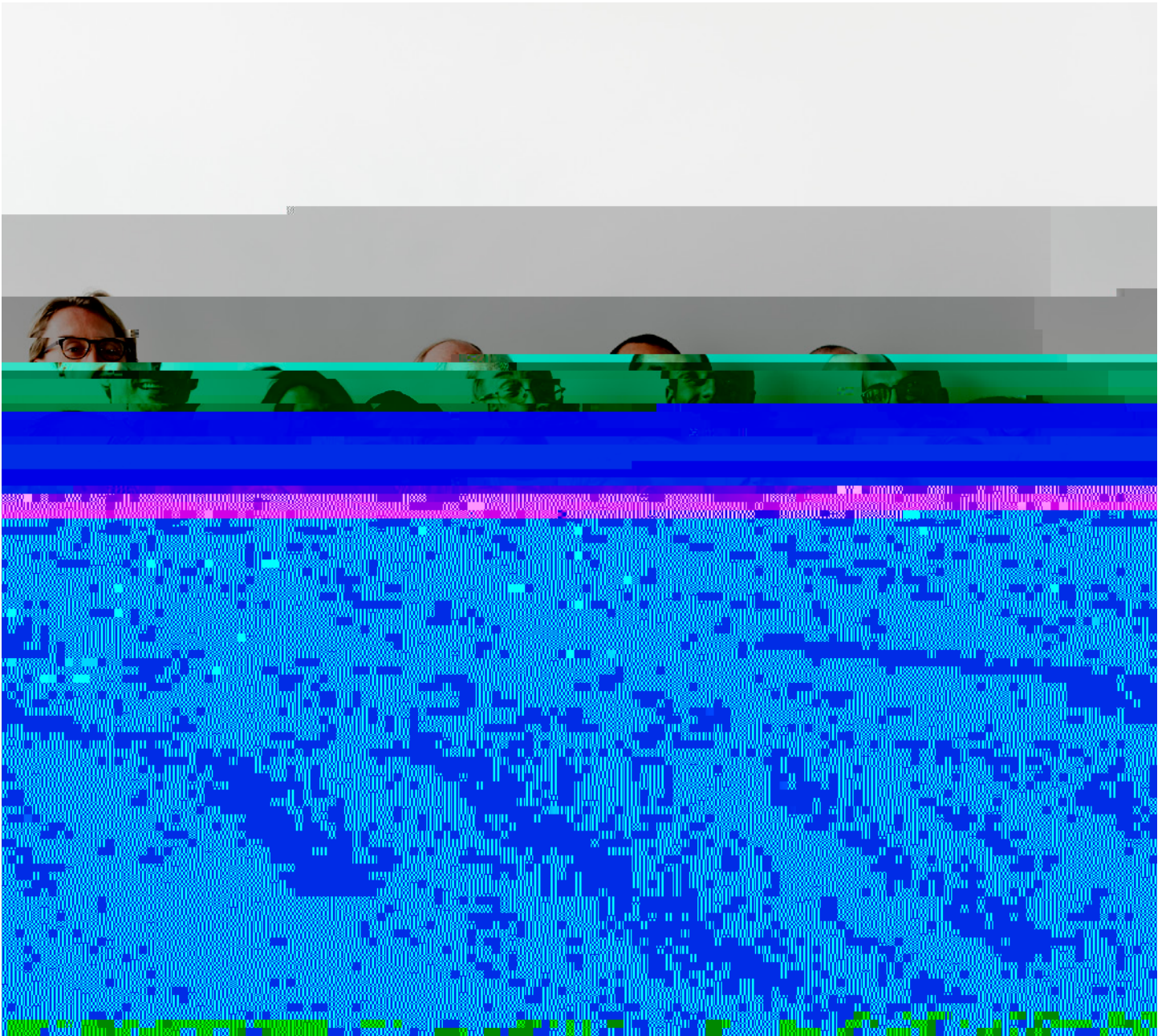




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For permission or information, please contact CIHI:

Ottawa, Ontario K2A6H6 Canadian Institute for Health Information
255 contact CIHI:

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Executive summary

Delivering care that is centred around the patient is a health care goal in Canada and many

Timely Access to Care

Canada continues to perform below the international average for timely access to patient care. Most Canadians (93%) have a regular doctor or place of care, but they generally report longer wait times for medical care than adults in comparable countries. One possible reason for longer waits here is that Canadians consult with physicians more often than people in other countries.

- Only 43% of Canadians report that they were able to get a same- or next-day appointment at their regular place of care the last time they needed medical attention — the lowest percentage of all countries.
- Only 34% of Canadians report that they could get care on evenings or weekends without going to an emergency department. However, after-hours access is closer to the international average (43%) in some provinces (Ontario and Alberta).
- Canadian patients are generally not seeing improvements in timely

About this report

The 2016 edition of The Commonwealth Fund International Health Policy Survey focused on the views and experiences of the general population (age 18 and older) in 11 developed countries. This report highlights the Canadian story and examines how these experiences vary across Canada relative to comparator countries and how they are changing over time.

To provide additional context, this report also references information from the Canadian Institute for Health Information (CIHI) and other sources. Please see the References section at the end of this document.

Timely Access to Care

Most Canadians (93%) have a regular doctor or place of care, but they have trouble accessing their health care system in a timely manner.

Same- or next-day appointments are difficult to get in Canadaⁱ

Last time you were sick or needed medical attention, how quickly could you get a same- or next-day appointment to see a doctor or a nurse? Country results from



Table 3 Access to after-hours care, trend over time

Communication with doctors not as easy in Canada

59% of Canadians often or always receive an answer the same day when they contact their regular doctor's office with a medical concern.

Very/somewhat easy to get medical care in the evenings, on weekends or on holidays without going to the hospital emergency department: Province results from east to west

Newfoundland and Labrador, 16% (below average); Prince Edward Island, 25% (below average); Nova Scotia, 26% (below average); New Brunswick, 35% (below average); Quebec, 27% (below average); Ontario, 40% (same as average); Manitoba, 34% (below average); Saskatchewan, 32% (below average); Alberta, 42% (same as average); British Columbia, 27% (below average); Canada, 34% (below average); Commonwealth Fund average, 43%

Always/often receive an answer the same day when they contact their regular doctor's office with a medical concern: Province results from east to west

Newfoundland and Labrador, 61% (below average); Prince Edward Island, 70% (same as average); Nova Scotia, 64% (same as average); New Brunswick, 50% (below average); Quebec, 54% (below average); Ontario, 62% (below average); Manitoba, 57% (below average); Saskatchewan, 51% (below average); Alberta, 58% (below average); British Columbia, 64% (same as average); Canada, 59% (below average); Commonwealth Fund average, 72%

Canadians report more timely access to mental health care than those in other countries

1 in 4 surveyed Canadians say they experienced emotional distress, such as anxiety or great sadness, in the past 2 years, which they found difficult to cope with by themselves (below average).

More Canadians — 59% — who experienced emotional distress were able to get professional help when they needed it (above average compared with the international average of 54%).

Canadians are high users of emergency departments

Adults who used an emergency department in the past 2 years: Country results from highest to lowest

Canada, 41% (below average); Sweden, 37%; United States, 35%; France, 33%; Switzerland, 30%; Commonwealth Fund average, 27%; Norway, 26%; United Kingdom, 24%; New Zealand, 23%; Australia, 22%; Netherlands, 20%; Germany, 11%

Table 7 Used emergency department in past 2 years, trend over time

Country	2010	2013	2016
Canada	44%	40%	41%
Commonwealth Fund average	30%	29%	27%

The trend over time is fairly stable for Canada.

Many Canadians use EDs because they can't get appointment with regular doctor

The last time you went to the hospital emergency department, was it for a condition that you thought could have been treated by the doctors or staff at the place where you usually get medical care if they had been available? Country results from highest to lowest

United States, 47%; Germany, 42%; Canada, 41% (below average); Norway, 40%; Commonwealth Fund average, 34%; Netherlands, 33%; Sweden, 32%; New Zealand, 31%; Switzerland, 30%; United Kingdom, 29%; Australia, 28%; France, 20%

How do the experiences of urban and rural Canadians compare?

Urban Canadians, 37%; rural Canadians, 56%

Did you know?

In rural Canada, the ED may be the only place to receive treatments that are performed in family practice settings in urban areas.⁷

Potentially avoidable use of ED improving slightly in Canada

The last time you went to the hospital emergency department, was it for a condition that you thought could have been treated by the doctors or staff at the place where you usually get medical care if they had been available?

Canada wait time breakdown

Wait times for specialists are longest in Canada and not improving

Patients who waited 4 weeks or longer to see a specialist, after they were advised or decided to see one in the last 2 years: Country results from highest to lowest

Canada, 56% (below average); Norway, 52%; New Zealand, 44%; Sweden, 42%; United Kingdom, 37%; Commonwealth Fund average, 36%; France, 36%; Australia, 35%; Germany, 25%; United States, 24%; Netherlands, 23%; Switzerland, 22%

Table 9 Wait time for specialist, trend over time

Country	2010		

Wait times are longer than average in Canada for all elective surgeries

Patients who waited 4 months or longer for elective surgery in last 2 years: Country results from highest to lowest

Canada, 18% (below average); New Zealand, 15%; Norway, 15%; United Kingdom, 12%; Sweden, 12%; Commonwealth Fund average, 9%; Australia, 8%; Switzerland, 6%; Netherlands, 4%; United States, 3%; France, 2%; Germany, 0%

Median wait times in days for priority procedures in 2014

Cataract surgery: Canada, 48 days; Commonwealth Fund average, 73 days

Hip replacement: Canada, 87 days; Commonwealth Fund average, 100 days

Knee replacement: Canada, 98 days; Commonwealth Fund average, 126 days

Note: The Commonwealth Fund average median wait time is calculated using the following countries: Australia, Canada, New Zealand, Norway and the United Kingdom.

Table 10 People who report always or usually worrying about having enough money to pay rent or the mortgage, by age group

Age group	Canada	Commonwealth Fund average
18–24	10%	9%
25–34	17%	10%
35–49	15%	10%
50–64	11%	9%
65+	7%	6%

Younger Canadians (25 to 34) worry more often about money for rent or the mortgage than those in other age groups.

Food insecurity is a challenge for younger Canadians

Table 11 People who report always or often worrying about having enough money to buy nutritious meals, by age group

Age group	Canada	Commonwealth Fund average
18–24	7%	8%
25–34	17%	9%
35–49	14%	8%
50–64	12%	8%
65+	9%	6%

Few Canadians face cost barriers to care covered under *Canada Health Act*

**Within last year, had a medical problem but did not visit a doctor because of the cost:
Country results from highest to lowest**

United States, 22%; Switzerland, 16%; New Zealand, 14%; Australia, 9%; France, 9%;
Commonwealth Fund average, 9%; Canada, 6% (above average); Norway, 5%;
United Kingdom, 4%; Netherlands, 3%; Sweden, 3%; Germany, 3%

**Within last year, skipped a medical test, treatment or follow-up because of the cost:
Country results from highest to lowest**

United States, 19%; France, 12%; Switzerland, 10%; New Zealand, 10%; Commonwealth
Fund average, 7%; Australia, 7%; Canada, 6% (above average); Germany, 5%; Norway, 4%;
Netherlands, 4%; Sweden, 3%; United Kingdom, 3%

More Canadians face cost barriers to dental care and prescription drugs

**Within last year, did not fill prescription for medicine or skipped doses of medicine
because of the cost: Country results from highest to lowest**

United States, 18%; Canada, 10% (below average); Switzerland, 9%; Commonwealth Fund
average, 6%; Australia, 6%; New Zealand, 6%; Sweden, 6%; Netherlands, 4%; France, 4%;
Norway, 3%; Germany, 3%; United Kingdom, 2%

**Within last year, skipped dental care or dental checkups because of the cost:
Country results from highest to lowest**

United States, 32%; Canada, 28% (below average); France, 23%; New Zealand, 22%;
Australia, 21%; Switzerland, 21%; Norway, 20%; Commonwealth Fund average, 20%;
Sweden, 19%; Germany, 14%; United Kingdom, 11%; Netherlands, 11%

Despite cost barriers, use of prescription drugs is higher in Canada than in most other countries

58% of Canadian adults report taking 1 or more prescription drugs on a regular basis.

Adults taking 1 or more prescription drugs on a regular basis: Country results from highest to lowest

Within last year, did not fill prescription for medicine or skipped doses of medicine because of the cost, age 18 to 64 versus age 65 and older

Age 18 to 64: Canada, 12% (below average); Commonwealth Fund average, 7%
Age 65 and older: Canada, 4% (same as average); Commonwealth Fund average, 4%

Note: All Canadian provinces and territories provide drug coverage for seniors age 65 and older.

Cost barriers to all care are highest for low-income Canadians

Table 13 Cost barriers to care by income level

Barrier	Below-average income	Above-average income
Skipped a medical test, treatment or follow-up	9%	3%
Had a medical problem but did not visit a doctor	11%	3%

Most Canadians have a regular doctor or place where they receive care

85% of Canadians have a usual doctor.

93% of Canadians have a usual doctor or place they go to for medical care.

People who report having one doctor they usually go to for their medical care: Country results from lowest to highest

Sweden, 42%; United States, 77%; United Kingdom, 81%; Canada, 85% (same as average); Switzerland, 85%; Commonwealth Fund average, 85%; Australia, 86%; New Zealand, 89%; Norway, 95%; Germany, 98%; Netherlands, 99%; France, 99%

Canadians like their usual physician but don't think the system works well

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? "Excellent or very good" country results from lowest to highest

There are some good things in our health care system, but fundamental changes are needed to make it work better: 55% (below average)

Our health care system has so much wrong with it that we need to completely rebuild it: 9% (below average)

Not sure: 2% (same as average)

Overall view of the health care system — It works well and only minor changes are necessary to make it better: Country results from lowest to highest

United States, 19%; Sweden, 31%; Canada, 35% (below average); New Zealand, 41%; Netherlands, 43%; Commonwealth Fund average, 44%; Australia, 44%; United Kingdom, 44%; France, 54%; Switzerland, 58%; Norway, 59%; Germany, 60%

Provinces vary when it comes to perceptions of the health care system

Is there one doctor you usually go to for your medical care? Province results from east to west

Newfoundland and Labrador, 85% (same as average); Prince Edward Island, 92% (above average); Nova Scotia, 85% (same as average); New Brunswick, 88% (same as average); Quebec, 75% (below average); Ontario, 92% (above average); Manitoba, 83% (same as average); Saskatchewan, 79% (same as average); Alberta, 84% (same as average); British Columbia, 83% (same as average); Canada, 85% (same as average); Commonwealth Fund average, 85%

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? "Excellent or very good" province results from east to west

Newfoundland and Labrador, 76% (above average); Prince Edward Island, 77% (above average); Nova Scotia, 78% (above average); New Brunswick, 76% (above average); Quebec, 66% (same as average); Ontario, 76% (above average); Manitoba, 75% (above average); Saskatchewan, 75% (above average); Alberta, 78% (above average); British Columbia, 77% (above average); Canada, 74% (above average); Commonwealth Fund average, 65%

How would you rate the overall quality of medical care in your country? “Excellent or very good” province results from east to west

Newfoundland and Labrador, 48% (same as average); Prince Edward Island, 44% (same as average); Nova Scotia, 52% (same as average); New Brunswick, 40% (below average); Quebec, 26% (below average); Ontario, 52% (same as average); Manitoba, 46% (same as average); Saskatchewan, 43% (same as average); Alberta, 54% (same as average); British Columbia, 52% (same as average); Canada, 45% (below average); Commonwealth Fund average, 51%

Overall, you think the health care system works pretty well and only minor changes are necessary to make it work better: Province results from east to west

Newfoundland and Labrador, 35% (same as average); Prince Edward Island, 35% (same

Canadians report better experiences with their regular doctors than 11-country average

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

Canada, 63% (above average); Commonwealth Fund average, 57%

When you need care or treatment, how often does your regular doctor or the medical

Online access to personal health information low across most provinces

Viewed online or downloaded your health information, such as tests or laboratory results: Province results from east to west

Newfoundland and Labrador, 1% (below average); Prince Edward Island, 1% (below average);

Most hospital patients report comprehensive discharge planning

When you left the hospital, did someone discuss with you the purpose of taking each of your medications?

Canada, 83% (same as average); Commonwealth Fund average, 82%

When you left the hospital, did the hospital make arrangements for or make sure you had follow-up care with a doctor or other health care professional?

Canada, 73% (same as average); Commonwealth Fund average, 73%

When you left the hospital, did you receive written information on what to do when you returned home and what symptoms to watch for?

Canada, 75% (same as average); Commonwealth Fund average, 74%

Two-way communication between specialists and regular doctors can be improved in most countries

The specialist did not have basic medical information or test results from your regular doctor about the reason for your visit: Country results from highest to lowest

France, 22%; Switzerland, 19%; Sweden, 18%; United States, 17%; Netherlands, 16%; Commonwealth Fund average, 15%; Norway, 14%; Canada, 13% (same as average); United Kingdom, 13%; Germany, 13%; Australia, 11%; New Zealand, 8%

After you saw the specialist, your regular doctor did not seem informed and up to date about the care you got from the specialist: Country results from highest to lowest

Norway, 29%; United States, 23%; Sweden, 23%; France, 21%; Canada, 21% (same as average); Commonwealth Fund average, 19%; Netherlands, 18%; Switzerland, 17%; Australia, 16%; Germany, 15%; New Zealand, 14%; United Kingdom, 11%

Communication between specialists and regular doctors varies across the country

The specialist did not have basic medical information from your regular doctor about

Test results or medical records were not available at the time of your scheduled medical care appointment: Country results from highest to lowest

France, 13%; United States, 11%; Sweden, 8%; Canada, 8% (same as average); Commonwealth Fund average, 8%; Norway, 7%; New Zealand, 7%; United Kingdom, 6%; Germany, 6%; Switzerland, 6%; Netherlands, 5%; Australia, 5%

Doctors ordered a medical test that you felt was unnecessary because the test had already been done: Country results from highest to lowest

France, 20%; United States, 11%; Switzerland, 9%; Commonwealth Fund average, 7%; Australia, 6%; Germany, 6%; Norway, 6%; Canada, 6% (above average); United Kingdom, 5%; Sweden, 5%; New Zealand, 4%; Netherlands, 3%

International progress in reducing coordination problems

Table 14 You received conflicting information from different doctors or health care professionals, trend over time

Country	2010	2013	2016
Canada	20%	15%	17%
Commonwealth Fund average	18%	15%	14%

The trend over time improved slightly for Canada.

Table 15 Test results or medical records were not available at the time of your scheduled medical care appointment: Country results from highest to lowest

Table 16

CIHI would like to acknowledge and thank the many individuals who assisted with the development of this report, including our expert advisory group:

- Dr. Mike Benigeri, Consultant, Health and Welfare Commissioner of Quebec
- Dr. Alan Katz, Director, Manitoba Centre for Health Policy, University of Manitoba
- Dr. Gail Dobell, Director, Performance Measurement, Health Quality Ontario
- Michelina Mancuso, Executive Director, Performance Measurement, New Brunswick Health Council
- Annette McKinnon, patient representative
- Dr. Jean-Frédéric Levesque, Chief Executive, Bureau of Health Information, New South Wales, Australia

Special thanks also go to Lisa Corscadden, Senior Researcher, and Kim Sutherland, Senior Director, Bureau of Health Information, New South Wales, Australia, for their feedback.

Please note that the analyses and conclusions in the present document do not necessarily reflect those of the individuals or organizations mentioned above.

Appreciation goes to the CIHI staff from the core team as well as the supporting program areas who contributed to the development of this project. Core team members who

Demographics by province

Total respondents (number)

Newfoundland and Labrador, 253; Prince Edward Island, 251; Nova Scotia, 253;
New Brunswick, 251; Quebec, 1,002; Ontario, 1,500; Manitoba, 255; Saskatchewan, 251;
Alberta, 271; British Columbia, 254; Canada, 4,541

Percentage male

Newfoundland and Labrador, 40%; Prince Edward Island, 41%; Nova Scotia, 37%;
New Brunswick, 39%; Quebec, 40%; Ontario, 40%; Manitoba, 38%; Saskatchewan, 45%;
Alberta, 48%; British Columbia, 45%; Canada, 41%

Percentage female

Newfoundland and Labrador, 60%; Prince Edward Island, 59%; Nova Scotia, 63%;
New Brunswick, 61%; Quebec, 60%; Ontario, 60%; Manitoba, 62%; Saskatchewan, 55%;
Alberta, 52%; British Columbia, 55%; Canada, 59%

Percentage age 18 to 24

Newfoundland and Labrador, 4%; Prince Edward Island, 6%; Nova Scotia, 5%;
New Brunswick, 5%; Quebec, 4%; Ontario, 3%; Manitoba, 5%; Saskatchewan, 4%;
Alberta, 7%; British Columbia, 4%; Canada, 4%

Percentage age 25 to 34

Newfoundland and Labrador, 7%; Prince Edward Island, 9%; Nova Scotia, 6%;
New Brunswick, 11%; Quebec, 12%; Ontario, 9%; Manitoba, 11%; Saskatchewan, 13%;
Alberta, 11%; British Columbia, 8%; Canada, 10%

Percentage age 35 to 49

Newfoundland and Labrador, 21%; Prince Edward Island, 16%; Nova Scotia, 19%;
New Brunswick, 16%; Quebec, 23%; Ontario, 20%; Manitoba, 20%; Saskatchewan, 22%;
Alberta, 23%; British Columbia, 19%; Canada, 21%

Percentage age 50 to 64

Newfoundland and Labrador, 35%; Prince Edward Island, 34%; Nova Scotia, 31%;
New Brunswick, 38%; Quebec, 35%; Ontario, 34%; Manitoba, 25%; Saskatchewan, 27%;
Alberta, 27%; British Columbia, 29%; Canada, 33%

Percentage age 65 and older

Newfoundland and Labrador, 30%; Prince Edward Island, 33%; Nova Scotia, 37%; New Brunswick, 28%; Quebec, 25%; Ontario, 32%; Manitoba, 34%; Saskatchewan, 33%; Alberta, 30%; British Columbia, 38%; Canada, 31%

Percentage age 18 and older, exact age not provided

Newfoundland and Labrador, 2%; Prince Edward Island, 2%; Nova Scotia, 2%; New Brunswick, 2%; Quebec, 1%; Ontario, 3%; Manitoba, 4%; Saskatchewan, 1%; Alberta, 1%; British Columbia, 2%; Canada, 2%

References

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Bibliography

Canadian Cancer Society and Canadian Cancer Action Network. [*Five-Year Action Plan to Address the Financial Hardship of Cancer in Canada*](#). 2012.

Canadian Institute for Health Information. [Nearly 1 in 5 patient visits to emergency could potentially be treated elsewhere](#) [media release]. November 6, 2014.

Canadian Institute for Health Information. [Sources of Potentially Avoidable Emergency Department Visits](#). 2014.
