

Where you live matters: Canadian views on health care quality

Results from the 2013 Commonwealth Fund International
Health Policy Survey of the General Public



Health Council of Canada
Conseil canadien de la santé

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Created by the 2003 *First Ministers' Accord on Health Care Renewal*, the Health Council of Canada is an independent national agency that reports on the progress of health care renewal. The Council provides a system-wide perspective on health care reform in Canada, and disseminates information on innovative practices across the country. The Councillors are appointed by the participating provincial and territorial governments and the Government of Canada.

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ALTHOUGH CANADIANS HAVE MORE CONFIDENCE
in the health care system, access to care has not substantially improved and patients are not reporting that their care is better integrated or more patient-centred. And we show largely disappointing performance compared to other high-income countries, some of which have made impressive progress.

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FOREWORD

Imagine arriving at an appointment with a specialist after waiting more than a month to see her, as 60% of Canadians do, to find that your lab results have not been sent over by your family doctor. This kind of frustration wastes everyone's time, delays care, and erodes confidence in our health care system.

Unfortunately, according to the findings in this bulletin, long waits and poorly organized care are still common in Canada. But why do some parts of Canada (and other countries as well) do much better than others? We found large variations in patient experiences, not only around wait times and coordination of care, but also in other areas including out-of-pocket expenses, patient safety, and preventive care. In a country with universal, publicly funded health care, why does where you live seem to matter so much?

These and other questions arise from this eighth and final bulletin in our *Canadian Health Care Matters* series. Since 2009, the Health Council of Canada has used these reports to inform Canadians about results from a variety of health surveys of the general public and primary care physicians. This time we present Canadians' views on and experiences with health care, based on the 2013 Commonwealth Fund International Health Policy Survey of the General Public. We focus on differences across the 10 provinces, comparisons among the 11 OECD countries participating in the survey, and changes in Canada's performance over the past decade.

What we find adds further evidence to the conclusions of our recent summative report looking back over 10 years of health reform. In *Better health, better care, better value for all* (2013), we concluded that improvement has been modest (and often lacking), and that Canada's overall performance lags behind that of many other high-income countries. Inequities in Canadians' health status and their access to high-quality health services remain despite a decade and more dedicated to addressing these concerns.

The Health Council of Canada has been pleased to be a key contributor to the design and funding of The Commonwealth Fund's international surveys in recent years. We have collaborated with national and provincial agencies to expand the Canadian sample sizes, improving the clarity and usefulness of the findings and increasing the potential for richer analyses. This work has helped us fulfill our commitment to bring a system-wide perspective to reporting on progress and innovation in Canadian health care. We encourage continued investments in the collection, analysis, and reporting of these survey data to keep building this important source of comparative information about health care in Canada and opportunities for improvement.

Dr. Jack Kitts
Chair, Health Council of Canada

SUMMARY OF KEY FINDINGS

This bulletin examines Canadians' views and experiences with health care based on responses to the 2013 Commonwealth Fund International Health Policy Survey of the General Public. We present findings for the 10 provinces, compare Canada with the 10 other high-income countries that participated in the survey, and examine how Canada's performance has changed over time, where data are available.

Overall views

- Canadians' views about the health care system have grown more positive in the past decade. Today, 42% agree that "on the whole, the system works pretty well and only minor changes are needed," double the 22% who felt this way in 2004.
- Canadians generally give high ratings to the quality of care they personally receive. Nearly three-quarters (74%) rate their care as very good or excellent, with little change over the past 10 years.
- Still, about one-quarter of Canadians (ranging from 11% in Manitoba to 32% in Quebec) are concerned they would not be able to afford needed care if they became seriously ill.

Health status

- 61% of Canadians rate their health as very good or excellent, putting Canada among the top three of the 11 countries surveyed.
- 57% have at least one chronic condition and 31% have two or more. (Conditions included arthritis, asthma and other lung diseases, cancer, mental health problems such as depression or anxiety, diabetes, heart disease, high blood pressure, and high cholesterol.)
- 36% of Canadians are taking two or more prescription drugs — among the highest use of prescription drugs of the 11 countries surveyed.

Access to care

PRIMARY CARE

- Between 3% and 15% of Canadians, depending on the province, do not have a regular doctor or clinic where they go for care.
- Accessing medical care after hours (without going to an emergency department) is difficult for 62% of Canadians, ranging from 56% in British Columbia to 76% in Newfoundland and Labrador. Overall, Canada has improved only slightly since 2004. In contrast, the United Kingdom has managed to cut this problem in half over the same time period.
- Problems with access to primary care continue to be addressed by hospital emergency departments (ED). Almost half of Canadians (47%) said they recently used an ED for a problem that their regular doctor could have treated if he or she had been available, the highest among the countries surveyed.
- 67% said they can usually get a same-day answer to a medical question they have phoned about, fewer than in most other countries. Only 10% have been invited to email their doctor with a medical question, and very few (2%) have done so.

WAIT TIMES

- Fewer than half of Canadians surveyed, ranging from 31% to 46%, could get a same-day or next-day appointment when needed (not including ED visits), the worst of all the countries surveyed and with no improvement since 2004.
- 26% of Canadians waited four hours or more to be seen in the ED (17% to 39% across provinces). Here too, Canada ranked the worst internationally and has not improved since 2004.

OUT-OF-POCKET EXPENSES

- 14% of Canadians spent more than \$1,000 out-of-pocket for health care in the past year.
- 5% (Saskatchewan and Quebec) to 15% (New Brunswick) of Canadians did not fill a prescription or skipped a dose of medication because of the cost in the past year, virtually unchanged since 2004.

- 21% of Canadians skipped dental care in the past year due to cost.
- The proportion of people who have supplementary private health insurance varies across provinces, from 55% in Quebec to 72% in New Brunswick.

Coordination and integration of care

COMMUNICATION

- 37% of Canadians said their regular doctor did not seem informed about care they had received in the ED, a finding that has not improved since 2004.
- 18% felt their time was wasted because care was poorly organized. A similar proportion, ranging from 9% to 20%, had received conflicting information from different health care professionals in the past two years.
- 17% said test results or other basic information from their regular doctor had not arrived in time for their appointment with a specialist, and 9% experienced delays in being notified about abnormal test results.

NAVIGATION

- Canadian doctors and hospitals seem to be doing fairly well in helping patients coordinate their care from other providers, although there is more room for improvement in some provinces.
- 78% of respondents said their regular doctor or clinic usually helps coordinate the care they need with other providers, ranging from 68% in Quebec to 91% in Prince Edward Island.
- 76% who had been hospitalized said the hospital helped ensure they had follow-up care.

PATIENT-CENTRED CARE

- 53% of Canadians said their regular doctor always spends enough time with them.
- 60% said their doctor always knows their medical history, explains things clearly, and involves them in decision-making.

- Up to 49% of Canadians, depending on where they live, have easy access to their medical test results, such as by mail, email, or online.

Patient safety

- 20% of Canadians hospitalized overnight left without written instructions about what they should do and what symptoms to watch for at home.
- In three provinces, more than 20% of patients who had been hospitalized in the past two years said no one talked to them about the purpose of the drugs they were to continue taking when they returned home. Across all provinces, the results ranged from 9% to 35%.
- 6% of Canadians said they had received the wrong medication or wrong dose in the past two years.
- At least 20% of Canadians said that, in the past year, a doctor or pharmacist had not explained the side-effects of the drugs they were prescribed, had not given them a written list of all their prescriptions, and/or had not reviewed all their medications with them. All of these results varied significantly by province.

Preventive care

HEALTHY LIVING ADVICE

- About half of Canadians have not had a doctor or other clinic staff talk with them about healthy eating or exercise in the past two years, and 77% have not discussed alcohol use.

SCREENING

- Up to 73% of Canadians did not get a seasonal flu shot last year, depending on the province.
- Between 2% and 20% of Canadian women have never had a Pap test, and up to 34% of women have never been screened for breast cancer.
- Between 23% and 49% of Canadians age 50 or older have never had a test to screen for bowel or colon cancer.
- 61% of Canadians do not get reminders when they are due for preventive care, unchanged since 2004.

INTRODUCTION AND METHODS

Since 2009, the Health Council of Canada has been reporting on patient and provider views of the health system through our *Canadian Health Care Matters* series. These bulletins are based primarily on responses to an annual international survey conducted by The Commonwealth Fund in collaboration with other health care organizations and government agencies from various countries. The continuous and comparable monitoring of and reporting on patient and provider experiences fulfills an important role in identifying successful approaches to health care delivery and opportunities for improvement.

In our eighth and final bulletin in the series, we present what Canadians had to say in 2013 about their experiences with the health system. In this bulletin, for the first time, we are able to assess how patients' views and experiences vary from province to province and to compare results from a decade of previous surveys. These comparative findings show how provinces rank relative to one another as well as to other countries, indicating areas for action and potential learning across jurisdictions.

These findings are based on responses from the general public in Canada and the 10 other high-income countries that participated in the 2013 Commonwealth Fund International Health Policy Survey of the General Public. For this bulletin we focus on six aspects of health system performance: (1) overall views, (2) health status, (3) access to care, (4) coordination and integration of care, (5) patient safety, and (6) preventive care.

In this bulletin, we present three types of comparison (where data are available):

- **International** — How Canada as a whole compares to 10 other countries in 2013.
- **Interprovincial** — How performance in Canada varies by province. (These findings are presented for the 10 provinces where adequate sample size allowed for this type of comparison. We are unable to include the Northwest Territories, Nunavut, and Yukon, due to small sample sizes in these jurisdictions.)
- **Over time** — How Canadian and international performance has changed over the past decade. (These findings are presented where the same survey questions were asked in 2004, 2007, and/or 2010.)

About the survey

The 2013 Commonwealth Fund International Health Policy Survey of the General Public reflects the perceptions of a random sample of the general public (age 18 years and older) in 11 countries: Australia, Canada, France, Germany, Netherlands, New Zealand, Norway, Sweden, Switzerland, United Kingdom, and United States. Participants were interviewed by telephone (land line or cell phone) between March and June 2013. In Canada, 5,412 respondents were surveyed.

The Commonwealth Fund sponsored the survey, along with four Canadian partners who contributed to expanding the sample size: the Commissaire à la santé et au bien-être (Quebec Health and Welfare Commissioner), the Health Council of Canada, the Health Quality Council of Alberta, and Health Quality Ontario. Organizations in other countries that co-funded the survey included: Haute Autorité de Santé and Caisse nationale de l'assurance maladie des travailleurs salariés (France); the Federal Ministry of Health and the National Institute for Quality Measurement in Health Care (Germany); the Ministry of Health, Welfare, and Sport and Scientific Institute for Quality of Healthcare at Radboud University Nijmegen (Netherlands); the Norwegian Knowledge Centre for the Health Services; the Ministry of Health and Social Affairs (Sweden); and the Federal Office of Public Health and Swiss Medical Association (Switzerland).

SAMPLE SIZE BY COUNTRY

	Unweighted sample size
Australia	2,200
Canada	5,412
France	1,406
Germany	1,125
Netherlands	1,000
New Zealand	1,000
Norway	1,000
Sweden	2,400
Switzerland	1,500
United Kingdom	1,000
United States	2,002
Total	20,045

SAMPLE SIZE BY PROVINCE

	Unweighted sample size
Alberta*	1,006
British Columbia	252
Manitoba	260
New Brunswick	267
Newfoundland and Labrador	272
Nova Scotia	263
Ontario*	1,543
Prince Edward Island	259
Quebec*	1,022
Saskatchewan	252
Territories**	16

*Alberta, Ontario and Quebec paid for expanded sample sizes for their province.

**Territories were not included in analysis due to small sample sizes.

Analytic approach

The 2013 Commonwealth Fund International Health Policy Survey consisted of approximately 100 questions. In our reporting, we focus on 70 questions grouped into six general themes to assess health system performance and identify significant policy implications. A complete list of the survey questions is available at www.commonwealthfund.org.

Due to expanded sampling in Canada, we were able to compare performance among the 10 provinces. Provincial data were weighted to reflect the population in each province. We examined provincial results using cross tabulations and the chi square test ($p < 0.01$). Many statistically significant differences were found among provinces. We further examined provincial results

to identify those that showed substantive statistical differences that would be relevant for performance measurement and policy-making. We calculated the range in responses among provinces and examined the results in conjunction with another statistical test (eta squared) that provides a measure of the degree of response variation due to provinces. The questions that showed strong variation by province using these tests are presented in charts in the following chapters. The profile of survey respondents (page 9) summarizes some differences in populations across the provinces and provides context for interpretation of the survey findings.

We also conducted international comparisons of the 2013 survey findings, as well as comparisons to previous Commonwealth Fund surveys (2004, 2007, and 2010) where the same questions were asked of the general public. Responses over time should be interpreted with some caution as variations in survey methods over time (e.g., inclusion of cell phone users) may affect results.

Data from each country were weighted to ensure the final sample was representative of the adult population. The weighting procedure accounted for the sample design and probability of selection, as well as systematic non-response across known population parameters. For example, Canadian data are weighted by province, age, gender, educational attainment, knowledge of official languages, and type of telephone (compared to previous Commonwealth Fund surveys, greater efforts were made to capture cell phone users in the 2013 survey).

Guide to the chapters and charts

Each chapter in this report includes charts illustrating the provincial and international comparisons and responses over time for questions that showed significant provincial differences based on our analytical approach.

In the charts, an arrow to the right of the provincial and international chart indicates the direction of better performance. Where an arrow is absent, more caution is needed to interpret the results.

Provincial results are presented for the 10 provinces, based on the 2013 survey and ordered by performance, using these abbreviations:

AB	Alberta
BC	British Columbia
MB	Manitoba
NB	New Brunswick
NL	Newfoundland and Labrador
NS	Nova Scotia
ON	Ontario
PE	Prince Edward Island
QC	Quebec
SK	Saskatchewan

International results are presented for 11 countries, based on the 2013 survey and ordered by performance, using these abbreviations:

AU	Australia
CA	Canada
FR	France
DE	Germany
NLD	Netherlands
NZ	New Zealand
NO	Norway
SE	Sweden
CH	Switzerland
UK	United Kingdom
US	United States

In this report, we provide results for selected response categories for each included survey question. Many of the questions were not simple “yes/no” questions but instead had several categories of responses. For example, question 1.1 in the report asks, “Which of the following statements comes closest to expressing your overall view of the health care system in this country?” The possible response options include: (1) “On the whole, the system works pretty well and only minor changes are necessary to make it work better;” (2) “There are some good things in our health care system, but fundamental changes are needed to make it work better;” and (3) “Our health care system has so much wrong with it that we need to completely rebuild it.” To simplify the presentation and interpretations of results, we present data for only one selected response option (e.g., response option 1 for chart 1.1).

For readers looking for more detail, our data supplement — available at healthcouncilcanada.ca/pub/healthcarematters8 — provides a complete breakdown of results for all response categories for all questions in the report.

PROFILE OF SURVEY RESPONDENTS

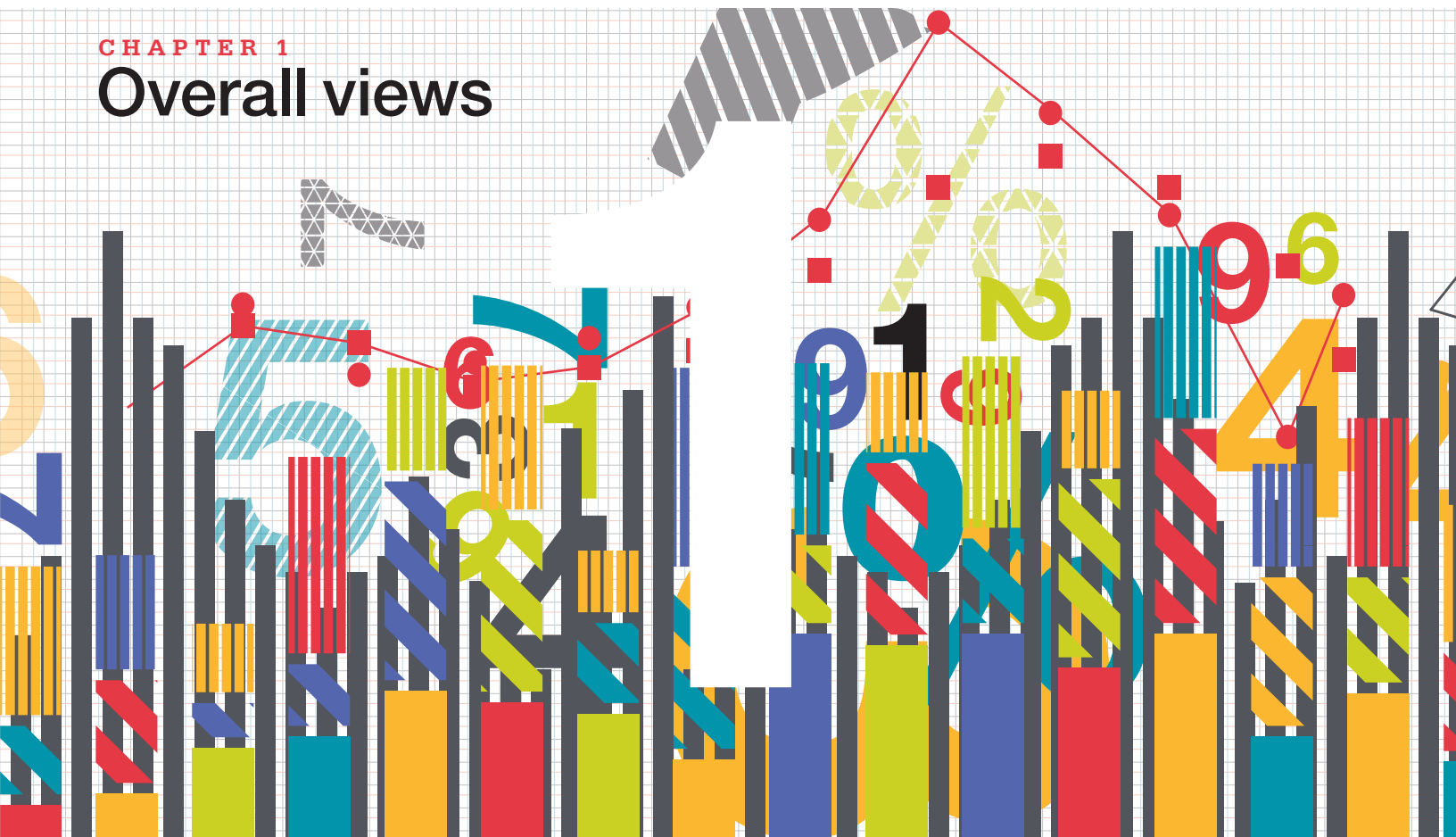
The table below summarizes the demographic characteristics of Canadian survey respondents by province. These details reflect differences in populations across the provinces and provide context for interpretation of the survey findings. Some differences to consider include:

- The age structure of the population varies across provinces. For example, British Columbia had more older respondents, and Manitoba had more young adult respondents.
- In all but three provinces, at least half of respondents had completed some education beyond high school.
- Alberta had the largest proportion of higher-income and the smallest proportion of lower-income respondents.
- About one-quarter of respondents in Ontario and British Columbia were immigrants, compared to 10% or less in five other provinces.

	Alberta	British Columbia	Manitoba	New Brunswick	Newfoundland and Labrador	Nova Scotia	Ontario	Prince Edward Island	Quebec	Saskatchewan
Respondents (n)	1,006	252	260	267	272	263	1,543	259	1,022	252
SEX (%)										
Male	49	47	52	50	47	50	48	45	48	43
Female	51	53	48	50	53	50	52	55	52	57
AGE (%)										
18–34 years	31	20	38	27	19	22	28	25	27	34
35–49 years	32	29	21	29	34	24	31	27	30	27
50–64 years	23	27	25	28	31	35	24	29	26	25
65 + years	14	24	16	17	16	19	17	19	17	14
HIGHEST LEVEL OF EDUCATION COMPLETED (%)										
Less than high school/some high school	11	10	17	22	24	28	14	18	18	19
High school graduate	34	29	31	30	22	28	32	28	27	37
Post-high school	55	61	52	49	54	45	55	54	56	44
ANNUAL HOUSEHOLD INCOME (%)										
Less than \$35,000	14	18	20	22	24	27	19	23	19	22
\$35,000 to less than \$63,000	19	22	19	25	26	26	21	28	28	20
\$63,000 to less than \$77,000	12	17	22	18	14	17	18	20	18	23
\$77,000 to less than \$105,000	20	18	17	14	13	11	15	14	17	14
\$105,000 or more	30	17	16	13	18	13	18	9	9	15
Decline / Refuse to answer	7	9	7	8	6	8	9	6	10	6
IMMIGRANT POPULATION (%)										
Not born in Canada	16	24	16	4	9	9	23	10	15	8

CHAPTER 1

Overall views



Despite a strong belief in the importance of our publicly funded health care system, many Canadians have concerns about how well the system is actually working. However, most are confident that health care will be available if they need it, and they give high ratings to the care they have personally received.

Over the past decade, positive views about the system have grown. Still, in 2013, fewer than half of Canadians (42%) agreed that “on the whole, the system works pretty well and only minor changes are needed to make it work better.” While this rating has doubled since 2004 (when only 22% of respondents felt the system was generally working well), it is far below the best-performing country in this survey — the United Kingdom, at 63% — with no individual province reaching that mark.

Canadians generally feel positive about the quality of care they personally receive. Nearly three-quarters (74%) rate their care as very good or excellent, with little variation over the past 10 years. Ratings of personal experiences with care do not necessarily correlate with opinions about the health

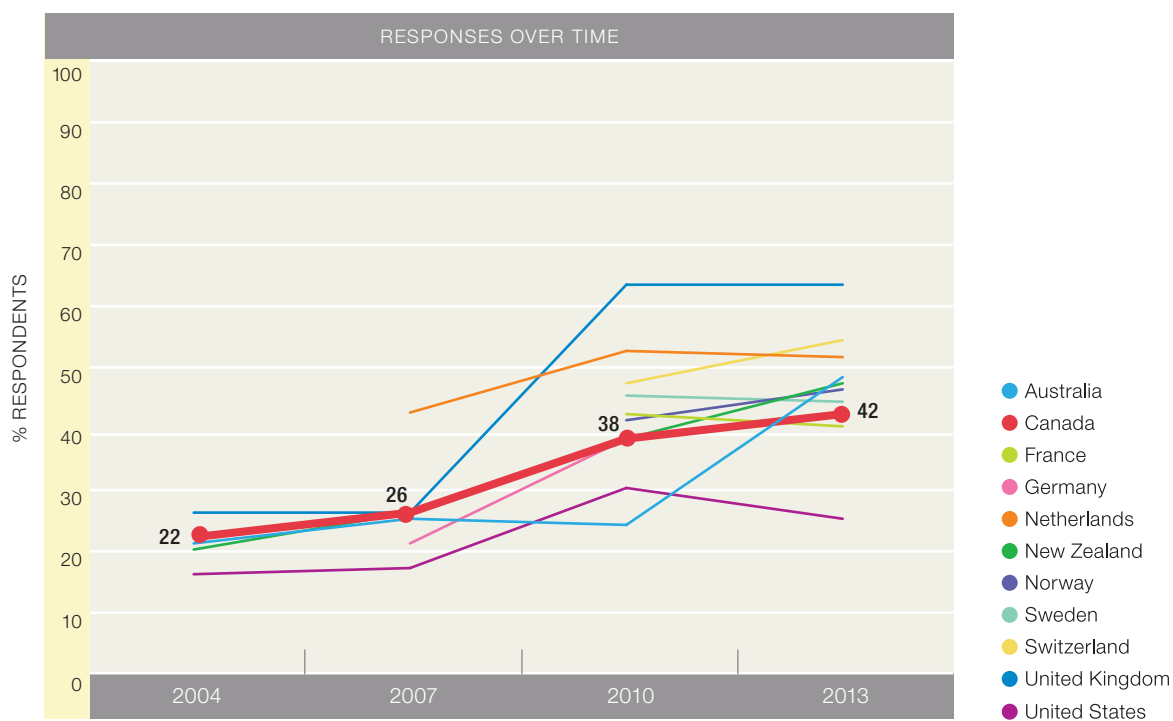
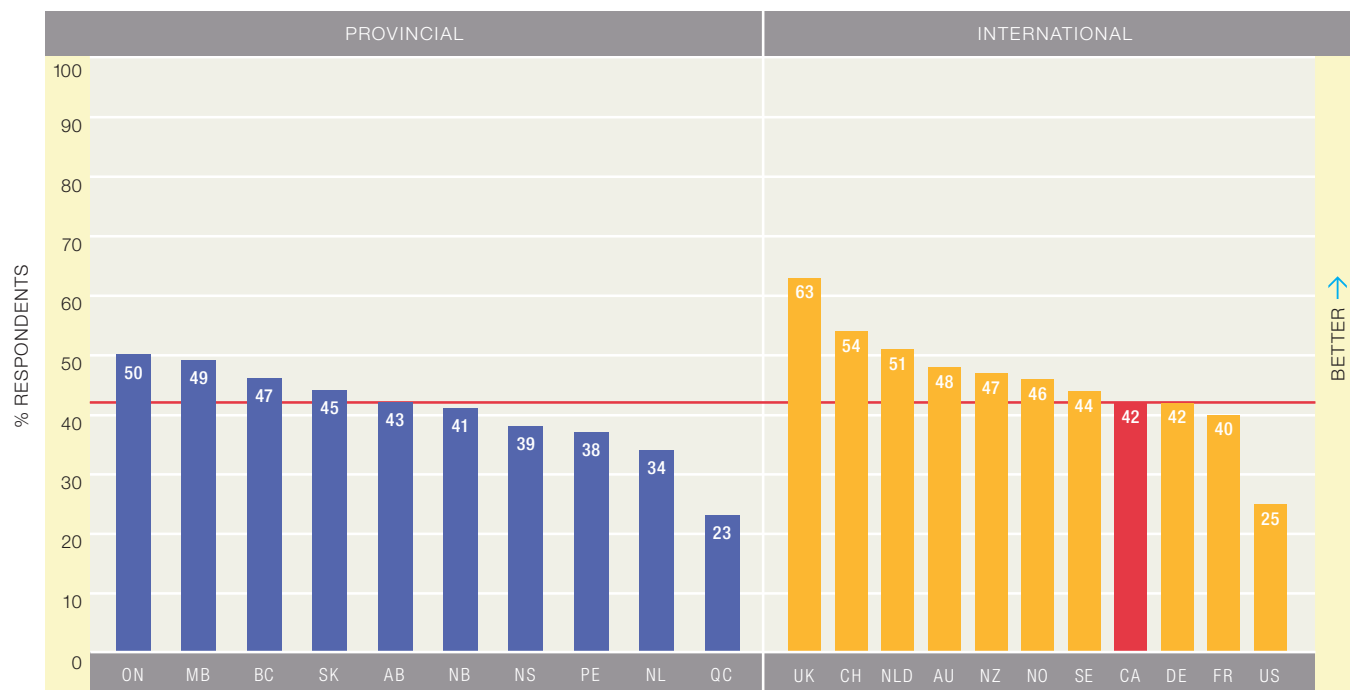
care system as a whole. The Atlantic provinces have the highest proportion of respondents who are happy with their care (79% to 84%), but respondents in that region are among the least likely to feel the health care system generally works well (34% to 41%).

The survey also highlights Canadians’ concerns about certain aspects of care. Among respondents with chronic health conditions, about 10% are not confident that they can manage their health problems. And 24% of Canadians overall are concerned about being able to pay for all the care they might need should they become seriously ill. We found substantial variation among the provinces here as well (from 11% in Manitoba to 32% in Quebec), suggesting a question to consider: Are these differences in confidence about the affordability of care related to variations in coverage by provincial health plans?

1.1 Fewer than half of Canadians feel the health system is working well

Which of the following statements comes closest to expressing your overall view of the health care system in this country?

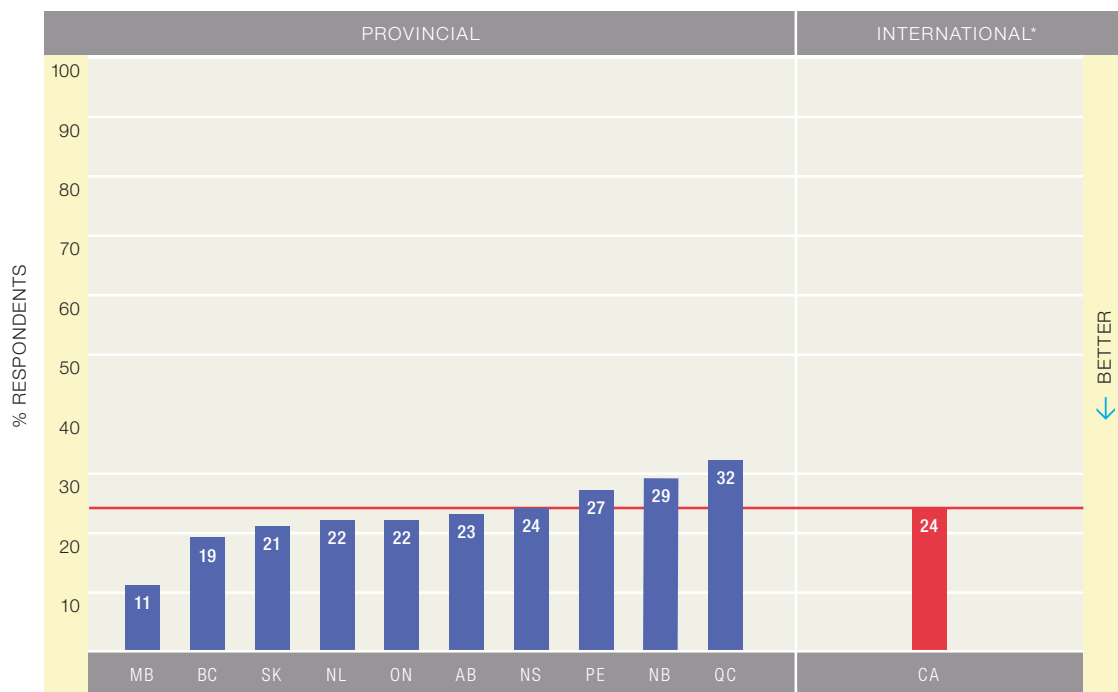
Response category presented: On the whole, the system works pretty well and only minor changes are necessary to make it work better.



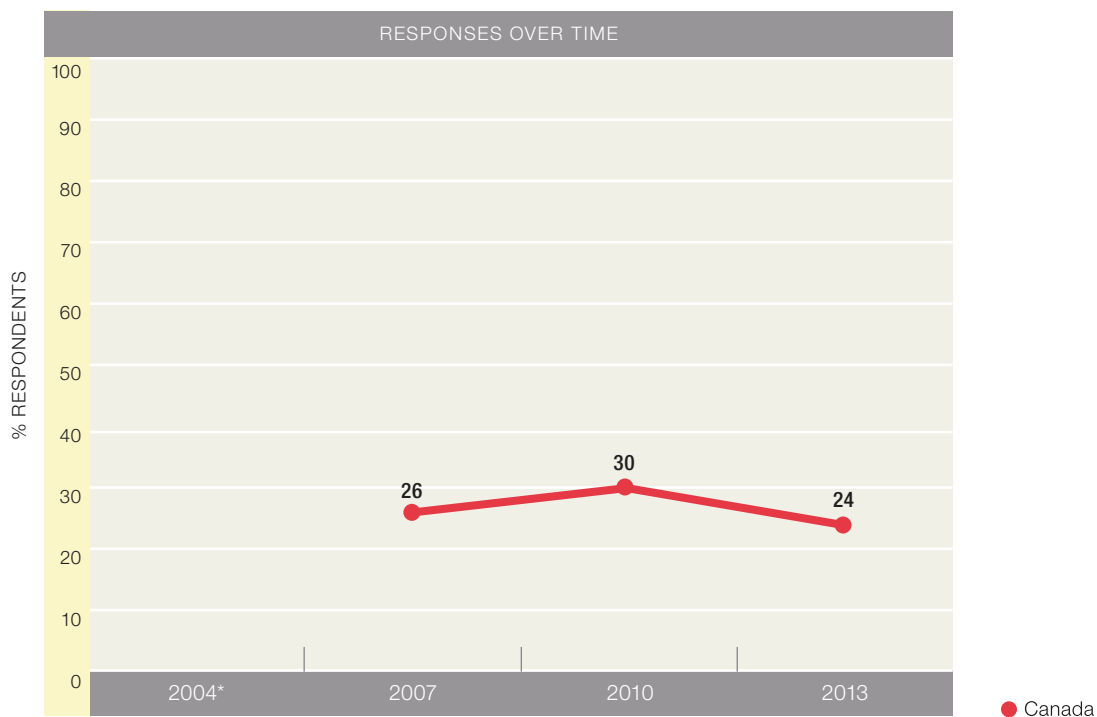
1.2 Some Canadians have concerns about care not being affordable

How confident are you that if you become seriously ill, you will be able to afford the care you need?

Response categories presented: Not very/Not at all confident



* International data not available



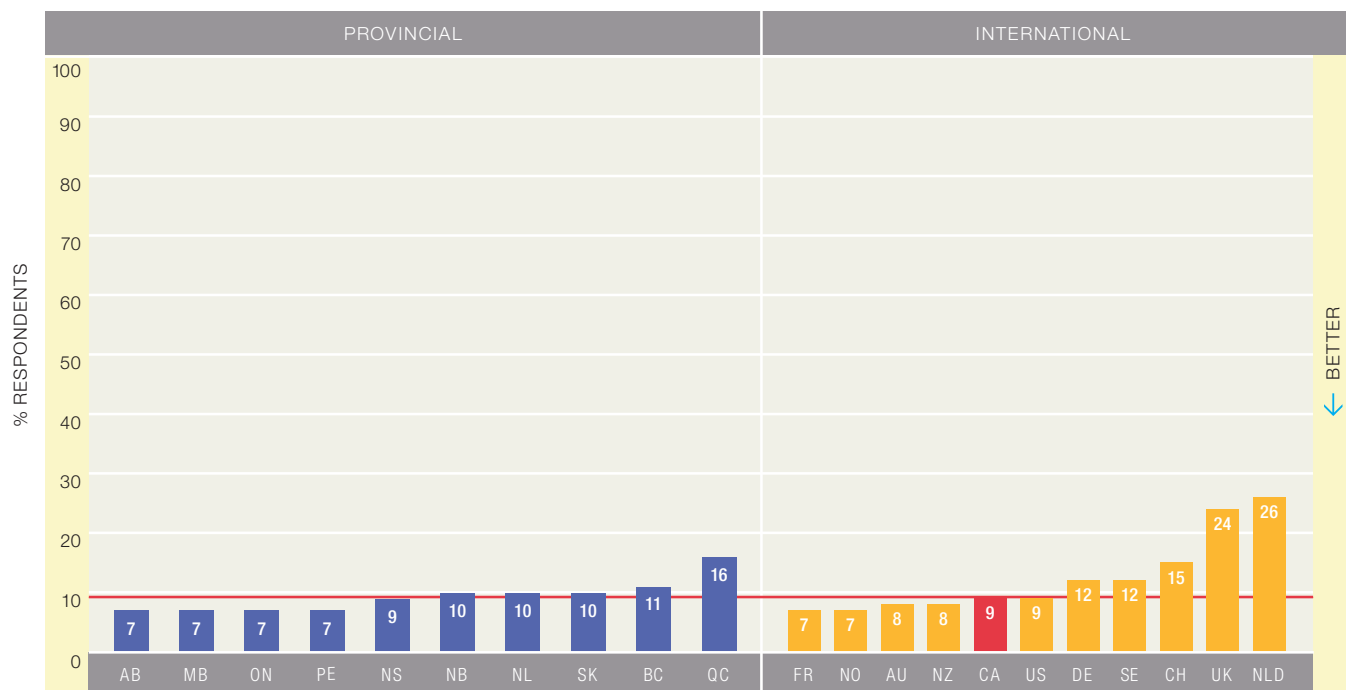
* Survey data not available for this year.

1.3 One in 11 Canadians with chronic conditions have concerns about managing their health problems

How confident are you that you can control and manage your health problems?

(Asked of respondents who have diabetes, heart disease, hypertension, or high cholesterol)

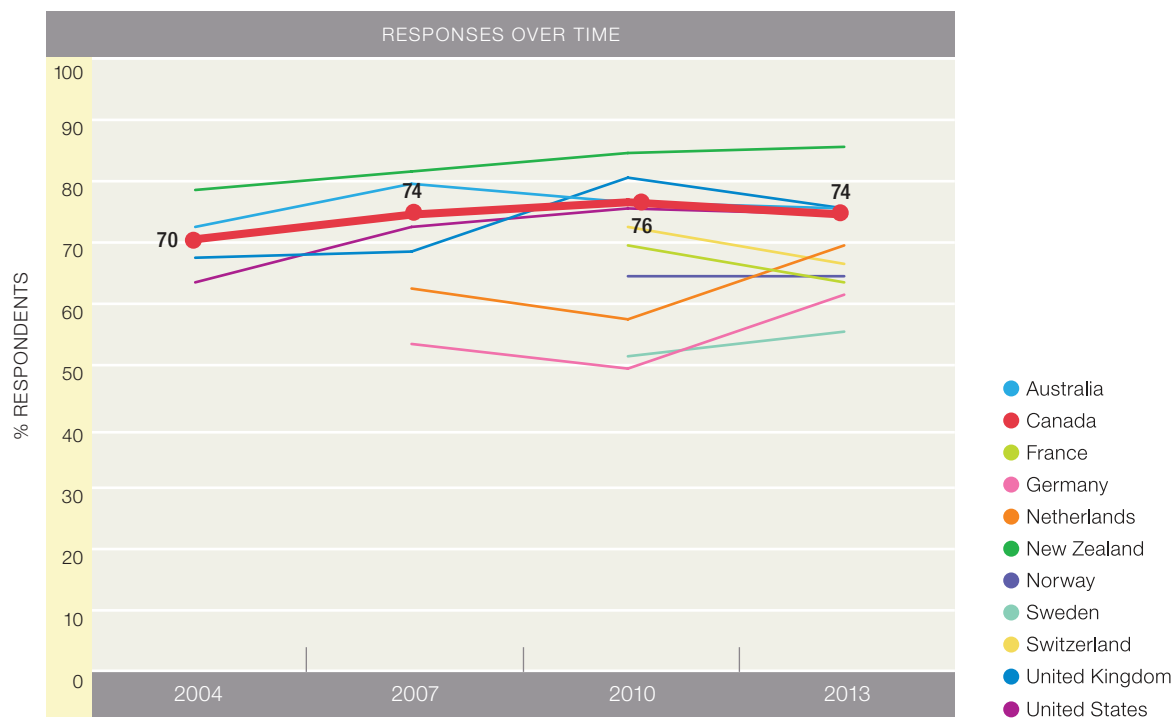
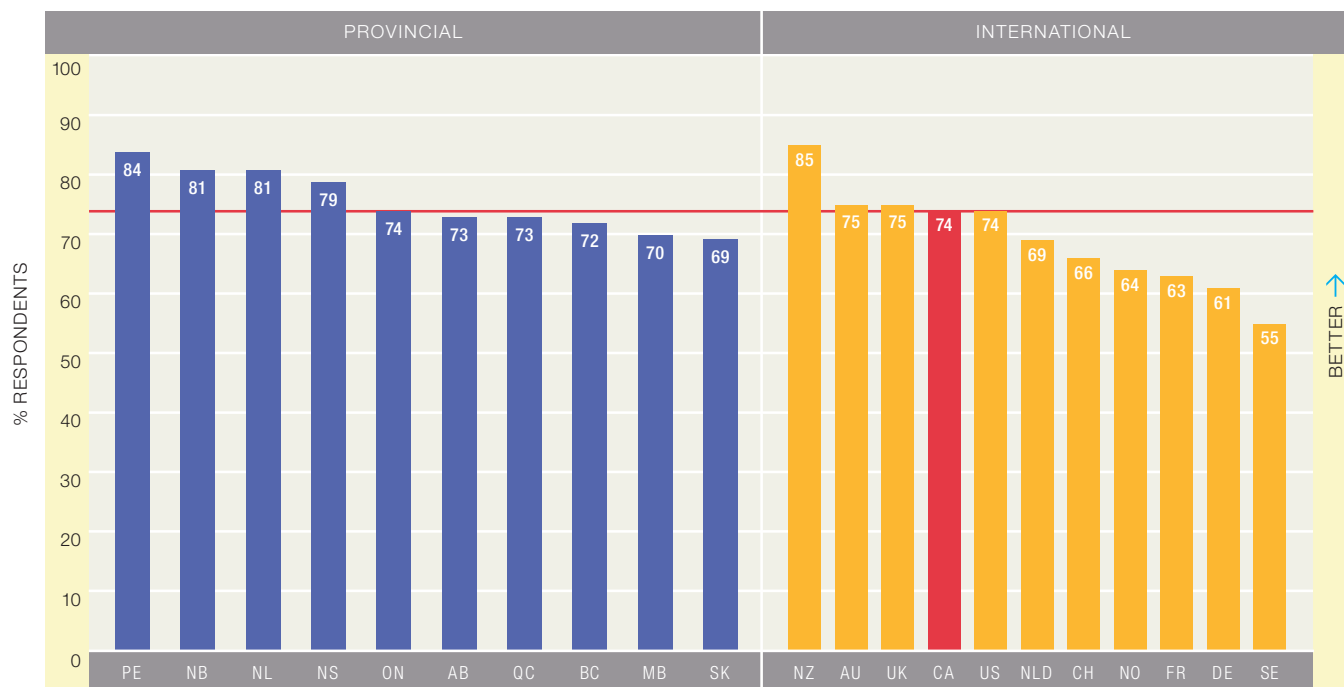
Response categories presented: Not very / Not at all confident



1.4 Most Canadians give high ratings to the care they receive

Overall, how do you rate the medical care that you have received in the past 12 months from your regular doctor's practice or clinic?

Response categories presented: Very good/Excellent



The graphic features a light gray grid background. Overlaid on this are various elements: a network of black lines with blue circular nodes; several large, stylized numbers in different colors (yellow, blue, red, black); and numerous vertical bars of varying heights and colors (red, blue, yellow, teal, black). Some bars have diagonal stripes. The overall composition is complex and data-oriented.

CHAPTER 2

Health status

According to their own assessment, most Canadians feel positively about their health. With 61% of respondents rating their health as very good or excellent, Canada ranks in the top three of the 11 countries surveyed. This positive outlook, largely unchanged since 2004, can be compared with the findings about Canadians' health. For example:

- More than half of Canadians (57%) report having at least one chronic health condition, such as arthritis, high blood pressure, or depression.
- More than one-third of Canadians (36%) are taking two or more prescription drugs. Respondents from only two of the 11 countries surveyed use more prescription drugs than Canadians.
- About one in six Canadians (17%) say their health problems limit their ability to work or take care of daily activities.

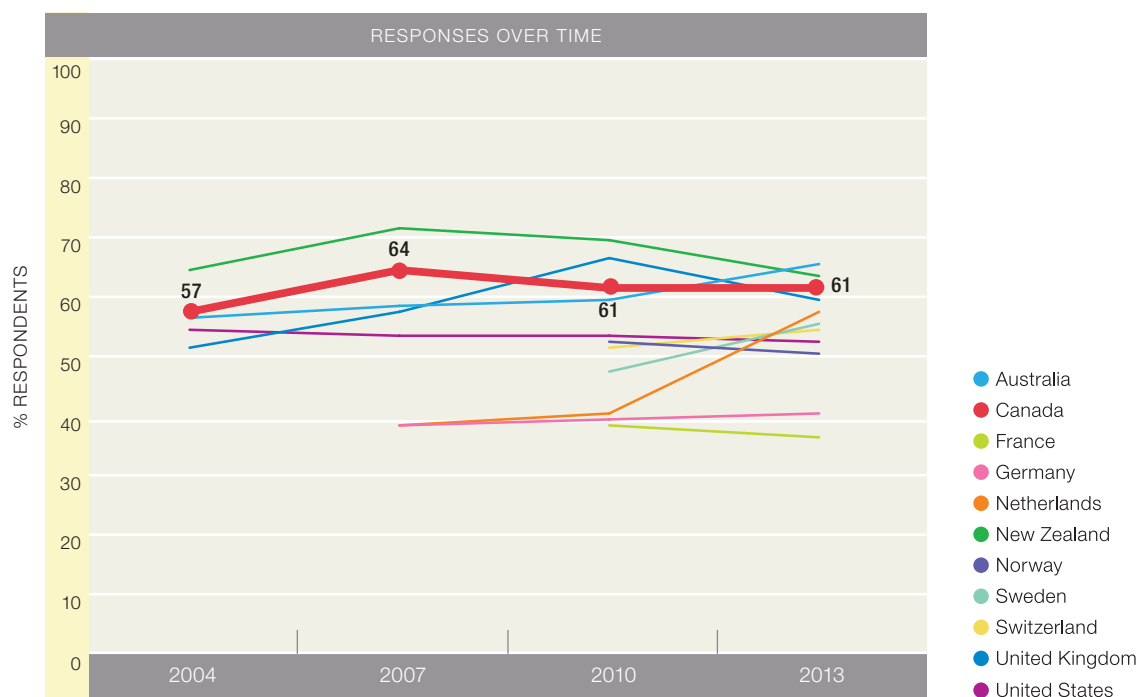
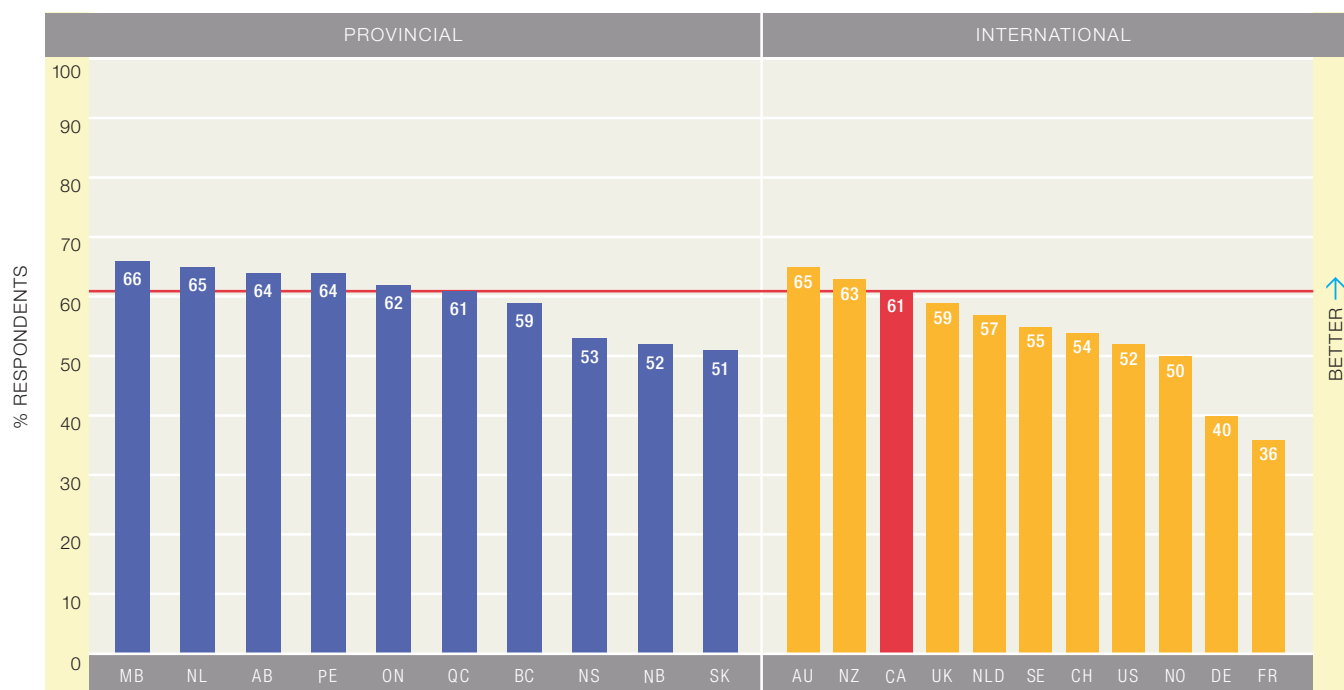
Disparities in health status — and differences in perceptions about health — are evident among the provinces:

- In Saskatchewan, about half of respondents say their health is very good or excellent, compared to two-thirds in Manitoba. Yet these two provinces have similar proportions of people with chronic conditions and similar rates of prescription drug use.
- In contrast, three Atlantic provinces — Nova Scotia, New Brunswick, and Newfoundland and Labrador — have the highest rates of chronic disease and prescription drug use. But, contrary to what might be expected, self-rated health in those provinces is not consistently worse than in other parts of the country. In fact, in Newfoundland and Labrador, it is better than the national average.

2.1 Most Canadians feel their health is very good or excellent

In general, how would you describe your own health?

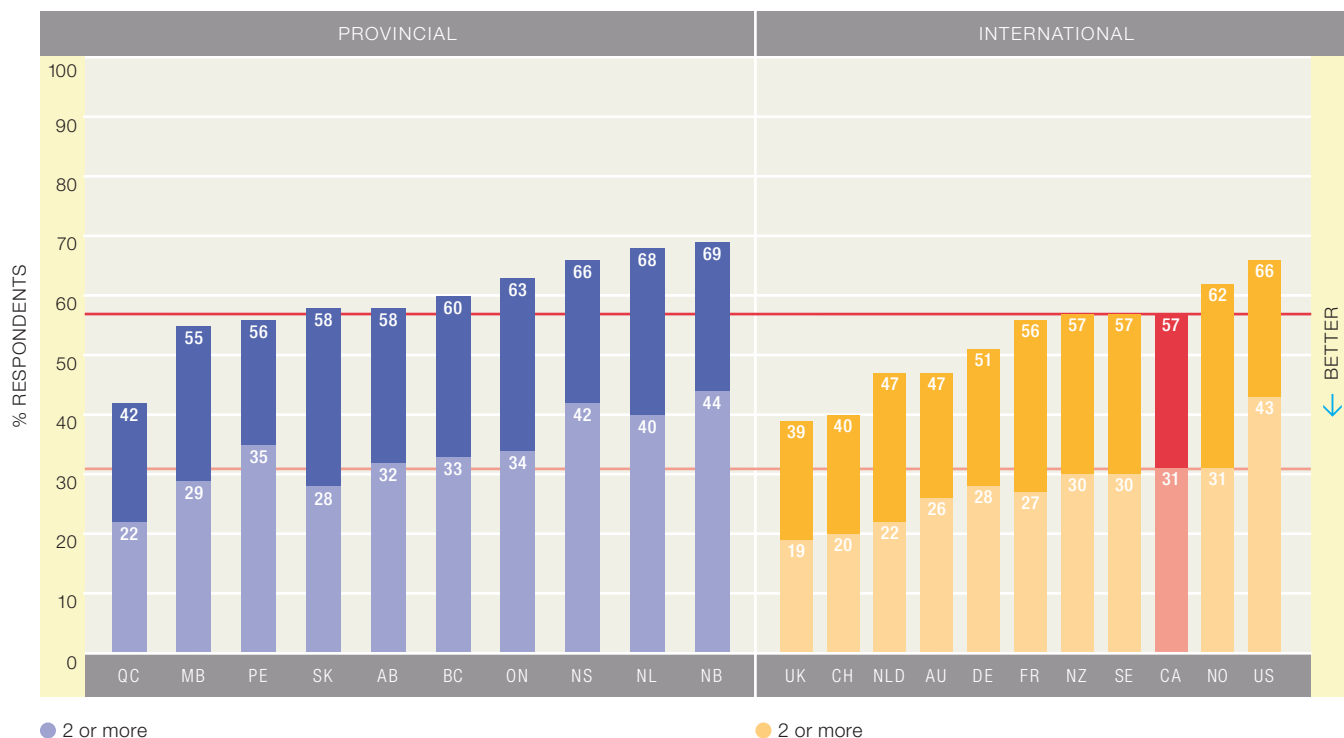
Response categories presented: Very good/Excellent



2.2 More than half of Canadians have at least 1 chronic condition

Have you ever been told by a doctor that you have a chronic condition? (Conditions included arthritis, asthma or chronic lung disease such as chronic bronchitis, emphysema, or COPD, cancer, depression, anxiety or other mental health problems, diabetes, heart disease, including heart attack, high blood pressure, and high cholesterol)

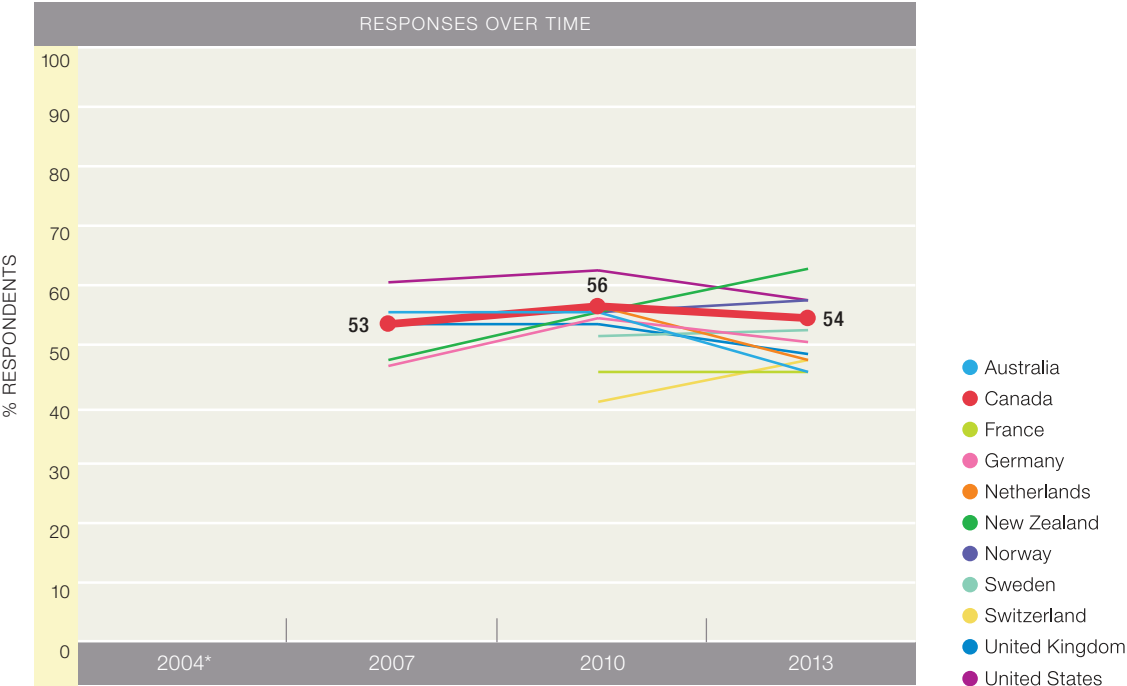
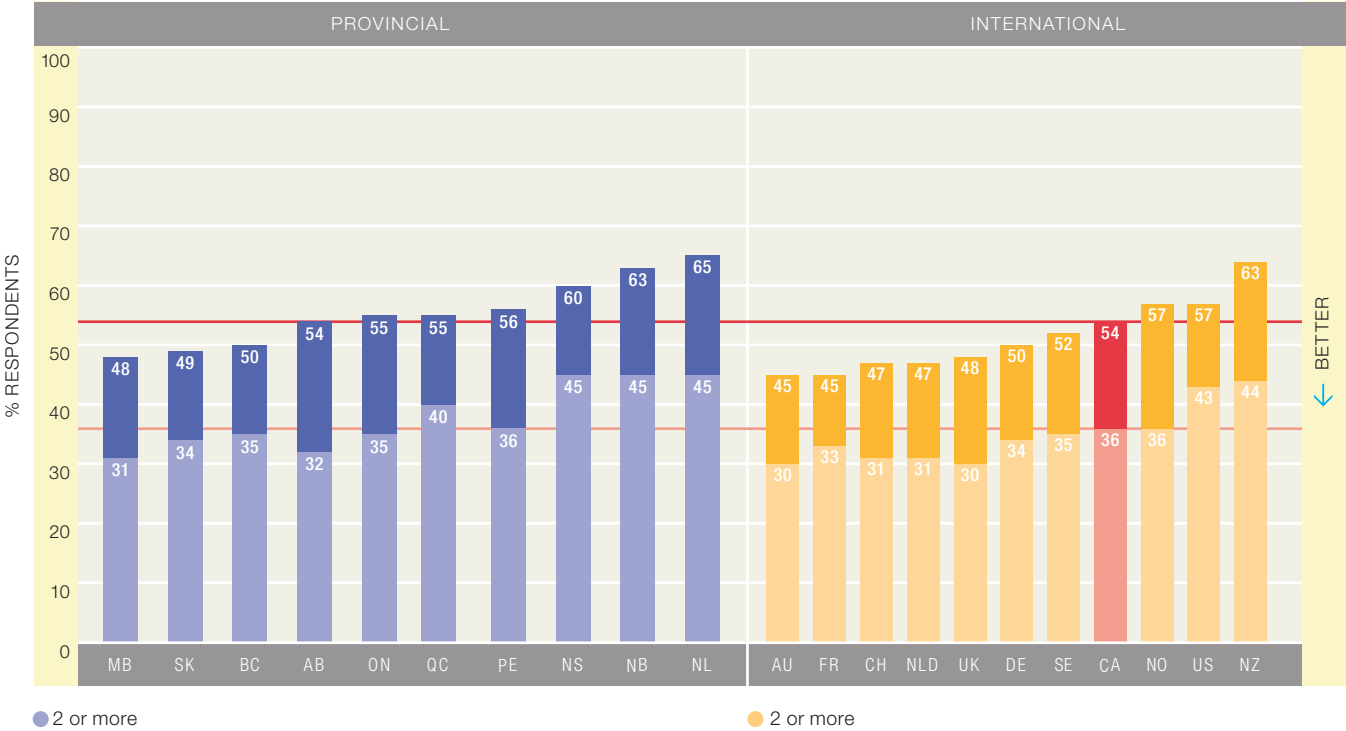
Response category presented: Yes (to 1 or more of these conditions)



2.3 Canadians are among the highest users of prescription drugs compared to other countries

How many different prescription medications are you taking on a regular or ongoing basis?

Response category presented: Taking 1 or more medications



*Survey data not available for this year.

CHAPTER 3

Access to care

Equitable access to care without financial barriers is a cornerstone of Canada's public health care system. Maintaining and improving that access has been a long-standing concern for both the general public and policy-makers.

What does access to care look like in Canada today? Not much different than it did 10 years ago, according to the public's responses in this survey. The vast majority of Canadians have a regular doctor or clinic where they go for care (only 7% do not). However, we wait longer for primary, specialist, and emergency department care compared to all or most of the 11 countries surveyed. And out-of-pocket costs continue to create hardship for some Canadians, affecting their ability to follow through with prescribed medication, tests, or other treatment.

In contrast to most other high-income countries, access to primary care in Canada continues to be addressed by hospital emergency departments:

- Nearly two-thirds of Canadians (62%) find it difficult to access medical care in the evenings, on weekends, or during holidays without going to a hospital emergency department (ED). Canada's small improvement over the last decade is encouraging but pales in comparison to the progress made in the United Kingdom, which has managed to reduce this problem by half.
- Nearly half (47%) said they had recently used an ED for a problem that their regular doctor could have treated if he or she had been available, the highest among the countries surveyed.
- Fewer than half (41%) can get a same-day or next-day appointment to see a doctor or nurse when needed (not including ED visits), the worst of all the countries surveyed and with no improvement since 2004.

- A contributing factor may be the fact that Canadians do not typically have easy access to their primary care provider by phone or email. 67% said they can usually get a same-day answer to a medical question they have phoned about; however, even the highest provincial rate (Quebec, 75%) is lower than the best-performing countries in the survey (Germany, 90% and Sweden and Netherlands, both 84%). Only 10% of Canadians have been invited to email their doctor with a medical question, and very few (2%) have done so.
- Given these numbers, it's perhaps not surprising that many Canadians use the ED for primary care and many wait a long time to be seen there. More than one in four ED visits (26%) involve waiting four hours or more — by far the worst of any country and unchanged over the past decade. In three provinces this percentage was much higher (32% to 39%).

Waits for specialized care are also long for many Canadians:

- More than half (59%) waited a month or more to see a specialist, and about one in five (18%) waited four months or more for elective surgery.

Despite our publicly funded health care system, out-of-pocket expenses are a reality in Canada. Depending on the province, 9% to 20% of Canadians spent more than \$1,000 out-of-pocket for health care in the past year.

Cost barriers have consistently been an issue for a small number of Canadians, with large differences across provinces:

- In the past year, 8% of Canadians did not fill a prescription or skipped a dose of medication because of the cost, a number that is virtually unchanged since 2004. Provincially, the problem ranges from 5% in Saskatchewan and Quebec to 15% in New Brunswick.

- 6% skipped a medical test or treatment because of the cost, even though their doctor had recommended this care.
- In the past year, 15% to 24% skipped dental care due to cost.
- 2% to 7% said the cost kept them from seeing a doctor in the past year despite having a medical problem, and somewhat more (4% to 11%) had serious problems paying medical bills.

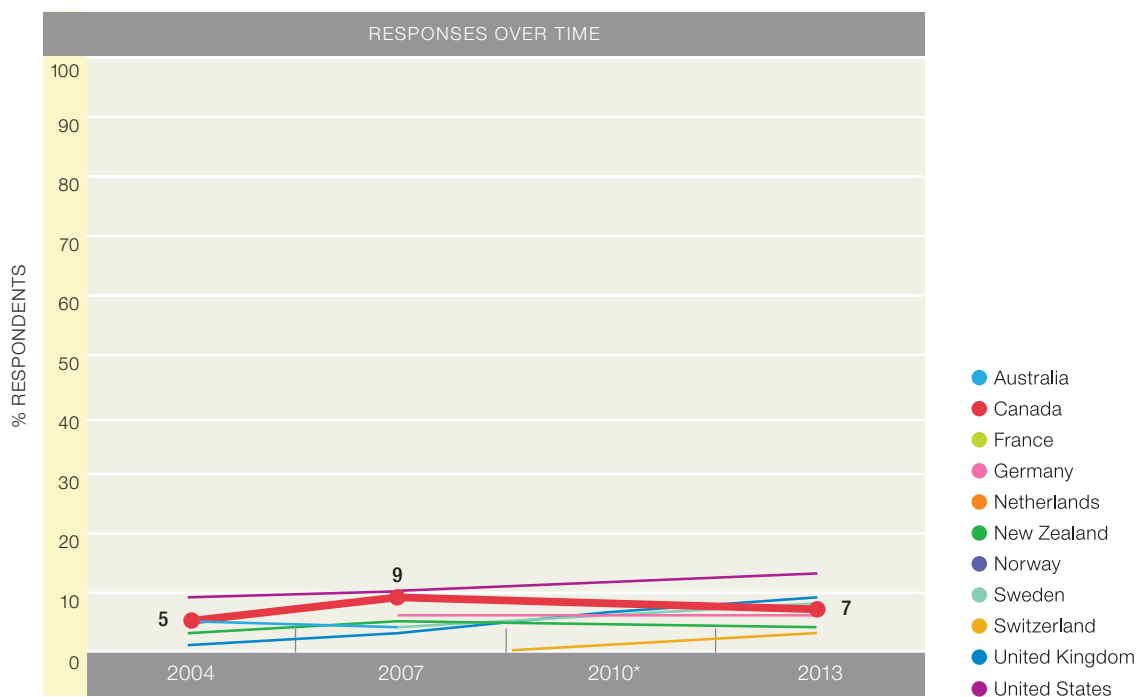
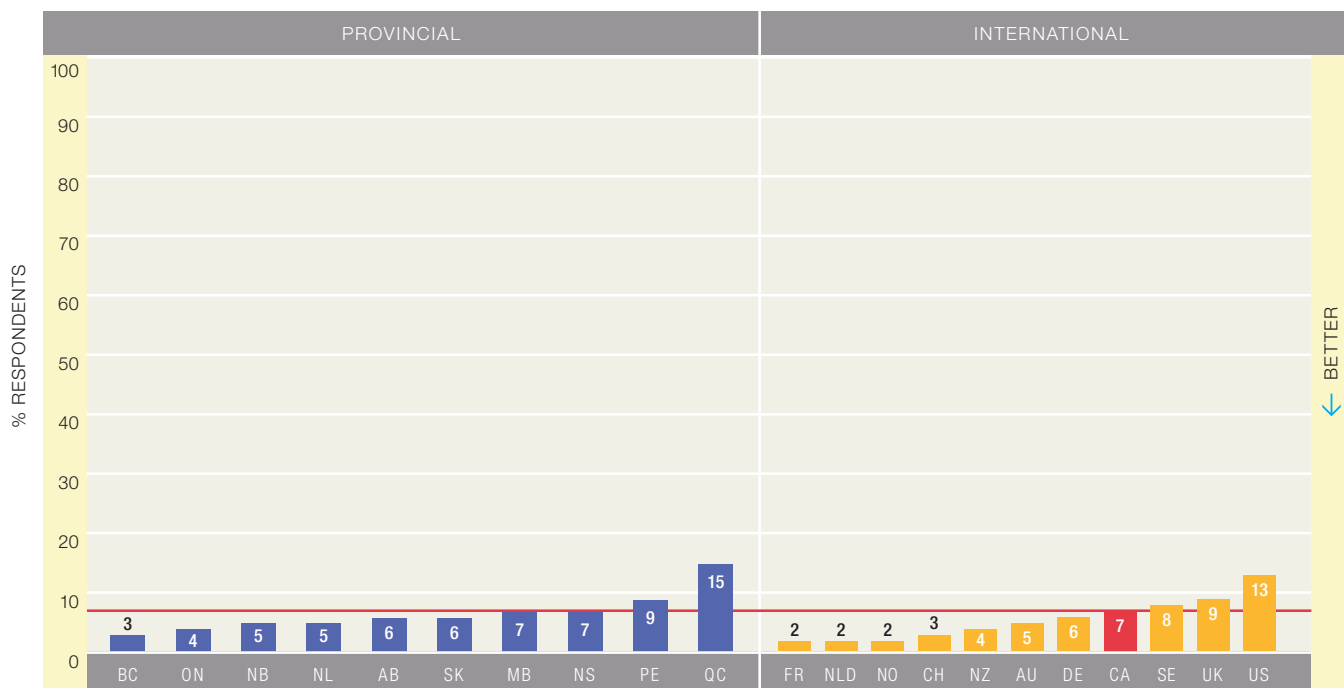
It's well known that health varies by income — lower-income groups tend to have more health problems than higher-income groups. So financial barriers to care are cause for concern, no matter how few people are affected by them. We found variation in the proportion of people who have supplementary insurance across Canada: for example, 72% of New Brunswick respondents have private health insurance compared to 55% in Quebec. What is covered by private insurance may differ widely, but this finding suggests there is also potential for varying contributions and impacts of public/private health insurance across Canada.

These survey findings raise a variety of questions. For example, a number of initiatives across Canada have attempted to improve access to primary care and reduce inappropriate ED visits. Some provinces have promoted innovative scheduling designed to help doctors make time for urgent appointments each day. Other approaches include incentives for doctors to provide more after-hours care. Are such programs not working well? Or are there barriers that restrict implementation or adaption? Are they not yet widespread enough to have much impact? What can we learn from others who have successfully made improvements?

3.1 Seven per cent of Canadians do not have a regular doctor

Is there one doctor you usually go to for your medical care? If not, is there one doctor's group, health centre, or clinic you usually go to for most of your medical care?

Response categories presented: No regular doctor/No regular place of care

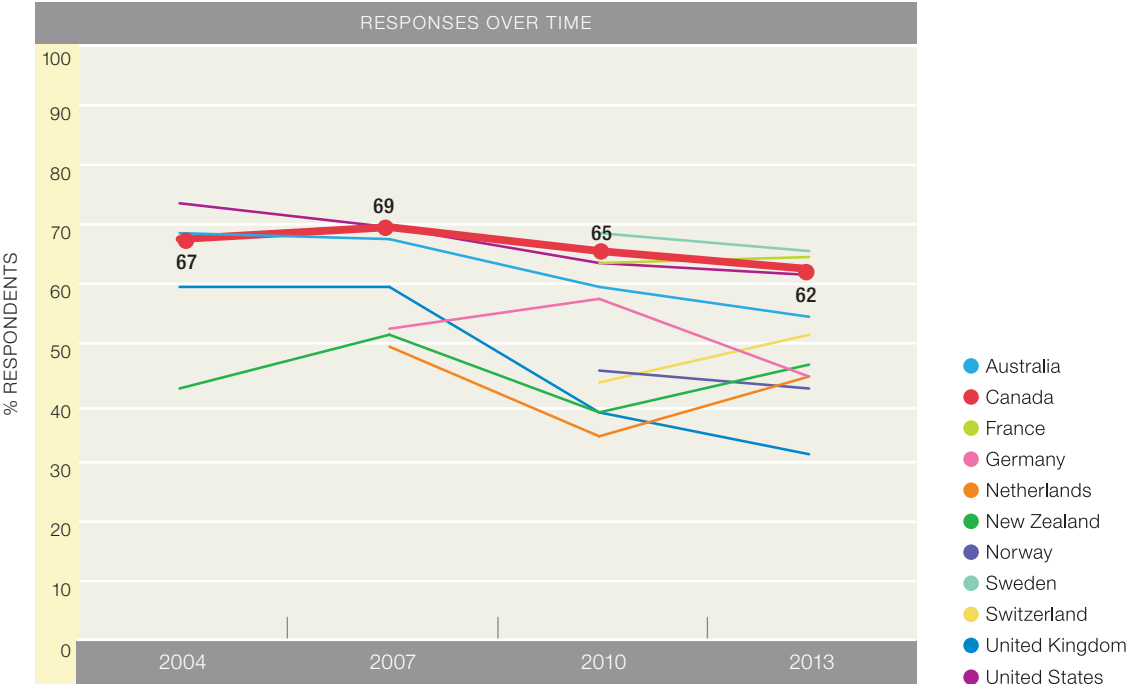
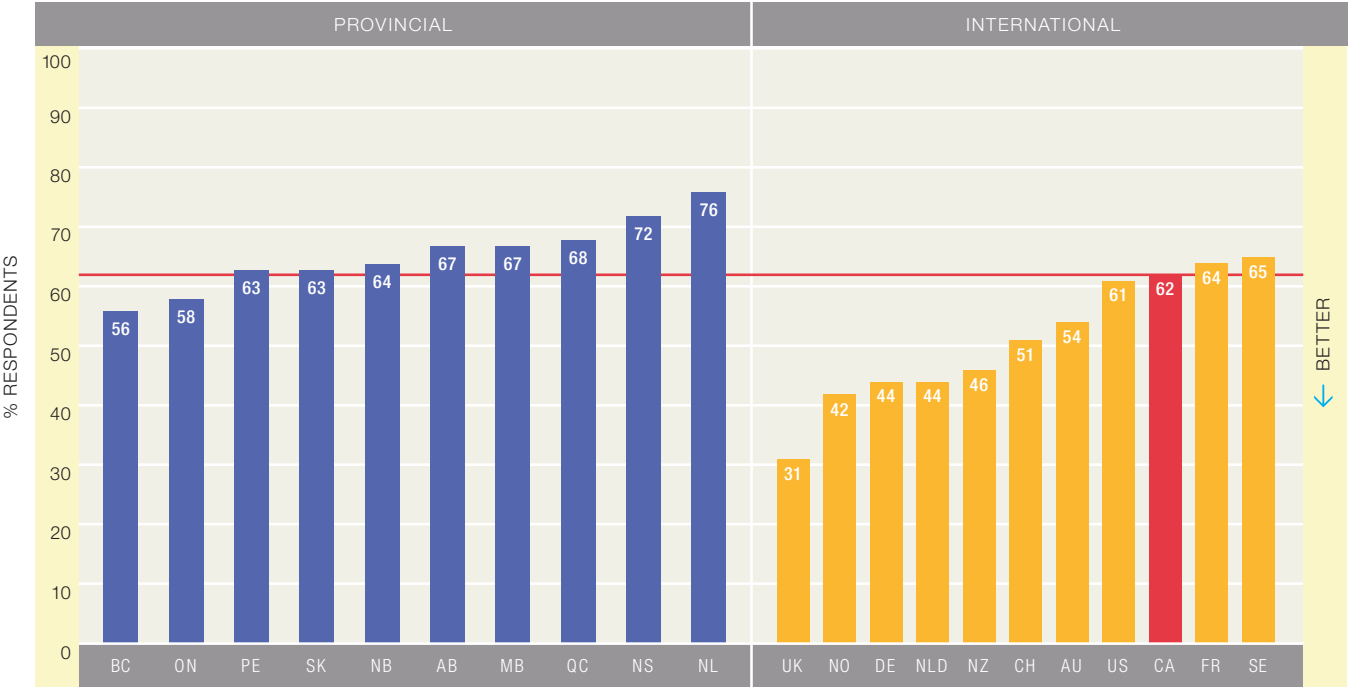


*Survey data not available for this year.

3.2 Finding after-hours care remains difficult for most Canadians

How easy or difficult is it to get medical care in the evenings, on weekends, or holidays without going to the hospital emergency department?

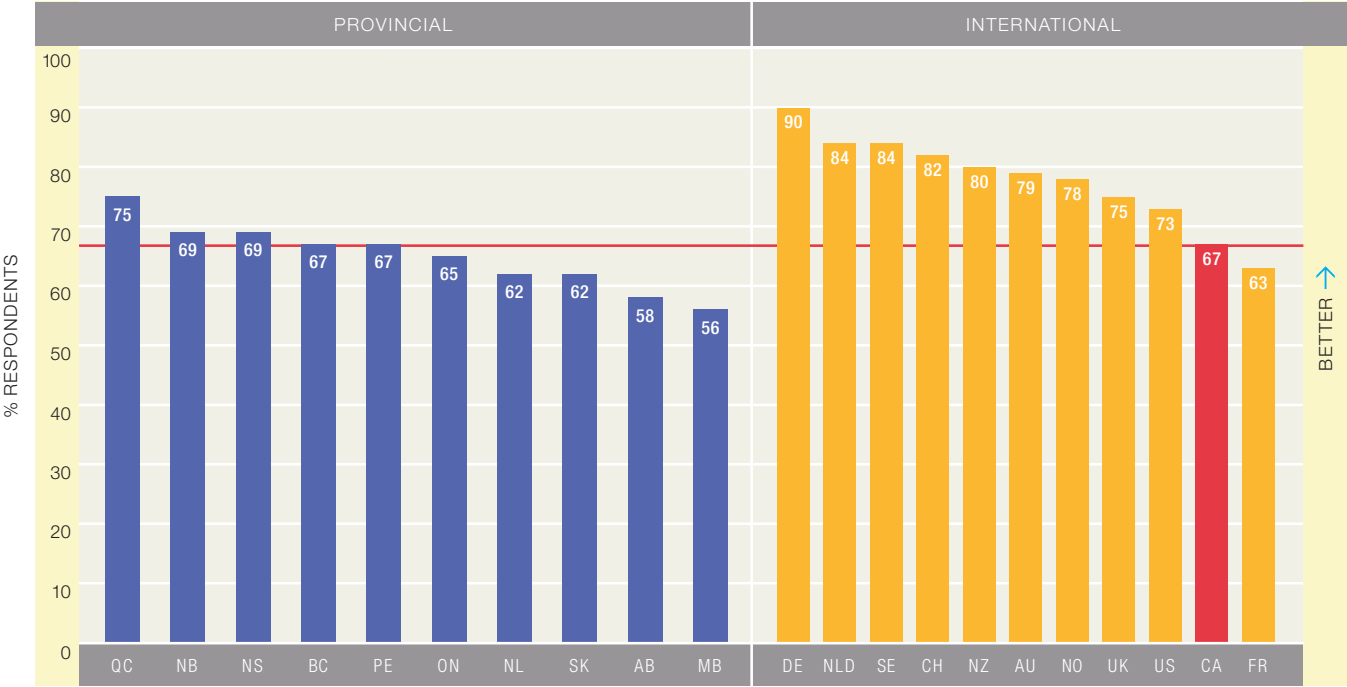
Response categories presented: Somewhat / Very difficult



3.3 How quickly can you get an answer from your doctor?

When you call your regular doctor's office with a medical concern during regular practice hours, how often do you get an answer that same day?

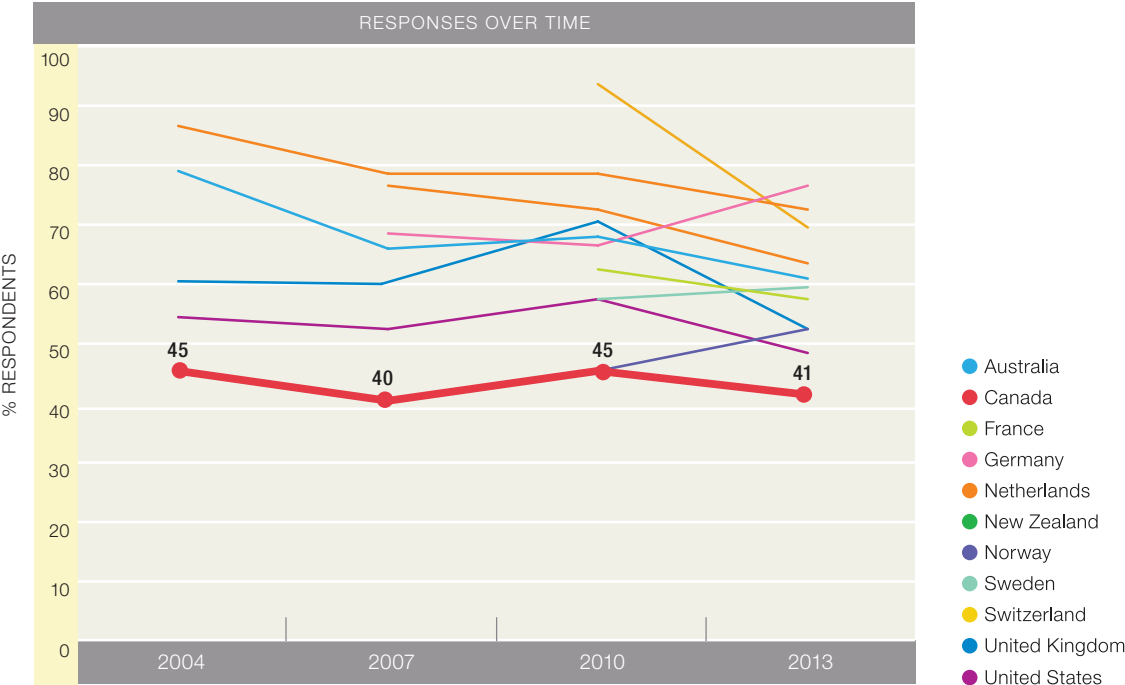
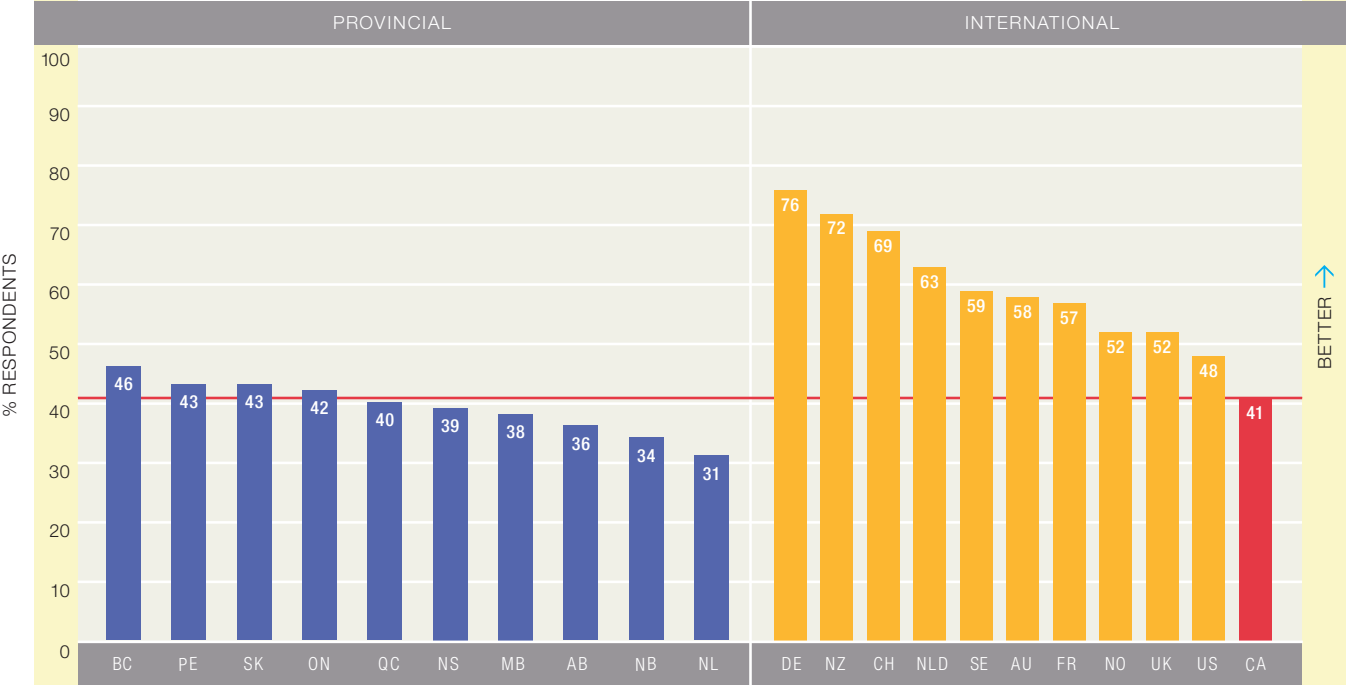
Response categories presented: Always/Often



3.4 Canada still ranks last in providing same/next-day appointments

Last time you were sick or needed medical attention, how quickly could you get an appointment to see a doctor or nurse? (not including hospital emergency department visits)

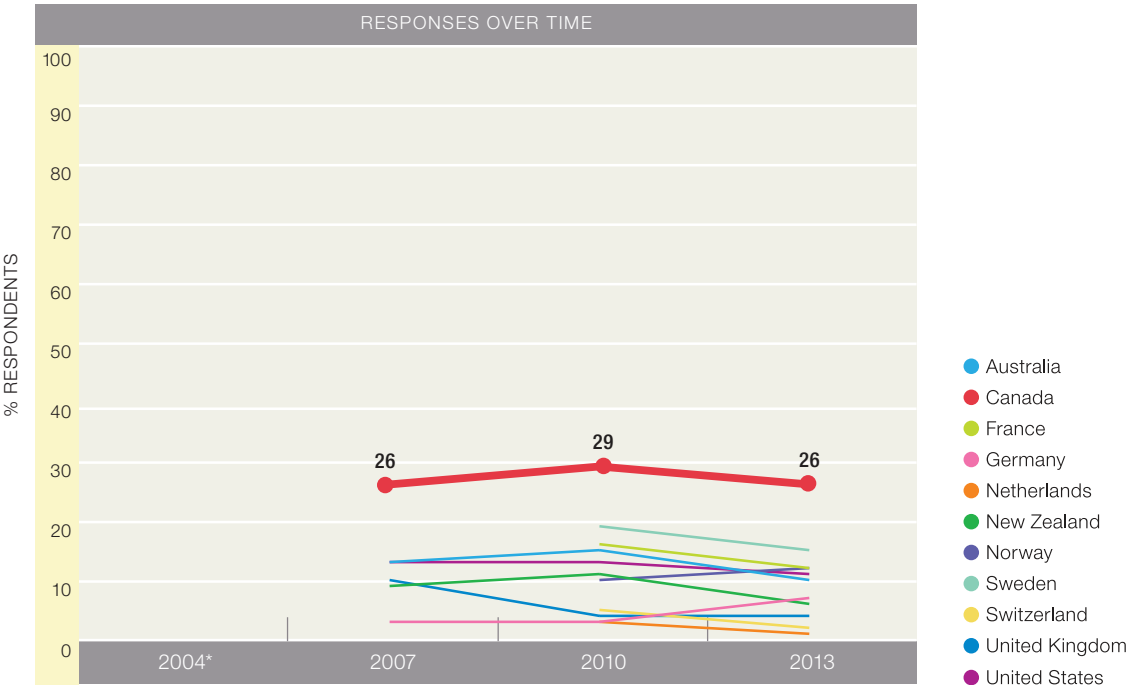
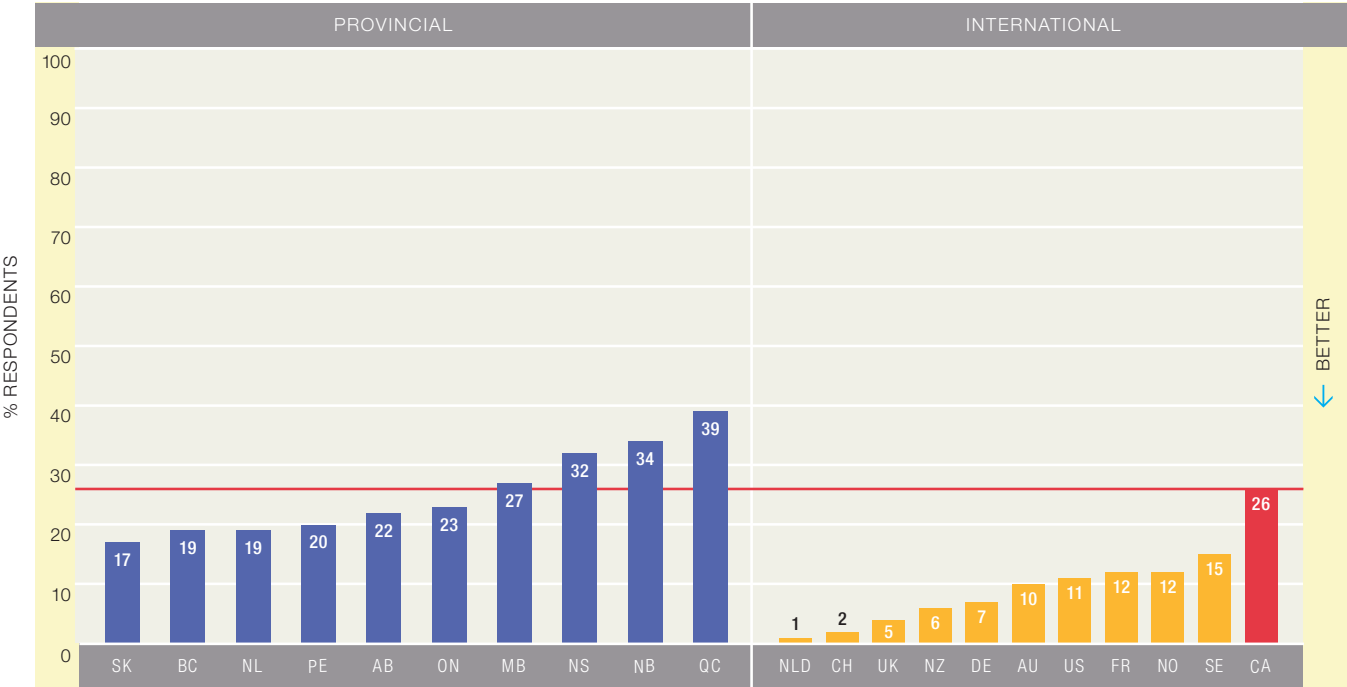
Response categories presented: Same day / Next day



3.5 Canadians wait the longest for emergency department care

The last time you went to the hospital emergency department, how long did you wait before being treated?

Response category presented: Waited 4 or more hours

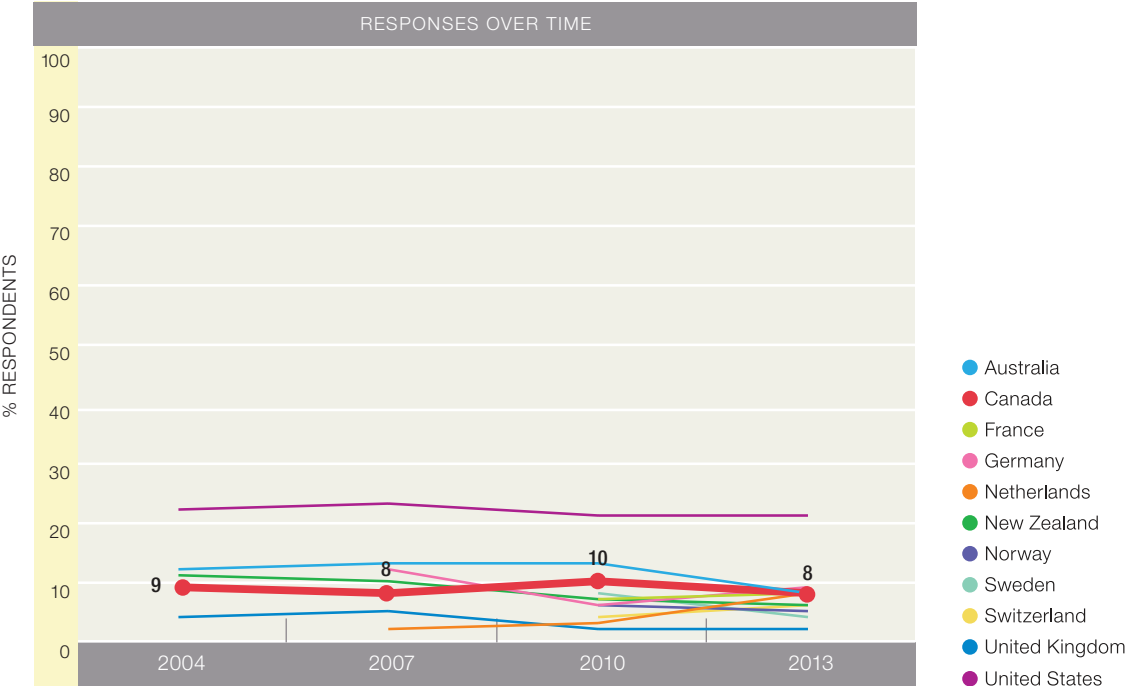
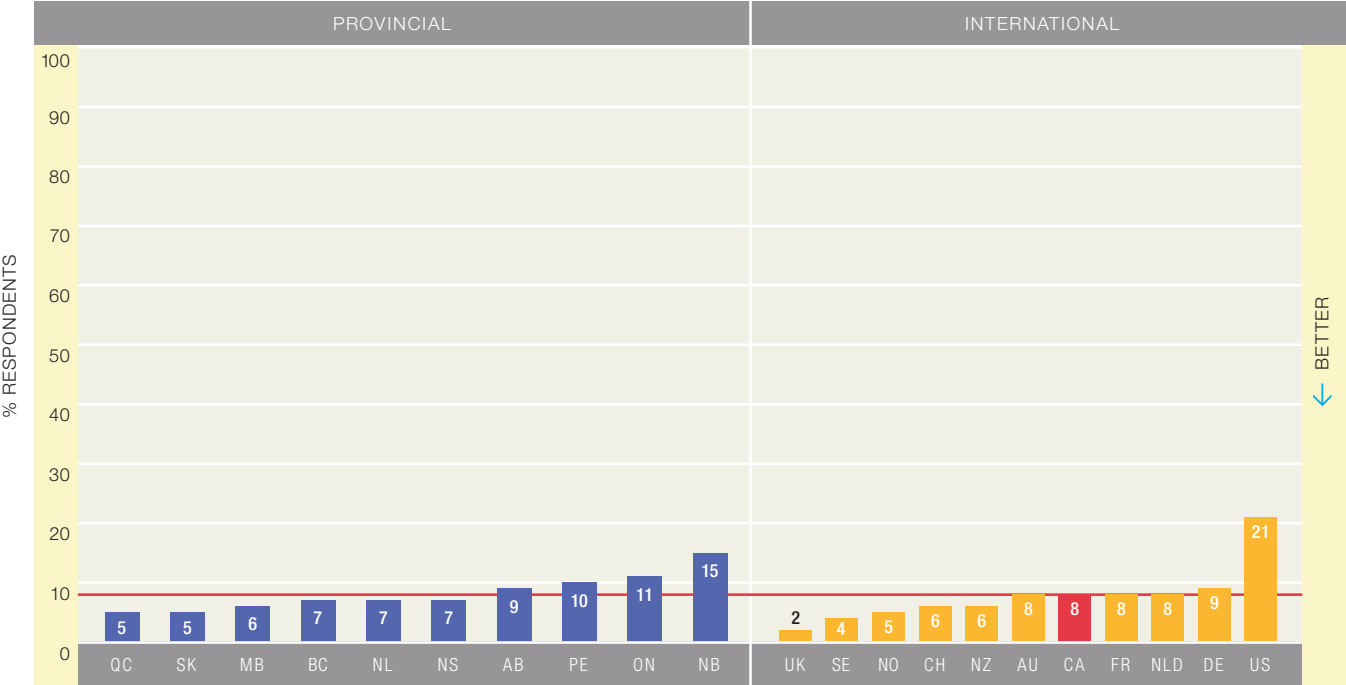


* Survey data not available for this year.

3.6 One in 12 Canadians did not fill a prescription or skipped a dose due to cost

During the past 12 months, was there a time when you did not fill a prescription for medicine or skipped doses of your medicine because of the cost?

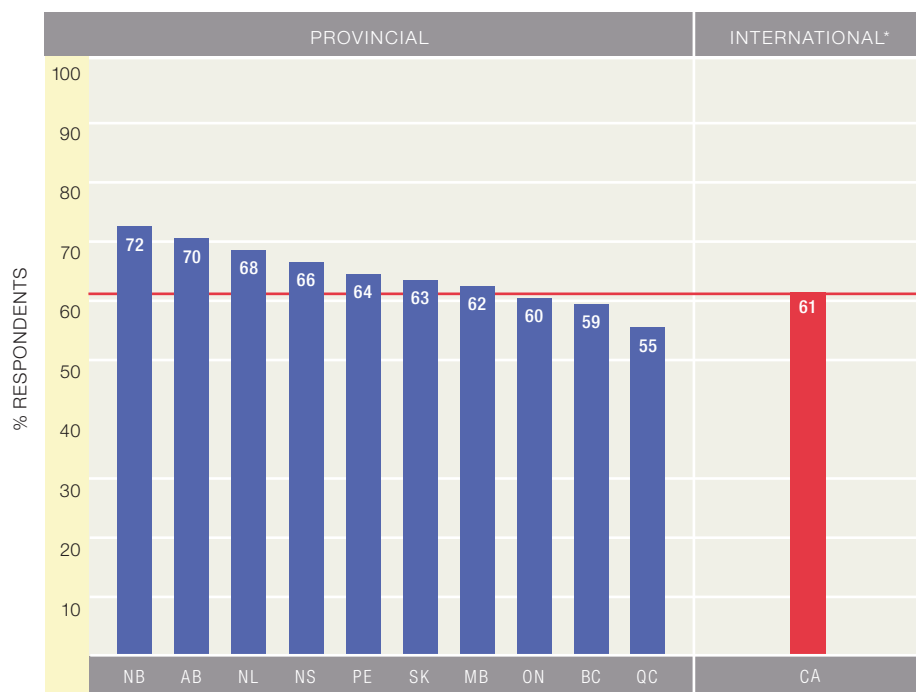
Response category presented: Yes



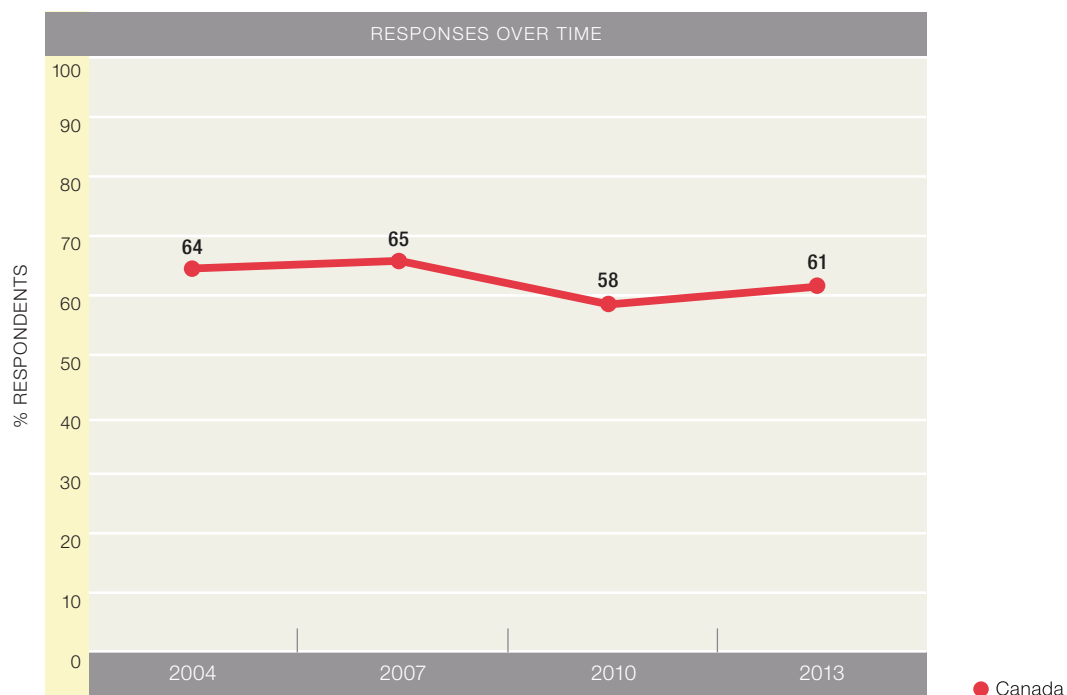
3.7 Sixty per cent of Canadians have supplementary health insurance

In addition to government-funded health services, are you currently covered by any private health insurance that you or your family pays for or that an employer or association provides?

Response category presented: Yes



* International data not available



CHAPTER 4

Coordination and integration of care



Well-integrated care is a consistent feature of high-quality health systems. Providers need to communicate efficiently and effectively—with one another and with patients—to ensure that care is timely, safe, appropriate, and patient-centred.

According to patients' perceptions in this survey, Canada has some distance to go before we can claim that care is well-coordinated and integrated as patients move from one setting to another:

- 17% to 25% of Canadians encountered problems with coordination of care, such as poor communication between their regular doctor and a specialist or a hospital.
- Nearly one in five (18%) feel their time was wasted because care was poorly organized. A similar proportion received conflicting information from different health care professionals.
- 29% to 49% of Canadians can get their medical test results easily, such as by mail, email, or online.
- Among Canadians who have used a hospital emergency department, more than one-third (37%) say their regular doctor did not seem informed about the care they had received there, ranging from 24% in PEI and in Newfoundland and Labrador to 52% in Quebec.

This has been a consistent problem in Canada for the last decade.

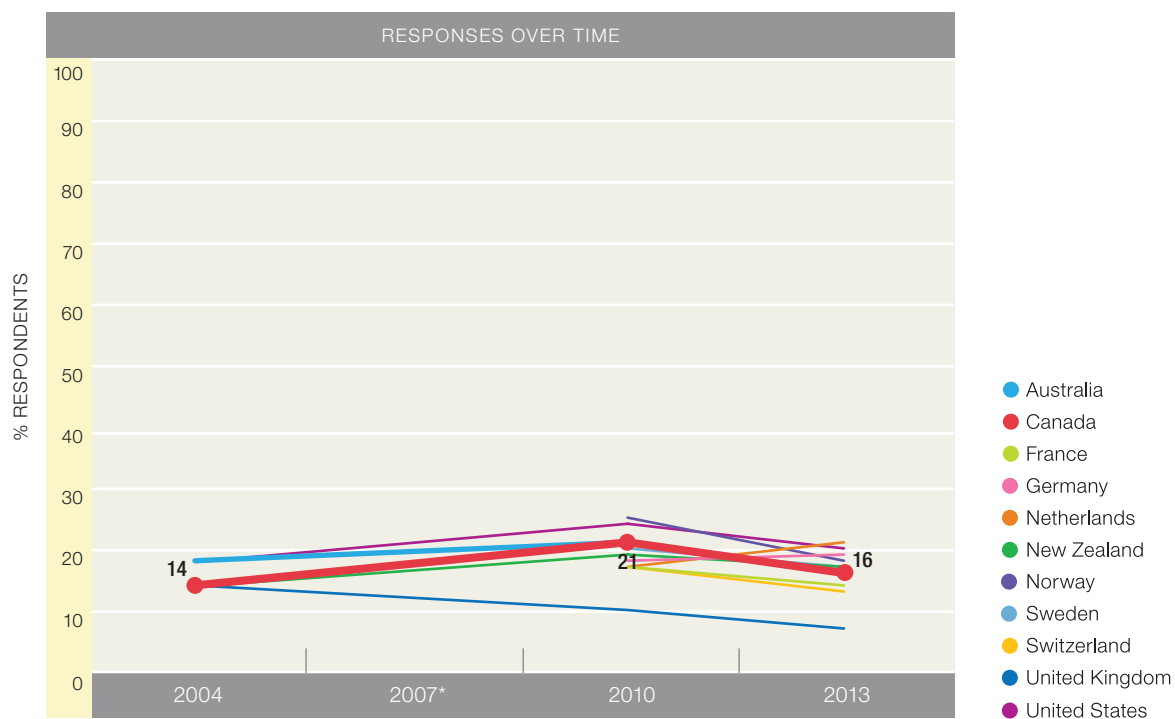
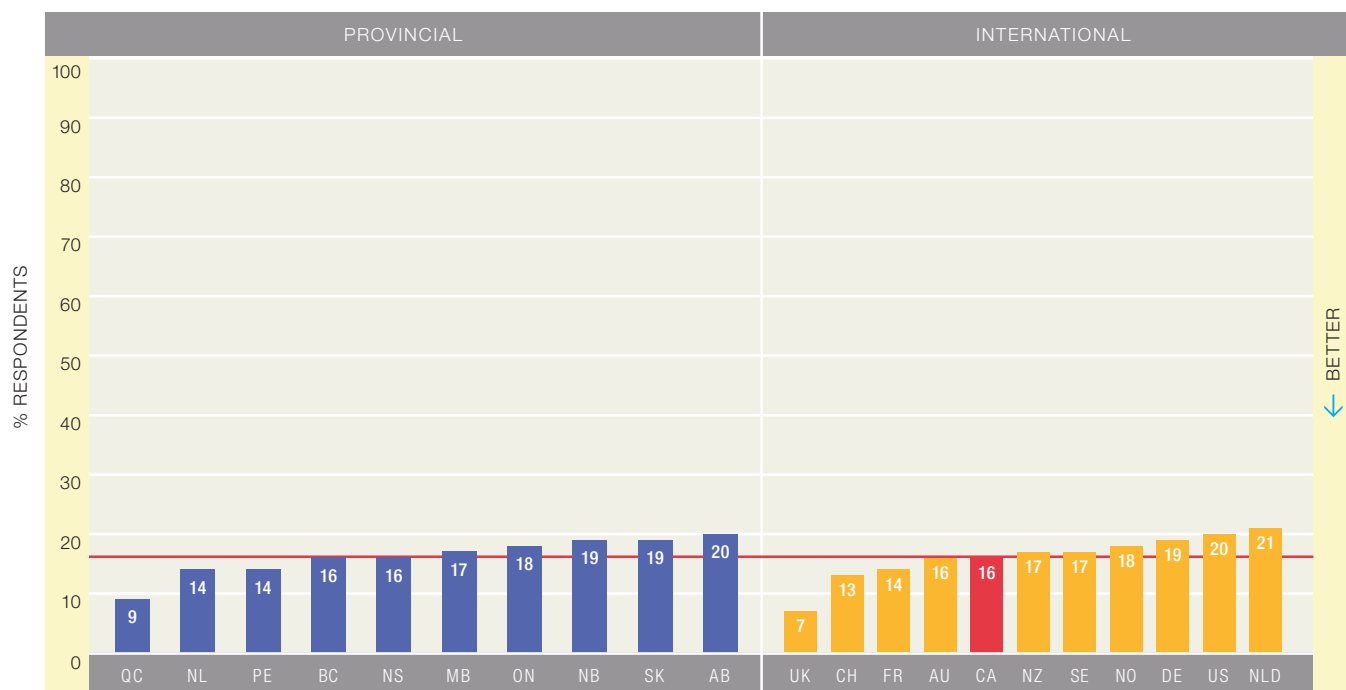
Helping patients navigate the various services they need is another important feature of well-coordinated care. In this area, Canadian doctors and hospitals seem to be doing fairly well, although some provinces have room for improvement. Nearly three-quarters of respondents who had been hospitalized said the hospital helped ensure they had follow-up care. A similar proportion (78%) said their regular doctor or clinic usually helps coordinate the care they need with other providers. While this places Canadian primary care doctors among the best of the 11 countries surveyed, the number of patients who get this support ranges widely across the country — from 68% in Quebec to 91% in Prince Edward Island.

On the other hand, Canada is doing only moderately well in other important aspects of patient-centred care and, as a whole, ranks poorly in comparison to the top-performing countries. Just half of Canadian respondents said their regular doctor always spends enough time with them, and 60% said their doctor always knows their medical history, explains things clearly, and involves them in decision-making.

4.1 One in 6 Canadians gets conflicting information from health professionals

Thinking about the past 2 years, when receiving care for a medical problem, was there ever a time when you received conflicting information from different doctors or health care professionals?

Response category presented: Yes

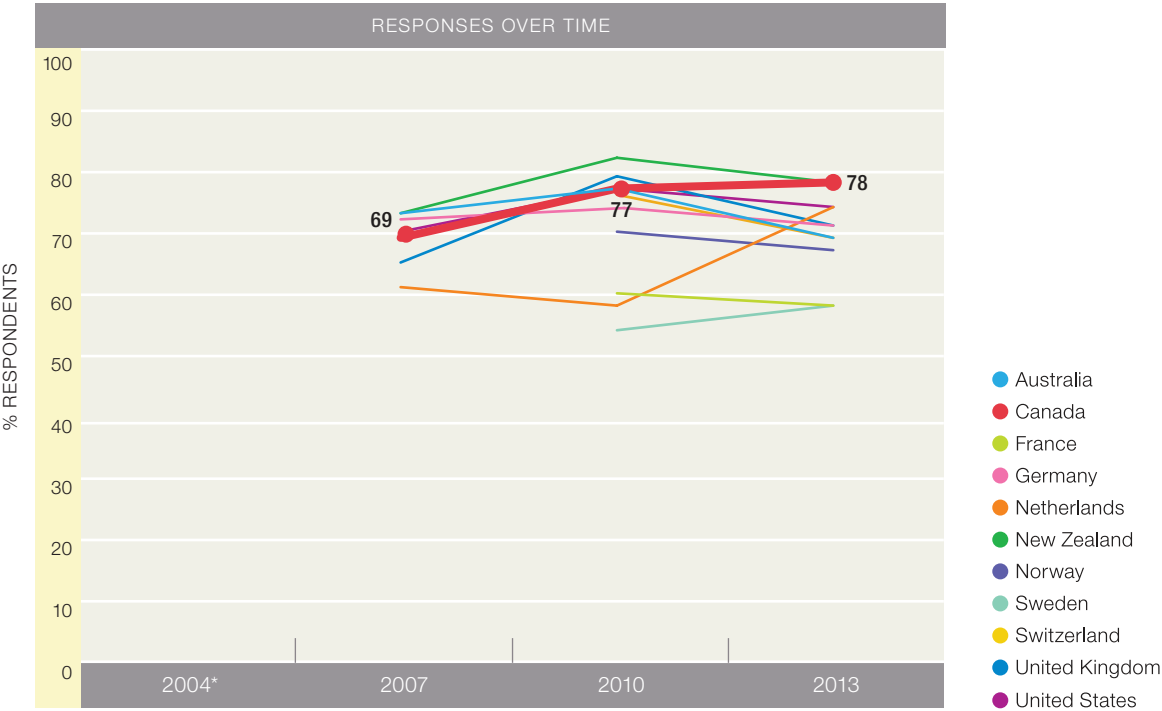
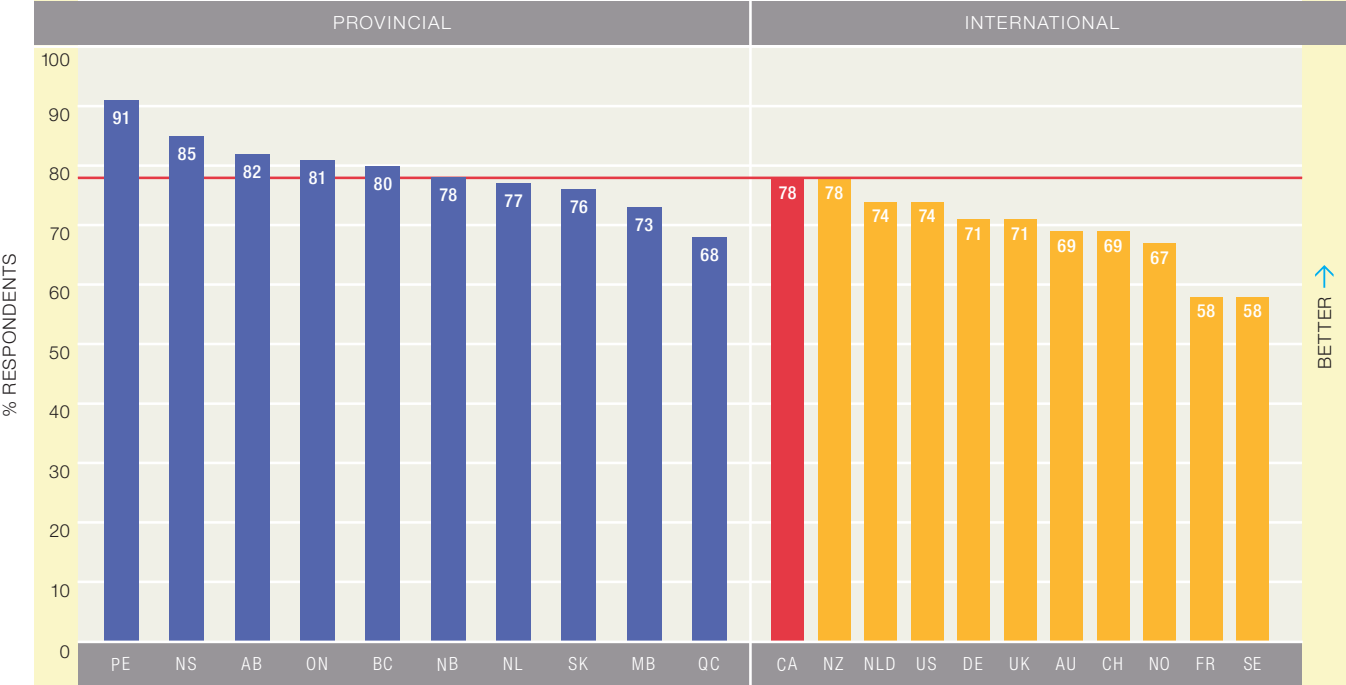


*Survey data not available for this year.

4.2 Most Canadians get help from their regular doctor in coordinating care from others

How often does your regular doctor or someone in your doctor's practice help coordinate or arrange the care you receive from other doctors and places?

Response categories presented: Always/Often

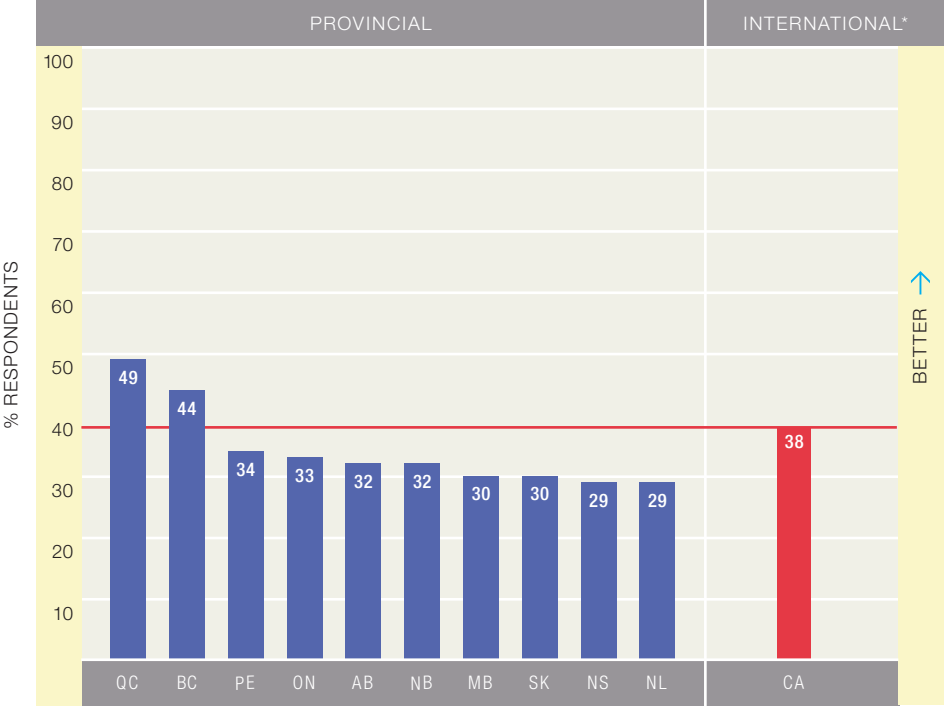


*Survey data not available for this year.

4.3 One-third to half of Canadians have easy access to medical test results

Does your regular place of care make your laboratory or other test results easily available for you to see — for example, by mail, email or online?

Response category presented: Yes

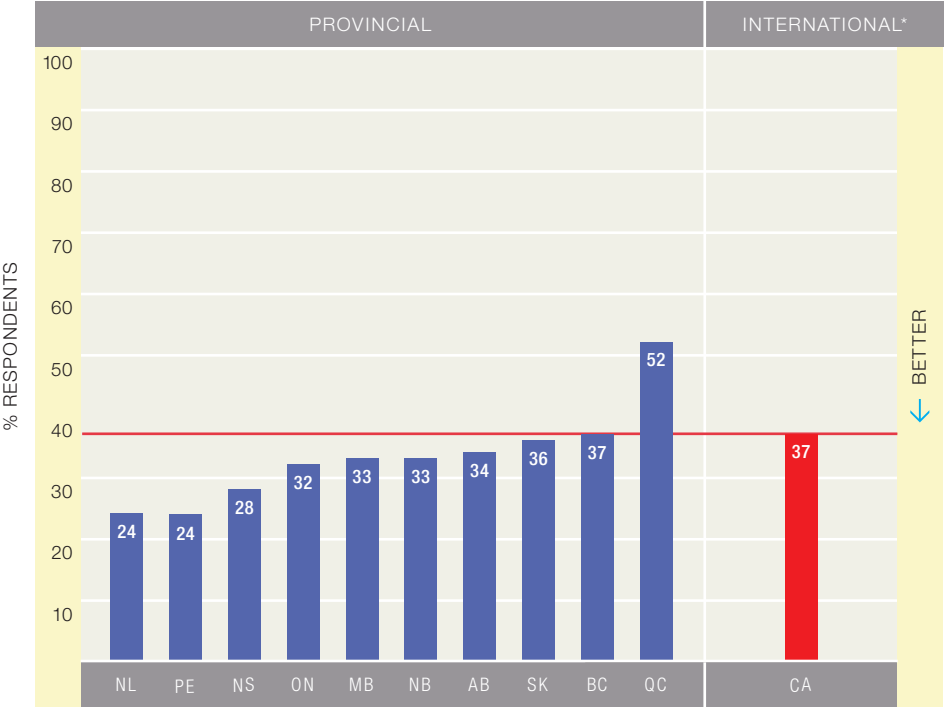


* International data not available

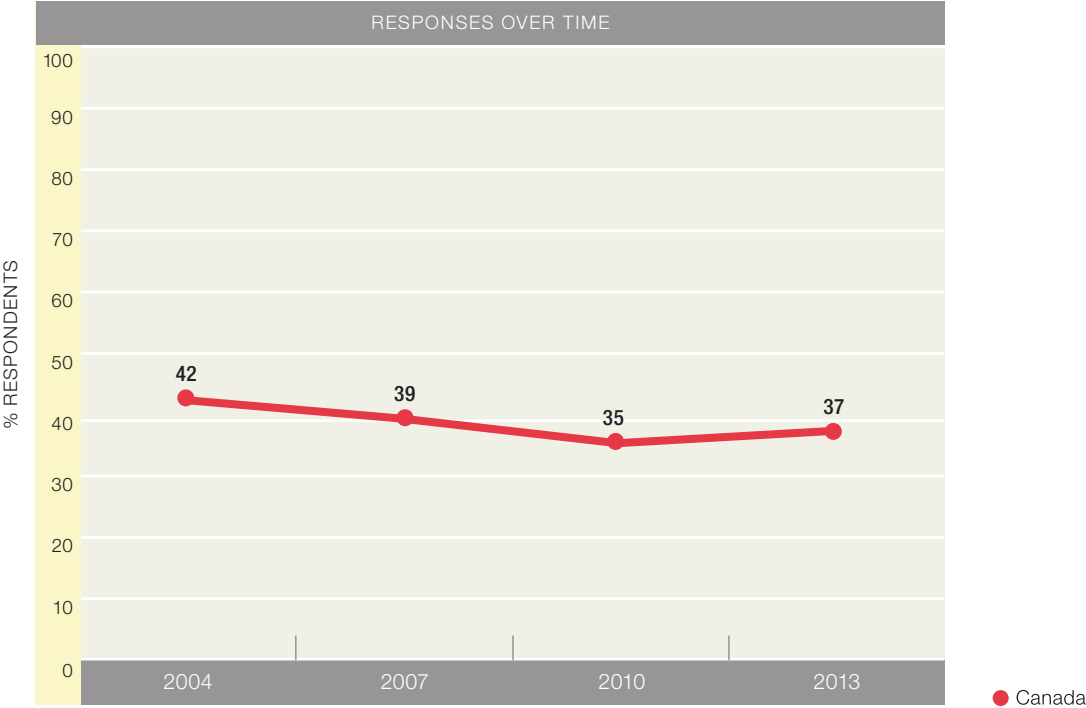
4.4 Communication between emergency departments and family doctors varies widely in Canada

After your visit in the hospital emergency department, did the doctors or staff at the place where you usually get medical care seem informed and up-to-date about the care you had received in the hospital emergency department?

Response category presented: No



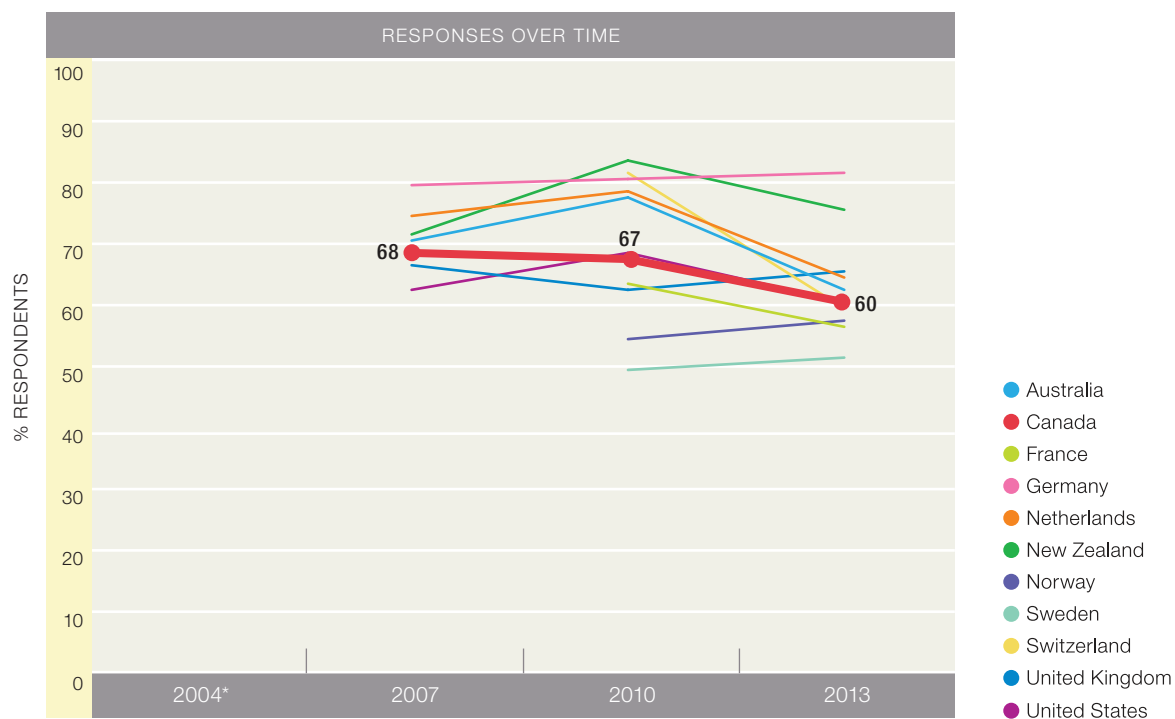
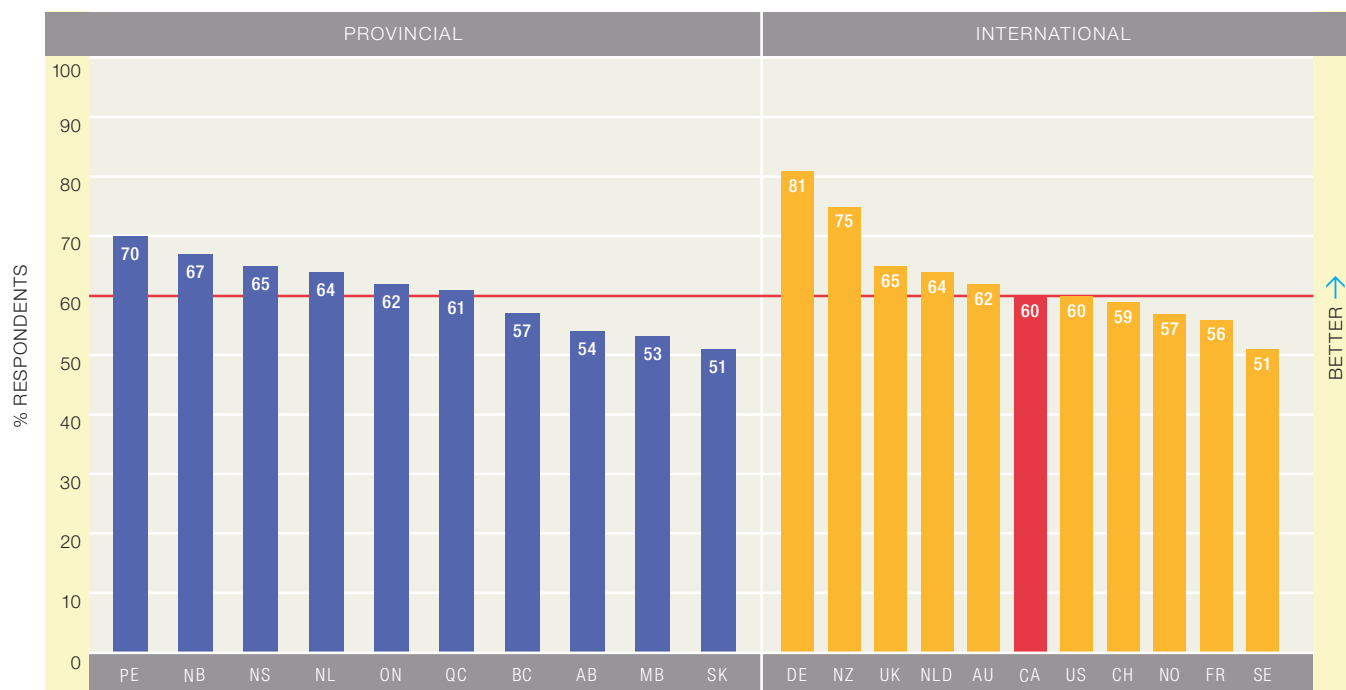
* International data not available



4.5 Fewer primary care doctors always know their patients' medical history, compared to 2007

When you need care or treatment, how often does your regular doctor or medical staff you see know important information about your medical history?

Response category presented: Always

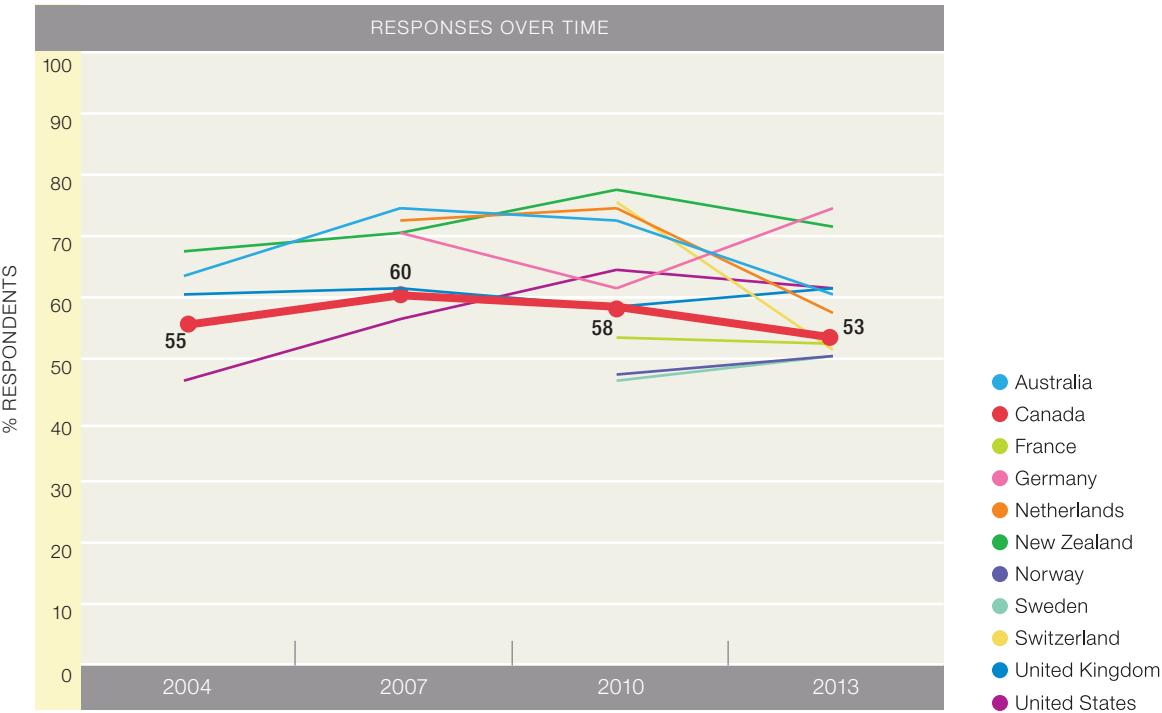
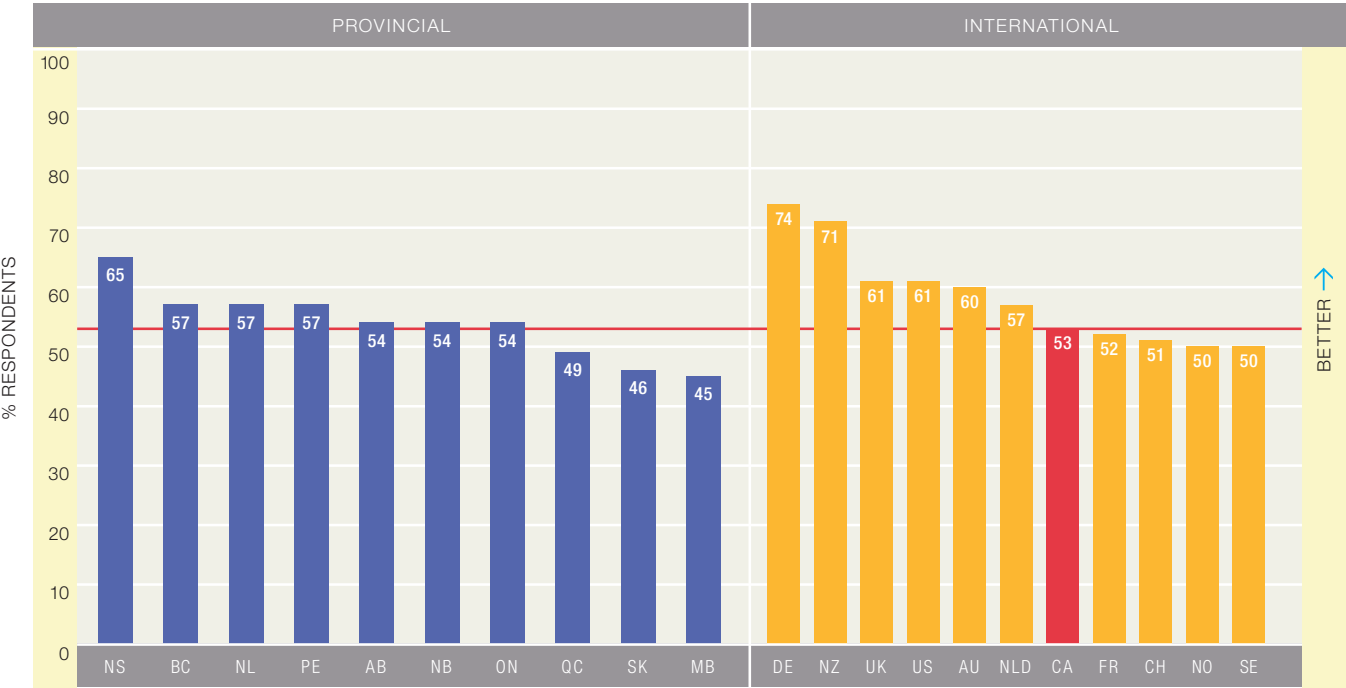


* Survey data not available for this year.

4.6 One in 2 patients feel their doctor spends enough time with them

When you need treatment or care, how often does your regular doctor or medical staff you see spend enough time with you?

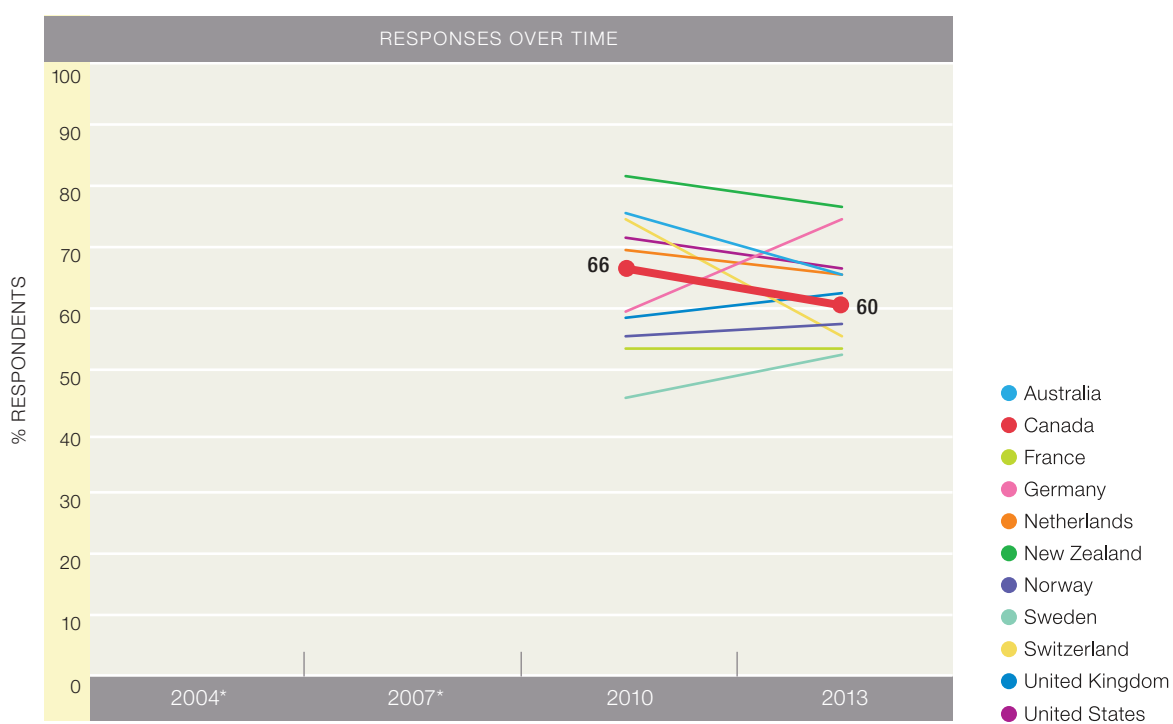
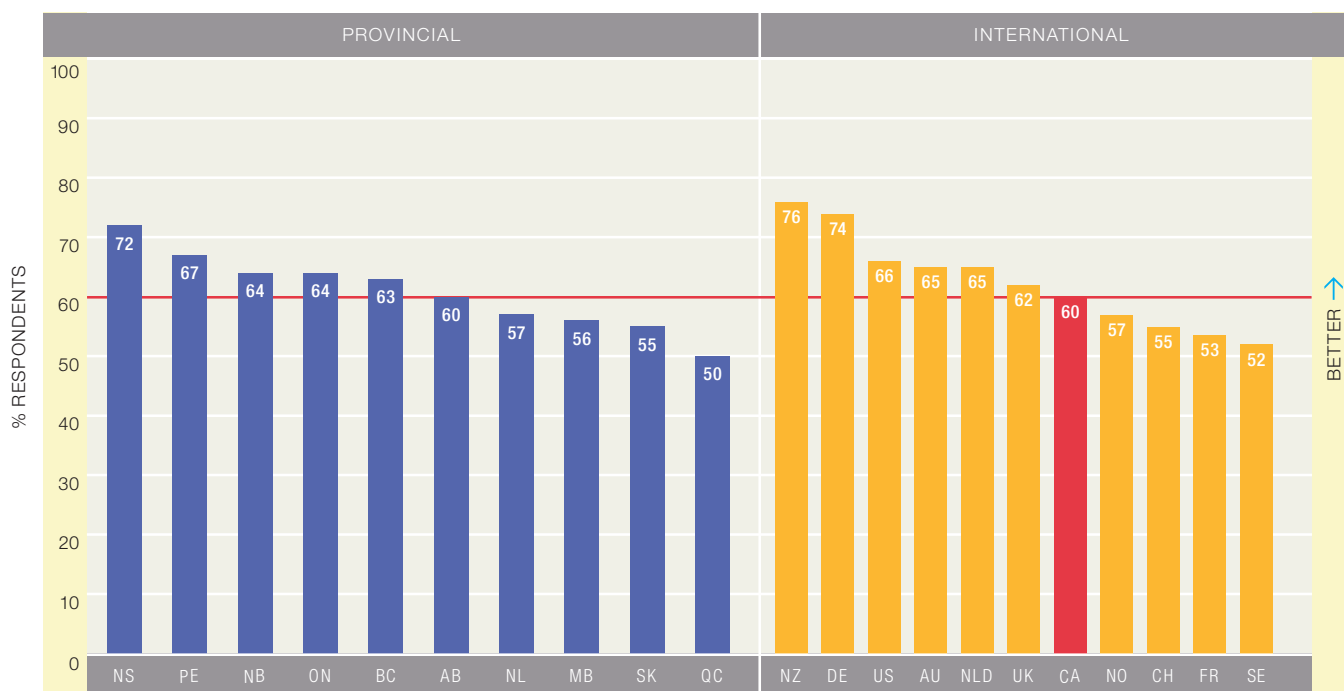
Response category presented: Always



4.7 Doctors in some provinces are much more likely to share decision-making with their patients

When you need care or treatment, how often does your regular doctor or medical staff you see involve you as much as you want to be in decisions about your care and treatment?

Response category presented: Always



*Survey data not available for this year.

CHAPTER 5

Patient safety



Preventing medical errors is a critical concern. Mistakes can have serious health and financial consequences, and they erode confidence in the health care system. One in 10 Canadian respondents in this survey believe they had experienced a medical mistake in the past two years, but just one-quarter of them were informed about it by a health professional involved in their care.

Medication safety is a particularly important area, with more than half of Canadians using prescription drugs on a regular basis and 36% taking two or more medications. Safe care depends on patients having accurate, clear information about their medicines. In comparison to other countries, Canada ranks relatively well with respect to some aspects of patient safety, but the survey findings indicate areas of concern within this country:

- In three provinces (Saskatchewan, Nova Scotia, and Newfoundland and Labrador), more than 20% of patients who had been hospitalized in the past two years said no one talked to them about the purpose of the drugs they were to continue taking when they returned home. However, overall Canada compares well internationally. Still, more than 10% of Canadian patients leave hospital without having discussed their medications with a health care professional.

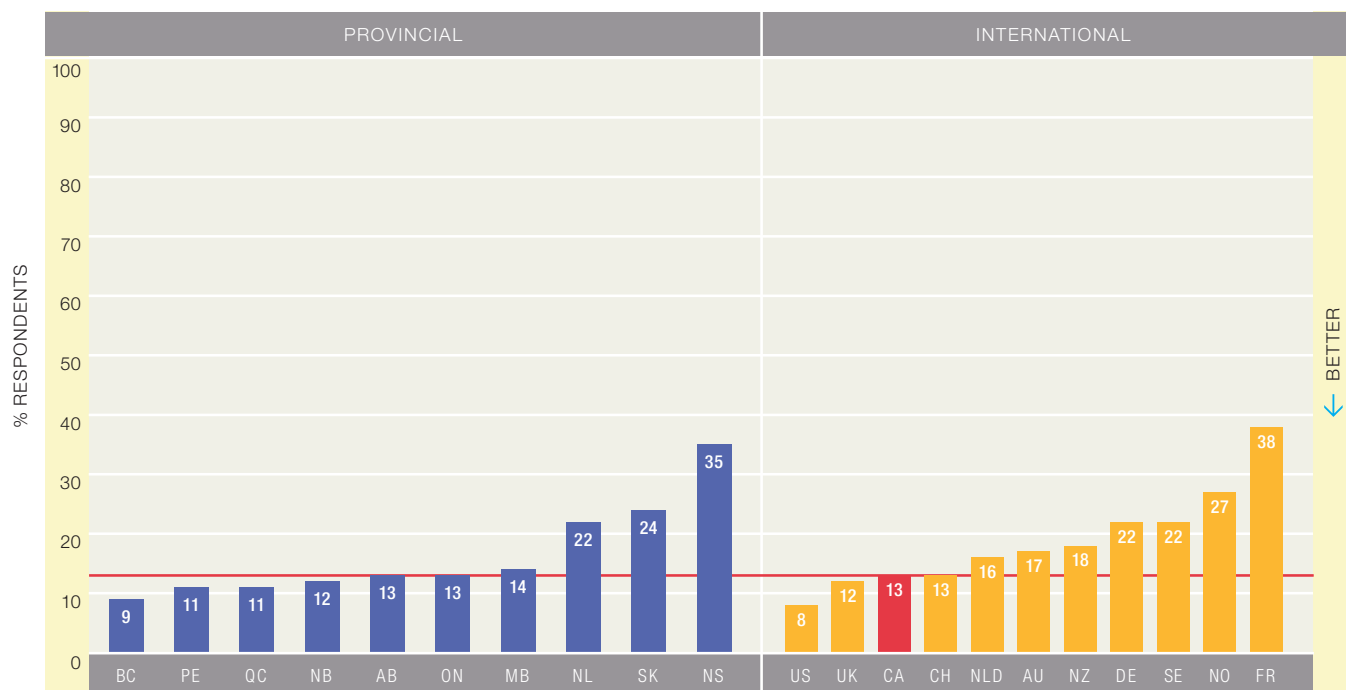
- 13% to 35% of patients, depending on the province, left hospital without written instructions about what they should do at home and what symptoms to watch for.
- Medication errors by professionals affected 6% of Canadians. Across the provinces, 4% to 9% said a doctor, nurse, hospital, or pharmacist gave them the wrong medication or wrong dose in the past two years.
- About 20% of Canadians said that, in the past year, a doctor or pharmacist had not explained the side-effects of the drugs they were prescribed, had not given them a written list of all their prescriptions, and/or had not reviewed all their medications with them.

Canadians are much more likely to get information support about their medications compared to residents of some of the other participating countries. However, the wide variations among provinces suggest that jurisdictions could learn much from one another to better prevent medication problems. For example, one-third of respondents in Manitoba and Saskatchewan did not have the side-effects of their medication explained, about twice as many as in Quebec (18%) and New Brunswick (17%).

5.1 Medication review at hospital discharge varies widely across Canada

When you left the hospital, did someone discuss with you the purpose of taking each of your medications? (Asked of respondents who indicated that they had been hospitalized overnight in the past 2 years)

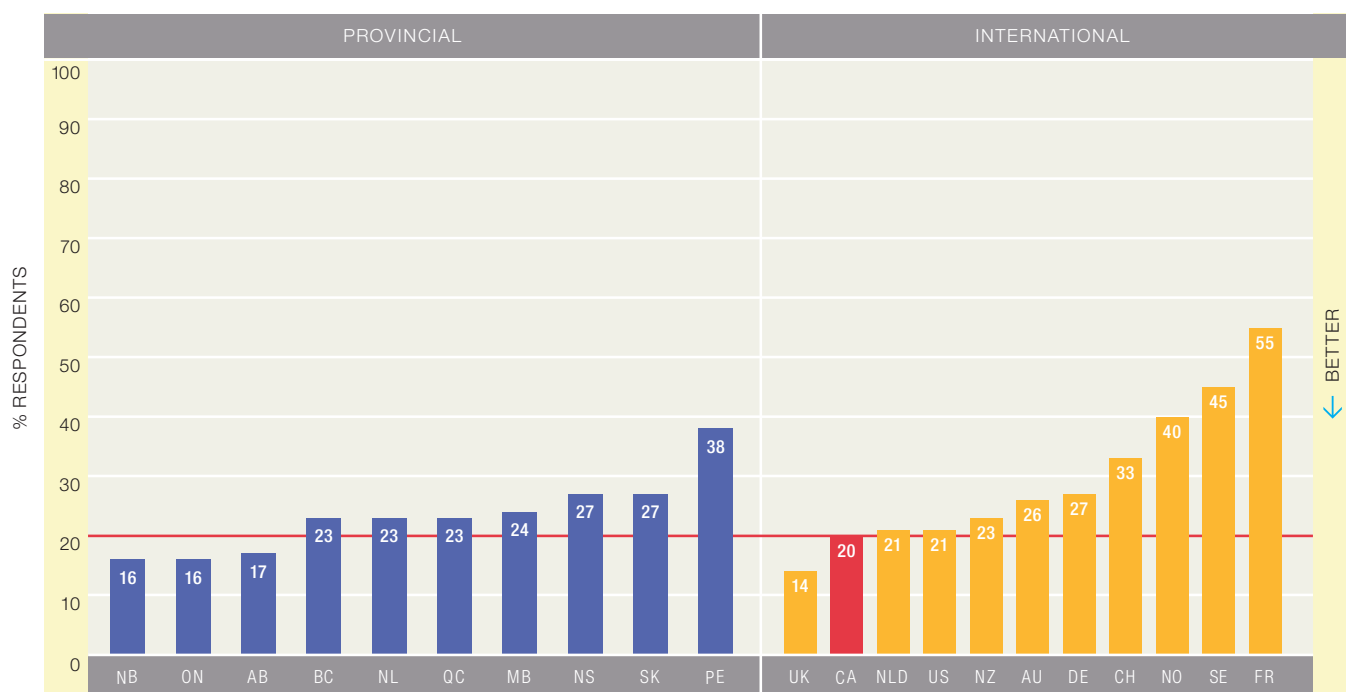
Response category presented: No



5.2 A full review of medications? Not the case for 1 in 5 Canadians

In the past 12 months, has a doctor or pharmacist reviewed with you all the medications you take?

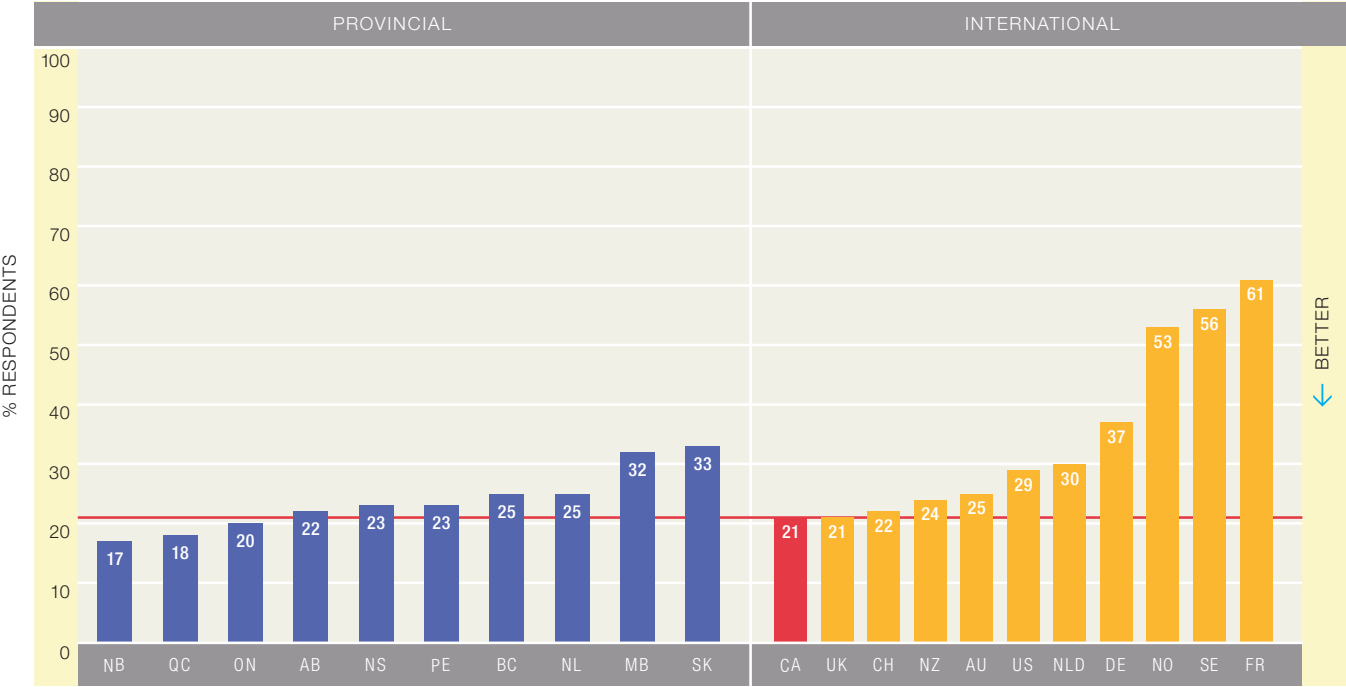
Response category presented: No



5.3 Side-effects of medication not explained for up to one-third of respondents in some provinces

In the past 12 months, has a doctor or pharmacist explained the potential side-effects of any medication that was prescribed?

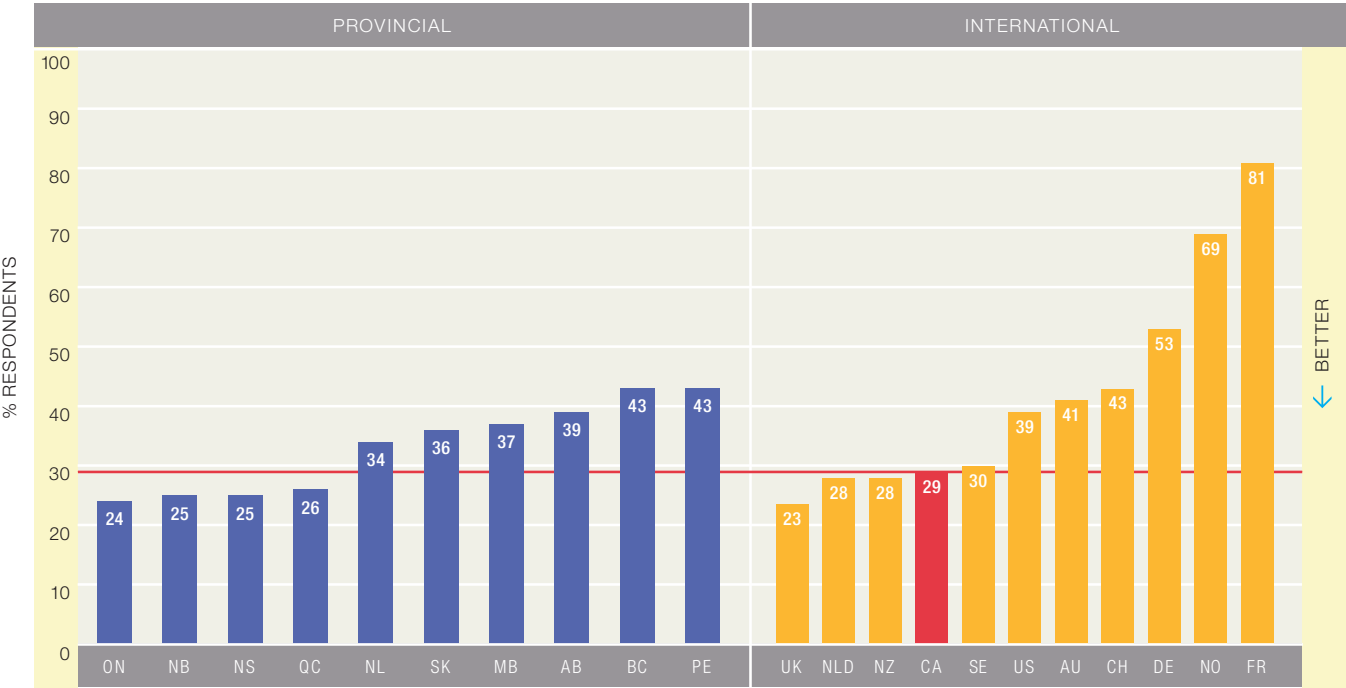
Response category presented: No



5.4 More than one-quarter of Canadians have not been given a list of all their medications

In the past 12 months, has a doctor or pharmacist given you a written list of all your prescribed medications?

Response category presented: No



CHAPTER 6

Preventive care



Many of the chronic diseases affecting Canadians today could be prevented. For example, at least 20% of Canadians have high blood pressure or cholesterol, major risk factors for heart disease and stroke. Nearly one in 10 have diabetes, a largely preventable disease. Risks for these and other diseases can be greatly reduced if people stop smoking, get more physically active, curb excessive drinking, and adopt healthier diets.

As the Health Council of Canada said in an earlier report on health promotion (*Stepping It Up*, 2010), enabling Canadians to make these changes requires coordinated action outside the health care system. At the same time, health care providers also have a role to play in promoting healthy habits and providing preventive care. This survey shows that a large proportion of Canadians are not getting healthy living advice as part of their regular health care:

- About half of Canadians have not had a doctor or other clinic staff talk with them about healthy eating or exercise in the past two years.
- Between 11% and 21% of Canadians are daily smokers, depending on the province, and 31% of those daily smokers said no one at their regular place of care had talked with them about how to quit smoking.

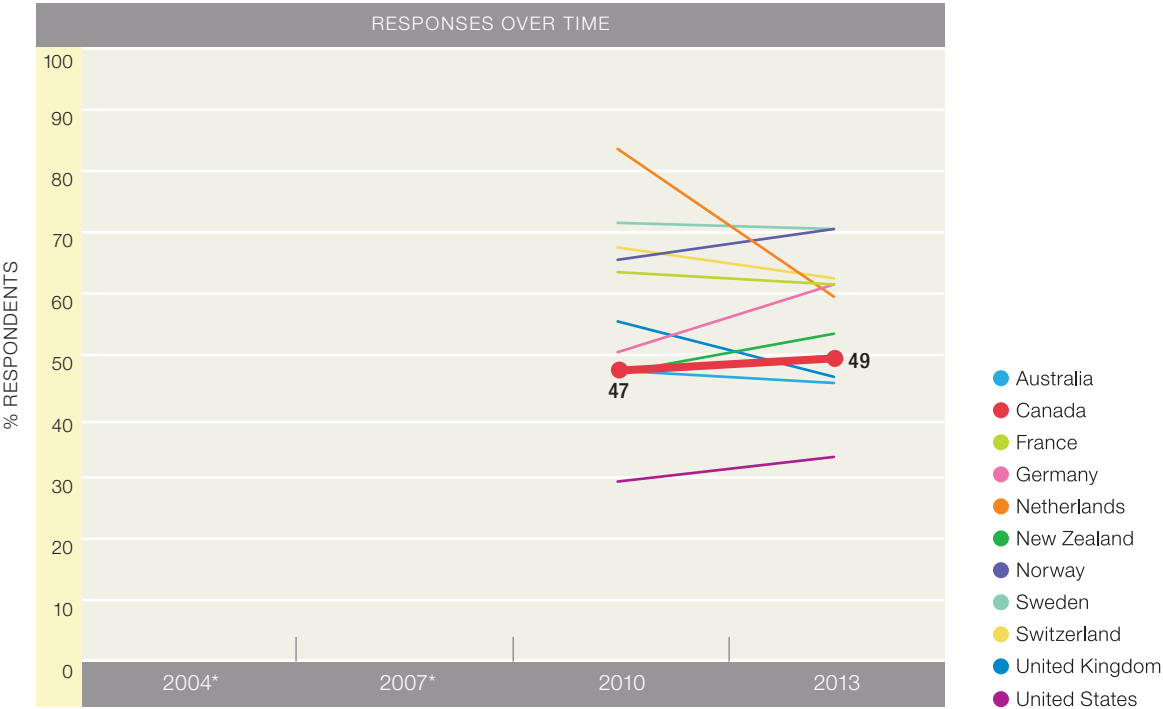
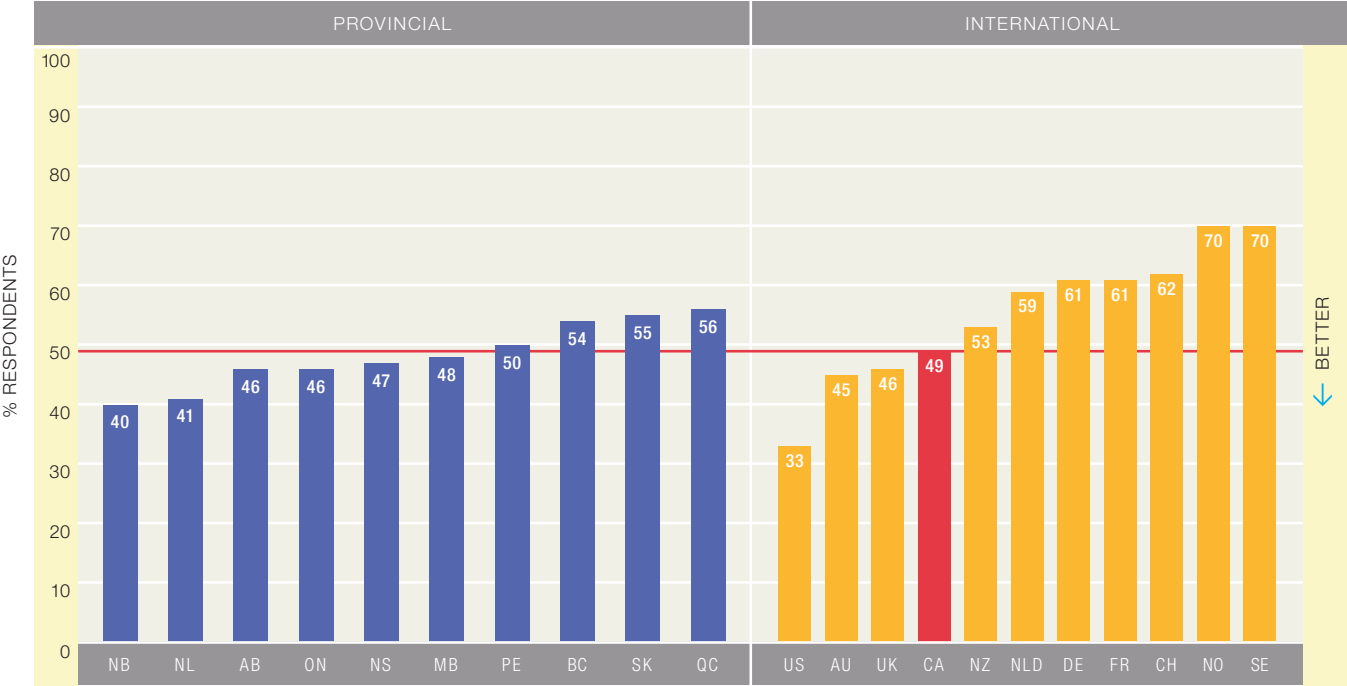
Screening programs are also important to identify people at high risk or in early stages of disease, and the survey responses suggest this type of care is fairly common. But for some types of screening and preventive care, responses ranged widely across provinces, raising more questions. What might explain these differences?

- The number of Canadians who did not get a seasonal flu shot last year ranged from 53% in Nova Scotia to 73% in Quebec.
- 20% of women in Quebec have never had a Pap test, versus just 2% in BC.
- In Saskatchewan, 34% of women say they have never been screened for breast cancer, compared to 12% in Nova Scotia.
- More than one-third of Canadians age 50 or older have never had a test to screen for bowel or colon cancer (ranging from 23% in Manitoba to 49% in Quebec). Compared to the other countries in the survey, Canada performs in the middle in terms of delivering preventive care. Would more people get preventive care if they received reminders to make an appointment? Most Canadians don't. The range within Canada—from 44% in Saskatchewan to 73% in Quebec—mirrors the array of international responses.

6.1 Half of Canadians have not talked with their doctor about healthy eating

During the past 2 years, have you and your doctor or other clinical staff at the place you usually go to for care talked about a healthy diet and healthy eating?

Response category presented: No

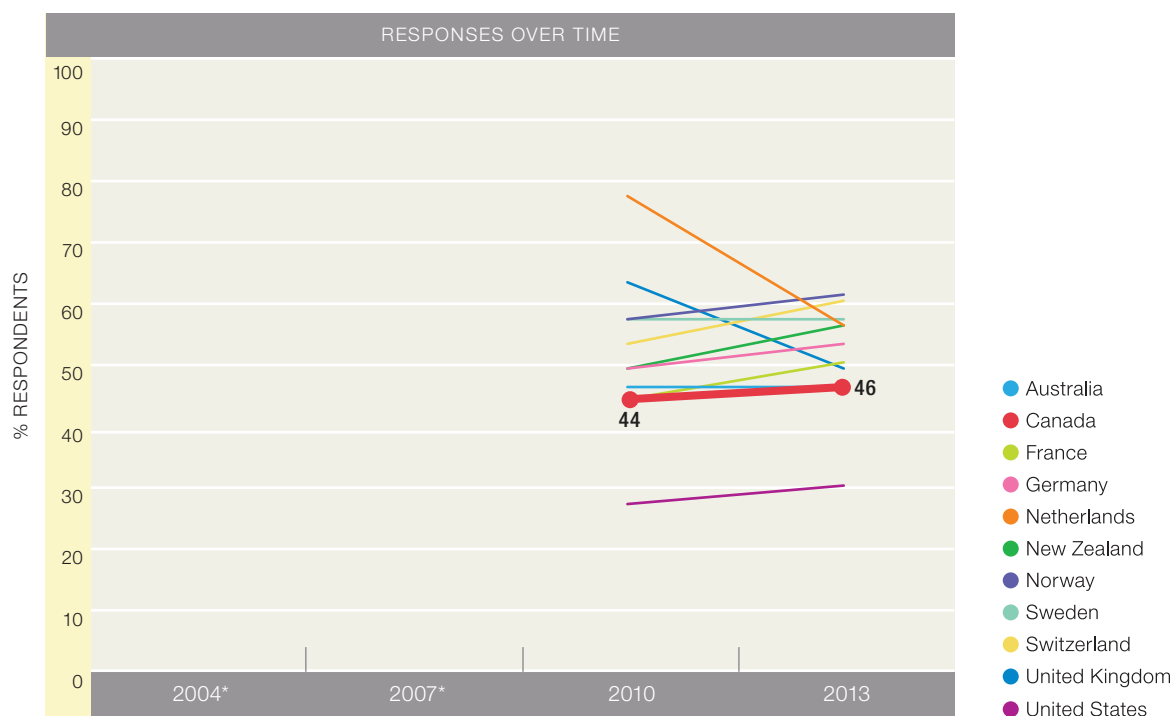
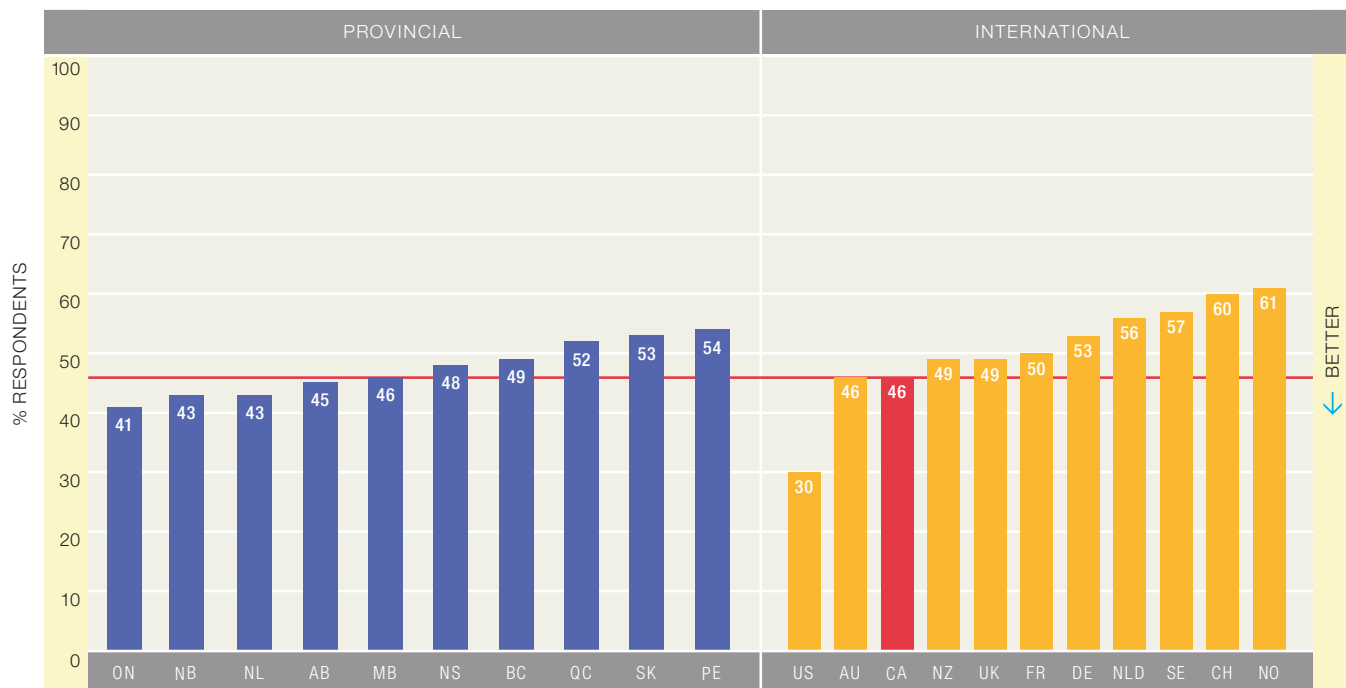


*Survey data not available for this year.

6.2 Exercise is not a common topic during health care visits in Canada

During the past 2 years, have you and your doctor or other clinical staff at the place you usually go to for care talked about exercise or physical activity?

Response category presented: No

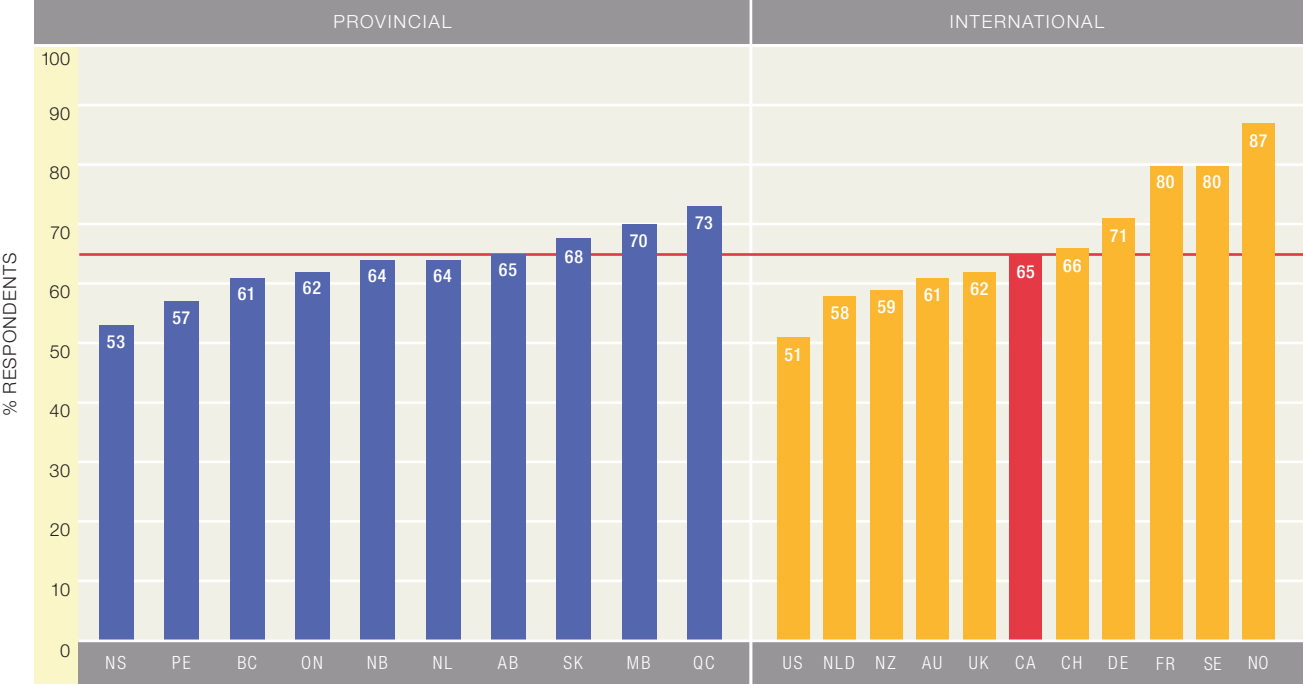


* Survey data not available for this year.

6.3 Two-thirds of Canadians say “no” to flu shots

In the past year, have you had a seasonal flu shot?

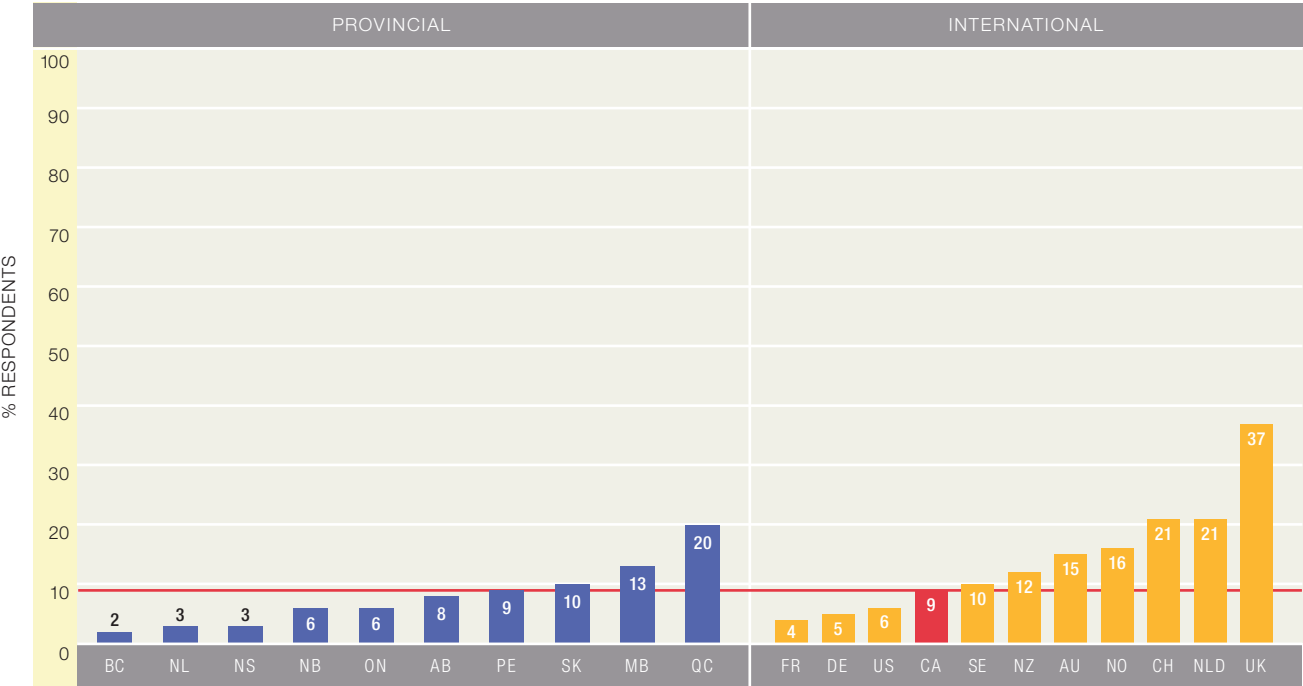
Response category presented: No



6.4 The number of women who have never had a Pap test varies widely by province and by country

About how long has it been since you had a Pap smear? (Asked of women age 18-70 years)

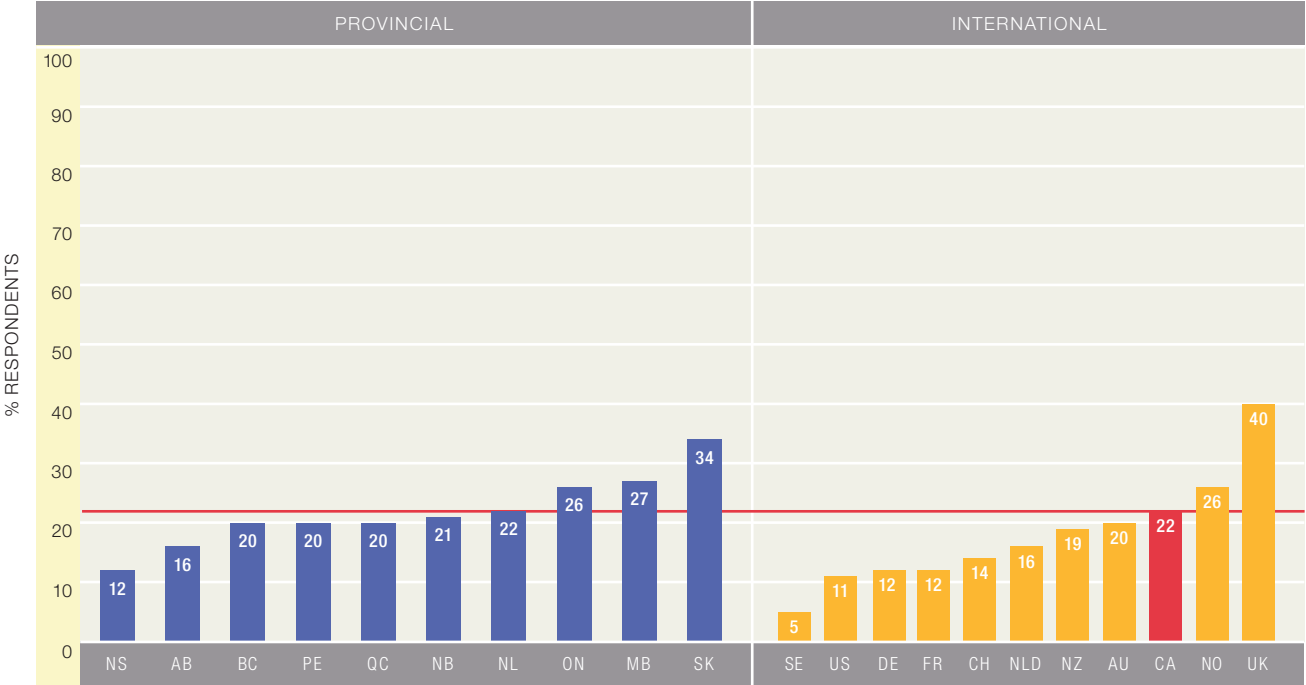
Response category presented: Never



6.5 One in 5 Canadian women have never had a mammogram

About how long has it been since you had a mammogram or breast cancer screening?
(Asked of women age 40-74 years)

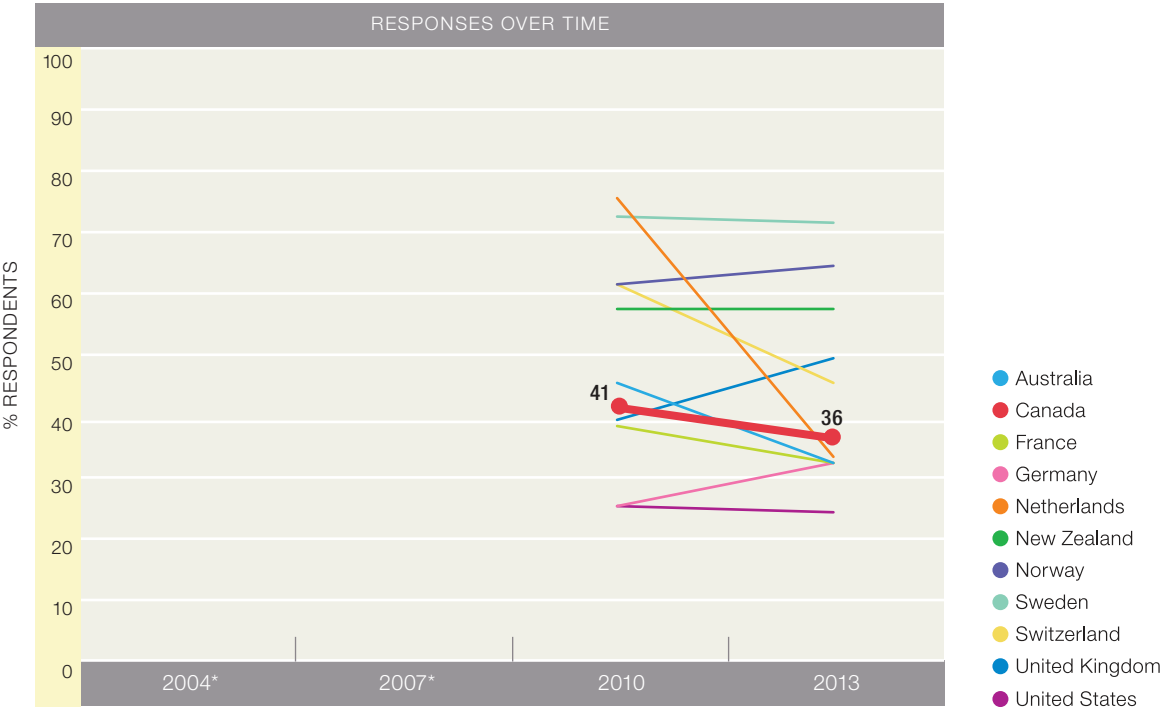
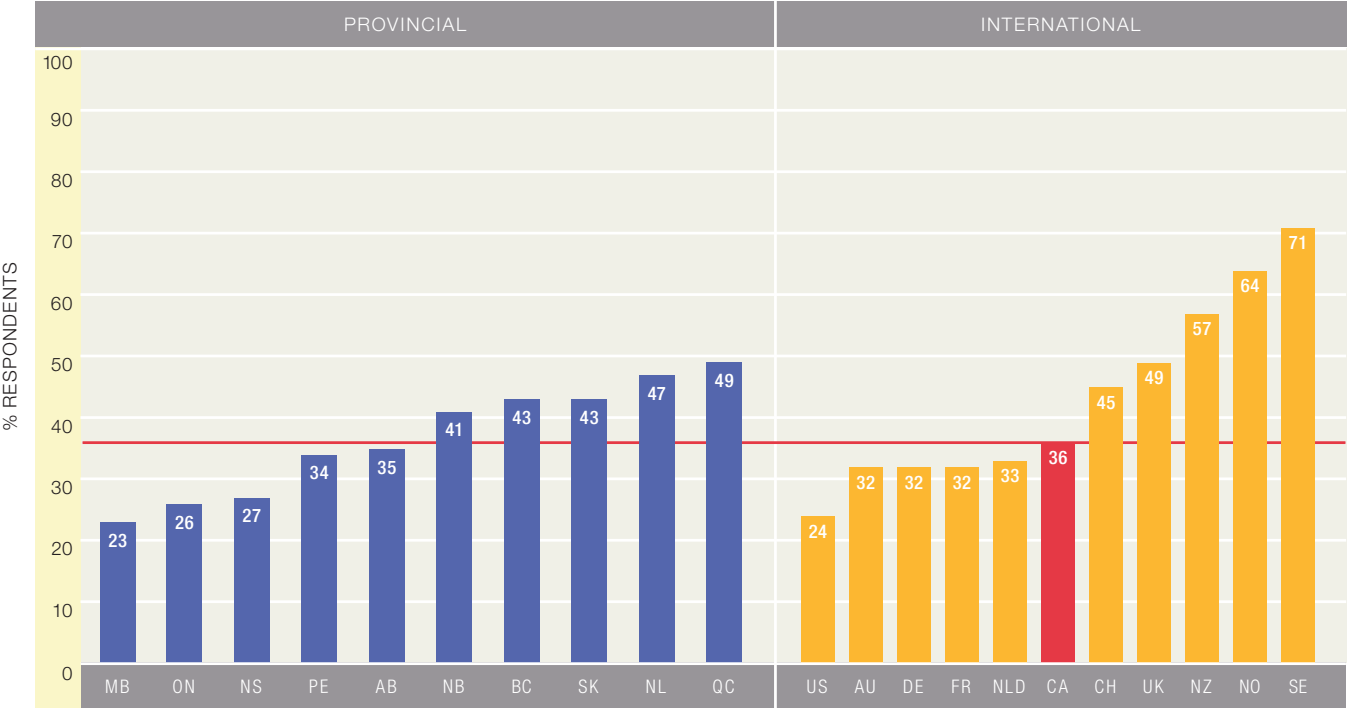
Response category presented: Never



6.6 One in 3 Canadians over 50 have never been screened for colon cancer

About how long has it been since you had a bowel or colon cancer screening?
This could be a colonoscopy or other screening test. (Asked of respondents age 50 years and older)

Response category presented: Never

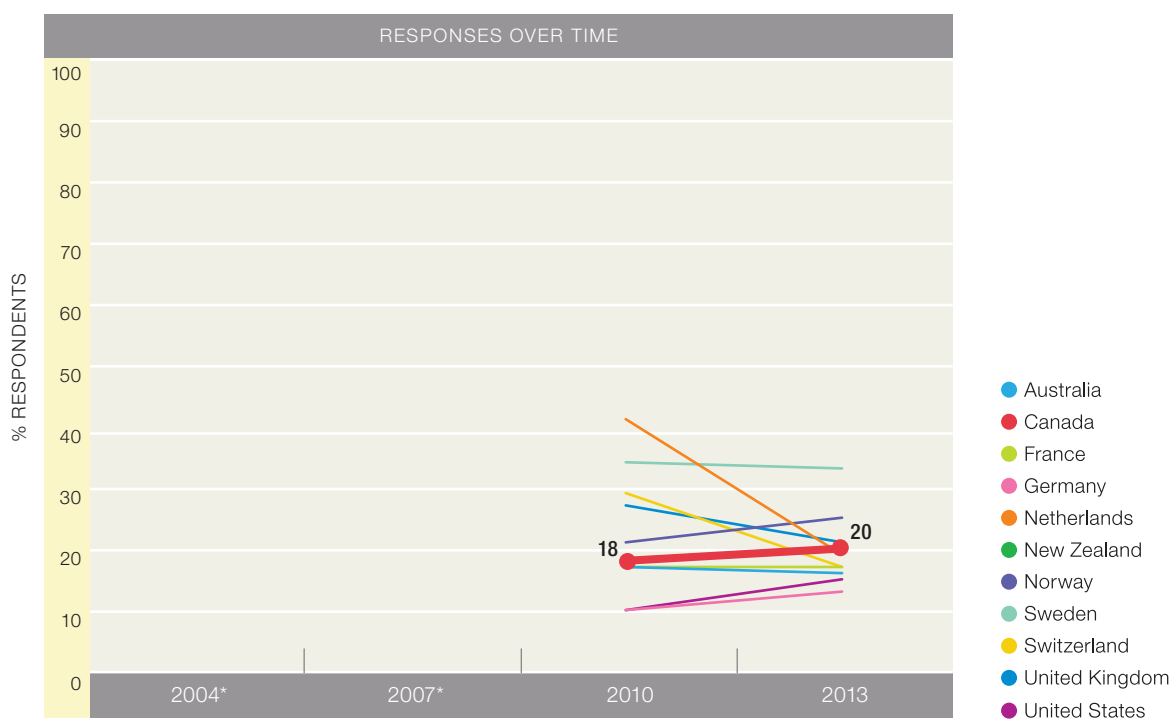
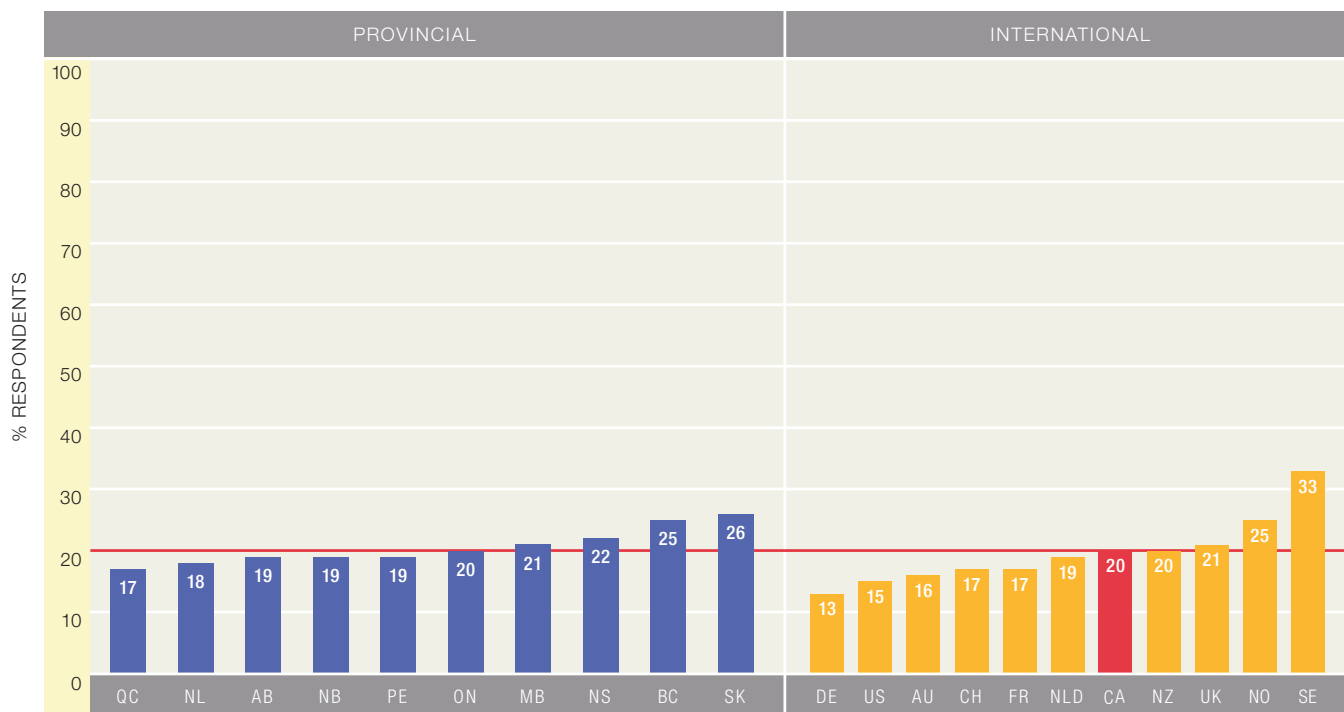


*Survey data not available for this year.

6.7 One in 5 Canadians have never had a cholesterol test

About how long has it been since you had your cholesterol checked?

Response category presented: Never

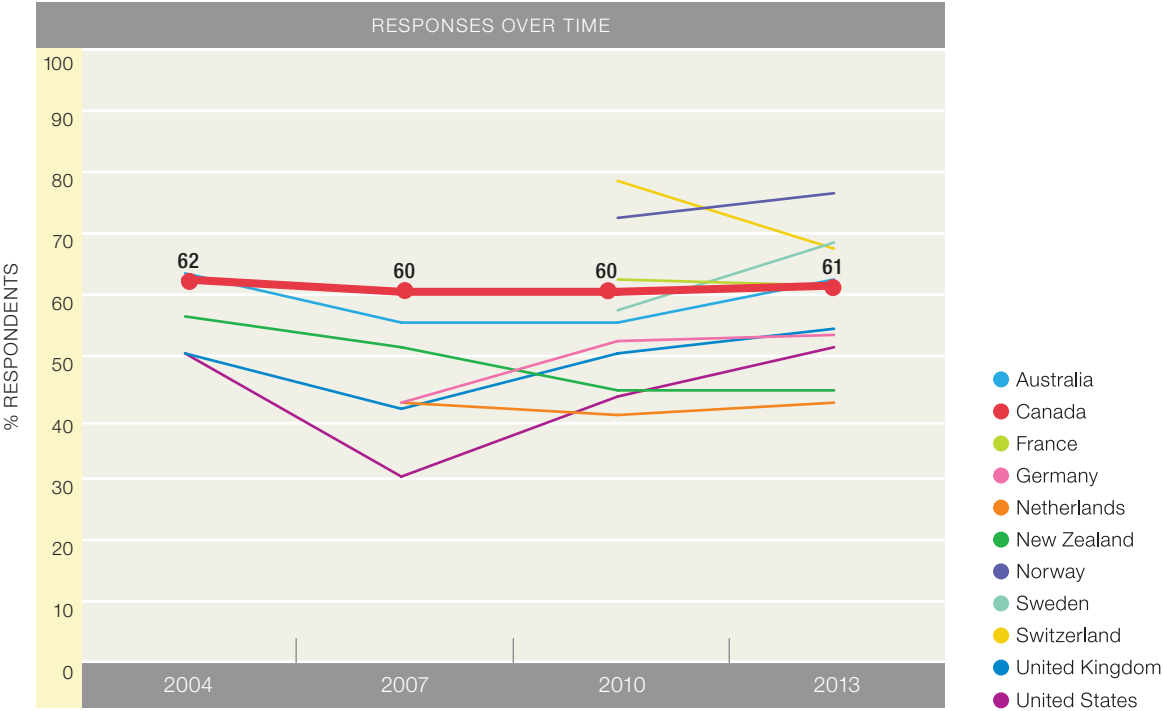
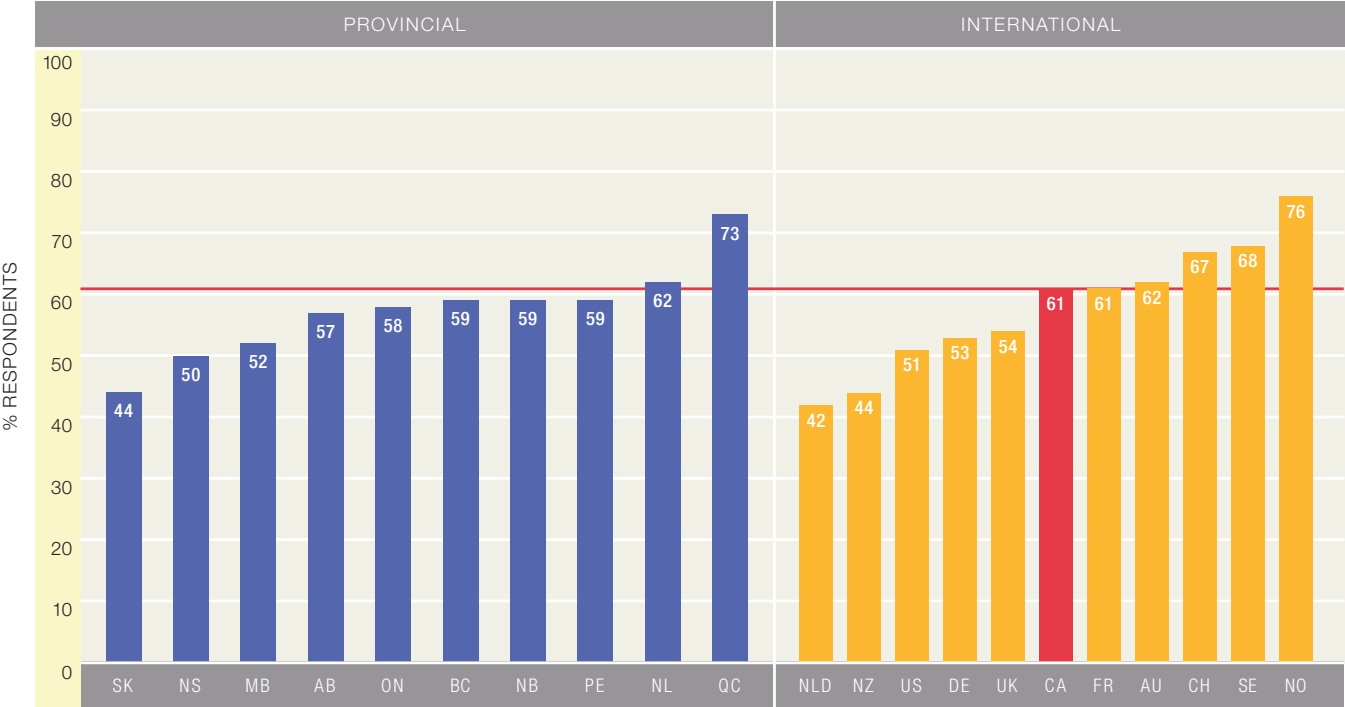


* Survey data not available for this year.

6.8 Reminders for preventive care are not routine in most provinces

Do you receive reminders to make an appointment for preventive care that you are due to receive — for example for a flu shot, cancer screening, or eye exam?

Response category presented: No



CONCLUSION

Patients' views and experiences are an important source of information about the quality of health care, one that a wide range of organizations — from clinics and hospitals to whole systems — are increasingly using to monitor and improve their performance. This bulletin provides a picture of Canada's performance at a national and an inter-provincial level across three broad themes: quality, safety, and prevention.

Where the data allow us to look back over the past decade, the big message for Canada is the lack of progress in many areas. Although Canadians have more confidence in the health care system, access to care has not substantially improved and patients are not reporting that their care is better integrated or more patient-centred. We still use hospital emergency departments for too much of our primary care. And we show largely disappointing performance compared to other high-income countries, some of which have made impressive progress.

The ability to compare data across populations, as we do in this bulletin, opens more windows to understanding our health care system. Comparative analysis helps to identify successful approaches and opportunities for improvement. The lesson here is that where you live does matter, even within Canada.

On a number of questions in this survey, the wide range of results across Canadian provinces mirrors the international variation. It could be argued that differences in the structure and organization of the health care systems among the 11 countries in the survey might account for some of this variation. What accounts for the large variation within Canada? This bulletin raises important questions, such as:

- Why do we have such wide variations in ED wait times, access to after-hours care, and reliance on hospitals for after-hours care? Are there important differences in family practice arrangements and ED management at play?
- Why are patients in some provinces much more likely than in others to experience well-coordinated care and to feel fully involved in decisions about their care?
- What factors contribute to the substantial differences in the affordability of care, including reliance on private health insurance across Canada? How would broader catastrophic drug coverage change the results?
- Why is the uptake of cancer screening programs two to three times higher in some provinces than in others?
- How are innovations in one province being spread to others?

The provinces and territories will need to dig deeper into these survey data and other sources to understand the reasons for the differences identified in this bulletin and consider what can be done to reduce inequities in health and health care for all Canadians.

APPENDIX

Summary of Canadian, provincial, and international responses

OVERALL VIEWS

Chart		Average of Canadian Results (%)	Range of Provincial Results (%)		Range of International Results (%)	
			Low	High	Low	High
1.1	I feel that on the whole the health care system in the country works pretty well and only minor changes are necessary to make it work better.	42	23	50	25	63
1.2	I am not very or not at all confident that I will be able to afford the care that I need if I become seriously ill.	24	11	32	N/A	N/A
1.3	I am not very or not at all confident that I can control and manage my health problems. (Asked of respondents with diabetes, heart disease, hypertension or high cholesterol)	9	7	16	7	26
1.4	I have received excellent or very good medical care from my regular doctor's practice or clinic in the past 12 months.	74	69	84	55	85

HEALTH STATUS

Chart		Average of Canadian Results (%)	Range of Provincial Results (%)		Range of International Results (%)	
			Low	High	Low	High
2.1	In general, I would describe my health as very good or excellent.	61	51	66	36	65
2.2	I have at least one chronic condition.	57	42	69	39	66
2.2	I have two or more chronic conditions.	31	22	44	19	43
	I have arthritis.	22	12	31	7	28
	I have asthma or chronic lung disease such as chronic bronchitis, emphysema or COPD.	13	8	18	6	17
	I have cancer.	6	4	11	2	8
	I have depression, anxiety or other mental health problems.	18	11	25	6	24
	I have diabetes.	9	7	12	6	12
	I have heart disease, including heart attack.	6	4	9	6	11
	I have hypertension or high blood pressure.	22	19	30	17	31
	I have high cholesterol.	20	16	33	12	29
2.3	I am taking at least one prescription medication on a regular or ongoing basis.	54	48	65	45	63
2.3	I am taking two or more prescription medications on a regular or ongoing basis.	36	31	45	30	44
2.4*	My health keeps me from working full-time or limits my ability to do housework or other daily activities.	17	10	24	12	25

* Data for this question are not presented as a chart in the report.

ACCESS TO CARE

Chart		Average of Canadian Results (%)	Range of Provincial Results (%)		Range of International Results (%)	
			Low	High	Low	High
3.1	I do not have a doctor or place of care where I usually go to for medical care.	7	3	15	2	13
3.2	It is very or somewhat difficult for me to get medical care in the evenings, on weekends, or holidays without going to the hospital emergency department.	62	56	76	31	65
3.3	When I call my doctor's office with a medical concern during regular practice hours, I always or often get an answer that same day.	67	56	75	63	90
3.4	Last time I was sick or needed medical attention, I was able to get an appointment to see a doctor or nurse on the same or next day.	41	31	46	41	76
3.5	The last time I went to the hospital emergency department, I waited 4 hours or more before being treated. (Asked of respondents who visited an ED in the past 2 years)	26	17	39	1	26
3.6	During the past 12 months, there was a time when I did not fill a prescription for medicine or skipped doses of my medicine because of the cost.	8	5	15	2	21
3.7	In addition to government funded health services, I have private health insurance that is paid for by me, my family, an employer, or an association.	61	55	72	N/A	N/A
3.8*	I had a medical problem but did not see a doctor because of the cost in the past 12 months.	5	2	7	2	28
3.9*	In the past 12 months, I skipped a medical test, treatment, or follow-up that was recommended by a doctor because of the cost.	6	4	9	2	22
3.10*	In the past year, I and/or my family have spent \$1,000 or more out-of-pocket for medical treatments or services that were not covered by medicare or private insurance.	14	9	20	2	41
3.11*	In the past year, I had serious problems paying or was unable to pay medical bills.	7	4	11	1	23
3.12*	In the past year, I skipped dental care or dental checkups because of the cost.	21	15	24	6	33
3.13*	The last time I went to the hospital emergency department it was for a condition that could have been treated by my regular doctor had they been available. (Asked of respondents who visited an ED in the past 2 years)	47	37	53	25	47
3.14*	My doctor's practice has told me that I can email them if I have a medical concern.	10	5	11	9	32
3.15*	In the last two years, I have emailed my doctor's practice with a medical question.	2	1	3	2	19
3.16*	I waited more than 4 weeks for an appointment with a specialist. (Asked of respondents who saw or needed to see a specialist in the past 2 years)	59	57	69	17	59
3.17*	I waited for 4 months or more for elective surgery. (Asked of respondents who needed elective surgery in the past 2 years)	18	16	28	2	22

*Data for this question are not presented as a chart in the report.

COORDINATION AND INTEGRATION OF CARE

Chart		Average of Canadian Results (%)	Range of Provincial Results (%)		Range of International Results (%)	
			Low	High	Low	High
4.1	In the past 2 years, when receiving care for a medical problem, I received conflicting information from different doctors or health care professionals.	16	9	20	7	21
4.2	My regular doctor or someone in my doctor's practice always or often helps coordinate or arrange the care I receive from other doctors and places.	78	68	91	58	78
4.3	My regular place of care makes my laboratory or other test results easily available for me to see — for example, by mail, email, or online.	38	29	49	N/A	N/A
4.4	The doctor or staff at the place where I usually get medical care did not seem informed and up-to-date about the care I had received in the hospital emergency department. (Asked of respondents who were treated in an ED in the past 2 years)	37	24	52	N/A	N/A
4.5	When I need care or treatment, my regular doctor or medical staff always knows important information about my medical history.	60	51	70	51	81
4.6	When I need treatment or care, my regular doctor or medical staff always spend enough time with me.	53	45	65	50	74
4.7	When I need care or treatment, my regular doctor or medical staff always involves me as much as I want to be in decisions about my care and treatment.	60	50	72	52	76
4.8*	My doctor always explains things in a way that is easy to understand.	67	59	73	60	81
4.9*	In the past 2 years, I have felt that my time was wasted because my care was poorly organized or poorly coordinated.	18	14	24	N/A	N/A
4.10*	Aside from a doctor, I do not have a nurse or other clinical staff who is regularly involved with my health care — for example, discussing test results, treatment plans or advising me on my health.	76	73	86	N/A	N/A
4.11*	In the past 2 years, test results or medical records were not available at the time of my appointment.	11	6	12	7	18
4.12*	In the past 2 years, I have experienced delays in being notified about abnormal test results.	9	7	10	3	11
4.13*	In the past 2 years, when I saw a specialist, they did not have basic medical information or test results from my regular doctor.	17	7	21	10	26
4.14*	In the past 2 years, after I saw a specialist, my regular doctor did not seem informed and up-to-date about the care I got from the specialist.	25	13	30	10	45
4.15*	When I left the hospital, the hospital made sure I had follow-up care with a doctor or other health care professional. (Asked of respondents who were hospitalized overnight in the past 2 years)	76	67	84	58	89
4.16*	Following hospitalization, my regular doctors did not seem informed and up-to-date about the care I received in the hospital. (Asked of respondents who were hospitalized overnight in the past 2 years)	17	12	29	13	29

* Data for this question are not presented as a chart in the report.

PATIENT SAFETY

Chart		Average of Canadian Results (%)	Range of Provincial Results (%)		Range of International Results (%)	
			Low	High	Low	High
5.1	When I left the hospital, no one discussed with me the purpose of taking each of my medications. (Asked of respondents who were hospitalized overnight in the past 2 years)	13	9	35	8	38
5.2	In the past 12 months, a doctor or pharmacist has not reviewed all my medications with me.	20	16	38	14	55
5.3	In the past 12 months, a doctor or pharmacist has not explained the potential side-effects of any medication that was prescribed.	21	17	33	21	61
5.4	In the past 12 months, a doctor or pharmacist has not given me a written list of all my prescribed medications.	29	24	43	23	81
5.5*	In the past 2 years, I have been given the wrong medication or wrong dose by a doctor, nurse, hospital or pharmacist.	6	4	9	3	8
5.6*	In the past 2 years, there was a time when I thought a medical mistake was made in my treatment or care.	10	5	14	4	15
5.7*	The doctor or health professional involved did tell me that a medical error had been made in my treatment. (Asked of respondents who answered "yes" to either of the preceding 2 questions)	25	14	43	12	52
5.8*	When I left the hospital, I did not receive written information on what to do when I returned home and what symptoms to watch for. (Asked of respondents who were hospitalized overnight in the past 2 years)	20	13	35	8	43

* Data for this question are not presented as a chart in the report.

PREVENTIVE CARE

Chart		Average of Canadian Results (%)	Range of Provincial Results (%)		Range of International Results (%)	
			Low	High	Low	High
6.1	During the past 2 years, neither my doctor nor other clinical staff at my place of care has talked to me about a healthy diet and healthy eating.	49	40	56	33	70
6.2	During the past 2 years, neither my doctor nor other clinical staff at my place of care has talked to me about exercise or physical activity.	46	41	54	30	61
6.3	I have not had a flu shot in the past year.	65	53	73	51	87
6.4	I have never had a Pap smear. (Asked of women age 18—70 years)	9	2	20	4	37
6.5	I have never had a mammogram or breast cancer screening. (Asked of women age 40—74 years)	22	12	34	5	40
6.6	I have never had a bowel or colon cancer screening. (Asked of respondents age 50 years or older)	36	23	49	24	71
6.7	I have never had my cholesterol checked.	20	17	26	13	33
6.8	I do not receive reminders to make an appointment for preventive care that I am due to receive — for example, for a flu shot, cancer screening, or eye exam.	61	44	73	42	76
6.9*	I smoke cigarettes every day.	16	11	21	9	24
6.10*	During the past 2 years, neither my doctor nor other clinical staff at my place of care has talked to me about the health risks of smoking and ways to quit.	31	24	41	14	55
6.11*	During the past 2 years, neither my doctor nor other clinical staff at my place of care has talked to me about alcohol use.	77	74	83	67	88
6.12*	I have not had my blood pressure checked by a doctor or nurse in the past year.	19	14	27	11	33

* Data for this question are not presented as a chart in the report.

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