

Where You Live Matters: Report Shows Canadians' Healthcare Experiences Differ

The Health Council of Canada has released results from the 2013 Commonwealth Fund International Health Policy Survey of the General Public. *Where You Live Matters: Canadian Views on Health Care Quality* is the eighth and final bulletin in the *Canadian Health Care Matters* series.

The report focuses on differences across the 10 provinces, comparisons among the 11 OECD countries that participated in the survey and changes in Canada's performance over the past decade. These results show that where a person lives does matter. Canada shows largely disappointing performance compared to other high-income countries, some of which have made impressive progress. Also, there is considerable variation among provinces.

Survey results show that Canadians' views about the healthcare system have grown more positive in the last decade, and more than half (61%) rate their health status as very good or excellent, putting Canada among the top three of the 11 countries surveyed. However, there remain large and concerning variations in patients' experiences in terms of access to care, coordination and integration of care, patient safety and preventive care.

Among the major areas of concern for Canadians are cost and access to care. About one-quarter of Canadians are concerned they would not be able to afford needed care if they became seriously ill. In addition, between 3% and 15% of Canadians do not have a regular doctor or clinic where they go for care. Accessing medical care after hours (without going to the emergency department) is difficult for 62% of Canadians (up to 73% in Newfoundland and Labrador).

The report also found that wait times remain a concern for Canadians, as only 31 to 46% of Canadians, depending on the province, can get a same-day or next-day appointment when needed (excluding emergency department visits). Canada is in last place among all countries surveyed in this regard, with no improvement since 2004.

In addition, screening activities vary across provinces. Between 12 to 34% of women aged 40 to 74 state they have never been screened for breast cancer. Also, 23 to 49% of Canadians aged 50 or older state they have never had a test to screen for bowel or colon cancer. "These provincial variations and complexities surrounding

screening are the focus of an upcoming report on screening from the Health Council to be released in February," explains Dr. Mark Dobrow, Director, Analysis and Reporting, Health Council of Canada.

Preventive care appears to remain a low priority, as up to 73% of Canadians did not get a seasonal preventive flu shot last year. Also, about half of Canadians surveyed said they have not had a doctor or other clinic staff talk with them about healthy eating or exercise in the past two years, and 76% have not talked about alcohol use.

To read the full report, visit <http://healthcouncilcanada.ca/bulletin8>.

ICN and IHTSDO Partner to Provide a New Informatics Resource for Nurses

The International Council of Nurses (ICN) and the International Health Terminology Standards Development Organisation (IHTSDO) have announced an equivalency table between the International Classification for Nursing Practice (ICNP) concepts and SNOMED CT concepts. The table contains ICNP Diagnosis and Outcomes Statements that have semantic equivalencies with SNOMED CT concepts.

ICNP is an international standard that facilitates the description and comparison of nursing practice locally, regionally, nationally and internationally. The ICNP terminology serves a critical role for ICN in facilitating representation of the domain of nursing practice worldwide to promote evidence-based, high-quality care. ICNP provides nurses with content solutions for electronic health records (EHRs) at all levels to support data-based information for use in practice, administration, education and research. SNOMED CT, a multidisciplinary international healthcare terminology, is designed to support the entry and retrieval of clinical concepts in electronic record systems and the safe, accurate and effective exchange of health information.

This new product advances the collaboration on terminology development agreed between ICN and IHTSDO in their 2010 harmonization agreement by allowing ICN to make the equivalency table available through its website at the ICNP download page (www.icn.ch/icnp-download-redirect.html). Although this table is not formally endorsed by IHTSDO, persons interested in using it should review the terms of the SNOMED CT Affiliate Licence before downloading (www.ihtsdo.org/licence.pdf).

The product can be a useful resource to nurses

and healthcare facilities interested in using SNOMED CT for documentation in EHRs and using ICNP to help identify clinically relevant content for use in documentation of nursing care.

A Quintuple Honour for Accreditation Canada

Accreditation Canada is celebrating its fifth consecutive year as one of the Top 25 Employers in the National Capital Region, an annual competition organized by the editors of Canada's Top 100 Employers. This year marks a decade recognizing Ottawa-area employers that lead their industries in offering exceptional places to work.

Employers are evaluated by the editors of Canada's Top 100 Employers using the same criteria as the national competition, including work and social atmosphere, benefits, training and skills development, employee communications and community involvement.

Accreditation Canada is an independent, not-for-profit organization that accredits health organizations in Canada and around the world. Its comprehensive accreditation program uses evidence-based standards and a rigorous peer review process to foster ongoing quality improvement. Accreditation Canada has been helping organizations improve healthcare quality and patient safety for more than 55 years.

Northern European Countries Learn from Canada's Strategies to Attract Health Professionals to Underserved Areas

Recruiting and retaining healthcare professionals for rural and remote communities is an ongoing challenge in many parts of the world. In January, Canada's Northern Ontario School of Medicine (NOSM) in Thunder Bay, Ontario hosted an international conference aimed at sharing strategies for attracting healthcare professionals and other public sector workers to underserved areas.

The Canadian Recruit and Retain Conference brought together international delegates from several northern European countries to discuss best practices for ensuring that people living in remote communities benefit from high-quality healthcare. The conference was part of the Recruit and Retain project funded by the European Union, of which NOSM is the only non-European partner.

NOSM's inclusion in the Recruit and Retain project stems from its social accountability mandate responding to the healthcare needs of rural and remote communities in Northern

Ontario. Since it opened in 2005, NOSM's made-in-the-North solution has garnered international recognition for its unique and effective model. In a very short time, NOSM has become a world leader in community-engaged medical education and research, while staying true to its social accountability mandate of contributing to improving the health of the people and communities of Northern Ontario.

Conference participants include policy makers, educators and health professionals from across Europe and Canada, including representation from the Canadian Foundation for Healthcare Improvement's (CFHI) Northern, Rural or Remote Pan-Provincial Collaboration, who will share how the collaboration is uniting regions across five provinces to address common healthcare challenges.

The other participating countries are Sweden, Norway, Iceland, Greenland, Scotland, Northern Ireland and the Republic of Ireland.

Newfoundland Launches New Component of Electronic Health Record

Development of Newfoundland's electronic health record, HEALTHe NL, continues to progress with the addition of the HEALTHe NL Viewer. The viewer is a portal that provides authorized healthcare professionals with a single point of access to view patient information at the point of care.

The HEALTHe NL Viewer is the next milestone in provincial electronic health record development. The viewer provides healthcare professionals with access to medication profiles available through the Pharmacy Network. Over time, it will include other relevant clinical information including lab results, diagnostic images and select clinical records. Like other components of HEALTHe NL, the viewer provides healthcare professionals with more comprehensive patient information when and where it is needed.

Quick Facts

- Approximately \$18 million has been allocated in 2013–14 towards the ongoing implementation of the province's electronic health record, HEALTHe NL.
- Newfoundland and Labrador is positioned to be among the first three provinces to establish an electronic health record that captures health information from multiple sources.
- Five components of the electronic health record have been implemented. These components include the Picture Archiving

and Communications Systems (PACS), which provides the ability to review diagnostic images remotely; a Client Registry to help link patient data; a Provider Registry; the Pharmacy Network, providing more comprehensive access to patient medication information; and now, the HEALTHe NL Viewer.

Expanding Life-Saving Care for Stroke Victims

Stroke victims across Ontario can now benefit from life-saving, emergency care through eHealth Ontario's Emergency Neuro Image Transfer System. Through a partnership between the Ontario Telemedicine Network and eHealth Ontario, the Emergency Neuro Image Transfer System – currently used for head trauma victims – is expanding to provide 24/7 access to expert care for stroke patients.

Doctors in acute care hospitals across the province, regardless of size or location, now have the capability to hold virtual consultations and get expert advice from the Ontario Telemedicine Network's neuro-specialists. The system allows them to share brain images, such as MRIs and CT scans, electronically to determine the best course of treatment.

This enhancement will help doctors make faster diagnoses, such as determining whether a patient is a candidate for the clot-busting drug tPA, which is effective if administered shortly after a stroke. It will also help physicians determine whether patient transfers to specialized urban hospitals are necessary, helping to get better value for health dollars.

Improving access to life-saving emergency care for stroke victims is part of Ontario's Action Plan for Health Care to provide the right care, at the right time, in the right place. This supports the government's economic plan to invest in people, build modern infrastructure and support a dynamic and innovative business climate.

Quick Facts

- Ontario's Emergency Neuro Image Transfer System has been used since 2009 for head trauma victims, and has already proven to help provide more accurate and faster patient care.
- Sixteen thousand people will experience a stroke in Ontario each year, at a cost of nearly \$1 billion to the economy in medical and indirect costs.
- All 97 acute care hospitals in Ontario are live with the Emergency Neuro Image Transfer System.

- Today, two out of three Ontarians are covered by an electronic health record (EHR), and seven out of 10 family physicians use EHRs in their practice.

Nipissing University Educator Recognized for Leadership in Digital Health

The Canadian Association of Schools of Nursing (CASN) and Canada Health Infoway (Infoway) awarded Dr. Aroha Page, associate professor, Nipissing University, with the 2013 Nursing Faculty E-Health Award. Through her role as a leader, teacher, mentor and advocate, Dr. Page is advancing e-health competence in her students at all levels. Her curriculum links e-health within nursing's practice framework and includes students developing a knowledge translation website.

The Nursing Faculty E-Health Award is an important component of the CASN and Infoway Nurses in Training project, aimed at improving graduates' preparedness for work in technology-enabled environments by integrating digital health into nursing curricula on a pan-Canadian level for the first time. The project currently involves educators and students at 91 nursing degree-granting colleges and universities across Canada.

Manitoba Announces Access to Improved Cancer Screening

New testing procedures to help identify patients at greater risk for inherited colon and other types of cancers are now in place, including testing for Lynch syndrome, a disorder that significantly increases the risk of developing cancer. All colorectal cancer surgery patients aged 70 years and under will receive testing for Lynch syndrome. As a result of this testing, patients will have access to increased cancer surveillance, a practice that could lead to earlier detection and improved cancer survival rates.

Immediate family members of affected patients will also benefit from this new testing, as it will help to identify their risk of developing cancers and allow them to consider early detection and prevention measures, said Minister of Health Erin Selby. Manitoba's cancer strategy highlights the importance of genetic testing in early diagnosis, as this type of screening can help oncologists tailor treatment for patients to provide the most effective form of chemotherapy, she added.

Diagnostic Services Manitoba (DSM), the organization responsible for Manitoba's public laboratory and rural diagnostic imaging services, is now offering these new tests. Genetic testing for breast cancer is also available, and further expansion of genetic screening for other forms of cancer, such as melanomas and lung cancer, is being explored.

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**New Agreement Allows Alberta Pharmacies to Offer More Services**

The Alberta government is ensuring that Albertans can access additional healthcare services – such as customized medication assessments, tobacco cessation counselling and new medication management tools for diabetics – at their local pharmacies.

Alberta's 1,049 licensed pharmacies are now able to offer a broader scope of services, increasing Albertans' access to healthcare. This initiative is supported by a new four-year agreement signed by the Alberta Pharmacists' Association, Alberta Blue Cross and the Alberta government to support the expanding role of pharmacists in communities across Alberta.

The agreement also includes four years of predictable funding for pharmacists, transparency of prescription pricing, changes to dispensing fees and an updated pharmacy services framework that compensates pharmacists for the increased primary healthcare services they provide to Albertans.

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