



Canadian Academy of Health Sciences
Académie canadienne des sciences de la santé

Provincial Government Relations Strategy

Carol Herbert/Eleanor Fast

Approved by the CAHS Board on June 28, 2018

Provincial Government Relations Strategy

Purpose

This document is a draft provincial government relations strategy for the Canadian Academy of Health Sciences.

Background

The CAHS' Strategic Plan identifies "Build Government Relationships" as one of five strategic goals. Good progress has been made on this front, but activities have been largely opportunistic and focused around the Annual Forum and assessments. Aligned with CAHS federal government relations strategy, there is an opportunity to embark on a renewed provincial government relations strategy focused on medium to long term relationship building and influence.

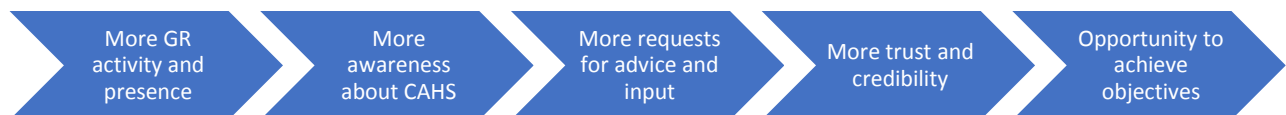
Key Government Relations Objectives

- CAHS becomes a go-to organization for evidence-based advice to inform provincial decision-making regarding health.

Other objectives

- CAHS is asked to contribute to provincial decision-making through assessments or other means.
- CAHS receives project-based or ongoing core funding from some provincial governments.
- CAHS is approached by other organizations as a partner of choice.
- An increase in provincial government attendance at, and sponsorship of, CAHS' Annual Forum.

Pathways to success





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Key messages

Developing key messages for government relations will be an iterative process, as described below. However, initial key messages are:

Founded in 2005, CAHS recognizes and collectively engages in a volunteer capacity the top-ranked health and biomedical scientists and scholars from across all Canadian universities and research institutes. CAHS Fellows are health scholars and leaders from the health professions (Medicine, Nursing, Dentistry, Pharmacy, Rehabilitation Sciences, Veterinary Medicine, Public Health). Our 659 (as of 2017) Fellows are elected based on their internationally recognized leadership, scientific creativity, distinctive disciplinary competency and willingness to serve Canada in the volunteer activities of the CAHS.

CAHS is seeking ongoing funding in order to achieve its potential, to:

- *Be the “go-to” resource for scientific advice on options to address health-related questions of critical concern to Canadians;*
- *Provide assessments which close the knowledge translation gap between evidence and improved health policy and program strategies;*
- *Be internationally recognized as the organization that has major impact on improving decision-making about health-related challenges in Canada; and,*
- *Become Canada’s ambassador and authoritative voice for health sciences on the international stage.*

Materials will be provided to Regional leads to which province-specific materials can be added.

A phased approach to GR activities

As described above, before we can embark on trying to achieve our overarching objective we need to enhance our presence and establish trust. Therefore, a phased approach to GR is recommended.

At the provincial level, it is suggested that we initially focus on two or three provinces where political conditions are favourable and we have existing relationships between Fellows and Ministry of Health.

Province-specific GR aims will be important and can be developed in partnership between the Regional leads and the GR Committee.

Phase 0: **Organizing internally.** January 2018 onward

Before provincial GR can begin it will be necessary to identify regional GR leads, agree on province-specific GR aims, and potentially develop province-specific GR materials.

Phase 1: **Enhancing our presence.** January 2018 onward

Activity: Introductory and follow-up meetings to be led by Regional group leads accompanied by one or more Board member with a range of provincial capitol-based stakeholders (see below).

Objective: Awareness raising about CAHS and information gathering on best opportunities for influence and partnership

Phase 2: **Establishing trust.** Sept 2018 onward

Activity: Intense GR activity with a small number of stakeholders identified in phase 1. This would include highest level meetings and carefully developed partnership / funding pitches.

Objective: Develop funded pilot partnerships/ projects with government and other partners.

Phase 3: **Influence and partnership.** Timing tbc.

Activity: Learning from Phase 2, establish meaningful long-term funded partnership(s) (potentially with government agency such as Provincial Ministry of Health or NAPHRO organization in region, but keeping an open mind during phases 1 and 2).

Objective: To establish CAHS as a go-to organization for evidence-based advice to inform provincial decision making.

Secondary objective: Greater financial stability.

Next steps - Implementing phase 1: Enhancing our presence

Once phase 0 is complete, activities in phase 1 can begin, mainly carried out by the Regional leads in selected provinces, supported by the President, and Chair of the GR Committee. Activity will focus not only on relations directly with government but also in raising awareness about CAHS throughout the provincial policy ecosystem.



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Targets include:

Elected/ appointed officials (and their staff and Deputies):

- Minister of Health or equivalent
- Minister of Innovation, Science and Economic Development or equivalent
- Minister of Mental Health and Addictions or equivalent
- Chair and Vice Chairs of Committees on Health or equivalent

Provincial Government officials involved in policy development in:

Leadership and policy staff at non-governmental organizations involved in providing evidence-based advice to government.

Others:

- National Alliance of Provincial Health Research Organizations (NAPHRO) members in target provinces
- Health charities on issue-by-issue basis in target provinces
- University presidents, provosts,
- Deans of health sciences and executive officers for research and equivalents
- Hospital CEOs

Although work in each province will proceed largely independently, the GR Committee will play a coordinating and oversight role. The intention will be to look for opportunities to bring our work at a provincial level onto the national stage, for example by taking part in a meeting of provincial health deputy ministers, or at a FPT ministerial meeting.

Phases 2 and 3: Establishing trust and achieving our objectives

Plans for Phase 2 and 3 will be developed and discussed by the Committee on Government Relations in Sept 2018 in conjunction with provincial leads from provinces engaged in first phases. .

Measuring success

- Contracts achieved with provinces for assessments or related work
- Ongoing funding
- Approaches by provincial governments to CAHS that demonstrate their knowledge of our capacity

Carol Herbert/Eleanor Fast
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