

December 5, 2016

Hon. Jean-Yves Duclos
Minister of Families, Children and Social Development
House of Commons
Ottawa, ON K1A 0A6
Jean-Yves.Duclos@parl.gc.ca

RE: Improving access to Canada Pension Plan Disability benefits: The role of registered nurses and nurse practitioners

Dear Minister Duclos,

We are writing on behalf of our respective organizations¹ about how Service Canada could improve access to Canada Pension Plan Disability (CPP-D) benefits by adopting a more consistent and inter-professional approach which allows registered nurses (RN) and nurse practitioners (NP) to complete CPP-D medical reports without restrictions.

In 2015, the Auditor General of Canada issued a report on the CPP-D program which identified the "lengthy and complex" application process and delays in the initial, reconsideration, and appeal decision making process.² Your response was to instruct your department to "put in place an action plan that addresses all the recommendations of the Auditor General and to ensure the Program is significantly improved."³

Seeking to improve access to this critical program for some of Canada's most vulnerable people, this letter recommends that steps be taken to ensure Service Canada accepts CPP-D medical reports completed by RNs and NPs and that it makes this authorization explicit and public.

(i) Service Canada should follow its own policies on medical evidence from RNs and NPs

CPP-D application materials and the form on Service Canada's website consistently refer only to a "physician" as being authorized to complete the medical report.⁴ This excludes RNs and NPs.

However, this information is contrary to the Service Canada policy "The Provision of Medical Evidence by Nurses and Nurse Practitioners", dated 1999-05-19, which states:

There are no restrictions in the CPP or its Regulations which exclude medical evidence provided by a nurse or which stipulate that medical

information in support of a disability application must originate from a physician. Current medical report forms are appropriate for completion by physicians, registered nurses and nurse practitioners.

A medical report that has been completed by a RN or NP is accepted at full value, in two circumstances:

- 1) A RN working in a geographically isolated area, can complete an initial medical report when he/she is using records maintained by the treating physician(s). Any necessary medical documentation in support of the diagnosis such as x-ray reports or consultative reports, could be attached.
- 2) A NP working in a geographically isolated area where there is decreased availability of physicians, can independently complete an initial medical report.

A more recent document, Service Canada College Training Module, *Medical Adjudication--Disability Adjudication Level 1--Module 2*, effective 2011-02-01, reiterates that "under certain specific circumstances, a nurse practitioner or a registered nurse" may fill in the medical report for a CPP-D application.

We expect that you will immediately ensure that Service Canada follows these policies. This would entail revising the medical report forms and supporting documentation to reflect this approach.

While it is important to ensure that clients in geographically isolated areas can have initial medical reports for their CPP-D applications completed by NPs and RNs, we urge further swift action to improve access across Ontario and Canada.

(ii) Service Canada policies should be expanded to recognize the important role of registered nurses and nurse practitioners in ensuring access to CPP-D

Health professionals other than physicians should be able to provide medical reports to the CPP-D program to ensure greater access. Restricting medical evidence to that obtained from physicians fails to reflect the reality that primary care and specialized health care is increasingly being delivered by inter-professional teams focused on person-centred care. As well, applicants face difficulties in accessing primary care generally, not just in isolated areas. Limiting evidence from NPs and RNs only to those working in "geographically isolated areas" is not consistent with ongoing efforts to improve access to health services by enabling health professionals to work to their full scope of practice.

Better use of regulated health-care providers who know the applicant best will support those in need with severe and prolonged disabilities, including those facing terminal illnesses and grave conditions.

Unlike the federal application process, Ontarians applying to the Ontario Disability Support Program (ODSP) will find a broad range of regulated health professionals (NPs, ophthalmologists, optometrists, physicians, psychological associates, and psychologists) are authorized to complete the Health Status Report. An even broader group of health professionals (audiologists, chiropractors, occupational therapists, physiotherapists, RNs, social workers, and speech-language pathologists) are approved to complete the Activities of Daily Living Index.⁵

We urge you revise Service Canada policies to allow for greater inclusivity of health professionals beyond physicians in the provision of medical evidence for CPP-D eligibility.

Minister Duclos, as you acknowledged in response to the Auditor General of Canada's report:

This situation is not acceptable. The Canadian Pension Plan Disability (CPP-D) program is supposed to be there to support Canadian facing a severe and prolonged disability. These are some of the most vulnerable Canadians, many of them facing very difficult circumstances. We must do better for them.⁶

Increasing access to CPP-D by accepting medical reports from RNs and NPs in all circumstances will help the system "do better" for Canadians experiencing disability.

We look forward to prompt action on this matter.

Warm regards,



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Chief Executive Officer
Registered Nurses' Association of Ontario



Mary Marrone
Director of Advocacy & Legal Services
The Income Security Advocacy Centre



Diane Janisse
Co-chair of the Canada Pension Plan Working Group

cc. Kris Johnson, Director General, CPP Disability Directorate, Employment and Social Development Canada, Kris.Johnson@hrsdc-rhdcc.gc.ca

¹The Registered Nurses' Association of Ontario (RNAO) represents registered nurses, nurse practitioners and nursing students in Ontario. The Income Security Advocacy Centre is a specialty legal clinic in Ontario that advances the rights, interests and systemic concerns of low-income Ontarians with respect to income security, including the CPP-D program. The Canada Pension Plan Working Group consists of legal clinic caseworkers from across Ontario who meet quarterly to discuss CPP-D appeals.

²Office of the Auditor General of Canada (2015). *Fall 2015 Reports of the Auditor General of Canada. Report 6. Canada Pension Plan Disability Program*. Ottawa. http://www.oag-bvg.gc.ca/internet/docs/parl_oag_201511_06_e.pdf, pp. 4-6.

³Employment and Social Development Canada (2016). Statement by the Minister of Families, Children and Social Development in response to the 2015 Fall Report of the Auditor General of Canada, February 2, 2016. <http://news.gc.ca/web/article-en.do?nid=1030889>

⁴Service Canada (2016). Application for Canada Pension Plan Disability Benefits. <http://www.servicecanada.gc.ca/fi-if/index.jsp?app=prfl&frm=ISP1151&lang=eng>

⁵Ontario Ministry of Community and Social Services. Applying for ODSP Income Support.

http://www.mcsc.gov.on.ca/en/mcsc/programs/social/odsp/income_support/IS_Application.aspx

⁶Employment and Social Development Canada (2016). Statement by the Minister of Families, Children and Social Development in response to the 2015 Fall Report of the Auditor General of Canada, February 2, 2016.