

Canadian Primary Health Care Human Resource Policy: solutions without implementation



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Michael M. Rachlis MD MSc FRCPC LLD www.michaelrachlis.ca

Outline

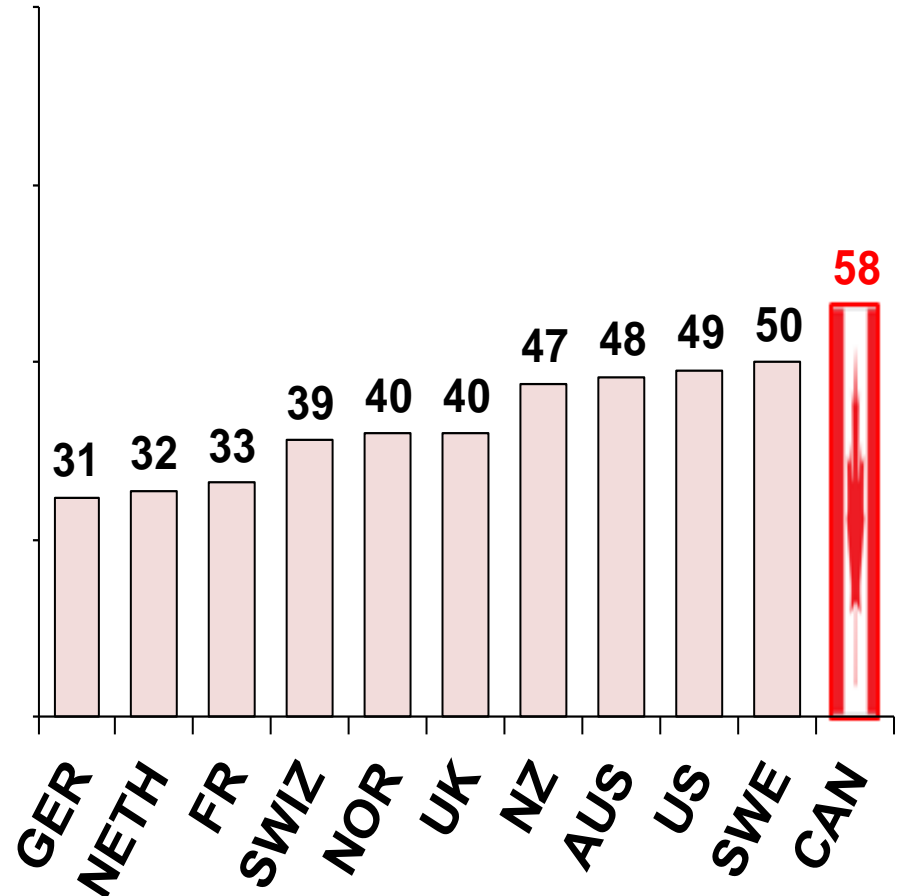
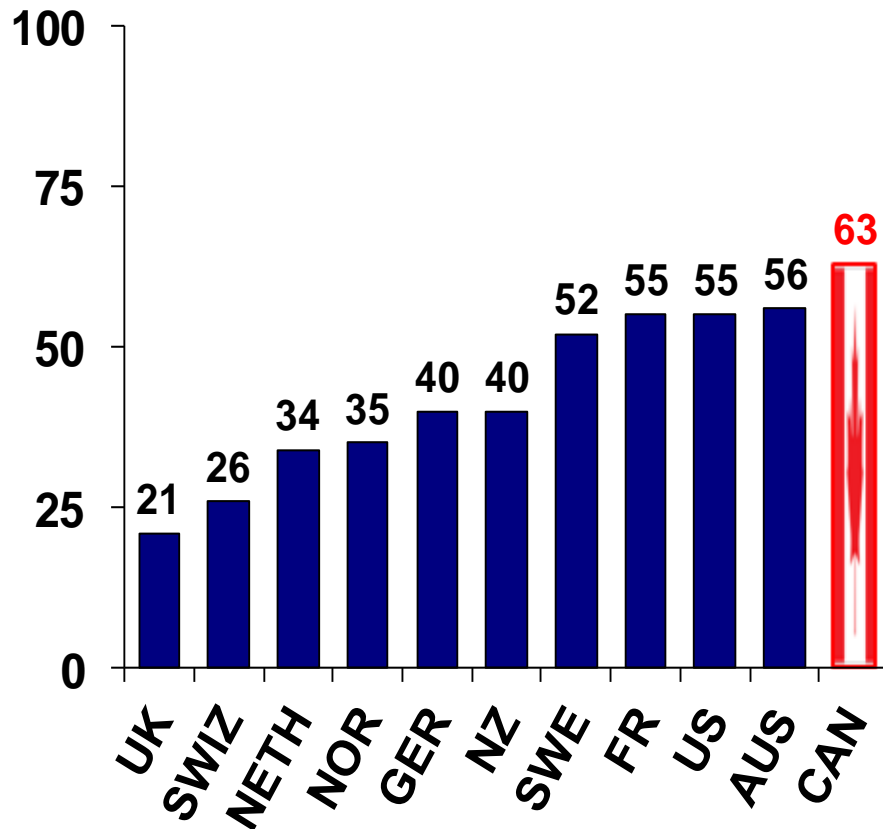
- Modern ideas about health care delivery make a mockery of previous and current PHC HHR planning
- Canadian PHC HHR planning is tough, for very good reasons
- We need to better understand our policy environment so we can move the key issues to where they can be addressed

After-Hours Care and Emergency Room Use

Difficulty getting after-hours care without going to the emergency room

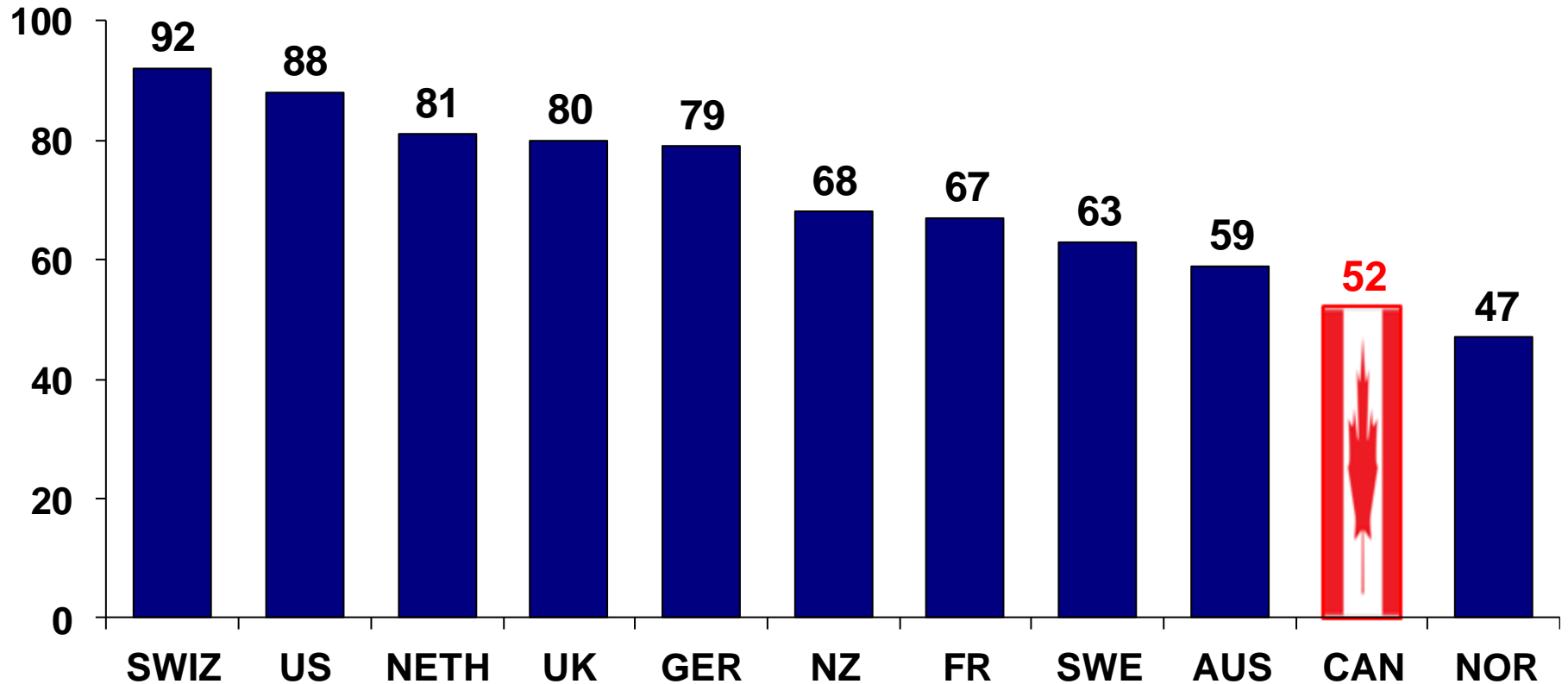
Used emergency room in past two years

Percent



Waited Less Than a Month to See Specialist

Percent



Base: Saw or needed to see a specialist in the past two years.

Source: 2011 Commonwealth Fund International Health Policy Survey of Sicker Adults in Eleven Countries.

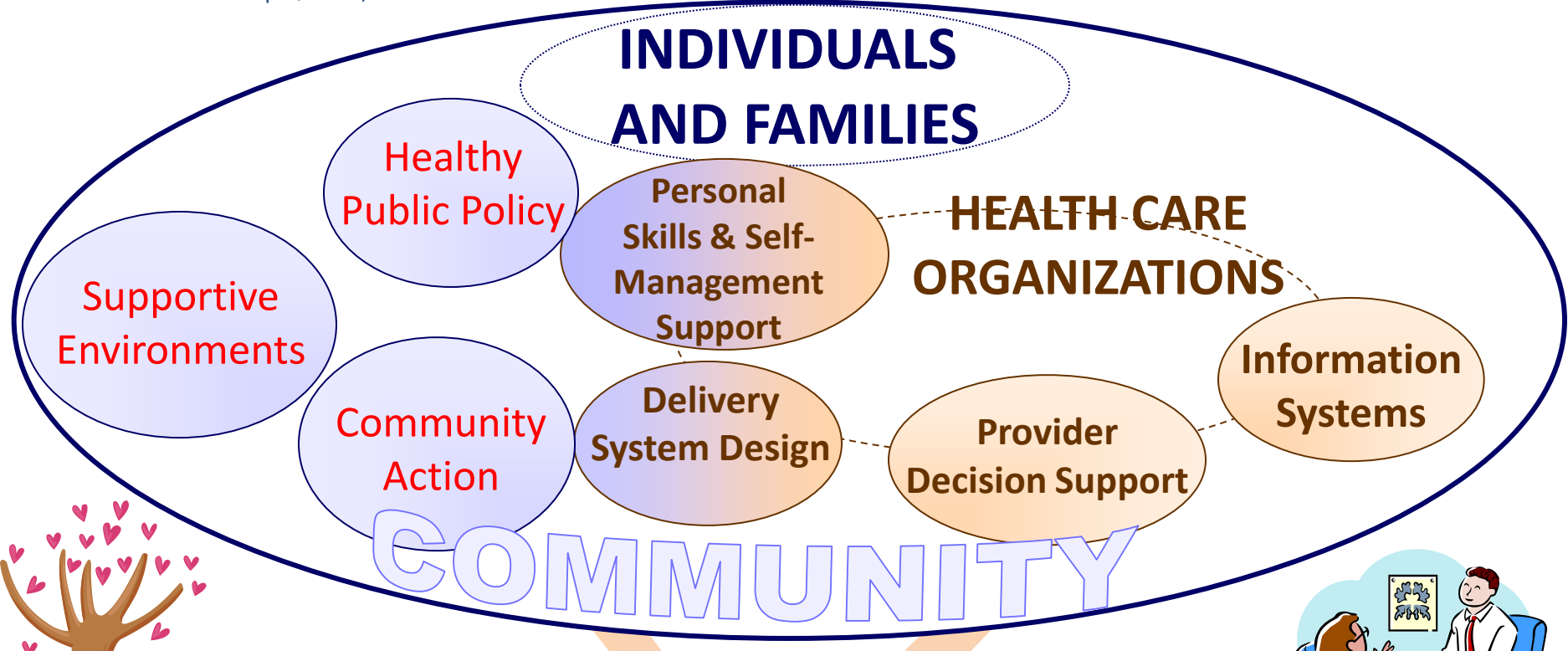
Spine surgeons in Ontario: A wasted precious resource

- Only 10% of patients referred to a spine surgeon actually need surgery
- \$24 million in unnecessary MRI scans

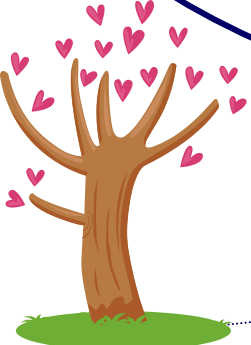
Improving access is easy! With current resources Canadians could:

- Have elective surgery within two months
- Have elective specialty input within one week
- Have same day access to our regular family doctor or someone on the doctor's team
- Get better access to the system through community health workers

Based on VJ Barr et al Hosp Q. 2003;7:73-82.



Productive interactions and relationships



Activated communities & prepared, proactive Community partners



Informed, activated individuals & families



Prepared, proactive Practice teams



Improved clinical, functional and population health outcomes

This means re-engineering and re-designing our processes of care



HHR deployment would look different if PHC delivery incorporated these new ideas

- More use of other professionals and non-professionals such as home care aides and lay community health workers
- Physicians work days would be very different
 - Much more time spent supporting and coaching other providers
 - More face time with complex patients

Canadian HHR planning is tough, for very good reasons

- Canada is a federation not a unified state
- Only 24 of the world's 193 countries have federal political systems. However, their citizens make up 40 per cent of the world's population.
 - Few are as decentralized as Canada
- Health care is a provincial responsibility
- The federal government has gradually withdrawn from health care even though they pay for care for more people than do six provinces

Canadian HHR planning is tough, for very good reasons

- At the (provincial) health care delivery level, reform has been agonizingly slow
- We are inured to inefficient delivery models based upon outdated processes which are mainly related to continued medical dominance in health policy decisions
- The political notion of medical dominance may have changed but the institutions and decision-making processes are resistant to change

Summary:

- Modern ideas about health care delivery make a mockery of previous and current HHR planning
- HHR deployment would look very different if health care delivery incorporated these concepts
- Canadian HHR planning is tough, for very good reasons
- We need an enhanced democracy to reform our health care system



**Courage my
Friends, it is
Not Too Late to
Make a Better
World!**

Tommy Douglas
(paraphrasing Tennyson)