A number of readers have told me that the long-standing debate over home care is about to move out of the boardrooms and into the mainstream in this country. I think they are probably right.

For several years, home care has been positioned as one of the solutions to hospital cuts and overcrowding. The theory goes that if we could move recovering patients out of hospitals quicker, then we could reduce the amount of resources needed in hospitals, which are a reputedly more expensive type of care.

Yet this simple logic has never really taken wing with the public. Why is that? Some clues can be found in our annual national health surveys.

Canadians feel that it is important for patients to have access to the full continuum and range of care within the healthcare system. Based on a scale from 1 (not at all important) to 10 (very important), Canadians rate it as important to have each of a full range of services available. While emergency care (9.5) ranks as the most important service, other aspects of care such as inpatient hospital care (9.0), palliative care for long term illness (8.7), mental health care (8.6), illness prevention (8.6), home care (8.4), prescription medicines (8.3) and outpatient care (8.3) are all rated very highly.

No more than 10% of Canadians rate any of these services as unimportant, with the exception of wellness promotion.

For everyone involved in healthcare delivery, these numbers are inescapable. Hospital care, that is, the care you need when you are sick and need to be cured, is viewed as the top priority. This is precisely because the public believes it does not have the technical expertise to cure health problems that are acute in nature. They need a place to go when they have these problems, and the community hospital has been the place where Canadians have indulged in one-stop shopping for their acute care for many years.

At present, most Canadians view home care as an add-on, a very important add-on, but an add-on, nonetheless, to a healthcare system that they view as ailing, primarily in hospitals and professionals services.

The view that home care is a solution to the problem of hospital capacity within an integrated framework is beginning to gain some purchase with the public, but it has generated little traction. The top priority for Canadians in healthcare is making sure that hospital care, and more urgently, emergency care, is available for them when they might need it. Once this is taken care of, additional important priorities could also be addressed.

It is unlikely that this hierarchy of priorities would shift unless Canadians were to become convinced that in-home medical care were an equal or superior setting for curing acute illnesses or the problems associated with providing in-home care to chronic care patients were to become much more widespread than at present.

On the other hand, some 58% of Canadians tell us that they would prefer to recover from an illness or surgery in their home, compared to 36% who prefer to recover in a hospital. These Canadians believe the home environment is more comforting, and tend to view the professional home care services as equal or better to the quality of care received in hospitals.

What is more, a clear majority of Canadians (63%) view in-home medical care as less expensive than hospital care. This number ranges as high as 75% among Canadians aged 45-64, who have high rates of contact with home care providers.

And when it comes to quality, 58% of Canadians view the quality of in-home medical care as equal to, or better than, the
quality of hospital care. Just 27% perceive it to be worse, while some 15% say they just don’t know.

Meanwhile, there is an overwhelming consensus in place in Canada that government should pay for home care as part of the universal healthcare plan. Fully 80% say the government should pay for in-home medical care, while just 11% say it should not. What is more, three-quarters (75%) say that if government were to start helping to pay for in-home medical care, everybody who requires in-home medical care should be covered, regardless of whether they have private insurance. Just 22% think government should limit its role to the currently uninsured.

That being said, at present, while Canadians believe that medicare should cover 100% of the people needing in-home medical care, they do not believe that medicare should cover 100% of the costs of different elements in the continuum of home care.

On average, Canadians believe that coverage under medicare should extend to:

- Costs of home visits by nurses to carry out medical procedures (81%);
- Costs of pharmaceutical medications taken by chronic care patients at home (78%);
- Home visits by doctors (77%);
- Costs of pharmaceutical medications taken by patients at home while recovering from short-term illnesses (70%);
- Costs of visits for grooming and personal care (46%).

But confidence in the ability of governments to manage both home care and the healthcare system in the future is not high. In fact, at best, it can be said that Canadians have adopted a wait-and-see attitude about both.

The home care debate is indeed maturing in Canadian public opinion. As problems in emergency and acute care settings are dealt with, the public will begin to demand increased attention to issues such as home care, not at the expense of hospitals, but as part of an integrated continuum of care that can improve the health outcomes of hospital patients.

The findings are from elements of POLLARA’s annual Health Care in Canada study and are based on a national telephone survey of 1,200 adult Canadians. Overall results are accurate to within plus or minus 2.9%, nineteen times out twenty.

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**NEXT QUARTER: The Challenges and Responsibilities of Social Marketing in the Hospital Sector**

This information is provided with the kind permission of the Ontario Hospital Association (OHA). The OHA subscribes to POLLARA consumer research to provide its members with a snapshot of public concerns with the healthcare system and the hospital sector.