

Health Canada's 2024-25 Departmental plan

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Plan ministériel de Santé Canada 2024-2025

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Health Canada's 2024-25 Departmental plan at a glance

A departmental plan describes a department's priorities, plans, and associated costs for the upcoming three fiscal years.

Health Canada is the federal department responsible for helping Canadians¹ maintain and improve their health. In keeping with the Department's commitment to making this country's population among the healthiest in the world, its main responsibilities are as a regulator, a catalyst for innovation, a funder, and an information provider.

The Department's [Raison d'être, mandate and role and operating context](#) can be found on Health Canada's webpage. Information on Health Canada's mandate letter commitments is available in the [Minister of Health](#) and the [Minister of Mental Health and Addictions and Associate Minister of Health](#) Ministers mandate letters.

[[Read the full departmental plan](#)] [[Print this page](#)]

Key priorities

- Improving oral health care access for Canadians.
- Working together to improve health care for Canadians to advance shared health priorities.
- Reducing substance use-related harms and addressing the illegal toxic drug supply and overdose crisis.
- Modernizing regulatory oversight and increasing regulatory agility for drugs and medical devices.

For more information on key priorities see the [Ministers' Message](#) in the full departmental plan.

Refocusing government spending

In Budget 2023, the government committed to reducing spending by \$14.1 billion over the next five years, starting in 2023-24, and by \$4.1 billion annually after that.

As part of meeting this commitment, Health Canada is planning the following spending reductions.

- **2024-25:** \$20,682,000
- **2025-26:** \$28,948,000
- **2026-27 and after:** \$40,057,000

Health Canada will achieve these reductions by doing the following:

- Improving operational efficiencies of Programs post-pandemic including investing in digital solutions, business informatics and re-aligning research and surveillance.
- Optimizing risk-based approaches to compliance and enforcement activities and consolidating activities across product lines.
- Reducing spending on internal services (e.g., on corporate activities such as human resources, real property), making a small reduction to the grants and contributions budget, and reducing travel and the use of professional services.

¹ "Canadians" not only refers to those with citizenship but also those with residency status.

The figures in this departmental plan reflect these reductions.

Highlights

A [Departmental Results Framework](#) consists of an organization's core responsibilities, the results it plans to achieve, and the performance indicators that measure progress toward these results. In 2024-25, among the many others detailed in the full Departmental Plan, Health Canada aims to achieve the following key results, that contribute to the health of Canadians.

[Expand all] [Collapse all]

[Core responsibility 1: Health care systems](#)

[Core responsibility 2: Health protection and promotion](#)

[Internal services](#)

For more information, see "[Plans to deliver](#)" in the full departmental plan.

Core responsibility 1: Health care systems

Health Canada provides national leadership to foster sustainable healthcare systems that ensure access for Canadians to appropriate and effective health care, including dental care. This is achieved through partnerships with provincial and territorial governments and support through targeted funding agreements to organizations and key pan-Canadian health partners that are contributing to health system improvements. This is supported by two departmental results.

Departmental Results:

- 1: Canada has modern and sustainable health care systems
- 2: Canadians have access to appropriate and effective health services

2024-25 Planned spending: \$7,555,392,020

2024-25 Planned human resources: 560 full-time equivalents

Plans to achieve results:

- Health Canada will continue to expand access to oral health care through the Canadian Dental Care Plan. This transformative \$13 billion investment over 5 years aims to benefit an estimated nine million Canadians without private dental coverage. In 2024-25, the Department will also launch a call for proposals for the Oral Health Access Fund, for projects that reduce barriers to accessing oral health care for priority populations.
- Health Canada will continue to bolster the public healthcare system through the [Working Together to Improve Health Care for Canadians Plan](#) which includes a Government of Canada investment of over \$200 billion over 10 years. Provinces and territories have signed bilateral agreements that focus on expanding family health services, supporting the health workforce, improving mental health and substance use services, and modernizing health systems and will report annually on progress. Additional funds include \$5.4 billion for Aging with Dignity bilateral agreements and \$1.7 billion for increasing personal support workers.
- The Department will continue to work with partners to advance pharmaceutical management strategies so that Canadians have affordable access to the drugs they need. In 2024-25, Health

Canada will work to develop the Canadian Drug Agency, designed to make Canada's drug system more sustainable and better prepared for the future. The Department will also advance ongoing efforts related to a Pharmacare Act (not yet in force) and will work with province and territories to develop agreements for the National Strategy for Drugs for Rare Diseases.

More information about [Health care systems](#) can be found in the full departmental plan.

Core responsibility 2: Health protection and promotion

Health Canada works with domestic and international partners to assess, manage, and communicate the health and safety risks and benefits associated with health and consumer products, food, chemicals, pesticides, environmental factors, tobacco and vaping products, cannabis, and controlled substances. These risks are managed through rigorous regulatory frameworks and by communicating risks and benefits to Canadians so that they can make informed decisions. This is supported by three departmental results.

Departmental Results:

- 3: Canadians have access to safe, effective and quality health products
- 4: Canadians are protected from unsafe consumer and commercial products and substances
- 5: Canadians make healthy choices

2024-25 Planned spending: \$801,063,755

2024-25 Planned human resources: 6,109 full-time equivalents

Plans to achieve results:

- Health Canada will continue to advance an agile, modern licensing scheme for drugs (prescription and non-prescription) and medical devices in Canada. The Department will also modernize the regulation of clinical trials to increase transparency, advance plans to facilitate a modernized Self-Care Framework, and apply real-world evidence to improve post-market oversight of prescription drugs.
- Health Canada will lead the implementation of the renewed Canadian Drugs and Substances Strategy. The Strategy covers a broad range of legal and illegal substances and focuses on prevention and education, substance use services and supports, evidence, and substance controls. Specifically, Health Canada aims to enhance data availability, provide additional support for innovative models, and promote regulatory compliance.
- Following amendments to the *Canadian Environmental Protection Act 1999*, the Department will conduct ongoing research, monitoring, and risk assessments on chemical substances, develop strategies to replace vertebrate animal testing, and invest in research on plastic additives and microplastics. The Department will also create a more sustainable approach to managing pesticides by making targeted regulatory amendments to enhance protection of human health, the environment, and wildlife from risks posed by pesticides and increasing the transparency of decisions.
- The Department will continue promoting healthy eating by making healthier choices easier for all Canadians by developing healthy eating resources that are inclusive of Canada's diverse population. The Department will also monitor child and teen exposure to food advertising and analyze food supply data to inform future healthy eating initiatives.

More information about [Health protection and promotion](#) can be found in the full departmental plan.

Internal services

Internal services are the services that are provided within a department so that it can meet its corporate obligations and deliver its programs.

2024-25 Planned spending: \$322,146,749

2024-25 Planned human resources: 2,038 full-time equivalents

Plans to achieve results:

- In support of the 2023-26 Data Strategy for the Federal Public Service and driven by Health Canada's Data Strategy, the Department will advance the strategic use of data as an asset to support decision-making with the goal of building a digital-first organization.
- Health Canada is committed to building a healthy, diverse, and inclusive workforce. In 2024-25, the Department will continue to advance its 2022-25 Accessibility Plan, for example by developing clear performance indicators to measure improvements to accessibility, to meet the Government of Canada's goal to make Canada barrier free by 2040.

More information about [Internal services](#) can be found in the full departmental plan.

Health Canada's 2024-25 Departmental plan

On this page

[From the Ministers](#)

[Plans to deliver on core responsibilities and internal services](#)

[Core Responsibility 1: Health care systems](#)

[Core responsibility 2: Health protection and promotion](#)

[Internal services](#)

[Planned spending and human resources](#)

[Spending](#)

[Funding](#)

[Future-oriented condensed statement of operations](#)

[Human resources](#)

[Corporate information](#)

[Supplementary information tables](#)

[Federal tax expenditures](#)

[Definitions](#)

From the Ministers

We are pleased to present Health Canada’s 2024-25 Departmental Plan, which outlines the Department’s key priorities for this coming year. As we move forward, we remain committed to helping Canadians maintain and improve their health and ensuring equitable access to high quality health care.

We know that oral health is an important part of our overall health and well-being, yet one in four Canadians reported avoiding visiting an oral health professional because they couldn’t afford it.

Cost should not be a barrier to oral health care. That is why in 2024-25, the Government of Canada will continue to move forward on effectively delivering the Canadian Dental Care Plan.

Through a phased approach that will ensure a smooth onboarding process, we estimate the Plan will help nine million Canadian residents and make a real difference in their health and quality of life.

The Government of Canada will maintain its focus on supporting the transformation of our healthcare system by investing over \$200 billion over 10 years through the Working Together to Improve Health Care for Canadians Plan.

In 2024-25, Health Canada will continue to work with provinces and territories, particularly through the negotiated bilateral Working Together agreements, to advance shared health care priorities. This includes expanding access to family health services, notably in rural and remote areas; supporting our health workforce and reducing backlogs; modernizing health systems with health data and digital tools; and improving access to mental health, substance use, and addictions supports and services.

In addition, we are investing \$5.4 billion in funding for Aging with Dignity bilateral agreements to improve the quality and safety of long-term care and home and community care across the country.

Collaboration with the provinces, territories, and other stakeholders is at the heart of the Department’s work. Through joint efforts, Health Canada will further initiatives on workforce retention, innovative approaches to expedite foreign credential recognition processes, labour mobility for health professionals and supporting a new centre of excellence—Health Workforce Canada.

In partnership with key stakeholders, Health Canada will support the adoption of common standards from the Pan-Canadian Interoperability Roadmap to better connect health care systems and allow secure access of electronic health information. The Department will focus on modernizing how health data is collected and shared so that Canadians can be active participants in their health care through better access to their own digital health information that can be easily and securely shared among health care providers.

Health Canada will continue to collaborate with a wide range of partners to ensure Canadians can access evidence-based, person-centered, trauma-informed, and culturally appropriate mental health and substance use services, including to help develop and expand Integrated Youth Services. Additionally, the Department will continue its efforts to reduce substance use-related harms and the illegal toxic drug supply and overdose crisis through an evidence-based continuum of prevention and education, treatment and harm reduction services and supports, as well as innovative substance controls. This work will be guided by the renewed Canadian Drugs and Substances Strategy.

Health Canada is committed to ensuring universal access to health care, safeguarding, and advancing the public health system, and promoting equitable and affordable healthcare for all Canadians. In 2024-25, Health Canada will continue to promote and defend the core principles of the *Canada Health Act* to

ensure access to health services without financial or other barriers, such as patient charges for insured services. We will build on efforts to improve access to care for specific health needs, including sexual and reproductive health services and palliative care.

Access to safe and effective pharmaceuticals in Canada is an important part of Health Canada's work. Canada has strong regulatory safeguards to protect Canadian drug supply. The new Canadian Drug Agency will provide the dedicated leadership and coordination to make Canada's drug system more sustainable and better prepared for the future. The Government of Canada plans to advance work on the National Strategy for Drugs for Rare Diseases and on national pharmacare, including ongoing efforts related to the development of pharmacare.

Furthermore, Health Canada will continue to support the implementation of medical assistance in dying legislation in a consistent and safe manner across all jurisdictions in Canada. This will include the release of the 5th annual federal report on medical assistance in dying in Canada, which provides a comprehensive overview of its administration.

As a part of its regulatory oversight role, the Department will continue its efforts to ensure that Canadians have timely access to safe, effective, and quality health products. In partnership with provinces and territories, industry, and stakeholders, Health Canada will continue to lead efforts to mitigate and alleviate the impacts of drug shortages.

The Department will also advance regulatory changes to support an agile, modern licensing scheme for drugs (prescription and non-prescription) and medical devices in Canada. Health Canada will continue to work to modernize the oversight of self-care products, including natural health products and non-prescription drugs.

Health Canada remains committed to protecting Canadians from unsafe consumer products and substances. This includes commitments to strengthening pesticide regulations and re-evaluating previously approved pesticides to ensure they meet current scientific standards and monitoring compliance with the ban on cosmetic animal testing under the *Food and Drugs Act*.

Health Canada plays a pivotal role in helping Canadians protect and promote their health and safety. To that end, the Department will continue to promote healthy eating among Canadians, particularly children. Health Canada will also develop a cost recovery framework for the *Tobacco and Vaping Products Act* to enable the fixing of fees, levies or charges, and related compliance and enforcement tools. Additionally, the Department will help people in Canada adapt to the impacts of climate change and extreme weather events. For example, Health Canada will fund projects that address research gaps, such as identifying indoor heat safety thresholds, to support efforts to understand and address the impacts of extreme heat. Finally, the Department will leverage lessons learned from its response to the COVID-19 pandemic to strengthen plans for future emergency preparedness and support for the healthcare system.

Across these priorities, Health Canada will continue to work closely with provincial and territorial governments, Indigenous partners, key stakeholders, and communities to promote and protect the health of all people in Canada.

As always, it is the employees of Health Canada that are key in carrying out the work outlined in this plan. We are grateful for their continued dedication and commitment and feel privileged to work alongside such an exceptional team.



*The Honourable Mark Holland, P.C. M.P.
Minister of Health*



*The Honourable Ya'ara Saks, P.C. M.P.
Minister of Mental Health and Addictions and
Associate Minister of Health*

Plans to deliver on core responsibilities and internal services

Health Canada administers the [Canada Health Act](#) (CHA), which embodies national principles to ensure that all Canadians² have access to insured health services without financial or other barriers. In addition to working closely with provincial and territorial (P/T) governments, the Department also works with partners in the Health Portfolio [Public Health Agency of Canada (PHAC), Canada Food Inspection Agency (CFIA), and Canadian Institutes of Health Research (CIHR)], other federal departments and agencies, non-governmental organizations, other countries, Indigenous partners,³ and the private sector.

From coast to coast to coast, Health Canada employees—scientists and researchers, inspectors, doctors and nurses, policy analysts and administrative professionals, and many others—are working to help Canadians maintain and improve their health.

Sex- and Gender-based Analysis Plus (SGBA Plus) is an analytical approach that helps assess structural inequalities and diverse experiences to shape initiatives and legislation. In 2024-25, Health Canada will continue to implement its [Sex- and Gender-Based Analysis Plus Action Plan](#) which provides a framework for integrating sex, gender and diversity considerations into the Department's work and culture. This includes considering Indigenous identities through the application of culturally appropriate SGBA Plus. The Department will continue to provide tools to facilitate, promote, and support its employees in applying SGBA Plus in all its work.

More information about SGBA Plus can be found in the [Gender-Based Analysis Plus Supplementary Information Table](#).

As part of Canada's commitment to support the United Nations 2030 Agenda for Sustainable Development and UN Sustainable Development Goals (SDGs), Health Canada's domestic contribution through ongoing policies, programs and initiatives advances five SDGs: good health and well-being (3); clean water and sanitation (6); sustainable cities and communities (11); responsible consumption and production (12); and climate action (13).

More information about Health Canada's contributions to Canada's Federal Implementation Plan on the 2030 Agenda and the Federal Sustainable Development Strategy can be found in [Health Canada's Departmental Sustainable Development Strategy 2023-2027](#)

Core responsibilities and internal services:

[Core responsibility 1: Health care systems](#)

[Core responsibility 2: Health protection and promotion](#)

[Internal services](#)

² "Canadians" not only refers to those with citizenship but also those with residency status.

³ The Government of Canada recognizes First Nations, the Métis Nation, and Inuit as the Indigenous Peoples of Canada, consisting of distinct, rights-bearing communities with their own histories, including with the Crown. The work of forming renewed relationships based on the recognition of rights, respect, co-operation, and partnership must reflect the unique interests, priorities, and circumstances of each People. Health care policy development needs to recognize these distinctions.

Core Responsibility 1: Health care systems

In this section

[Expand all] [Collapse all]

[Description](#)

[Program inventory](#)

[Summary of changes to reporting framework since last year](#)

[Quality of life impacts](#)

[Results and targets](#)

[Snapshot of planned resources in 2024-25](#)

[Plans to achieve results](#)

[Key risks](#)

[Related government priorities](#)

Description

Health Canada provides national leadership to support and encourage sustainable and adaptable healthcare systems that ensures access for Canadians to appropriate and effective health care services, including dental care.

Program inventory

Health care systems is supported by the following programs in the program inventory:

- Responsive Health Care Systems.
- Healthy People and Communities.
- Quality Health Science, Data and Evidence.

Supporting information on planned expenditures, human resources, and results related to Health Canada’s program inventory is available on [GC InfoBase](#).

Summary of changes made to reporting framework since last year

In light of the establishment of the Canadian Dental Care Plan and the Oral Health Access Fund, the words “including dental care” have been added to the Description of Core Responsibility 1 as described above. Additionally, a new Departmental Results Indicator has been established ([see table below](#)).

Quality of life impacts

This core responsibility contributes to the [Health domain](#) of the [Quality of Life Framework](#) for Canada and, more specifically, Health care systems.

Results and targets

The following tables show, for each departmental result related to Core responsibility 1: Health care systems, the indicators, the results from the three most recently reported fiscal years, the targets and target dates approved in 2024–25.

**Table 1: Indicators, results and targets for departmental result 1
Canada has modern and sustainable health care systems**

Departmental Result Indicators	Target	Date to achieve target	Actual Results
National health expenditure as a percentage of Gross Domestic Product (GDP) ^a	Between 10.9% and 13.4%	March 31, 2025	2020-21: 13.8% 2021-22: 13.2% 2022-23: 12.2%
Real per capita health expenditure (1997) ^{a b}	Between \$4,386 and \$5,361	March 31, 2025	2020-21: \$4,759 2021-22: \$4,963 2022-23: \$4,874
Drug spending as a percentage of Gross Domestic Product ^c	Between 1.0% and 2.0%	March 31, 2025	2020-21: 1.9% 2021-22: 1.7% 2022-23: 1.7%
Percentage of family physicians using electronic medical records	At least 95.0%	March 31, 2026	2020-21: 86.0% 2021-22: 86.0% 2022-23: 92.6%
^a The results and targets are estimates and subject to change as new data is released. ^b Real per capita health expenditure is expressed in 1997 constant Canadian dollars. ^c Drugs include prescribed and over-the-counter medication.			

Table 2: Indicators, results and targets for departmental result 2
 Canadians have access to appropriate and effective health services

Departmental Result Indicators	Target	Date to achieve target	Actual Results
Percentage of Canadians (aged 15+) with a mental disorder who have expressed that they have an unmet mental health care need	At most 22.0%	March 31, 2027	2020-21: 24.7% 2021-22: 24.7% 2022-23: 24.7%
Percentage of Canadians (aged 18+) who have expressed that they have an unmet need for access to home care services	At most 1.0%	March 31, 2027	2020-21: 1.3% 2021-22: 1.7% 2022-23: N/A
Percentage of <i>Canada Health Act</i> compliance issues addressed within 24 months of identification	At least 80%	March 31, 2025	2020-21: 96% 2021-22: 93% 2022-23: 94%
Percentage of Canadians (aged 12+) who did not fill a prescription for medicine or skipped doses of medicine because of the cost	At most 8.0% ^a	March 31, 2025	2020-21: 5.0% 2021-22: 5.0% 2022-23: N/A
Percentage of the target Canadian population who avoided visiting an oral health professional due to cost	TBD in 2025-26	TBD in 2025-26	2020-21: N/A 2021-22: N/A 2022-23: N/A ^b
^a The target has been updated to reflect recent data trends and raising costs associated with inflation.			
^b This is a new indicator. Results are expected in 2026-27.			

Snapshot of planned resources in 2024–25	
Planned spending:	\$7,555,392,020
Planned full-time resources:	560 full-time equivalents

The financial, human resources, and performance information for the Health Canada’s program inventory is available on [GC InfoBase](#).

Plans to achieve results

Modern and sustainable healthcare systems are vital for addressing the health needs of Canadians. Health Canada plays an important role in a range of health care and health system priorities and works with P/T governments to improve health care for Canadians. This includes modernizing the healthcare system so that it can meet a broader range of needs in a timely manner and improving the affordability and accessibility of pharmaceuticals.

Health Canada also administers the CHA and upholds its core principles which underpin publicly funded health systems in Canada. Through Health Canada, the GC is responsible for ensuring that P/T health care insurance plans provide reasonable access to health services without financial or other barriers, such as patient charges for insured services.

The Department's grants and contribution programs allow Health Canada to work with funding recipients and stakeholders to advance a wide variety of health priorities. These contribution programs fall into three broad categories:

- Those that address major national health priorities or health issues that cut across multiple Departmental Results that make up Core Responsibility 1.
- Health promotion programs where community organization participation is essential for success.
- Research projects that further the development of knowledge, policy, or program delivery.

As part of Health Canada's efforts to improve access to health services, the Department will continue to expand access to oral health care. Oral health is an important part of Canadians' overall health and well-being, but not all Canadians are able to obtain oral health care due to cost and other barriers, such as limited access to appropriate care. Canadians with lower family incomes are less likely to have private dental insurance and have both the highest level of oral health problems and the most difficulty accessing oral health care.

The new, long-term Canadian Dental Care Plan will support both children and adults with adjusted annual family net incomes under \$90,000 without access to dental care coverage. This is the largest new social program introduced in generations and will have a substantial impact on Canadians' oral health. The Plan will be rolled out using a phased approach, starting with seniors, and remaining eligible residents by 2025.

Expanding access to eligible adults will benefit those with lower family incomes and who lack dental coverage. Valued at approximately \$4.4 billion a year, this transformative Plan aims to reduce financial barriers to accessing oral health care services for up to an estimated nine million eligible Canadian residents who do not have access to private or employer-sponsored dental coverage/insurance.

Health Canada is working with Statistics Canada to collect data on the oral health status and extent to which Canadians have access to dental care in Canada. This work will help fill gaps in oral health data and allow Health Canada to measure the impact of its efforts.

Additionally, starting in 2025, a new Oral Health Access Fund will complement the Canadian Dental Care Plan by funding projects that reduce barriers to accessing oral health care for priority populations, for example, people living in rural and remote communities. The goal of this funding is to improve oral health provider training and support community care and prevention measures. Budget 2023 provided

\$250 million over 3 years starting in 2025-26, and \$75 million ongoing to establish the Fund. In 2024-25, Health Canada will launch a call for proposals, with funding being dispersed to successful applicants in 2025-26.

Did you know?

Since 2022, the interim [Canada Dental Benefit](#) has been helping children under the age of 12 access dental care, which will continue until June 2024. This Benefit aims to address the negative impact poor oral health can have on quality of life during formative childhood years and prevent pain and infections, potential problems with eating, speaking, playing, or learning, as well as other future health problems. It has been the first step to improve access to dental care services for children by helping lower dental costs for families earning less than \$90,000 per year. Parents and guardians may be eligible if they pay for dental care for a child who does not have access to a private dental insurance plan. As set out in the *Dental Benefit Act*, this Benefit is a tax-free, upfront payment delivered by the Canada Revenue Agency. Up to \$650 per year (to a maximum of \$1,300 over two benefit periods) is available for eligible children under 12 years old to help pay for dental care services. These up-front payments recognize that many parents or guardians do not have the financial flexibility to wait for reimbursement.

Departmental Result 1: Canada has modern and sustainable health care systems

Health Canada works closely with P/Ts, domestic and international organizations, health care providers, and other stakeholders to develop and implement innovative approaches that improve the efficiency, effectiveness, and sustainability of Canadian healthcare systems. The Department also conducts research, analysis, and policy work in support of modernizing the healthcare system. Further, Health Canada funds community and other third-party organizations to test new approaches to improve health services delivery.

Health systems continue to evolve amidst technological and social changes and in the face of global health challenges, such as the negative impact of the COVID-19 pandemic on Canadians' timely access to care and the subsequent growth of backlogs. The Department continues to play a leadership role to improve the quality and sustainability of Canada's healthcare systems with the objective of working collaboratively with P/Ts and other partners to improve integrated health care for Canadians.

Working together to improve health care for Canadians

To ensure that Canadians can access the services they need when and where they need them, the GC provides financial contributions to P/Ts to support publicly funded healthcare systems. As part of the [Working Together to Improve Health Care in Canada Plan](#), the GC is providing over \$200 billion over 10 years, beginning in 2023-24 to strengthen Canada's universal public healthcare system. In addition to increases through the Canada Health Transfer, delivered through Finance Canada, this funding includes \$25 billion over 10 years in bilateral agreement funding from Health Canada for P/Ts to advance four shared priorities:

- Expanding access to family health services, including in rural and remote areas.
- Supporting our health workforce and reducing backlogs.
- Improving access to quality mental health, substance use, and addictions services.
- Modernizing health systems with health data and digital tools.

It also includes \$5.4 billion in funding for Aging with Dignity bilateral agreements to improve the quality and safety of long-term care and home and community care and \$1.7 billion over 5 years to support personal support workers.

Finally, the Plan also includes \$350 million in funding to support a ten-year renewal of the Territorial Health Investment Fund, starting in 2023-24, in recognition of medical travel and the higher cost of delivering health care in the territories.

As P/Ts have jurisdiction-specific needs based on their populations and geographies, funding agreements were designed to be flexible to address their unique contexts. F/P/T governments have been working collaboratively to enable the signing of bilateral agreements by March 31, 2024. To offer additional transparency, [agreements and action plans have been made publicly available](#) and include three-year targets for common and jurisdiction-specific indicators, which P/Ts will report on annually so that residents can see how federal funding is being used to improve care. This reporting is in addition to the work on the 8 new common indicators that the Canadian Institute for Health Information is leading in collaboration with P/Ts and data partners, and which are reported on and published annually.

Expanding Canadians' access to family health services

Transforming the delivery of primary care services, including through virtual care, as well as encouraging and supporting providers in working together as interdisciplinary teams, will help Canadians to get care when and where they need it. In 2024-25, as one of the GC's shared health priorities with P/Ts, Health Canada will focus on expanding access to family health services across the country and making it easier for health care providers to work in underserved and rural and remote communities.

The Department will monitor P/T progress on bilateral agreements and will continue discussions with P/Ts, Indigenous partners, and other stakeholders on how to support better access to care.

Supporting Canada's health workforce

Health Canada will continue to work with P/Ts and key stakeholders to address Emergency Room closures caused by lack of staff, difficulty accessing health care services in rural and remote communities, and barriers to permanent residency for foreign-born physicians. As noted in [the statement issued by F/P/T Health Ministers in October 2023](#), Health Canada will work with P/Ts, national and regional regulatory organizations, and other stakeholders to make progress on agreed upon commitments in 2024-25, for example:

- Creating a Nursing Retention Toolkit with tools for employers to create environments where nurses feel supported and to reduce the reliance on agency nurses.
- Improving knowledge on the supply and demand of health workers and supporting a two-year residency requirement for family medicine.
- Making sure internationally educated health professionals can get to work more quickly in Canada.
- Advancing labour mobility for health professionals so they can practice across jurisdictions.
- Strengthening health workforce data and planning through Health Workforce Canada.
- Improving the well-being of health workers across Canada by providing \$3.3 million over 5 years to the Royal College of Physicians and Surgeons of Canada to develop a National Plan for Health Workforce Well-Being to help improve health workforce retention.

What's new?

As part of the GC's Working Together to Improve Health Care for Canadians Plan and building on the new Centre of Excellence for the Future of the Health Workforce, F/P/T Health Ministers established [Health Workforce Canada](#) in December, 2023. This independent, not-for-profit e-organization will identify the sector's priorities and work in partnership with the Canadian Institute for Health Information and others to facilitate access to data and information. Additional commitments include:

- Providing insights and guidance regarding the supply and distribution of the workforce, health equity-based planning, health and mental health of the workforce, and innovations in retention and recruitment.
- Gathering and sharing information on practical solutions and innovative practices to address key gaps and implementation challenges.

Improving access to mental health and substance use programs and services

Health Canada will continue to collaborate with a wide range of partners to ensure Canadians can access evidence-based, person-centered, trauma-informed, and culturally appropriate mental health and substance use services.

In 2024-25, Health Canada will fund P/Ts and community-led organizations to increase access to a full range of integrated services and supports that address the needs of Canadians, including children and youth. For example, through the Substance Use and Addictions Program, the Department is funding Dan's Legacy Foundation, a 24/7 Hospital Emergency on-call counselling program. Therapists will be available to provide trauma-informed care and attend at-risk youth (ages 15-25) admitted for self-harm, psychosis, and overdose. The youth admitted to the program will be offered wrap around support such as safe housing, food, a phone, and other basic necessities.

Improved access to evidence-based substance use treatment and harm reduction services will help reduce overdose-related harms and deaths. Health Canada continues to work with P/Ts and stakeholders to help develop and expand Integrated Youth Services, which are "one-stop shops" of local, effective, youth-focused, and integrated services in the community (including for mental health and substance use). As well, Health Canada will work with partners and stakeholders to build on work completed by the Standards Council of Canada for mental health and substance use health services. This work will support P/Ts, health organizations and other key stakeholders in their efforts to provide high-quality and equitable care for Canadians.

In addition, Health Canada will continue to fund the Mental Health Commission of Canada to advance work on the links between mental health and substance use. The Commission will continue to increase mental health literacy by training health care providers on how to better support others in declining mental health or in crisis, whether in communities, workplaces, or schools. Further, the Commission will support the implementation of the National Standard for Psychological Health and Safety in the Workplace and the National Standard for Mental Health and Well-Being for Post-Secondary Students to continue to raise awareness about mental health, decrease mental-illness related stigma, and to provide healthier and safer institutional environments.

Finally, the Department will provide national leadership on substance use issues through partnerships with stakeholders across Canada – Health Canada will provide funding to the [Canada Centre on Substance Use and Addiction](#) for their continued work on substance-related harms, including national engagement on alcohol. In 2024-25, the organization will focus their efforts on knowledge mobilization,

stigma reduction, workforce competencies and key intersectional areas of substance use and mental health.

Modernizing the healthcare system with standardized health data and digital tools

In today's digitally enabled world, Canadians should be able to access their own digital health information and benefit from it being shared among their health professionals. Canadians expect their health information to be easily and securely accessible to them and their health care providers through modern and digitally connected health care systems, built with the strongest privacy standards.

As noted in the [Joint F/P/T Action Plan on Health Data and Digital Health](#) approved by F/P/T Health Ministers on October 12, 2023, Health Canada is working with P/Ts, other federal departments, and non-governmental stakeholders on several key priorities, including:

- Collecting and sharing high-quality information to measure progress being made through common indicators to improve health care for Canadians, in addition to the Canadian Institute for Health Information's 8 new common indicators.
- Adopting common standards guided by the [Pan-Canadian Interoperability Roadmap](#) to better connect health care systems and allow Canadians and their health care providers to securely access electronic health information.
- Promoting alignment between P/T health data policies and legislative frameworks for consistent approaches to health information management and stewardship that maintains appropriate privacy protections.
- Advancing common principles for managing health data by implementing a [Pan-Canadian Health Data Charter](#), endorsed on October 12, 2023, that reaffirms a commitment to a person-centered, ethical approach to health data, public engagement, equity and Indigenous data sovereignty.
- Collecting and sharing public health data to support Canada's preparedness and response to public health events.

These activities will be complemented by F/P/T efforts and collaboration to build better public trust and literacy through meaningful engagement and consistent communications on the importance of sharing health data, and on the safeguards in place to protect the privacy and security of health data. Health Canada is also exploring the possibility of regulatory and legislative mechanisms to support F/P/T efforts to achieve connected care through the adoption of common standards and rules against data blocking.

Did you know?

In October 2023, Health Ministers (except Québec) endorsed Canada Health Infoway's Shared Pan-Canadian Interoperability Roadmap. The Roadmap represents a long-term vision and plan for achieving connected care in Canada and will serve as guide for F/P/T governments, industries, and other stakeholders to follow in achieving this objective. The Roadmap will help ensure health information technologies align with the latest internationally recognized standards, which is needed for systems and information to safely and consistently connect.

Investments in Pan-Canadian Health Organizations

In 2024-25, Health Canada will continue to work closely with organizations that directly contribute to health system modernization. The Department supports these organizations through a variety of

transfer payments (i.e., grants and contributions). Supplementary information tables on [Health Canada's transfer payment programs](#) provide additional information. Specific priorities include:

- Advancing Pan-Canadian digital health solutions – The Department will provide funding to [Canada Health Infoway](#) (Infoway) to support P/Ts in advancing digital health information for Canadians. This work will enable electronic transmission of prescriptions through an electronic prescribing service, Prescribe IT. Infoway will also support the ongoing implementation of a reporting system for organ donation and transplantation as well as continue to advance its Pan-Canadian Interoperability Roadmap published in May 2023.
- Accelerating improvements in health care, health system performance, and population health across the continuum of care - The Department will provide funding to the [Canadian Institute for Health Information](#) to close data gaps in areas such as reporting on shared health priorities through a set of common indicators and modernizing information flows to create a connected health system.
- Strengthening the effective management of drugs and non-drug technologies - Health Canada will provide the [Canadian Agency for Drugs and Technologies in Health](#) with funding to support health technology assessments and generate evidence on the effectiveness of drugs and non-drug health technologies to support decision makers, such as public drug plans and health care practitioners.
- Encouraging innovation and catalyzing change to support large-scale health system improvement – [Healthcare Excellence Canada](#) will receive funding to expand their efforts on three key priorities: re-imagining care with and for older adults with health and social needs; providing care closer to home and community; and contributing to pandemic recovery and health system resilience.

These efforts will enable governments, health care providers, stakeholders, patients, and Canadians to have access to better information on the performance of Canadian health systems and will provide them with information on the cost-effectiveness of drugs and technologies to support evidence-based decision-making. In addition, P/Ts will have access to examples of successful initiatives from which they can choose to adapt, scale and leverage to improve health services within their jurisdictions.

Helping Canadians age with dignity, with access to home care, long-term care, and palliative care

Health Canada will continue to help Canadians age with dignity, closer to home, with access to home care and palliative or care in a safe long-term care facility. Significant federal funding is being provided to P/Ts through Aging with Dignity Funding Agreement (2023-24 to 2027-28). As part of these agreements, P/Ts have developed action plans outlining how they will use federal investments to ensure seniors get the care they deserve. In 2024-25, the GC will work with P/Ts to enable implementation of these action plans.

Home care

The GC is committed to supporting programs and services that seniors need, should they want to live independently in their homes and communities, for as long as possible. This includes improving access to home and community care, consistent with the [Common Statement of Principles on Shared Health Priorities](#). Health Canada will examine ways to enhance the opportunities for seniors to live independently, for example, the Department will consider recommendations from the [National Seniors](#)

[Council](#), which served as the Expert Panel on Supporting Canadians Aging at Home, on potential ways to enhance current measures or introduce new ones.

Long-term care

Health Canada will continue to support individuals who wish to age at or closer to home and ensure high-quality and safe long-term care (LTC) services for those who need it. In 2023, the GC welcomed the release of LTC standards developed by the Health Standards Organization and Canadian Standards Association Group. The standards focus on the delivery of safe, reliable, and high-quality LTC services; safe operating practices; and infection prevention and control measures in LTC homes. In 2024-25, Health Canada will continue to provide funding to P/Ts to help ensure that these standards are applied, and permanent changes are made. Health Canada will also look to help improving working conditions for personal support workers and related professions, which will particularly benefit women, who disproportionately make up 86% of this profession. Finally, following extensive consultations in 2023-24, the Department, in collaboration with Employment and Social Development Canada will develop a Safe Long-Term Care Act (not yet in force) to help ensure that all Canadians get the care they deserve, while respecting P/T jurisdictions.

Palliative care

Palliative care helps address the needs of seriously ill people, improving their quality of life and that of their families. Health Canada will continue to enhance access to quality palliative care through its [Action Plan on Palliative Care](#). In 2024-25, Health Canada will: continue to raise awareness of the benefits of palliative care and increase grief literacy; support initiatives which improve palliative care skills and resources for health care providers and others; enhance data and research; improve access to culturally sensitive palliative care for underserved populations; and engage Indigenous organizations in developing policy frameworks to reflect the distinct end-of-life care needs of First Nations, Inuit, and Métis Peoples.

Did you know?

In 2024–25, the [Strategic Science Fund](#), a joint initiative with Innovation, Science and Economic Development Canada, aims to increase the quality of scientific research in Canada, attract more world-class research talent, and accelerate the use of research results to improve the lives of Canadians. In 2024-25 the Fund plans to:

- Increase the quality of internationally competitive, leading-edge research in areas critical to the health, economic, and social well-being of Canadians.
- Develop, attract, and retain world-class research and innovation talent in scientific areas that are aligned with Canada's priorities.
- Accelerate the exchange of research results and the translation of this knowledge into action in Canada and abroad.
- Strengthening the importance of science in decision-making and innovation.

Departmental Result 2: Canadians have access to appropriate and effective health services

Through Health Canada, the GC is responsible for promoting and defending the core principles of the *Canada Health Act* (CHA) – public administration, comprehensiveness, universality, portability, and

accessibility which ensures that P/T health care insurance plans provide reasonable access to health services without financial or other barriers, such as patient charges for insured services. In 2024-25, the Department will focus on: promoting and defending the core principles of the CHA; improving affordability and accessibility of pharmaceuticals; improving equitable access to care – including addressing anti-Indigenous racism in health care; and ensuring healthy people and communities.

Promoting and defending the core principles of the *Canada Health Act*

The Department will monitor changes in the delivery of health care to ensure that insured services under the CHA remain covered regardless of how the care is provided or who is providing the care. Mandatory deductions to P/T Canada Health Transfer (CHT) payments will be levied for non-compliance of the CHA in situations where patients have been inappropriately charged for care. Health Canada will also continue to work with P/Ts to help them comply with the CHA's [Diagnostic Services Policy](#) to ensure patients are not charged for medically necessary diagnostic services.

Under the [Reimbursement Policy](#) jurisdictions will have the opportunity to be reimbursed for any deductions to their CHT provided the implicated P/T carries out a Reimbursement Action Plan that demonstrates it has eliminated the patient charges and the circumstances that led to them.

Improving affordability and accessibility of pharmaceuticals

Some Canadians have difficulty accessing affordable prescription medications as costs continue to rise and new innovative drugs are expensive. Since April 2021, Health Canada has worked with partners to advance pharmaceutical management strategies so that Canadians have affordable access to the drugs they need. On December 18th, 2023, the [Minister of Health announced the creation of the Canadian Drug Agency](#). The Agency will provide the dedicated leadership and coordination needed to make Canada's drug system more sustainable and better prepared for the future, helping Canadians achieve better health outcomes. In 2024-25, the Department will continue to work with partners and stakeholders to develop the Agency and its core functions. Once operational, it will take on a greater role in the drug system to ensure Canadians can have better health outcomes and access the medications they need now and into the future. The GC also plans to continue to advance national universal pharmacare, including ongoing efforts related to a Pharmacare Act (not yet in force).

Since August 2021, the Department has worked with Prince Edward Island (PEI) to support their efforts to provide residents with more access to affordable prescription drugs. [Progress to date has enabled many PEI residents to access more affordable treatments](#) for cancer, heart disease, diabetes, migraine, and mental health, further increase coverage and simplified access under provincial drug programs, as well as reduced the copayments to \$5 for almost 60% of medications regularly used by Island residents. In 2024-25, Health Canada will continue its work with PEI to understand the impact of these changes for residents and identify any further opportunities to expand their public formulary and improve affordability under their public drug plans.

Health Canada's [Pediatric Drug Action Plan](#) aims to address multiple challenges affecting access to safe and effective health products for children. In 2024-25, the Department will consult with pediatric medical experts on a National Priority List of Pediatric Drugs to improve access to those that address the highest unmet medical needs in Canada for children and youth in Canada.

Health Canada continues to work with all willing P/Ts to develop bilateral agreements as part of implementing the first-ever National Strategy for Drugs for Rare Diseases. These agreements will help

increase access to a jointly determined small set of new and emerging drugs that would be cost-shared and covered in a consistent way across the country, as well as other enhancements, for the benefit of patients. This includes patients accessing drugs through Indigenous Services Canada's Non-Insured Health Benefit Program. The Strategy also supports health system partners to improve the collection and use of evidence for decision-making, advance diagnosis and screening and enable more rare disease research and clinical trials in Canada. Leveraging the expertise of an Implementation Advisory Group comprised of patients and other stakeholders launched in the fall of 2023, the Department will continue ensuring that patients remain at the center of implementing the Strategy.

Improving equitable access to care and addressing racism in Health Care

In 2024-25, Health Canada will continue to invest in programs and organizations that directly support access to appropriate and effective health services for Canadians. Addressing racism in health care and the health care needs of specific populations such as Indigenous Peoples, people living in Canada's territories, and official language minority communities continues to be a priority.

In 2024-25, the experiences of Indigenous, racialized, and marginalized communities will inform and support Health Canada's initiatives to address racism and discrimination in Canada's health systems. Priorities include improving access to culturally safe care, establishing accountability mechanisms, building partnerships, and effecting transformative change in health systems.

Poor health outcomes experienced by Black and other racial or religious minority groups are closely tied to racism, systemic oppression, and structural inequities in the healthcare system. Health Canada will continue to work with Employment Services and Development Canada, community organizations, and experts to advance Canada's Anti-Racism Strategy and to implement the United Nations International Decade for People of African Descent, which identifies health as a key priority.

The Department will provide funding via the Territorial Health Investment Fund to help offset medical transportation costs incurred by territorial governments for health services not available in the community. Health Canada will also continue supporting the transformation of territorial health systems in areas such as collaborating care, public health, primary care, health human resources, and capacity building.

In line with the modernized *Official Languages Act*, Health Canada will continue to ensure, when relevant, that official languages considerations are included in its initiatives to improve access to health services for Official Language Minority Communities, in the official language of their choice. In 2024-25, the Department will provide contribution funding to community organizations, postsecondary institutions, and P/Ts to improve access to health services for English-speaking communities in Quebec and French-speaking communities elsewhere in Canada. Areas of focus will include enhancing the availability of bilingual health service providers across the country, developing strategies and partnerships with health system stakeholders through community networking, and identifying the needs of Official Language Minority Communities.

Ensuring healthy people and communities

Health Canada supports the development of inclusive, innovative, and people-centered health care solutions to improve the health of those that have a greater risk of experiencing a health care issue, or who are facing barriers in accessing health care services adapted for distinct needs. The Department collaborates with partners and communities to test solutions and address population needs. Funding

recipients work directly with health practitioners, decision makers, and health organizations to develop, refine, and share specialized knowledge, skills, and tools designed to improve health care services for priority populations.

Combatting cancer

With ongoing contribution funding from Health Canada, the Canadian Partnership Against Cancer (CPAC) leads the implementation of the Canadian Strategy for Cancer Control. The objectives of the Strategy are that fewer people develop cancer; more people are successfully treated; and people undergoing cancer treatment and beyond experience a better quality of life. Funding in 2024-25 will support implementing lung cancer screening programs for people at high risk; improving how cancer data is collected and used across the health system; supporting access to new models of care; continuing to work to end cervical cancer; and supporting partners to consider health equity into program design and prioritize systemically excluded populations.

Funding in 2024-25 will also include the ongoing contribution agreement with the Terry Fox Research Institute to expand a national network of cancer centres to advance precision medicine in cancer research.

From 2019-20 to 2023-24, Health Canada provided \$10 million to Ovarian Cancer Canada to help address existing gaps in knowledge about effective prevention, screening, and treatment options for ovarian cancer to ultimately improve outcomes for women diagnosed with ovarian cancer. Health Canada will work with Innovation, Science and Economic Development Canada and Ovarian Cancer Canada in 2024-25 to finalize a new funding agreement with Ovarian Cancer Canada through the Strategic Science Fund.

Supporting organs, tissues, and blood systems

Ongoing contribution funding to Canadian Blood Services will support the development and dissemination of leading practices and professional/public education materials related to organ and tissue donation and transplantation (e.g., clinical tools to support health care professionals). In 2024-25, this funding will also enhance Canada's approach to pediatric and neonatal donation and transplantation, and the development of an education portal for youth, students, and teachers. Health Canada will also work with the Organ Donation and Transplantation Collaborative to improve organs and tissues donation and transplantation. Also, funding will support research to improve the safety and supply of the Canadian blood system.

Supporting safe and consistent implementation of medical assistance in dying

Health Canada will continue to collaborate with partners to support the implementation of medical assistance in dying (MAID) legislation in a consistent and safe manner across all jurisdictions in Canada, while also seeking to protect those who may be vulnerable. The federal Monitoring System for MAID has recently expanded its data collection to include race, Indigenous identity, and disability of persons requesting and receiving MAID. This information may help to determine the presence of individual or systemic inequality or disadvantage in the context of MAID.

In 2024-25, using this new data, the Department will release the fifth federal Annual Report on MAID in Canada to provide a comprehensive overview of the administration of MAID across the country. The Department is also engaging with Indigenous Peoples around end-of-life care to gain more

understanding about unique cultural and spiritual beliefs about death and dying, the range of perspectives on MAID, and how to support culturally safer practices.

Improving access to sexual and reproductive health services

In 2024-25, the GC will continue to reduce barriers to accessing care and ensure that accurate, culturally safe information about sexual and reproductive health care is readily available. The GC continues to protect Canadians' access to the full spectrum of sexual and reproductive health care services, including abortion care, and will continue to withhold CHT payments to P/Ts that allow any patient charges.

Health Canada supports community-based organizations that help make sexual and reproductive health services more accessible for underserved populations, who face the highest sexual health risks and the largest barriers to accessing care. This includes 2SLGBTQI+ populations, Indigenous Peoples, racialized people, people with disabilities, newcomers to Canada, youth, women, and people living in rural or remote communities. In 2024-25, the Department will invest up to \$10.6 million in new and continuing projects that will address topics such as: supporting health care providers in providing abortion care; travel and logistics to improve access to abortion care; providing culturally safe sexual and reproductive health resources and health care for Indigenous Peoples; and initiatives to protect access to care for trans and non-binary youth through addressing disinformation and misinformation. These projects will help health care providers build the knowledge and skills they need to deliver inclusive sexual and reproductive health care.

Key risks

Key risk(s) for Core Responsibility 1: Health care systems

1. **Risk:** Health Canada’s ability to effectively uphold the *Canada Health Act* could be put at risk by challenges in administering the Act.

Key examples of Health Canada’s planned risk responses

Monitoring and reporting on compliance	<ul style="list-style-type: none"> • Monitor compliance with the CHA through P/T reports on patient charges as per the Extra-billing and User Charges Information Regulations. • Work with P/Ts and other relevant parties to gather data to form a clear picture of patient charges for insured services. • Report to Parliamentarians on the administration and operation of the CHA, through the CHA Annual Report.
Implement new policies	Work with P/Ts that are not in compliance with the Diagnostic Services Policy to adapt their health insurance systems to ensure patients are not charged for medically diagnostic services and to ensure P/Ts can qualify for reimbursement of their Canada Health Transfer (CHT) deductions.
Work to resolve issues with P/Ts	Work with P/Ts to resolve CHA issues; recommend CHT deductions if necessary and communicate the process required for a P/T to receive a reimbursement as stipulated in the Reimbursement Policy.
Monitor litigation	Monitor any litigation that may implicate the CHA, and support federal involvement as required, particularly against the federal government’s administration of the CHA.
Monitor changes in health care delivery	<ul style="list-style-type: none"> • Monitor the delivery of health care to ensure that insured services under the CHA remain covered regardless of changes in how the care is provided or who is providing the care. • As new modes of health care delivery are integrated into the Canadian healthcare system, ensure the integrity of core Medicare services is safeguarded.

2. **Risk:** Health Canada’s ability to achieve its mandate may be at risk due to challenges posed by major disruptive events such as climate change and pandemics.

Key examples of Health Canada’s planned risk responses

Foster engagement and collaboration	<p>Work alongside other government departments (e.g., PHAC, PSPC) to advance a whole-of-government approach to adapt to and meet the needs of Canadians. For example:</p> <ul style="list-style-type: none"> • Enhance the Government-wide ability to monitor the evolution of major health events. • Work with P/Ts to strengthen the healthcare system’s capacity to protect priority communities. • Support the timely deployment of high quality, safe emergency health products to Canadians.
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	<ul style="list-style-type: none"> Engage and collaborate with international regulatory partners (e.g., the International Coalition of Medicines Regulatory Authorities).
Provide timely, trusted and evidence-based information	<ul style="list-style-type: none"> Provide P/Ts, health care providers and residents of Canada with the timely, clear, and evidence-based information they need to protect themselves. Publish clinical information used to support regulatory decisions and the basis for those decisions to foster public trust and solidify our commitment to greater openness and transparency.
Facilitate access to health products	<p>Support the prevention and treatment of novel diseases via clinical trials and flexible measures. For example:</p> <ul style="list-style-type: none"> Authorize clinical trials for health products under interim orders, transition regulations, and existing regulatory frameworks. Implement innovative and flexible measures to help prioritize and expedite the regulatory review of health products of greatest need without compromising Canada’s high standard for quality, safety, and efficacy.
Enhance internal services	<p>Deliver services and commitments during major crises. For example:</p> <ul style="list-style-type: none"> Work with Shared Services Canada to ensure network infrastructure can support business needs, as well as to minimize the risk of network outages. Support platforms and tools for collaboration and remote work. Maintain robust and resilient governance frameworks and processes across the Department and the Health Portfolio to effectively address horizontal initiatives and issues in times of crisis. Maintain detailed, tested, and high-profile emergency preparedness, crisis management, communications, business continuity, and business resumption plans, mapped against best practices and lessons learned. Develop comprehensive, practical strategies to protect and promote employees’ health, accommodate, and support staff and their family members (where applicable), and assess and promote occupational health and safety. Maintain a health emergency coordination office to support readiness for health emergencies. Support implementation of Health Canada’s Climate Change Adaptation Plan to manage and mitigate climate change risks to services, operations, and assets.

Related government priorities

More information about SGBA Plus is available in the [Gender-Based Analysis Plus Supplementary Information Table](#).

More information about Health Canada’s contributions to Canada’s Federal Implementation Plan on the 2030 Agenda and the Federal Sustainable Development Strategy can be found in [Health Canada's Departmental Sustainable Development Strategy 2023-2027](#).

Core responsibility 2: Health protection and promotion

In this section

[Expand all] [Collapse all]

[Description](#)

[Program inventory](#)

[Quality of life impacts](#)

[Results and targets](#)

[Snapshot of planned resources in 2024-25](#)

[Plans to achieve results](#)

[Key risks](#)

[Related government priorities](#)

Description

Health Canada works with domestic and international partners to assess, manage, and communicate the health and safety risks and benefits associated with health and consumer products, food, chemicals, pesticides, environmental factors, tobacco and vaping products, cannabis, and controlled substances.

Program inventory

Health protection and promotion is supported by the following programs in the program inventory:

- Pharmaceutical Drugs; Biologic and Radiopharmaceutical Drugs; Medical Devices; Natural Health Products.
- Food and Nutrition.
- Air Quality; Climate Change; Water Quality; Health Impacts of Chemicals.
- Consumer Product Safety; Workplace Hazardous Products.
- Tobacco Control; Controlled Substances; Cannabis.
- Radiation Protection.
- Pesticides.
- Health Canada Specialized Services.

Supporting information on planned expenditures, human resources, and results related to Health Canada's program inventory is available on [GC InfoBase](#).

Quality of life impacts

This core responsibility contributes to the Health domain of the [Quality of Life Framework](#) for Canada and, more specifically, Healthy people. It also contributes to the [Environment domain](#), more specifically air quality and drinking water, by assessing, managing, and communicating the health and safety risks associated with chemicals, pesticides, and environmental factors.

Results and targets

The following tables show, for each departmental result related to Core Responsibility 2: Health protection and promotion, the indicators, the results from the three most recently reported fiscal years, the targets and target dates approved in 2024–25.

**Table 3: Indicators, results and targets for departmental result 3
Canadians have access to safe, effective and quality health products**

Departmental Result Indicators	Target	Date to achieve target	Actual Results
Percentage of human new drug decisions issued within service standards ^a	At least 93.0%	March 31, 2025	2020-21: 100% 2021-22: 99.8% 2022-23: 99.0%
Percentage of Risk Management Plan reviews for new drug decisions completed within service standards	At least 90%	March 31, 2025	2020-21: 94% 2021-22: 90% 2022-23: 89%
Percentage of domestic drug companies deemed to be compliant with manufacturing requirements under the <i>Food and Drugs Act</i> and associated regulations	At least 90.0%	March 31, 2025	2020-21: 99.7% 2021-22: 97.0% 2022-23: 94.7%
^a Drugs include prescription and non-prescription pharmaceutical drugs for human use; disinfectants; biologic and radiopharmaceutical drugs.			

**Table 4: Indicators, results and targets for departmental result 4
Canadians are protected from unsafe consumer and commercial products and
substances**

Departmental Result Indicators	Target	Date to achieve target	Actual Results
Percentage of domestic consumer product recalls communicated to Canadians in a timely manner	At least 90%	March 31, 2025	2020-21: 86% 2021-22: 83% 2022-23: 71%
Percentage of actions taken in a timely manner to protect the health of Canadians from substances found to be a risk to human health	Exactly 100%	March 31, 2025	2020-21: 100% 2021-22: 100% 2022-23: 95%
Percentage of pre-market pesticide submission reviews that are completed within service standards	At least 90%	March 31, 2025	2020-21: 93% 2021-22: 96% 2022-23: 95%

**Table 5: Indicators, results and targets for departmental result 5
Canadians make healthy choices**

Departmental Result Indicators	Target	Date to achieve target	Actual Results
Percentage of Canadians (aged 15+) who are current cigarette smokers ^a	At most 5%	March 31, 2035	2020-21: 15% 2021-22: 13% 2022-23: 12%
Percentage of youth (grades 10-12) who report frequent (daily to weekly) cannabis use in the past 30 days	At most 9.2%	March 31, 2025	2020-21: 9.2% 2021-22: N/A 2022-23: 11.1%
Percentage of Canadians who use dietary guidance provided by Health Canada	At least 50.0%	March 31, 2026 ^b	2020-21: 47.0% 2021-22: 44.3% 2022-23: 44.3%
^a Data source: Canadian Community Health Survey (CCHS). As of 2024-25, results are presented based on the CCHS publication date as opposed to the timing of data collection. This is consistent with how results are presented for other Departmental Result Indicators. ^b The date to achieve target has been updated as data is expected to be released in Summer 2025.			

Snapshot of planned resources in 2024–25	
Planned spending:	\$801,063,755
Planned full-time resources:	6,109 full-time equivalents

The financial, human resources, and performance information for Health Canada’s program inventory is available on [GC InfoBase](#).

Plans to achieve results

The Department will continue to develop modern, agile, and responsive regulations for health products; food; consumer and commercial product and substances. This will help companies bring innovative products to the market while ensuring the regulatory system remains based on science and safety.

Departmental Result 3: Canadians have access to safe, effective and quality health products

In 2024-25, Health Canada will continue efforts to ensure that Canadians have timely access to safe, effective, and quality health products – including prescription and non-prescription pharmaceutical drugs, biologic and radiopharmaceutical drugs, medical devices, and natural health products. This includes accelerating market access for innovative products along with cost effective alternatives, such as generic and biosimilar drugs, which supports the needs of the healthcare system.

The Department will focus on: modernizing regulatory oversight and increasing regulatory agility; preventing and mitigating the impact of drug and other health product shortages; providing timely access to health products and promoting access to new and emerging technologies; modernizing compliance and enforcement; and acting to prevent and control antimicrobial resistance.

Modernizing regulatory oversight and increasing regulatory agility

Health Canada remains committed to implementing an agile, modern licensing scheme for drugs (prescription and non-prescription) and medical devices in Canada, as part of its [Regulatory Innovation Agenda](#). This contributes to commitments outlined in the [Health and Biosciences Regulatory Review Roadmap](#), the objectives of [Canada's Biomanufacturing and Life Sciences Strategy](#), and the [Agri-food and Aquaculture Regulatory Review Roadmap](#). A modernized regulatory environment will give the Department more tools to better manage risks and uncertainties once products are on the market. In support of this, in 2024-25, the Department will:

- Advance regulations that require risk management plans for certain drugs, enabling the use of terms and conditions for all drugs, and broadening their scope of use for Class II, III and IV medical devices.
- Begin updating recall requirements for drugs and medical devices and continue to advance proposals that improve the efficiency and predictability of regulatory decision-making, while strengthening the resilience of the supply chain.

- Continue to advance regulations that address outdated references related to foreign regulatory authorities, introduce exemptions related to finished product testing, reduce the burden associated with annual licence review and modernize provisions related to the use of compliance and enforcement tools, such as terms and conditions and suspensions.

Health Canada will continue to modernize the regulation of clinical trials and to increase transparency of clinical trials by requiring the registration of trial information in a publicly accessible registry. This will include developing a new guidance document outlining policy expectations and providing stakeholders the opportunity to develop best practices associated with registration and reporting of results in advance of potential regulations. Further, the Department will continue to advance policy and operational initiatives to modernize the oversight of generic drugs.

The Commissioner of the Environment and Sustainable Development’s 2021 recommendations included strengthening the Department’s natural health products oversight. As part of Health Canada’s continued response, the Department is advancing plans to facilitate a modernized Self-Care Framework that encompasses a risk-based approach to regulatory oversight for all self-care products.

Did you know?

The Department will advance work on a single regulatory framework for biocides (i.e., surface disinfectants and surface sanitizers) that aims to provide a consistent and flexible approach to the regulation of these products. The proposed regulations would also enable oversight based on risk and evolving evidence and introduce a use of foreign decisions pathway while maintaining Health Canada's oversight so that the Department can act if any health and safety risks are identified.

The Department will continue to apply real-world evidence to improve post-market oversight of prescription drugs in Canada. It will collaborate with partners to advance learning and develop guidance for reporting real-world evidence. Health Canada will also work with the Canadian Agency for Drugs and Technologies in Health to further align real-world evidence use across the drug life cycle and to improve the accessibility, affordability, flexibility, and appropriate use of drugs in Canada, and will continue to collaborate with international regulators to harmonize best practices.

As part of the Department’s efforts to support priority populations, Health Canada will continue to test aspects of a regulation for pediatric health products with the goal of increasing access to medicines for children in Canada.

The Department will also propose amendments to regulations for foods for a special dietary purpose, including infant formula, that reflect the latest science, support a more diversified market, reduce the risk of shortages, and improve access to specialized nutrition products.

Preventing and mitigating the impact of drug and other health product shortages

In partnership with P/Ts and a range of stakeholders including international organizations, industry, and patient advocacy and health care groups, Health Canada will continue to play a leadership role in mobilizing efforts to alleviate the impacts of drug shortages on Canadians. In 2024-25, the Department will work to identify, prevent, manage, and mitigate shortages of critical drugs of national significance, including:

- Continuing regulatory efforts, including monitoring compliance with mandatory reporting requirement, and prohibiting the distribution of certain drugs outside of Canada if it may lead to or exacerbate shortages domestically.
- Broadening stakeholder engagement to better understand the impact of shortages on priority populations such as children.
- Improving signal detection to make prevention more feasible more often.
- Increasing the use of data and analytics to help map out more reliable supply and demand information to inform prevention and mitigation measures.
- Implementing medium- to longer-term approaches to address shortages and bolster Canada's health product resilience built on a public consultation completed in August 2023.

In partnership with P/Ts, the Department will continue to play a leadership role in addressing national medical device shortages to ensure Canadians have access to the devices they need.

Providing timely access to health products and promoting access to new and emerging technologies

In 2024-25, the Department will continue to provide Canadians with timely access to health products by reviewing the safety, efficacy, and quality of pharmaceutical and biologic drugs, medical devices, and natural health products. In a context of complex international trade and global supply chains, Health Canada continues to engage with other countries to promote the health and safety of Canadians, aligning Canadian domestic regulations with international standards. This includes working with the U.S. to inform regulatory decisions, help prevent and mitigate health product shortages, and address current and emerging health regulatory challenges to ensure access to safe, quality, and effective health products.

Additionally, the [Special Access Program](#) allows health care professionals to request, in emergency situations, medical devices and drugs not yet authorized for use in Canada.

Health Canada recognizes the importance of access to veterinary drugs for animal owners and food producers. The Department will publish new and updated guidance for veterinary drug sponsors to facilitate submission filing and will continue to update its web content. Health Canada will further support access by continuing industry and sector specific discussions to help bring needed veterinary drugs onto the Canadian market. Health Canada will also continue to examine ways to leverage foreign data and assessments to facilitate submission filing and help bring more veterinary drugs to the Canadian market.

Scientific and technological advances are accelerating the pace of innovation in health care, leading to the development of innovative health products. To keep pace with scientific advances, Health Canada's gene therapy regulatory research laboratory is continuing to build capacity and expertise to assess new technologies. In 2024-25, Health Canada will:

- Publish final guidance regarding artificial intelligence/machine learning in medical devices, which use adaptive algorithms that learn from new datasets to improve performance.
- Co-chair the International Medical Device Regulators Forum Working Group on Software as a Medical Device.
- Participate in multilateral digital health collaborations with various international partners.

Advanced Therapeutic Products (ATPs) are drugs, medical devices, or a combination of both that are so complex or distinct that they significantly challenge Canada’s current regulatory system. The legislative framework for ATPs allows the Department to regulate complex and innovative products in a flexible and risk-based manner. Health Canada continues to explore the candidacy of various product classes for the ATP framework. This work supports timely access for patients while optimizing safety and benefits, as well as strengthening innovation in the health and biosciences sector. In 2024-25, the Department will publish a guidance document for ATPs and explore regulatory approaches for them.

Modernizing compliance and enforcement

In 2024-25, Health Canada will continue to become more agile, assertive, consistent, innovative, proactive, and risk-based with respect to its compliance and enforcement activities. Planned initiatives include:

- Continuing to explore how virtual and remote tools for inspections might improve oversight in domestic and foreign inspection programs.
- Collaborating with trusted international regulatory partners to coordinate inspection efforts, allowing Health Canada to strengthen compliance and enforcement oversight over a global supply chain and to focus on high-risk situations.
- Implementing a modified referral process with the Canada Border Services Agency to improve how Health Canada receives information on health product imports declared through the Single Window Initiative declaration shipment.

Acting to prevent and control antimicrobial resistance

Antimicrobial resistance (AMR) continues to be an urgent issue for the health of humans, animals, and their shared environment. In support of the Pan-Canadian Action Plan on AMR (2023-27) and in response to the Office of the Auditor General’s report on AMR (2023), the Department will continue work with PHAC, partners, and stakeholders to implement and monitor AMR activities. Key initiatives for 2024-25 include:

- Continuing efforts to raise awareness of AMR and the importance of preserving the effectiveness of antimicrobials, including publishing a Canadian list of reserve antimicrobials, and developing educational material on appropriate use of antimicrobials.
- Reviewing and prioritizing select veterinary antimicrobials so that these drugs are used responsibly and remain effective for future generations.
- Publishing sales data on medically important antimicrobials in animals to support surveillance and stewardship actions.
- Continuing to facilitate access to innovative antimicrobials for human use so Canadians have treatment options for difficult-to-treat infections and low-risk veterinary health products that improve health and wellness in animals so there is less need for routine use of antimicrobials.
- Continuing engagement with international partners, including the International Coalition of Medicines Regulatory Authorities and the Transatlantic Task Force, to exchange information and inform AMR best practices.

Departmental Result 4: Canadians are protected from unsafe consumer and commercial products and substances

Health Canada remains committed to helping Canadians lead healthier lives and providing protection from unsafe consumer and commercial products and substances. Over the course of 2024-25, the Department will focus on: reducing substance-use related harms and addressing the illegal toxic drug supply and overdose crisis; managing the health risks of chemicals in the home, the workplace, and the environment; supporting the safety of consumer products and cosmetics; strengthening pesticide regulation and transparency; and protecting Canadians from radiation.

Reducing substance use-related harms and addressing the illegal toxic drug supply and overdose crisis

Canada is experiencing an unrelenting rate of overdose deaths and substance use-related harms, largely due to the illegal toxic drug supply that continues to worsen. National data shows that [40,642 apparent opioid toxicity deaths occurred between January 2016 and June 2023](#). In addition to the overdose crisis, Canada continues to see significant harms from other substances, such as tobacco and alcohol. The Department will continue to work with all levels of government and other key partners and stakeholders to reduce substance-related harms and address the urgent challenge of the overdose crisis.

Research demonstrates that the majority of overdose deaths occur among men aged 20 to 59, and 90% of opioid toxicity deaths occur in Alberta, British Columbia, and Ontario. While the pandemic worsened the overdose crisis among all population segments, evidence shows disproportionate rates of overdoses among Indigenous Peoples. Youth are also more at-risk for substance use harms. The complicated and multi-faceted nature of substance use harms and the intersection of the overdose crisis with several complex social issues such as mental health, socio-economic conditions, experiences of trauma, and multi-generational impacts of colonization, underscores the collective responsibility to work together across GC Departments, with P/Ts, and community stakeholders, including people with lived and living experience, to strengthen Canada's health and social systems.

Led by Health Canada, the [Canadian Drugs and Substances Strategy](#) is the federal government's comprehensive response to substance use-related harms, including the overdose crisis. This all-substances, public health, and public safety-focused Strategy covers a broad range of legal and illegal substances, including tobacco, cannabis, alcohol, and opioids. The Strategy's goal is to improve the health and safety of all Canadians by minimizing the impact of substance use-related harms for individuals, families, and communities. It is based on four interconnected elements: prevention and education, substance use services and supports, evidence, and substance controls.

In 2024-25, the renewed Strategy will provide the framework for federal action across priority areas, including prevention, harm reduction, treatment and recovery services, data collection, as well as enforcement efforts to stem the flow of illegal toxic drugs into communities. Health Canada will continue to:

- Expand efforts to ensure that accurate, timely, reliable data, and research are available to inform decision making.
- Work closely with partners and stakeholders, including people with lived and living experience, to advance a whole of society approach to substance use-related harms.
- Support innovative models, pilot projects and organizations as well as public education and community-led efforts to prevent, delay, and reduce substance use and related harms. Through its Substance Use and Addictions Program, new funding in 2024-25 will address priorities such as enhancing the role of people with lived and living experience within organizations that

address substance use; offering post-treatment aftercare, including transition services; and addressing alcohol use disorder.

- Promote, monitor, and enforce compliance with the *Controlled Drugs and Substances Act* and its *Regulations*, as well as provide analytical services and intelligence on illegal controlled substances for public health purposes.

Did you know?

Health Canada supports efforts to prevent, reduce, or delay substance use by raising awareness of substance use-related harms, including the harms and barriers caused by stigma, and ways to reduce them. Awareness campaigns such as the [Know More Opioids awareness program](#) targeting youth and young adults and the [Ease The Burden campaign](#) targeting men in trades are part of the GC's response.

Since 2018, the Know More Opioids tour has interacted with over 178,000 young people across Canada and, since the Ease the Burden campaign video was released in September of 2022, it has received more than 35.8 million views.

Managing the health risks of chemicals in the home, the workplace, and the environment

Health Canada will continue work to reduce illness and injury by decreasing exposure to harmful chemicals and pollutants, and by supporting the safety of consumer products and chemicals.

Amendments to the *Canadian Environmental Protection Act, 1999* were passed in June 2023 via Bill-S-5, *Strengthening Environmental Protection for a Healthier Canada Act*. These amendments mark the first major reform of the Act in more than 20 years. Changes include recognizing a right to a healthy environment in federal law for the first time in Canada, and strengthening the foundation for chemicals management, including replacing, reducing, and refining vertebrate animal testing, and authorities to account for the cumulative effects of harmful chemicals and their effects on populations who may be disproportionately impacted. Amendments in Bill S-5 will also place greater emphasis on transparency and accountability, and facilitate moving forward on Indigenous reconciliation by committing to implementing the United Nations Declaration on the Rights of Indigenous Peoples, recognizing the role of science and Indigenous knowledge in decision making and inclusion of a 5 year report on the impact of the Act on Indigenous Peoples, and by recognizing that every individual in Canada, including Indigenous Peoples, has a right to a healthy environment.

Health Canada will meet requirements set out in the amended *Canadian Environmental Protection Act, 1999* including the ongoing requirement to identify and manage the risks of chemical substances to protect the health of Canadians. This includes conducting further research, monitoring, and surveillance (including biomonitoring) and risk assessments on chemical substances and biotechnology products.

The Department is developing a strategy to help guide efforts to replace, reduce, or refine vertebrate animal toxicity testing. The final strategy will be published as part of the Plan of Chemicals Management Priorities by June 2025.

Health Canada will continue to conduct research and invest in Canadian academic research to better understand the additives in plastic, the potential effects of microplastics on human health, and to support the GC's agenda for reducing plastic waste. The Department will develop methods to better assess microplastics in food and, as part of the [Canadian Total Diet Study](#), continue to monitor chemical contaminants transferred through food consumption. Further, Health Canada will continue to

collaborate with Environment and Climate Change Canada and other departments to advance a circular plastics economy for Canada.

To mitigate risks posed by workplace hazardous products, Health Canada will continue to conduct hazard assessments, collaborate on the enforcement of appropriate labelling and communication of hazards, and undertake outreach activities to increase awareness of the *Hazardous Products Act* and its *Hazardous Products Regulations*. These efforts will be informed and supported by international cooperation, including implementation of revised editions of the *Globally Harmonized System of Classification and Labelling of Chemicals*, participation in the United Nations Sub-Committee of Experts, and in the Canada-U.S. Regulatory Cooperation Council.

Health Canada will also continue to develop and modernize policies and operational procedures pertaining to workplace hazardous products under the *Hazardous Products Act* and the *Hazardous Materials Information Review Act* and their *Regulations*, including the potential removal of the consumer product exclusion from the *Hazardous Products Act* and which would require that suppliers communicate, upon request, hazard and safety information for consumer products used in a Canadian workplace.

Health Canada will continue to investigate food contaminants such as mercury and bisphenols using the Canadian Total Diet Study and other targeted studies. Working with F/P/T partners, the Department will mitigate health risks of contaminants in food not sold at retail, but which are traditionally consumed (e.g., Indigenous hunting/gathering of foods) by issuing consumption advice for groups at risk. Health Canada will further work with industry to ensure best practices are followed during food processing and continue to update the regulatory maximum levels for chemical contaminants in food. The Department intends to publish consumer advice and information on additional topics such as food allergen labelling and will also continue to work toward development of a mandatory program for food packaging.

Health Canada will begin to operationalize new environmental risk management provisions under the *Food and Drugs Act* that were brought in under Bill S-5 to better identify and mitigate risks to the environment and indirectly to people from drugs that are currently for sale in Canada. Further, the Department will continue to develop policy and engage with stakeholders to propose amendments to the *Food and Drugs Regulations* to strengthen the environmental risk assessment and risk management of drug ingredients. These amendments will require industry to provide environmental data on new drug ingredients at different stages during the drug development process.

Supporting the safety of consumer products and cosmetics

The Department will continue to mitigate risks posed by unsafe consumer products and cosmetics by updating policy and operational procedures as necessary, and conducting risk assessments, compliance and enforcement, and outreach activities. For example, Health Canada will continue to work with international partners to coordinate joint product recalls and increase verification of consumer products for compliance with Canadian standards.

Health Canada will further strengthen legislative and regulatory requirements pertaining to consumer products under the *Canada Consumer Product Safety Act* (CCPSA) and to cosmetics under the *Food and Drugs Act*. The Department will continue to monitor the ban on cosmetic animal testing under the *Food and Drugs Act*.

Health Canada will examine ways to address enforcement challenges resulting from the growing global marketplace and the increasing prevalence of e-commerce. For example, the Department will continue to advance the [Canadian Product Safety Pledge](#), which will help strengthen the application and enforcement of the CCPSA and its *Regulations* for consumer products sold online from sellers outside of Canada. The Pledge is a voluntary commitment made by online marketplace signatories to strengthen and improve product safety online through a combination of preventative and corrective actions and includes annual reporting on the outcomes and effectiveness of these actions.

Strengthening pesticide regulation and transparency

In 2024-25, Health Canada will continue to promote, monitor, and enforce compliance with the *Pest Control Products Act* and its *Regulations* by using a science-based evaluation process to review and authorize new pesticides for use in the Canadian market, and to re-evaluate previously approved pesticides to ensure they meet current scientific standards.

In June 2023, the [Government of Canada announced plans to move forward on commitments to strengthen the pesticide review process](#) and create a more sustainable approach to managing pesticides while making sure that farmers have the tools they need to respond to growing demands for healthy and affordable food for Canadians. Health Canada will continue to build on progress made since August 2021 to modernize the pesticide regulatory system and respond to key concerns raised by stakeholders. Specifically in 2024-25, the Department will:

- Strengthen the pesticide regulatory framework through targeted regulatory amendments that will enhance protection of human health, the environment and wildlife from risks posed by pesticides and improve transparency.
- Continue to increase the transparency and accessibility of decisions, including posting plain language summaries of key decisions online and disclosing applicants' names as applications enter the review stage.
- Implement a new risk-based oversight model for pesticide evaluations to facilitate proactive identification and timely response to emerging risks or issues, with greater focus on pesticides that present a higher risk to the health of Canadians and/or the environment.
- Continue to integrate independent advice from the [Science Advisory Committee on Pest Control Products](#), the Department's water monitoring program, and on pesticide use in Canada into Health Canada's evidence-based decision making.

Protecting Canadians from radiation

Health Canada will continue to monitor, advise, and report on exposure to radiation that occurs both naturally and from human-made sources under the authority of relevant GC acts and regulations. As part of the Federal Nuclear Emergency Plan, the Department will participate in nuclear emergency training, drills, and exercises, and will coordinate with F/P/T and international partners to confirm that emergency preparedness plans are ready for execution in the event of a nuclear emergency. Additional ongoing activities for 2024-25 include:

- Advancing efforts to provide reliable and accessible radiation data to Canadians daily and during a nuclear emergency.
- Continuing, with stakeholder input, to advance efforts to modernize the *Radiation Emitting Devices Act* and its *Regulations*, including those for lasers.

- Developing relevant information and science-based advice for Canadians and stakeholders on the safety of radiation emitting devices.

Departmental Result 5: Canadians make healthy choices

Helping Canadians make healthy choices in their day-to-day lives is a vital part of Health Canada’s Health protection and promotion core responsibility. Over the course of 2024-25, the Department will focus on: regulating and supporting Canadians in making informed decisions about cannabis; taking action on youth vaping and reducing tobacco use; promoting healthy eating; modernizing the regulatory oversight of food; ensuring the safety and nutritional quality of the Canadian food supply; advancing climate change adaptation measures; and building resilience for future health emergencies.

Regulating and supporting Canadians in making informed decisions about cannabis

In 2024-25, Health Canada will continue implementing the *Cannabis Act* by restricting legal access to regulated products to adults and reducing illegal activities involving cannabis. The Department will issue licences and permits under the Act, including for cannabis, industrial hemp, research including non-therapeutic research on cannabis, analytical testing, and for drugs containing cannabis; facilitate reasonable access to cannabis for medical purposes; and conduct compliance and enforcement activities.

Measures to strengthen the cannabis framework in 2024-25 include:

- Promoting a diverse commercial cannabis industry by identifying the challenges and barriers to participating in the legal industry, enhancing outreach and intervention strategies with cannabis micro-class applicants, Indigenous, Black, and other racialized peoples, and hosting webinars on topics proposed by industry participants and stakeholders.
- Developing a cost-effective and efficient electronic Cannabis Personal Registration System to enable the electronic submission of applications, medical documents, and issuing registration decisions.
- Continuing to strengthen the integrity of the medical access framework by addressing the potential risks posed by individuals who misuse their personal production of cannabis for medical purposes registration.
- Advancing draft regulations for consultation to reduce the burden on industry without compromising public health.
- Conducting inspections on activities that represent the highest risk to public health and safety.

In 2024-25, the Department will assess the findings and recommendations in the Cannabis Legislative Review Panel’s final report and will identify areas for action to improve the functioning of the *Cannabis Act*.

What’s new?

Health Canada launched an online training course for federal cannabis licence holders called, “[Cannabis Act and Regulations – Understanding Compliance and Enforcement](#)”. This has helped more than 400 licence holders understand their obligations under the *Cannabis Act* and its *Regulations*.

To support Canadians in making informed decisions about cannabis, Health Canada will continue to conduct public education campaigns and monitor changes in knowledge, attitudes, and behaviours

through research and surveillance. Public education and awareness messaging will emphasize: the risks of using cannabis to cope with mental health issues; the impact of cannabis use on the developing brain; and the ongoing risk of pediatric poisonings from cannabis products, including a focus on safe storage and the importance of buying legal cannabis products.

The Department will continue to regularly engage First Nations, Inuit and Métis leaders, organizations, and communities to respond to their feedback regarding the implementation of the *Cannabis Act* in Indigenous communities.

Health Canada monitors, conducts, and analyzes research to address knowledge gaps (e.g., novel cannabinoids and toxicology of cannabis vaping emissions) and to understand changes in patterns of cannabis consumption and other indicators through the Canadian Cannabis Survey. The Department also conducts risk assessments and communicates potential health risks and negative side effects related to cannabis use through public reports. In 2024-25, Health Canada will continue to publish public health advisories in response to risk reports, including accidental cannabis ingestion.

What's new?

Building on [Health Canada's Science Advisory Committee on Health Products Containing Cannabis' final report](#), the Department will consult with stakeholders on policies that would permit cannabidiol to be added to non-prescription medication. This would provide consumers with access to safe, effective, and high-quality products to treat minor ailments without the need for practitioner oversight.

Taking action on youth vaping and reducing tobacco use

Health Canada will continue to address ongoing high rates of youth vaping and aim to reduce tobacco use through [Canada's Tobacco Strategy](#).

In 2024-25, based on the [first legislative review](#) of the *Tobacco and Vaping Products Act*, the Department will examine youth access to vaping products as a means to address high rates of vaping; provide factual information on vaping as a less harmful source of nicotine for people who smoke and on health risks to Canadians who do not use tobacco; strengthen compliance and enforcement; and conduct research and surveillance to better understand the vaping market and the health impacts of vaping. Health Canada will also continue to explore additional measures to address youth vaping, such as sustained public education efforts and regulatory measures.

In cooperation with F/P/T partners and key stakeholders, measures will include:

- Monitoring national trends in vaping and smoking by SGBA Plus characteristics, including age group, sex and gender, and income to inform future policies and regulations.
- Gaining a better understanding of smoking and vaping behaviours by examining them in the context of polysubstance use and mental health.
- Continuing to support and promote compliance and enforcement activities of tobacco and vaping products at manufacturers, distributors, wholesalers, and retailers.

Measures specific to addressing youth vaping will include:

- Establishing an F/P/T working group to assess youth access to vaping products to help ensure that youth are adequately protected.

- Inspecting websites that advertise, promote, or sell products; inspecting retailers, including online retailers as well as manufacturers, and importers of vaping products to ensure compliance with existing regulations.
- Advance regulatory measures to reduce appeal of vaping products to young people.

Measures related to tobacco will include:

- Requiring tobacco manufacturers to contribute to the cost of federal public health investments in tobacco control.
- Evaluating stakeholder feedback on the second legislative review of the *Tobacco and Vaping Products Act* and preparing the final report.
- Establishing a F/P/T working group to focus on cessation services including developing voluntary standards for health care organizations.
- Taking a person-centered approach to smoking cessation, addressing the stigma surrounding smoking and developing culturally appropriate policies and programming that better reflect the needs of people who smoke.

What's new?

In a groundbreaking move, Canada is the first country in the world to require health warnings to be printed directly on individual cigarettes. By July 2024, these cautionary messages will appear on all king size cigarettes, expanding to include regular size cigarettes and little cigars by April 2025. The warnings such as “POISON IN EVERY PUFF” and “CIGARETTES CAUSE CANCER,” encompass a range of concerns, from child endangerment to organ damage, impotence, and leukemia. This bold step aligns with Canada's goal of reducing tobacco use to less than 5% by 2035 and stems from insights gathered from public consultations.

Promoting healthy eating

Health Canada provides information on healthy eating that is inclusive of Canada’s diverse population. Good nutrition is critical for optimal infant growth and development. Thus, in 2024-25 the Department will be updating Nutrition for Healthy Term Infants—Canada’s infant feeding guidelines (0-6 months). These guidelines, co-authored with the Canadian Pediatric Society, Dietitians of Canada, and the Breastfeeding Committee for Canada, are intended for health professionals and can be used by P/Ts and health organizations as a basis for developing practical feeding guidelines for parents and caregivers in Canada.

Diet-related chronic diseases such as cancer, type 2 diabetes, and cardiovascular disease are prevalent in Canada. In 2024-25, Health Canada will continue to address this by promoting the use and understanding of [Canada's food guide](#). The Department will develop healthy eating resources for children and youth as well as educators working with children, and a new web tool that customizes healthy eating information to meet users’ needs and will also work with stakeholders to make it easier to follow the food guide in child and youth-focused settings such as recreation and post-secondary institutions.

In 2024-25, to assess the impact of healthy eating initiatives and inform future actions, Health Canada will work with experts to monitor and report on child and teen exposure to food advertising, an important determinant of children’s food preferences, choices, and consumption, which can predispose

them to diet-related chronic diseases. Further, the Department will continue to collect and analyze data related to the nutritional quality of the food supply (e.g., sugars, sodium, and saturated fat content).

To encourage further sodium reduction in products with the highest sodium content, in 2024-25 Health Canada will continue to work with the food-processing sector to achieve the targets set in the [Voluntary Sodium Reduction Targets for Processed Foods, 2020-25](#). The Department is also planning to develop an internal report on progress towards meeting these targets.

Modernizing the regulatory oversight of food

The current structure of food regulations under the *Food and Drugs Act* limits Health Canada's ability to respond to advances in science and technology and creates difficulties for industry to bring innovative products to market. In 2024-25, the Department aims to make its regulatory system more transparent, and responsive and will modernize regulations for microbiological criteria, methods of analysis, and food additives. The Department will also implement an awareness strategy to help Canadians better understand supplemented foods and the new regulatory framework that governs them.

Ensuring the safety and nutritional quality of the Canadian food supply

Canada's food safety system is one of the best in the world. Health Canada works with other jurisdictions, industry, and consumers to establish policies, regulations, and standards related to the safety and nutritional quality of all food sold in Canada. In 2024-25, the Department will continue to educate the public and increase awareness about the importance of safe food handling, selection, and preparation practices to reduce foodborne illnesses and adverse reactions to food allergens in Canada.

The Department will continue to conduct nutrition research on protein quality, fats, vitamins, and mineral nutrients with a focus on refining the threshold levels of adequacy and excess that may impact the health of Canadians, including priority groups.

Health Canada will continue to foster international partnerships in 2024-25 to advance issues related to food safety and nutrition. The Department will also contribute to the development of international food safety and quality standards which will be adopted by the Codex Alimentarius Commission.

Collaborating with international partners involved in food safety and food regulation is increasingly important in today's global food supply chain. Sharing information and best practices not only enhances Health Canada's understanding of current and emerging food issues globally, but it also promotes science-based standard setting and assessment of risks and enhances the rigour of the Department's decisions, which helps to protect the health and safety of Canadians.

Advancing climate change adaptation measures

Health Canada supports the health sector and people in Canada in preparing for and adapting to the impacts of climate change. The Department will focus on protecting people in Canada from extreme heat and on improving heat resiliency across Canada. For example, Health Canada will fund projects that address research gaps, such as identifying indoor heat safety thresholds to support efforts in understanding and addressing the impacts of extreme heat. In addition, the Department is advancing components of Canada's first National Adaptation Strategy in collaboration with Environment and Climate Change Canada. Health Canada will also expand the Protecting Canadians from Extreme Heat Program and the HealthADAPT Program to support health authorities across Canada in creating climate-resilient and low carbon health systems.

Did you know?

Health Canada, along with the Ivory Coast, co-chairs an international working group on climate-resilient health systems under the World Health Organization's Alliance for Transformative Action on Climate and Health initiative. The working group's focus is on building climate resilience and adaptation to current, emerging, and future health impacts and threats of climate change.

Building resilience for future health emergencies

Health Canada is increasing its capacity to better respond and support others in responding to health emergencies. The Department will continue to work with PHAC and partners to respond to pandemics and maintain its readiness to respond to health emergencies and help build its resilience in Canada's health sector. Health Canada will apply the lessons learned from the response to the COVID-19 pandemic to enhance its readiness for future health emergencies. The management of the pandemic has provided crucial lessons in emergency preparedness, response, and engagement. It has also addressed broader systemic areas such as enhancing data accessibility and bolstering human health resource capacity. Additionally, Canada, along with World Health Organization Member States, is negotiating a Pandemic Agreement to strengthen pandemic prevention, preparedness, and response, as well as amendments to International Health Regulations, obliging Member States to detect, assess, report, and respond to public health threats. Both processes take into consideration health inequalities. This work includes strengthening the health and care workforce, creating interconnected platforms and technologies (including building digital health and data science capabilities), and strengthening regulatory authorities including ensuring the quality, safety, and efficacy of pandemic related products.

Key risks

Key risk(s) for Core Responsibility 2: Health protection and promotion

1. **Risk:** Canadians may lose confidence in Health Canada’s ability to help protect their health if the Department is not regarded as a trusted regulator and used as a credible source of information.

Key examples of Health Canada’s planned risk responses

<p>Implement informative initiatives</p>	<p>Increase and update the regulatory health and safety information that is made available to Canadians in a simple and accessible way. For example:</p> <ul style="list-style-type: none"> • Publish information on authorized clinical trials for drugs and vaccines and natural health products. • Continue to modernize the regulation of clinical trials and increase transparency by requiring the registration of trial information in a publicly accessible registry. This includes developing a new guidance document outlining policy expectations and providing stakeholders the opportunity to implement best practices associated with registration and reporting of results in advance of potential regulations. • Publish reports regarding industry non-compliance on the Health Canada website outlining key results of vaping compliance and enforcement activities. • Continue to deliver public education campaigns that are evidence- and fact-based to provide Canadians with the necessary information to make informed decisions across priority health issues, such as educating youth and adults about the risks and harms of cannabis, opioid, tobacco use, and vaping. • Update public information on supervised consumption sites and publish information on data and trends in the use of alcohol and psychoactive pharmaceuticals, and illegal drugs through the Canadian Alcohol and Drugs Survey, Canadian Student Alcohol and Drugs Survey, and the Canadian Postsecondary Education Alcohol and Drug Use Survey. • Update medical device guidance documents for improved clarity and transparency. • Publish data on the cannabis market, cannabis for medical purposes, survey results, public health advisories, reports on adverse reactions, research findings, update health warning messages. • Implement the Department’s Open Science Action Plan and Framework for Science and Research Excellence to ensure federal science is transparent and accessible for all Canadians. • Increase awareness of healthy eating and food safety behaviour through development of tools, resources, and public education campaigns to prevent mishandling of food preparation.
<p>Offer engagement opportunities to Canadians and stakeholders</p>	<p>In line with the GOC’s initiative and Health Canada’s Forward Regulatory Plan, provide opportunities for Canadians and stakeholders to become involved in decision-making processes, including the development of the regulatory process. For example:</p> <ul style="list-style-type: none"> • Consult broadly with stakeholders, including consumer and patient groups, health partners and industry as part of regulatory modernization

	<p>initiatives including modernizing Health Canada’s Lists of permitted food additives and the framework for foods for a special dietary purpose.</p> <ul style="list-style-type: none"> • Continue client services, stakeholder engagement, and outreach to the public regarding Health Canada programs.
<p>Modernize communications about Health Canada’s role as a regulator</p>	<p>Continue to acquire, develop, and improve the tools, processes, and resources needed to effectively communicate with, and engage, Canadians on Health Canada’s digital platforms, including Canada.ca, Healthy Canadians’ podcast, and Health Canada social media channels. For example:</p> <ul style="list-style-type: none"> • Proactively release information about approved health products and provide updates on shortages. • Optimize digital content so that it is more findable, easy to read and understand, and accessible to support increased trust of government web and social media content. • Collaborate with federal partners to innovate, leverage, and/or optimize content and digital tools for Canadians and streamline and automate the publishing of data to Canada.ca, allowing internal stakeholders to manage publishing and update in real time. • Continue to implement a user-focused recalls and safety alerts system to enable Canadians to take action to protect themselves from unsafe products. • Continue risk communication work to help reach out to sub-target audiences who are most impacted or who perceive themselves to be most impacted. • Improve transparency of pesticide regulatory decisions to increase understanding and enable meaningful public participation, including the use of plain language in regulatory documents and providing access to information and data used in regulatory decision-making.
<p>Advance regulatory modernization initiatives</p>	<p>Continue to modernize the federal regulatory system for health products and food through the Department’s efforts to make the regulations more responsive to an innovative environment, while ensuring the system remains science and safety-based and more internationally aligned. For example:</p> <ul style="list-style-type: none"> • Introduce agile licensing regulations for drugs and medical devices to support timely access, enable regulatory oversight based on risk and evolving evidence, improve transparency, modernize requirements, and align internationally. This will require manufacturers to submit human clinical trial data broken down by population subgroups for new and supplemental human drug submissions, in line with the United States Food and Drug Administration or the European Medicines Agency. • Modernize and update microbiological safety criteria and methods of analysis within Part B of the Food and Drug Regulations that enable timely revisions and efficient response to advance science and technology; and streamline food additive rules.

2. **Risk:** Health Canada’s ability to help protect the health of Canadians may be weakened due to the complexity and fragility of the global supply chain, the rapid pace of innovation, and increasing e-commerce from global sources.

Key examples of Health Canada’s planned risk responses

<p>Strengthen oversight</p>	<p>Develop strategies and tools to strengthen market surveillance and oversight of emerging products and supply shortage. For example:</p> <ul style="list-style-type: none"> • Promote, verify, and enforce compliance with the <i>Cannabis Act</i> and its regulations, consistent with the approach outlined in Health Canada’s Compliance and Enforcement Policy. • Enhance supply chain transparency, including mandatory labelling of chemicals in consumer products. • Explore, develop, and implement cross-product strategies, as well as digital and administrative tools to strengthen oversight of e-commerce and online marketplace domains. • Work with regulated parties and health care partners to enhance early signal detection, monitoring, and data-sharing to mitigate the impacts of health product shortages and to move further towards preventing them, where possible. • Strengthen outreach to P/Ts, industry stakeholders and patient groups to better anticipate and help alleviate the impacts of shortages. • Increase surveillance and data collection to improve supply/demand analysis for certain critical shortages. • Monitor food safety, risk, and labelling updates through collaboration with the International Social Science Liaison Group and participation in the Codex Alimentarius Commission which also contributes to the development of international food standards that facilitate fair trading practices of foods. • Increase the health and environmental protection of pesticides in Canada through implementation of a continuous oversight policy that enhances Health Canada's ability to keep pace with new and emerging science related to pesticides, and where necessary, to take actions to protect human health and the environment.
<p>Collaborate internationally</p>	<p>Collaborate with international regulatory organizations and align where appropriate with foreign regulators. For example:</p> <ul style="list-style-type: none"> • Work with international partners on antimicrobial resistance, clinical trials, regulatory reviews and market authorizations, increased diversity in clinical trials, risk assessments, post-market safety surveillance, regulatory standards, new technologies, emergent safety issues, and overall management of health product shortages. • Promote work-sharing for quicker access to drugs for Canadians (e.g., Project Orbis and Access Consortium). • Work with the International Council for Harmonisation of Technical Requirement for Pharmaceuticals for Human Use and the International Cooperation on Harmonization of Technical Requirements for Registration of Veterinary Medicinal Products to develop international standards.

	<ul style="list-style-type: none"> • Improving access to safer and more effective biocides for Canadians through the introduction of a Use of Foreign Decisions application pathway which allows businesses that want to bring biocides to the Canadian market to use the decisions of trusted foreign regulators. • Contribute to implement the G7 Clinical Trials Charter. • Communicate joint recalls of products and share information regarding non-compliant health product inspections, where appropriate.
Address changing business models in the supply chain	<p>Strengthen oversight of foreign sites involved in the manufacturing of health products. For example:</p> <ul style="list-style-type: none"> • Share information with other trusted regulators regarding non-compliance. • Carry out foreign on-site Good Manufacturing Practices inspections to increase Health Canada's oversight of drug production earlier in the supply chain. • Exchange information on pharmaceutical inspections conducted in foreign jurisdictions with international partners. • Implement regulatory initiatives and plans (e.g., Health Canada Forward Regulatory Plan, Regulatory Cooperation Council Action Plan).

Related government priorities

More information about SGBA Plus is available in the [Gender-Based Analysis Plus Supplementary Information Table](#).

More information about Health Canada’s contributions to Canada’s Federal Implementation Plan on the 2030 Agenda and the Federal Sustainable Development Strategy can be found in [Health Canada's Departmental Sustainable Development Strategy 2023-2027](#).

Internal services

In this section

[Description](#)

[Snapshot of planned resources in 2024-25](#)

[Plans to achieve results](#)

[Key risks](#)

[Related government priorities](#)

Description

Internal services are the services that are provided within a department so that it can meet its corporate obligations and deliver its programs. Internal Services include: Management and Oversight Services; Communications Services; Legal Services; Human Resources Management Services; Financial Management Services; Information Management Services; Information Technology Services; Real Property Management Services; Materiel Management Services; and Acquisition Management Services.

Snapshot of planned resources in 2024–25	
Planned spending:	\$322,146,749
Planned full-time resources:	2,038 full-time equivalents

Plans to achieve results

Health Canada's greatest strength is an engaged, empowered, and well-equipped workforce with employees who have the competencies (including science and regulatory skill sets), tools, and opportunities to pursue excellence in program and service delivery.

In the [Thirtieth Annual Report on the Public Service of Canada](#), the Clerk of the Privy Council acknowledged the collective hard work of public servants during a period characterized by the GC's ongoing response to the COVID-19 pandemic and efforts to advance reconciliation while driving progress on social justice. These events presented the public service with many opportunities to serve in different ways and to adapt while responding to complex, and rapidly changing challenges.

Health Canada will continue to support the continuous renewal of the Public Service in 2024-25 by fostering inclusivity and accessibility and embracing digital approaches. Priorities include building a healthy, diverse, and inclusive workforce; advancing accessibility; supporting innovative programs and services to deliver results for Canadians; enabling a safe and productive workforce with access to modern tools and facilities; and providing Canadians with inclusive, timely, and evidence-based communications.

Building a healthy, diverse, and inclusive workforce

Health Canada remains committed to its ongoing response to the [Clerk's Call to Action on Anti-Racism, Equity, and Inclusion in the Federal Public Service](#), the [Clerk's Call to Action Forward Direction Message](#)

to Deputies, the Deputy Ministers' Commitments on Diversity and Inclusion, and the President of the Treasury Board's Priorities for actions to increase diversity and inclusion in the public service. The Department's goal is to ensure a work environment where all employees feel safe and are treated with respect, dignity, and fairness. Health Canada strives to create a representative workforce and supports career growth for equity deserving groups. These values are the foundation of who we are, what we do, and how we carry out our work. Priorities for 2024-25 include:

- Facilitating discussions on systemic racism, harassment, and discrimination through platforms such as the Leadership Council for Diversity and Inclusion; Equity, Diversity, and Inclusion Metrics Action Committee; Branch Collaboration Forum; and the Inclusion, Diversity, Equity and Accessibility Employee Networks Collaboration Forum.
- Ensuring employee networks' contributions are considered in the design and implementation of initiatives focused on reducing systemic racism and barriers to inclusion.
- Increasing inclusivity and transparency by applying an Equity, Diversity, and Inclusion lens to staffing and by using employee feedback and input from partners and experts.
- Continuing to implement the GC Workplace Accessibility Passport to support a streamlined accommodation process for persons with disabilities.

What's new?

In June 2023, Health Canada appointed an Indigenous Career Navigator to provide career advice and coaching to Indigenous employees and to support managers looking to hire and develop Indigenous employees. Experienced in human resources, administration and project management, this individual will work closely with Health Canada's Indigenous Employee's Network chair to recruit and retain Indigenous employees.

The Department will work to attract and retain a diverse, bilingual, and representative workforce by:

- Continuing to offer training to help prevent discrimination, violence, and harassment in the workplace.
- Including bias and barrier-free practices for recruitment, onboarding, and retention within Health Canada's Multi-Year Diversity and Employment Equity Plan for 2022-25.
- Co-developing and implementing an Indigenous Human Resources Strategy with Health Canada's Indigenous Employee Network and achieving hiring targets for Indigenous Peoples.
- Continuing to implement the Recruitment and Career Advancement Strategy for Black and Racialized Employees in accordance with the Clerk's Call to Action Forward Direction.
- Implementing the Department's Official Languages Action Plan for 2023-26 with a focus on supporting a workplace that encourages bilingualism.

Health Canada's Mental Health and Wellness in the Workplace Strategy reaffirms the Department's commitment to building an organizational culture centered on psychological health and safety. Health Canada's repositories of information, such as The Mental Health Toolkit, connect all employees with information and resources. In 2024-25, the Department will continue the Psychosocial Risk Factor Education Campaign to highlight the practical applications of psychological health and safety in the workplace.

The Centre for Ombuds, Resolution and Ethics (CORE) will continue to offer employees, at all levels, a safe space to share experiences and explore options, recourse, and resources for resolving any work-related issues or concerns without fear of reprisal. As part of the role of the Ombuds, the Centre will

raise awareness of systemic issues and trends to those with the authority to act and will foster collaborative approaches to managing workplace conflicts. In addition, it will continue to offer a range of individual and organizational training and services in conflict resolution including topics such as emotional intelligence and values and ethics. Finally, CORE will advance the renewal of the Departmental Code of Values and Ethics.

Health Canada's Employee Assistance Program (EAP) provides services to employees in more than 90 federal departments and agencies. In 2024-25, the Department will continue to improve the program by promoting Live Chat and other digital wellness resources (e.g., the digital caregiver service, "Torchlight") through social media communications and other means (e.g., presentations, information sessions, website). Health Canada will also improve how EAP is experienced by equity deserving groups. For example, as part of Budget 2023's [An Action Plan for Black Employees in the Public Service](#) the Department will:

- Continue targeted recruitment efforts to improve alignment of the counsellor network with public service demographics.
- Explore training for EAP counsellors and staff on systemic anti-Black racism, trauma informed and culturally competent approaches.
- Expand demographic data collection to include specific sub-groups within the racialized category to enhance how disaggregated data is collected and evaluated.

Advancing accessibility

The [Accessible Canada Act](#) requires that all organizations under federal responsibility publish an Accessibility Plan every three years that outlines how they will identify, remove, and prevent barriers in their policies, programs, and services.

Health Canada will continue to advance [its 2022-25 Accessibility Plan](#) by taking action to meet its responsibility as part of the GC's goals to make Canada barrier free by 2040 by:

- Developing clear performance indicators for the Department to measure improvements to accessibility in the areas of employment; the built environment; communications; information technologies; design and delivery of programs and services; procurement; transportation; and culture.
- Continuing to focus on hiring Health Canada's share of the GC's commitment of 5,000 new hires of persons with disabilities by 2025 in support of the [Accessibility Strategy for the Public Service of Canada](#).
- Ensuring all Health Canada employees have the knowledge and tools to become accessibility confident through training and engagement.
- Ensuring ongoing consultations with the Health Canada Persons with Disabilities Network.

Health Canada will also assess its progress on implementing the Plan and publish a report by the end of 2024.

Supporting innovative programs and services to deliver results for Canadians

Innovation continues to be a priority for Health Canada. The Department will continue to invest in public-facing and internal-facing innovations aimed at supporting programs and services that protect the health and safety of Canadians.

Testing innovations prior to full-scale implementation allows the Department to make every effort to achieve value for money, while improving social, environmental, and economic outcomes for Canadians and public servants. Health Canada's Solutions Fund is an example of a space where employees can explore and test business process and service improvements.

The focus in the coming year will be building Health Canada's capacity for innovation in the following key areas:

- Exploring the relationship between innovation and developing evidence-based policy.
- Sharing project results and lessons learned ensuring horizontally amongst federal departments.
- Building employee capacity to use innovative methodologies to develop knowledge and skills to better support health-related solutions.

Did you know?

Project Deconstructing Unconscious Bias, under the Solutions Fund, will continue to explore concepts in equity and human-centered design to better identify unconscious bias and systemic racism within the Consumer Product Safety Program. By using a case study to explore these concepts, the Department will refine and enhance programs and services that meet the realities of all of Canada's people.

Health Canada will continue to support the testing of innovative products and solutions with healthcare partners such as hospitals, clinics, and health authorities. These products cover areas such as digital health, diagnostics, patient management, and health care administration.

Enabling a safe and productive workforce with access to modern tools and facilities

The Department will continue to collaborate across the Health Portfolio to encourage and support the modernization and security of the workforce. Employees will continue to have access to secure and modern tools and facilities that meet the requirements for accessibility as per the National Accommodation Strategy. Additionally, Health Canada's new Digital Strategy will guide how digital capabilities can improve processes and productivity, delivering better user experiences.

Health Canada will continue to advance the strategic use of data as an asset through the Department's Data Strategy and align with the [2023-26 Data Strategy for the Federal Public Service](#) to support decision-making and enhance the efficiency and effectiveness of programs and services. Driven by the [Open Science Action Plan](#) and Health Canada's Digital Strategy, the Department will strive to create a digital-first organization where innovative technologies and client-centered solutions advance operations. The knowledge developed from these data-driven insights contributes to the oversight of health systems and regulatory operations.

Other priorities in 2024-25 include:

- Continuing to transform the Department's financial, materiel, and grants and contributions management systems to align with the GC's Digital Comptrollership Program.
- Renewing Health Canada's real property portfolio strategy and engaging the science programs to define the long-term future laboratory needs of the Department.
- Supporting the Departmental Open Science Action Plan by working collaboratively with the Federal Science Library Network and other science-based Departments to allow Health Canada authors to publish in a wider range of journals and benefit from increased citations and visibility.

- Enhancing the security of our assets, people, and facilities by updating the Departmental Security Plan and modernizing the security infrastructure.

What's New?

In November 2023, Health Canada and PHAC launched a joint [Healthy Canadians Podcast on YouTube](#) and all major podcast platforms. The podcast, the first of its kind for the Department, is the latest addition to the Healthy Canadians suite of channels. The first season consisted of 9 episodes ranging from 15 to 30 minutes that feature discussions on interesting health and public-health related topics, such as radon in homes, with Departmental subject-matter experts as well as external guests. In 2024-25 additional podcast episodes will be released on a range of important health topics of relevance to Canadians.

Communicating with Canadians to provide them with inclusive, timely, and evidence-based information

Health Canada provides Canadians with inclusive, timely, and evidence-based information, through an array of digital and traditional communication methods, to help them make informed decisions on their health and safety. The Department leverages communication platforms and services to provide trusted, accurate, accessible, and culturally appropriate information that puts all people in Canada first in its design and functionality. In 2024-25, the Department will communicate on GC priorities such as improving Canadians' access to oral health care and advancing shared healthcare system priorities with P/Ts, as well as on a broad range of health and safety related issues.

Health Canada will also maintain its leadership role in delivering evidence-based communications initiatives, in collaboration with P/Ts and other stakeholders, on priority topics such as: addressing substance-use related harms, including the overdose crisis; mental health; regulatory compliance and enforcement; drug shortages; palliative care; healthy eating; food safety; pesticides; regulation and authorization of health products; and health impacts of climate change and extreme weather events.

Key risks

Key risk(s) for Internal Services

1. **Risk:** Health Canada's ability to deliver on its mandate effectively may be at risk due to challenges in maintaining a high-performing, bilingual, and diverse and agile workforce within a healthy workplace.

Key examples of Health Canada's planned risk responses

<p>Support workplace wellness initiatives</p>	<p>Invest in initiatives to foster a healthy and safe workplace. For example:</p> <ul style="list-style-type: none"> • Promote positive mental health and wellness through the Multi-Year Mental Health and Workplace Wellness Strategy and implement strategies that align with the National Standard for Psychological Health and Safety in the Workplace. • Provide guidance and support to employees on a healthy and respectful workplace. • Provide, via the Centre for Ombuds, Resolution and Ethics (CORE), an independent, confidential, and informal safe space where all Health Canada employees can explore options, recourse, and resources to resolve a range of issues that could hinder workplace well-being.
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<p>Promote diversity, bilingualism, and inclusion</p>	<p>Encourage diversity, bilingualism, and inclusion. For example:</p> <ul style="list-style-type: none"> • Continue implementation of the Department’s Multi-Year Diversity and Employment Equity Plan for 2022-25. • Continue implementation of the Department’s Official Languages Action Plan and expanding access to standardized language training through the Department’s single window for official languages training. • Address racism and discrimination through the Leadership Council on Diversity and Inclusion, and Employee Networks. • Provide services to help employees at all levels address racism and discrimination through CORE. • Implement strong employee networks with the support of their respective Champions. • Implement the commitments in Health Canada’s first Accessibility Plan.
<p>Attract and retain skilled and talented employees</p>	<p>Maintain a high-performing workforce with the appropriate skills and competencies. For example:</p> <ul style="list-style-type: none"> • Foster career development through clear performance measures, training, and talent management. • Incorporate accessibility, diversity, and inclusion in all aspects of planning to support the workforce, work, and workplace, regardless of location. • Implement innovative and targeted staffing strategies to streamline human resources processes and recruitment.

2. **Risk:** Health Canada’s ability to deliver its programs and services may be at risk due to the Department’s aging physical and IT infrastructure, deferred maintenance, limited funding, limited data analytics capacity, and challenges in safeguarding IT assets from cyberattacks.

Key examples of Health Canada’s planned risk responses

<p>Continue to update IT and lab infrastructure</p>	<p>Equip employees with modern, enhanced, and secure infrastructure. For example:</p> <ul style="list-style-type: none"> • Continue to modernize workplace facilities and provide novel and secure tools. • Update aging lab infrastructure and continue to participate in Labs Canada to create world class, innovative and collaborative science research centres across Canada. • Draft a Real Property Portfolio Strategy (primary focus will be custodial laboratories) to better align real property investments with Health Canada priorities and inform, where required, retention versus divestiture decisions. • Continue to implement the Departmental Security Plan. • Develop and/or implement business applications to address the risks of aged technology, including technology that does not meet business needs. • Research and consider modern, reliable, and robust security enterprise solutions that meet the needs of the Department and future of work. • Continue implementation of M365 collaboration tools/features.
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	<ul style="list-style-type: none"> • Create a systematic approach to capital investment planning and management by centralizing the Department’s capital budget and prioritizing investments to address highest priorities across investment classes.
Promoting digital transformation	<p>Leverage quality data as an asset to increase efficiency and effectiveness by:</p> <ul style="list-style-type: none"> • Advancing the Department’s digital-data transformation outlined in Health Canada’s Data Strategy and Digital Strategy. • Ensuring alignment with the 2023-2026 Data Strategy for the Federal Public Service, the Government of Canada Digital Standards, the Government of Canada Policy on Results.
Promote training and awareness	<p>Ensure Department vigilance and raise employee awareness. For example:</p> <ul style="list-style-type: none"> • Communicate with employees on security requirements. • Implement employee training on new applications and technology. • Provide training to all employees on information security and safeguarding. • Refine and deliver mandatory training regarding the management of personal information. • Conduct branch-level privacy risk assessments to ensure branches understand and are aware of privacy risks and allocate privacy advisory resources to the areas of highest need. • Identify an internal process for the procurement of IT professional services to clarify the roles of Contracting, Digital Transformation Client Services, Shared Services Canada, and Security. • Develop security tools and continued implementation of the Security Awareness Working Group action plan.
Strengthen oversight	<p>Implement oversight strategies and foster a security culture remotely and onsite. For example:</p> <ul style="list-style-type: none"> • Update policies and tools to safeguard and protect people, information, and assets in compliance with Treasury Board policies, directives, and standards such as the Treasury Board Standard on Security Screening. • Continue to implement the revised Privacy Management Framework focusing on further expansion of a risk-based approach for initiatives with personal information. • Continue Privacy Impact Assessments and Privacy Breach Process and Reporting. • Provide regular updates to Business Continuity Planning.

Related government priorities

Planning for contracts awarded to Indigenous businesses

Health Canada is committed to generating economic opportunities for Indigenous Peoples through federal procurement and advancing the GC’s reconciliation agenda. This includes a commitment to award at least 5% of the value of contracts to businesses managed and led by Indigenous Peoples. In 2023-24, the Department implemented an Indigenous Procurement Strategy including establishing an

oversight committee and increasing awareness of business owners and procurement practitioners to identify opportunities for Indigenous businesses.

In 2024-25, the Department will continue to monitor the Strategy through quarterly progress reports. Additional guidance and tools will be developed based on recent best practices, and Health Canada will maintain mandatory training on Indigenous businesses for all procurement practitioners. The Department will better integrate market research of Indigenous business capacity as part of the investment and procurement planning processes at the start of the fiscal year and will work with Indigenous Services Canada, Procurement Assistance Canada, and Buy Social Canada to address challenges related to Indigenous business capacity for specialized health and science related procurements.

Further, Health Canada will leverage best practices and participate in TBS' Indigenous Procurement Micro-Credentialing Pilot to develop in-house expertise on Indigenous procurement by understanding the historical relation and cultural aspects that influence the relationship between Indigenous Peoples and the GC.

5% reporting field	2022-23 actual result	2023-24 forecasted result	2024-25 planned result
Total percentage of contracts with Indigenous businesses	18.83%	N/A	5%

Planned spending and human resources

This section provides an overview of Health Canada’s planned spending and human resources for the next three fiscal years and compares planned spending for 2024–25 with actual spending from previous years. The figures in this departmental plan reflect the refocusing government spending reductions.

In this section

[Spending](#)

[Funding](#)

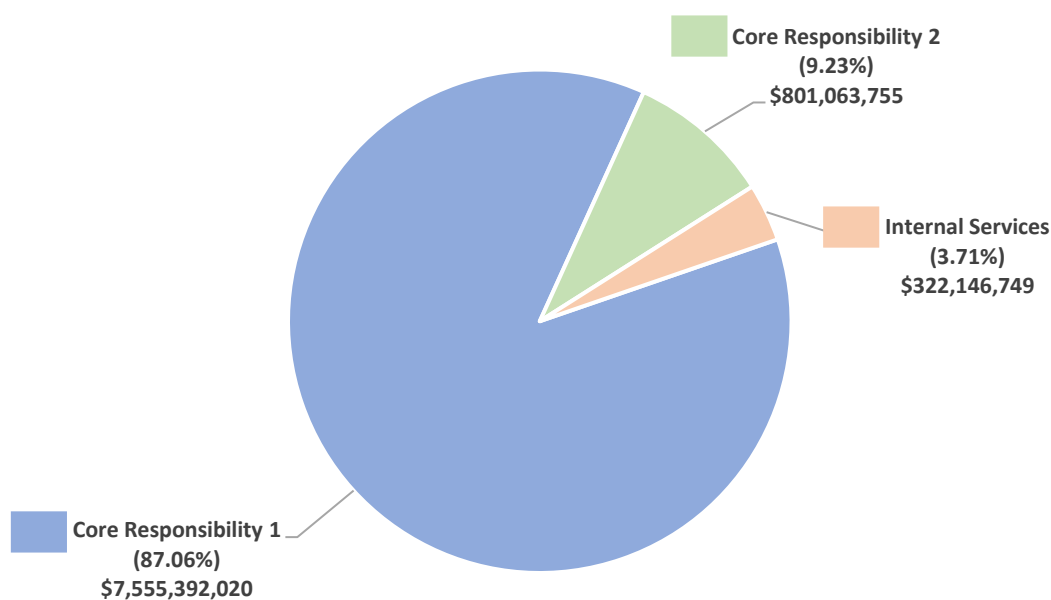
[Future-oriented condensed statement of operations](#)

[Human resources](#)

Spending

The following chart summarizes Health Canada’s planned spending in 2024–25 by core responsibility.

Figure 1: Spending by core responsibility in 2024–25



Text description of figure 1 [Expand all] [Collapse all]

The figure illustrates Health Canada’s planned spending in 2024-25 by core responsibility.

Core responsibility 1 (87.06%) \$7,555,392,020

Core responsibility 2 (9.23%) \$801,063,755

Internal services (3.71%) \$322,146,749

Table 6: Actual spending summary for core responsibilities and internal services (dollars)

The following table shows information on spending for each of Health Canada’s core responsibilities and for its internal services for the previous three fiscal years. Amounts for the current fiscal year are forecasted based on spending to date.

Core responsibilities and internal services	2021–22 actual expenditures	2022–23 actual expenditures	2023–24 forecast spending
Core Responsibility 1: Health care systems	4,744,300,568	2,953,648,145	6,113,286,984
Core Responsibility 2: Health protection and promotion	787,250,023	862,845,484	843,254,779
Subtotal	5,531,550,591	3,816,493,629	6,956,541,763
Internal services	513,234,110	505,814,560	539,130,654
Total	6,044,784,701	4,322,308,189	7,495,672,417

Explanation of table 6 [Expand all] [Collapse all]

The 2021–22 to 2023–24 fiscal years total expenditures and forecast spending include authorities from appropriation acts: Main Estimates, Supplementary Estimates, and funding from various Treasury Board votes.

The decrease in actual expenditures in 2022–23 is mainly due to the winding down of Health Canada’s response to the COVID-19 pandemic.

The increase in planned spending in 2023-24 is mainly due to funding received in-year for Working Together to Improve Health Care for Canadians and an increase in funding for Dental Care for Canadians and the Interim Canada Dental Benefit.

Table 7: Budgetary planning summary for core responsibilities and internal services (dollars)

The following table shows information on spending for each of Health Canada’s core responsibilities and for its internal services for the upcoming three fiscal years.

Core responsibilities and internal services	2024-25 budgetary spending (as indicated in Main Estimates)	2024-25 planned spending	2025-26 planned spending	2026-27 planned spending
Core Responsibility 1: Health care systems	7,555,392,020	7,555,392,020	8,528,629,539	8,544,166,393
Core Responsibility 2: Health protection and promotion	801,063,755	801,063,755	680,774,876	651,050,205
Subtotal	8,356,455,775	8,356,455,775	9,209,404,415	9,195,216,598

Core responsibilities and internal services	2024-25 budgetary spending (as indicated in Main Estimates)	2024-25 planned spending	2025-26 planned spending	2026-27 planned spending
Internal services	322,146,749	322,146,749	316,705,676	311,082,726
Total	8,678,602,524	8,678,602,524	9,526,110,091	9,506,299,324

Explanation of table 7 [Expand all] [Collapse all]

For the 2024–25 to 2026–27 fiscal years, total planned spending does not include funding that could be provided from Supplementary Estimates and carry forward adjustments.

The increase in planned spending in 2024–25 is mainly due to funding level increases for Dental Care for Canadians which is offset by the expiry of budgetary spending authorities for mental health supports and services; continuing Canada's chemical management regime; the Canadian Drug Agency Transition Office; and strengthening the capacity and transparency of the pesticide review process.

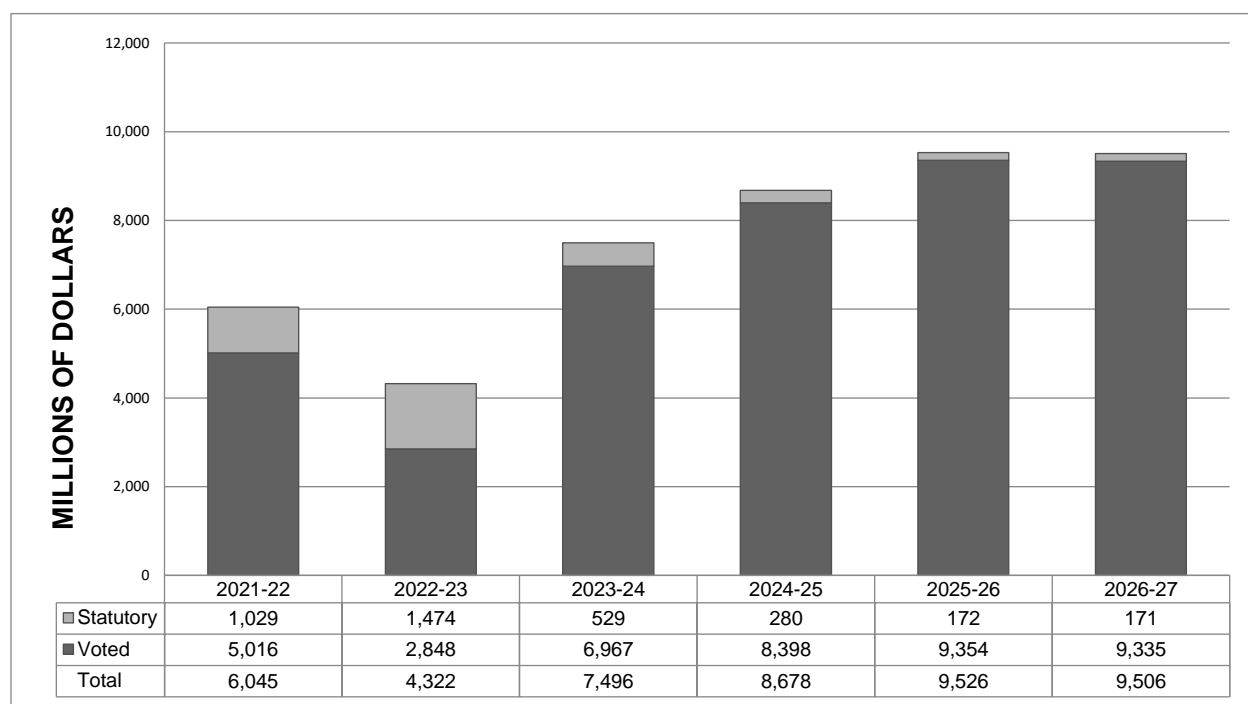
The increase in planned spending in 2025–26 is mainly due to the funding level increase for Dental Care for Canadians. This increase is partially offset by the expiry of budgetary authorities for the renewal of the federal framework for the legalization and regulation of cannabis in Canada.

For the expiry of budgetary spending authorities, the Department would have to request funding for these initiatives for future years.

Funding

Figure 2: Departmental spending 2021–22 to 2026–27

The following graph presents planned spending (voted and statutory expenditures) over time.



Text description of figure 2 [Expand all] [Collapse all]

The figure illustrates Health Canada's spending trend from fiscal year 2021-22 to fiscal year 2026-27 where spending, in millions of dollars, is shown on the vertical axis and time period, in fiscal years, is shown on the horizontal axis.

Health Canada's actual spending for fiscal year 2021-22: \$6,045 million (Voted: \$5,016 million, Statutory: \$1,029 million); and 2022-23: \$4,322 million (Voted: \$2,848 million, Statutory: \$1,474 million).

Health Canada's forecast spending for fiscal year 2023-24: \$7,496 million (Voted: \$6,967 million, Statutory: \$529 million).

Health Canada's planned spending for fiscal year 2024-25: \$8,678 million (Voted: \$8,398 million, Statutory: \$280 million); 2025-26: \$9,526 million (Voted: \$9,354 million, Statutory: \$172 million); and 2026-27: \$9,506 million (Voted: \$9,335 million, Statutory: \$171 million).

Estimates by vote

Information on Health Canada's organizational appropriations is available in the [2024-25 Main Estimates](#).

Future-oriented condensed statement of operations

The [future-oriented condensed statement of operations](#) provides an overview of Health Canada's operations for 2023-24 to 2024-25.

The forecast and planned amounts in this statement of operations were prepared on an accrual basis. The forecast and planned amounts presented in other sections of the Departmental Plan were prepared on an expenditure basis. Amounts may therefore differ.

A more detailed future-oriented statement of operations and associated notes, including a reconciliation of the net cost of operations with the requested authorities, are available on Health Canada’s website.

Table 8: Future-oriented condensed statement of operations for the year ending March 31, 2025 (dollars)

Financial information	2023–24 forecast results	2024–25 planned results	Difference (2024–25 planned results minus 2023–24 forecast results)
Total expenses	7,919,442,877	9,037,768,849	1,118,325,972
Total revenues	291,098,954	290,948,615	(150,339)
Net cost of operations before government funding and transfers	7,628,343,923	8,746,820,234	1,118,476,311

Explanation of table 8 [Expand all] [Collapse all]

Health Canada is projecting \$9,037.8 million in expenses based on 2024-25 Main Estimates and accrual information. This amount does not include future supplementary estimates. It represents an increase of \$1,118.3 million from 2023-24 forecast results.

The increase in planned results is mainly due to planned expenditures in 2024-25 for Dental Care for Canadians. This increase is partially offset by decreased funding to support the following initiatives:

- Canada’s chemicals management regime.
- Improve mental health supports and services.
- Canadian Drug Agency Transition Office.

The 2024-25 planned expenses by core responsibility are as follows:

- Health care systems \$7,556.3 million.
- Health protection and promotion \$1,106.9 million.
- Internal services \$374.6 million.

Health Canada receives most of its funding through annual parliamentary appropriations. Health Canada’s revenue is generated by programs that support the above-noted core responsibilities. Health Canada projects total revenues in 2024-25 to be \$290.9 million, representing a decrease of \$0.2 million from 2023-24 projections.

The 2024-25 main sources of revenues by type are as follows:

- Services of a regulatory nature \$105.6 million.
- Rights and privileges \$168.3 million.
- Services of a non-regulatory nature \$108.9 million.

Human resources

Table 9: Actual human resources for core responsibilities and internal services

The following table shows a summary of human resources, in full-time equivalents (FTEs), for Health Canada's core responsibilities and for its internal services for the previous three fiscal years. Human resources for the current fiscal year are forecasted based on year to date.

Core responsibilities and internal services	2021–22 actual FTEs	2022–23 actual FTEs	2023–24 forecasted FTEs
Core Responsibility 1: Health care systems	428	434	495
Core Responsibility 2: Health protection and promotion	6,527	6,628	6,538
Subtotal	6,955	7,062	7,033
Internal services	2,573	2,662	2,084
Total	9,528	9,724	9,117

Explanation of table 9 [Expand all] [Collapse all]

The 2021–22 and 2022–23 fiscal years FTEs are based on actual expenditures on personnel. The 2023–24 fiscal year is based on total authorities from appropriation acts: Main Estimates and Supplementary Estimates.

The increase in actual FTEs for 2022–23 is mainly due to the renewal of the federal framework for the legalization and regulation of cannabis in Canada.

The decrease in FTEs for 2023-24 is mainly due to FTEs associated with services provided to the Public Health Agency of Canada (PHAC) as part of the health portfolio Shared Services Partnership model which is not fully part of the planned FTEs; as well as the winding down of Health Canada and PHAC's response to the COVID-19 pandemic.

Table 10: Human resources planning summary for core responsibilities and internal services

The following table shows information on human resources, in full-time equivalents (FTEs), for each of Health Canada's core responsibilities and for its internal services planned for 2024–25 and future years.

Core responsibilities and internal services	2024–25 planned FTEs	2025–26 planned FTEs	2026–27 planned FTEs
Core Responsibility 1: Health care systems	560	613	571
Core Responsibility 2: Health protection and promotion	6,109	5,297	5,297
Subtotal	6,669	5,909	5,849
Internal services	2,038	1,965	1,945

Core responsibilities and internal services	2024–25 planned FTEs	2025–26 planned FTEs	2026–27 planned FTEs
Total	8,707	7,874	7,794

Explanation of table 10 [Expand all] [Collapse all]

The calculation of the planned FTE figures is based on programs using their full revenue authority.

The decrease in planned FTEs in 2024–25 is mainly due to the expiry of budgetary authorities for continuing Canada's chemical management regime; strengthening the capacity and transparency of the pesticide review process; bringing innovation to regulations; ensuring the ongoing integrity of the Public Service Occupational Health Program; and the Canadian Drug Agency Transition Office.

The decrease in planned FTEs in 2025–26 is mainly due to the expiry of budgetary authorities in 2024–25 for the renewal of the federal framework for the legalization and regulation of cannabis in Canada.

For the expiry of budgetary spending authorities, the Department would have to request funding for these initiatives for future years.

Corporate information

Organizational profile

Appropriate minister(s): The Honourable Mark Holland, P.C., M.P.

and The Honourable Ya'ara Saks, P.C., M.P.

Institutional head: Dr. Stephen Lucas

Ministerial portfolio: Health

Enabling instruments: *Assisted Human Reproduction Act, Canada Consumer Product Safety Act, Canada Health Act, Cannabis Act, Controlled Drugs and Substances Act, Dental Benefit Act, Department of Health Act, Food and Drugs Act, Hazardous Materials Information Review Act, Hazardous Products Act, Pest Control Products Act, Radiation Emitting Devices Act, Tobacco and Vaping Products Act.*

[List of Acts and Regulations](#)

Year of incorporation / commencement: 1913

Organizational contact information

Mailing address

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Assistant Deputy Minister / Chief Financial Officer

[Health Canada](#)

Assistant Deputy Minister Office

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Departmental Results Framework

Health Canada's approved Departmental Results Framework and Program inventory for 2024-25 are as follows.

DEPARTMENTAL RESULTS FRAMEWORK	CORE RESPONSIBILITY 1 Health Care Systems	CORE RESPONSIBILITY 2 Health Protection and Promotion	INTERNAL SERVICES
	<p>R1: Canada has modern and sustainable health care systems</p> <p>I1: National health expenditure as a percentage of Gross Domestic Product</p> <p>I2: Real per capita health expenditure</p> <p>I3: Drug spending as a percentage of Gross Domestic Product</p> <p>I4: Percentage of family physicians using electronic medical records</p> <p>R2: Canadians have access to appropriate and effective health services</p> <p>I5: Percentage of Canadians (aged 15+) with a mental disorder who have expressed that they have an unmet mental health care need</p> <p>I6: Percentage of Canadians (aged 18+) who have expressed that they have an unmet need for access to home care services</p> <p>I7: Percentage of <i>Canada Health Act</i> compliance issues addressed within 24 months of identification</p> <p>I8: Percentage of Canadians (aged 12+) who did not fill a prescription for medicine or skipped doses of medicine because of the cost</p> <p>I9: Percentage of the target Canadian population who avoided visiting an oral health professional due to cost</p>	<p>R3: Canadians have access to safe, effective and quality health products</p> <p>I10: Percentage of human new drug decisions issued within service standards</p> <p>I11: Percentage of Risk Management Plan reviews for new drug decisions completed within service standards</p> <p>I12: Percentage of domestic drug companies deemed to be compliant with manufacturing requirements under the <i>Food and Drugs Act</i> and associated <i>Regulations</i></p> <p>R4: Canadians are protected from unsafe consumer and commercial products and substances</p> <p>I13: Percentage of domestic consumer product recalls communicated to Canadians in a timely manner</p> <p>I14: Percentage of actions taken in a timely manner to protect the health of Canadians from substances found to be a risk to human health</p> <p>I15: Percentage of pre-market pesticide submission reviews that are completed within service standards</p> <p>R5: Canadians make healthy choices</p> <p>I16: Percentage of Canadians (aged 15+) who are current cigarette smokers</p> <p>I17: Percentage of youth (grades 10-12) who report frequent (daily to weekly) cannabis use in the past 30 days</p> <p>I18: Percentage of Canadians who use dietary guidance provided by Health Canada</p>	
PROGRAM INVENTORY	<ol style="list-style-type: none"> 1. Responsive Health Care Systems 2. Healthy People and Communities 3. Quality Health Science, Data and Evidence 	<ol style="list-style-type: none"> 4. Pharmaceutical Drugs 5. Biologic and Radiopharmaceutical Drugs 6. Medical Devices 7. Natural Health Products 8. Food and Nutrition 9. Air Quality 10. Climate Change 11. Water Quality 12. Health Impacts of Chemicals 13. Consumer Product Safety 14. Workplace Hazardous Products 15. Tobacco Control 16. Controlled Substances 17. Cannabis 18. Radiation Protection 19. Pesticides 20. Health Canada Specialized Services 	

Text description of figure 3 [Expand all] [Collapse all]

Legend:

R: Result

I: Indicator

The figure illustrates Health Canada's approved Departmental Results Framework and Program inventory for 2024-25.

The Departmental Results Framework groups Health Canada's Core Responsibilities into two categories, all supported by Internal Services. These categories are (1) Health Care Systems and (2) Health Protection and Promotion, each of which are delivered through multiple programs in the Program inventory. Each core responsibility has departmental results and several indicators associated with it.

Departmental Results Framework

Core Responsibility 1: Health care systems

- R1: Canada has modern and sustainable health care systems
 - I1: National health expenditure as a percentage of Gross Domestic Product
 - I2: Real per capita health expenditure
 - I3: Drug spending as a percentage of Gross Domestic Product
 - I4: Percentage of family physicians using electronic medical records
- R2: Canadians have access to appropriate and effective health services
 - I5: Percentage of Canadians (aged 15+) with a mental disorder who have expressed that they have an unmet mental health care need
 - I6: Percentage of Canadians (aged 18+) who have expressed that they have an unmet need for access to home care services
 - I7: Percentage of *Canada Health Act* compliance issues addressed within 24 months of identification
 - I8: Percentage of Canadians (aged 12+) who did not fill a prescription for medicine or skipped doses of medicine because of the cost
 - I9: Percentage of the target Canadian population who avoided visiting an oral health professional due to cost

Program inventory under Core Responsibility 1 (from one to three) as follows:

1. Responsive Health Care Systems
2. Healthy People and Communities
3. Quality Health Science, Data and Evidence

Core Responsibility 2: Health protection and promotion

- R3: Canadians have access to safe, effective and quality health products
 - I10: Percentage of human new drug decisions issued within service standards
 - I11: Percentage of Risk Management Plan reviews for new drug decisions completed within service standards
 - I12: Percentage of domestic drug companies deemed to be compliant with manufacturing requirements under the *Food and Drugs Act* and associated regulations

- R4: Canadians are protected from unsafe consumer and commercial products and substances
 - I13: Percentage of domestic consumer product recalls communicated to Canadians in a timely manner
 - I14: Percentage of actions taken in a timely manner to protect the health of Canadians from substances found to be a risk to human health
 - I15: Percentage of pre-market pesticide submission reviews that are completed within service standards
- R5: Canadians make healthy choices
 - I16: Percentage of Canadians (aged 15+) who are current cigarette smokers
 - I17: Percentage of youth (grades 10-12) who report frequent (daily to weekly) cannabis use in the past 30 days
 - I18: Percentage of Canadians who use dietary guidance provided by Health Canada

Program inventory under Core Responsibility 2 (from four to twenty) as follows:

4. Pharmaceutical Drugs
5. Biologic and Radiopharmaceutical Drugs
6. Medical Devices
7. Natural Health Products
8. Food and Nutrition
9. Air Quality
10. Climate Change
11. Water Quality
12. Health Impacts of Chemicals
13. Consumer Product Safety
14. Workplace Hazardous Products
15. Tobacco Control
16. Controlled Substances
17. Cannabis
18. Radiation Protection
19. Pesticides
20. Health Canada Specialized Services

Internal Services

Supplementary information tables

The following [supplementary information tables](#) are available on Health Canada's website:

- Details on transfer payment programs
- Gender-based analysis plus
- Horizontal initiatives

Information on Health Canada's departmental [sustainable development strategy](#) can be found on Health Canada's website.

Federal tax expenditures

Health Canada's Departmental Plan does not include information on tax expenditures.

Tax expenditures are the responsibility of the Minister of Finance. The Department of Finance Canada publishes cost estimates and projections for government wide tax expenditures each year in the [Report on Federal Tax Expenditures](#).

This report provides detailed information on tax expenditures, including objectives, historical background, and references to related federal spending programs, as well as evaluations, research papers and gender-based analysis plus.

Definitions

[Expand all] [Collapse all]

appropriation (crédit)

Any authority of Parliament to pay money out of the Consolidated Revenue Fund.

budgetary expenditures (dépenses budgétaires)

Operating and capital expenditures; transfer payments to other levels of government, organizations, or individuals; and payments to Crown corporations.

core responsibility (responsabilité essentielle)

An enduring function or role performed by a department. The intentions of the department with respect to a core responsibility are reflected in one or more related departmental results that the department seeks to contribute to or influence.

Departmental Plan (plan ministériel)

A document that sets out a department's priorities, programs, expected results and associated resource requirements, covering a three-year period beginning with the year indicated in the title of the report. Departmental Plans are tabled in Parliament each spring.

departmental result (résultat ministériel)

A change that a department seeks to influence. A departmental result is often outside departments' immediate control, but it should be influenced by program-level outcomes.

departmental result indicator (indicateur de résultat ministériel)

A factor or variable that provides a valid and reliable means to measure or describe progress on a departmental result.

departmental results framework (cadre ministériel des résultats)

A framework that consists of the department's core responsibilities, departmental results, and departmental result indicators.

Departmental Results Report (rapport sur les résultats ministériels)

A report on a department's actual performance in a fiscal year against its plans, priorities and expected results set out in its Departmental Plan for that year. Departmental Results Reports are usually tabled in Parliament each fall.

full-time equivalent (équivalent temps plein)

A measure of the extent to which an employee represents a full person-year charge against a departmental budget. Full-time equivalents are calculated as a ratio of assigned hours of work to scheduled hours of work. Scheduled hours of work are set out in collective agreements.

gender-based analysis plus (GBA Plus) (analyse comparative entre les sexes plus [ACS Plus])

An analytical tool used to support the development of responsive and inclusive policies, programs, and other initiatives. GBA Plus is a process for understanding who is impacted by the issue or opportunity being addressed by the initiative; identifying how the initiative could be tailored to meet diverse needs of the people most impacted; and anticipating and mitigating any barriers to accessing or benefitting from the initiative. GBA Plus is an intersectional analysis that goes beyond biological (sex) and socio-cultural (gender) differences to consider other factors, such as age, disability, education, ethnicity, economic status, geography, language, race, religion, and sexual orientation.

government-wide priorities (priorités pangouvernementales)

For the purpose of the 2024–25 Departmental Plan, government-wide priorities are the high-level themes outlining the government’s agenda in the 2021 Speech from the Throne: building a healthier today and tomorrow; growing a more resilient economy; bolder climate action; fighter harder for safer communities; standing up for diversity and inclusion; moving faster on the path to reconciliation and fighting for a secure, just, and equitable world.

horizontal initiative (initiative horizontale)

An initiative in which two or more federal organizations are given funding to pursue a shared outcome, often linked to a government priority.

Indigenous business

As defined on the [Indigenous Services Canada website](#) in accordance with the Government of Canada’s commitment that a mandatory minimum target of 5% of the total value of contracts is awarded to Indigenous businesses annually.

non-budgetary expenditures (dépenses non budgétaires)

Net outlays and receipts related to loans, investments, and advances, which change the composition of the financial assets of the Government of Canada.

performance (rendement)

What an organization did with its resources to achieve its results, how well those results compare to what the organization intended to achieve, and how well lessons learned have been identified.

plan (plan)

The articulation of strategic choices, which provides information on how an organization intends to achieve its priorities and associated results. Generally, a plan will explain the logic behind the strategies chosen and tend to focus on actions that lead up to the expected result.

planned spending (dépenses prévues)

For Departmental Plans and Departmental Results Reports, planned spending refers to those amounts presented in the Main Estimates.

A department is expected to be aware of the authorities that it has sought and received. The determination of planned spending is a departmental responsibility, and departments must be able to defend the expenditure and accrual numbers presented in their Departmental Plans and Departmental Results Reports.

program (programme)

Individual or groups of services, activities, or combinations thereof that are managed together within a department and that focus on a specific set of outputs, outcomes, or service levels.

program inventory (répertoire des programmes)

An inventory of a department's programs that describes how resources are organized to carry out the department's core responsibilities and achieve its planned results.

result (résultat)

An external consequence attributed, in part, to an organization, policy, program or initiative. Results are not within the control of a single organization, policy, program, or initiative; instead, they are within the area of the organization's influence.

statutory expenditures (dépenses législatives)

Expenditures that Parliament has approved through legislation other than appropriation acts. The legislation sets out the purpose of the expenditures and the terms and conditions under which they may be made.

target (cible)

A measurable performance or success level that an organization, program or initiative plans to achieve within a specified time period. Targets can be either quantitative or qualitative.

voted expenditures (dépenses votées)

Expenditures that Parliament approves annually through an Appropriation Act. The vote wording becomes the governing conditions under which these expenditures may be made.