Human Resource Management, and Remuneration Models

Description

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Abstract

The Canadian health-care system requires re-evaluation and innovation focused on clinical services provided at the beginning of life. The provincial/ territorial healthcare systems have not ethically prioritized clinical services, nor provided sustainable human resource management, or appropriate fiscal remuneration directed at healthcare providers serving patients at the beginning of life. Senior care has been prioritized for decades, but the beginning of life offers the greatest opportunities to make a positive long-term impact on population health outcomes. Investing in improving the health of Canadians at the beginning of life will lead to lower overall healthcare costs later in life. Ethically based prioritized healthcare services are required for both the end and the beginning of life populations. Sustainable human resources, cost-effective care, appropriate remuneration, and timely access with outcome-accountable healthcare service is required.

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