

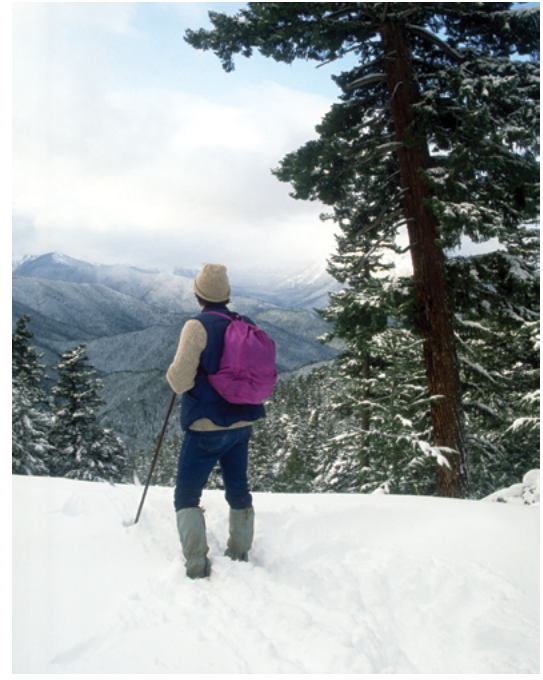
Health Care in Canada Survey 2005

A national survey of health care providers, managers, and the public

Results of the 2005 Health Care in Canada Survey highlight some significant challenges ahead for those managing, working and receiving health services in Canada. Canadians are divided on the appropriate role for private payment and private insurance in the Canadian health system. A slight majority of Canadians support paying out-of-pocket for service enhancements and allowing private insurance and payment for non-emergency services outside of the public system. Support drops when asked if they would like to pay out-of-pocket to purchase quicker access to services. There is strong support for requiring health professionals to work in teams and where most needed, with less support coming from physicians for such approaches. All groups favour increased funding and incentives for health research and for improved and more consistent access to new medicines. Public health measures are strongly supported – especially school-based wellness programs, tax measures on things such as alcohol and tobacco, and implementation of a national immunization strategy. Canadians have concerns about quality, safety, and access in the Canadian health system, including waiting times for surgical services, potential of errors while being treated in hospital, and preparedness for public health emergencies.

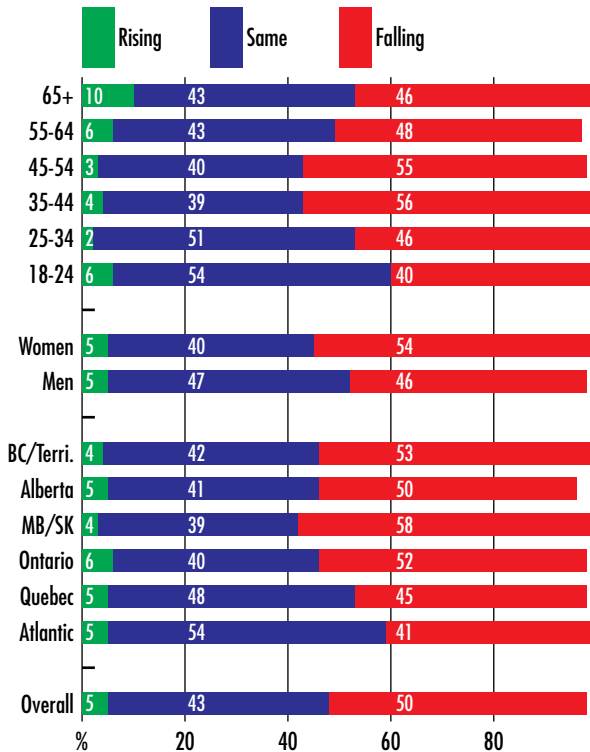
About the survey: This is the eighth annual comprehensive national survey of the public, doctors, nurses, pharmacists, managers and trustees. It is conducted by POLLARA Research. Survey partner organizations: Association of Canadian Academic Healthcare Organizations, Canadian Nurses Association, Canadian Medical Association, Canadian College of Health Service Executives, Canadian Healthcare Association, Canadian Home Care Association, Canadian Public Health Association, Health Charities Coalition of Canada, Canadian Pharmacists Association, Merck Frosst Canada Ltd., and Rogers Media. This year's survey results provides demographic breakdowns to allow examination of responses based on gender, location, and income. For full results, including Power-Point presentations, go to www.hcic-sssc.ca.

Methodology: Survey results are based on telephone interviews with nationally representative samples of 1,207 members of the Canadian public, 203 doctors, 201 nurses, 202 pharmacists, and 201 managers and trustees. Fielding of the core questionnaire was conducted between August 17 and September 2, 2005. Results for the public are considered to be accurate within plus or minus 2.8 per cent, 19 times out of 20, while the margin of error for results for the other groups is plus or minus 6.9 per cent, 19 times out of 20. Questionnaires were developed by POLLARA working in close consultation with the HCIC partners.

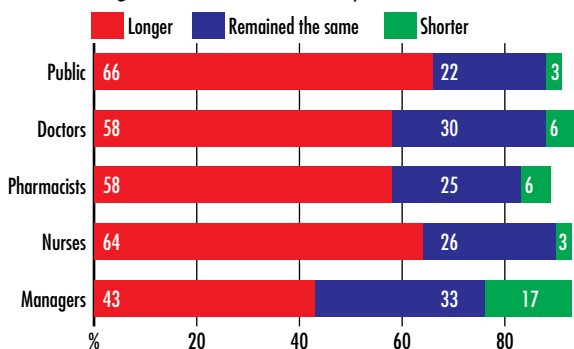


High-level results

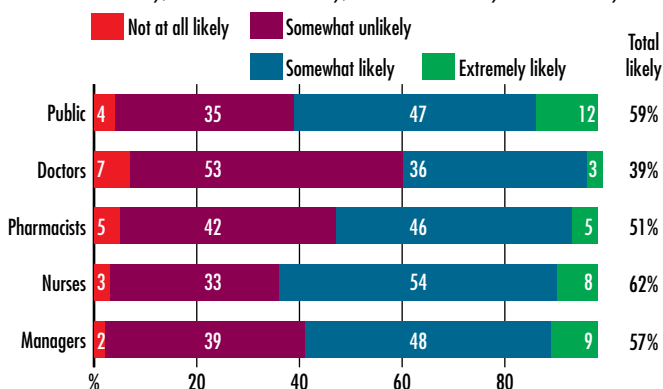
Overall, would you say that your confidence in the Canadian health system is rising or falling, or is it about the same as it ever was?



In the past 2 years, do you think that waiting times for elective surgery have become longer or shorter or have they remained the same?



How likely do you feel it is that someone might be subject to a serious medical error while being treated at a Canadian hospital? Would you say that it is not at all likely, somewhat unlikely, somewhat likely or extremely likely?



Overall confidence

- 50% of Canadians indicate they have **falling confidence in the system**. Confidence drops even further for women and for those between the ages of 35 and 55 (a middle-aged angst that is consistent through many of the survey results). The percentage of those saying they have falling confidence differs across the country, from a low of 41% in Atlantic to a high of 58% in Manitoba/Saskatchewan. Only 5% of Canadians say they have rising confidence in the system.

Private insurance and delivery

- 45% of those surveyed had heard of the **Supreme Court re: private health insurance** (55% of men and 37% of women). Of those who had heard of the ruling, 59% said they agreed with it (men 65%, women 49%).
- 45% of the public, 49% of nurses, 48% of managers, 72% of pharmacists, and 73% of physicians support the idea that Canadians should be **allowed to pay out of pocket to purchase faster access to health services** that are currently funded under the public system.
- When asked whether they would personally be **willing to pay out of pocket to purchase faster access to health services** that are currently funded under the public system, support came from 49% of the public, 60% of nurses, 63% of managers, 74% of physicians, and 76% of pharmacists.
- A majority of Canadians believe that **allowing expanded private insurance will create a two-tier health care system** (68%), lead to a **shortage of physicians in the public system** (61%), and **increase costs** (58%). But a majority also believe it would result in **shorter waiting times** (68%), provide **better access to health care** (59%), and **improve quality** (60%).
- 57% of Canadians believe **allowing the purchase of private insurance for health care services already covered under the public health system would have either no impact or a positive impact on the Canadian health system**. Other groups have a wide range of opinion, with 71% of physicians, 68% of pharmacists, 46% of nurses, and 43% of managers feeling that allowing private insurance purchase would have either no impact or a positive impact on the system.
- 57% of the public support allowing individuals to **pay out of pocket for service enhancements** beyond a basic service level (such as upgraded quality prosthetic joints).

Waiting times

- A majority of all groups except managers believe that **waiting times for elective surgery have become longer** in the past 2 years: 66% of the public, 64% of nurses, 58% of physicians, and 58% pharmacists. 43% of managers felt that waiting times had become longer. Few people feel waiting times have become shorter: those believing wait times have decreased range from 3% of the public to 17% of managers. Women (71%) are more likely than men (61%) to say waiting times have become longer.
- When looking at **perceptions of average waiting times for specific procedures**, the Canadian public believe that waiting times for **breast biopsies** are longer than health care providers believe they are: with 59% of the public, 45% of physicians, and 32% of managers expect it would take 3 weeks or more. 70% of the

public expect **emergency room** waits to take two hours or more, compared with 42% of nurses who believe that. By contrast, the public is more optimistic than health care providers when it comes to waiting time for **hip replacements**, with 58% saying they would expect to wait six months or more, compared with 77% of physicians and 69% of managers.

Public health measures

- The public perceive that **behavioral factors** such as eating habits and amount of stress have a high influence on the health of Canadians. They perceive that **genetic make-up, education level and income** have less of an influence. Canadians indicate strong support for initiatives to improve health and prevent illness and injury, such as physical education and healthy eating programs in schools, and police checkstop programs.
- When asked about **taxes as a healthy public policy measure** to encourage lower consumption, 41% of Canadians felt that taxes were too low on cigarettes, while only 18% felt they were too low on alcohol. 85% felt taxes were too high on gasoline.
- Canadians strongly support a **national immunization strategy**, with 64% indicating that ensuring the security of Canadian supply of vaccines for Canadians would be very important along with improved access to timely immunization programs. While citing control of vaccine prices as important in a national strategy, equally important was ensuring that regulatory and pricing systems encourage companies to conduct vaccine research
- 67% of Canadians believe **government should subsidize products like nicotine patches to help people quit smoking**. This is strongest among those 18–24, with 80% supporting subsidization, and drops to 59% for those over 65 years of age.

Safety in hospitals

- 59% of the public felt it was likely or very likely that someone might be subject to a **serious medical error** while being treated at a Canadian hospital. This compares with 39% of physicians, 51% of pharmacists, 62% of nurses, and 57% of managers.
- More women (66%) than men (51%) feel this is likely to occur.

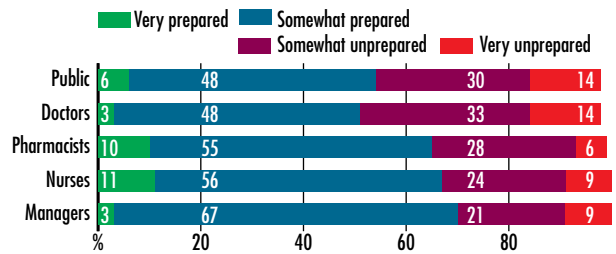
Emergency preparedness

- Few people (6%) feel we would be very prepared for a **public emergency situation**, like the SARS outbreak. 44% of the public, 47% of physicians, 34% of pharmacists, 33% of nurses, and 30% of managers feel we would be unprepared.
- Health providers are concerned a **situation like the SARS outbreak will occur again**: 81% of physicians, 85% of nurses, 60% of pharmacists, and 91% of managers are concerned. 40% of managers and 37% of nurses indicate they are “very concerned.”

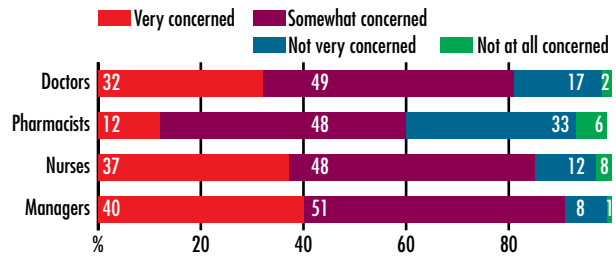
Pharmaceuticals and pharmacists

- Pharmacists are facing many issues: two of the priority concerns of the profession are **roles for pharmacists in primary health care teams** and **reimbursement for services other than dispensing medication**.
- 77% of the public, 95% of pharmacists, 77% of nurses, and 88% of managers believe that **pharmacists should have access to patients’ lab results and diagnostic tests** to verify that prescribed medication is most appropriate. Only 45% of physicians support this idea.
- Canadians believe that **all Canadians should have access to all needed medications** – 92% feel that government drug plans

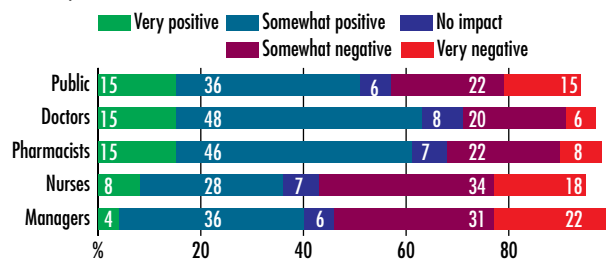
If we experienced a pandemic or public emergency situation, like the SARS outbreak for example, how prepared do you think the Canadian public health system would be to deal with it?



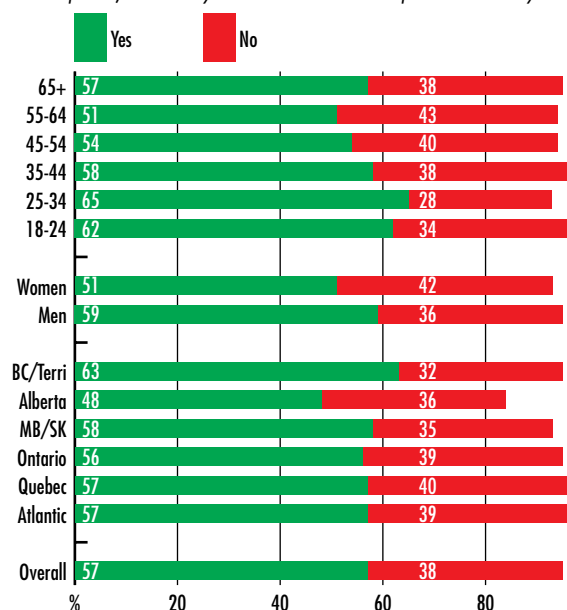
How concerned are you that this type of situation might occur again?



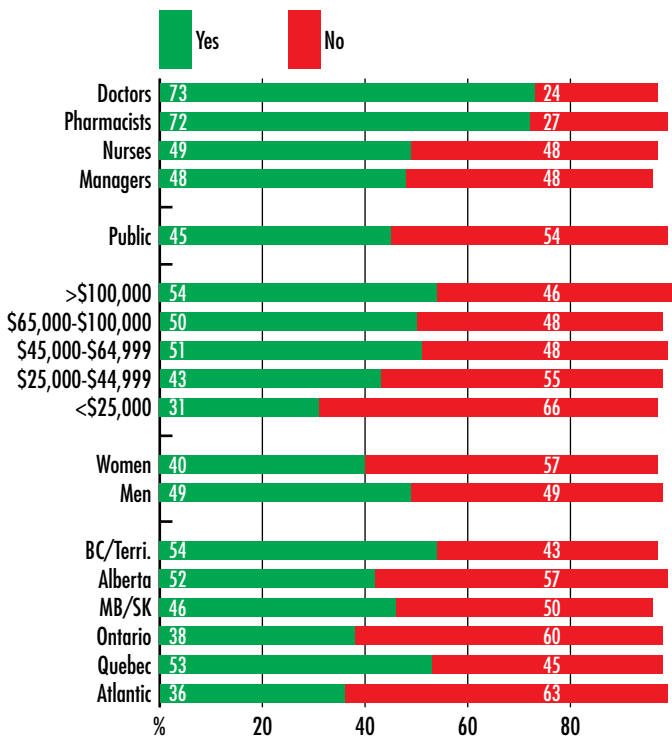
In your opinion, if Canadians were allowed to purchase private insurance for health care services already covered under the public health system, would the impact of the decision be very positive, somewhat positive, somewhat negative, very negative or would it have no impact on the Canadian health care system?



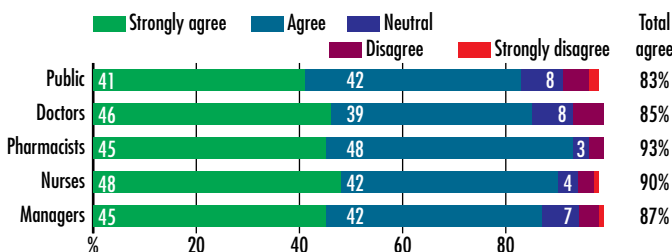
In July, Alberta proposed allowing individuals to pay out-of-pocket for service enhancements beyond a basic service level (such as upgraded quality prosthetic joints). Would you like to see this implemented in your province?



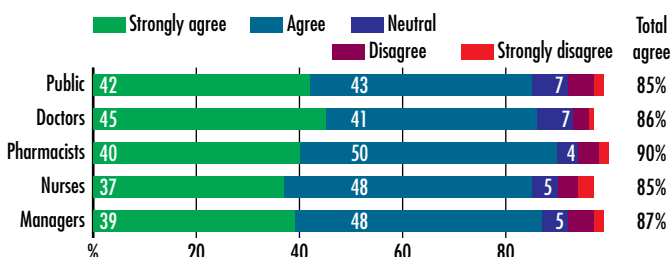
Do you think that Canadians should be allowed to pay out of pocket to purchase faster access to health services that are currently funded under the public system?



Health research can include research into medical treatments as well as the best ways to provide care and manage the health care system. Would you say that you strongly agree, agree, are neutral, disagree, or strongly disagree with the following statement: There should be increased public sector funding for health research, such as at universities, teaching hospitals and other not-for-profit organizations.



Health research can include research into medical treatments as well as the best ways to provide care and manage the health care system. Would you say that you strongly agree, agree, are neutral, disagree, or strongly disagree with the following statement: Incentives should be put in place to encourage more private sector investments in health research such as at universities, teaching hospitals and other charitable organizations.



should cover any medication that a patient and their doctor agree is the most effective treatment and 87% believe that if one province provides a drug, other provinces should automatically cover it as well.

- 84% of Canadians believe there should be a **maximum amount people should have to personally pay out of their own pocket** for drug costs. 80% of Canadians believe that people take **too many medications**, but 71% also believe there are many people who **should be taking medication regularly but are not**. 77% of Canadians believe that **prices for drugs have to be competitive** with the rest of the world to attract research and development (R&D) to Canada.
- About two thirds of physicians believe that **formulary restrictions** interfere with their ability to provide necessary care, and more than 80% consider whether a patient has **insurance coverage** when making prescribing choices.

Innovation and research

- The following initiatives were all supported by a majority of Canadians: developing more **home and community care programs** (81%); implementing **electronic patient records** (61%); increasing the use of **non-physician health providers** (55%); and allowing the government to **contract out the delivery of publicly covered services** to private clinics (55%).
- All groups supported requiring health professionals to **work in teams**: public (76%), pharmacists (88%), nurses (81%), managers (90%), and physicians (52%). Requiring health professionals to **work in parts of the country where they are most needed** was supported by 67% of the public, 56% of pharmacists, 50% of nurses, and 56% of managers. Only 27% of physicians supported this option.
- There continues to be very strong and growing support for **increased public sector funding for health research**, with backing from 83% of the public, 85% of physicians, 93% of pharmacists, 90% of nurses, and 87% of managers. There also continues to be growing support for incentives to encourage **more private sector investment in health research**: 85% of the public, 86% of physicians, 90% of pharmacists, 85% of nurses, and 87% of managers. As well, 84% to 90% of all groups indicate support for structuring regulatory and pricing systems to encourage research into and rapid development of new vaccines.

For full Health Care in Canada 2005 survey results, including PowerPoint presentations and demographic breakdowns, go to www.hcic-sssc.ca.

To what extent would you support or oppose requiring health professionals to work in teams with other types of health care providers?

