Putting what really matters to patients into the heart of health policy

Canadian Association for Population Therapeutics - Panel Presentation

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Patients & PCC

• Who is a patient?

• What do we mean when we talk about patient-centred care (PCC)?
  ○ an approach incorporating an individual’s perspectives & involving him/her in own care that results in better health outcomes & quality of life.
Today – acute vs chronic

- More than 16 million Canadians with chronic disease. *(SOURCE: CDPAC)*
  - More than 2 million live with diabetes.
  - More than 4 million live with arthritis.
- More than 2,803,300 admissions to acute care hospitals in 2005/6.
  - 10% were for diabetes or related complications.
  - Estimated 60% to 85% of admissions related to chronic disease.
Appropriate budgetary expenditures that meet the needs of citizens.

- Increasing cost of medications within health budgets is seen as a challenging cost pressure.
  - annual growth in public drug plan budget seen as the result of price & use rather than inflation or population increases.
  - newer medications are expensive & believed to be driving costs up without appropriate health benefits.
What every patient wants...

- Positive health & quality of life.
- Access to:
  - Appropriate medical care & advice when needed.
  - Information & education in plain language.
    - Want information about living with their chronic disease.
  - Medications, devices & supplies – no matter where they live in Canada.
What PWD want...

- To discuss their diabetes experience with their **peers** because:
  - they understand (40%)
  - they can share experiences/ideas/knowledge (24%),
  - they are supportive (16%)
  - they provide suggestions & tips (12%)

- To have more support & assistance:
  - 16% would like support groups
  - 12% want nutrition advice
  - 10% want more information & 10% want advice hotline
  - 8% want financial assistance
Reality of living with diabetes

- Majority of Canadians with type 2 diabetes are not receiving diabetes education or ongoing support.

- Survey showed Ontarians with diabetes receive support from 3 primary sources:
  - **Family doctor (42%)**
    - 91% cite medical support
    - 65% cite advice & moral support
    - 43% get diabetes education
PWD reality continued...

- **Diabetes Education Centre (30%)**
  - 91% state they receive information on diabetes
  - 91% receive diabetes education
  - 75% receive advice & moral support
  - 50% get medical support

- **Partners or spouses (30%)**
  - 94% cite advice & moral support
  - 30% receive information
  - 30% receive medical support
  - 17% get diet/food assistance
Medication use

- More than 50% of Canadians take one prescription medication or more.
  - 15% take 4 or more medications.
  - 37% of Canadians living with a chronic disease take 4 or more.
  - 40% of seniors over 65 take 4 or more. *(SOURCE: Health Council of Canada, January 2009.)*

- People with diabetes take between 5 & 8 medications daily to manage their disease. *(Source: Canadian Diabetes Association, Stats & Facts, 2008.)*
Medication access

- It matters where you live in Canada.
  - 13 different public drug plans.
  - Employer sponsored drug plans.
  - Different formularies, varying coverage.

- Newer medications difficult to access.
  - No newer diabetes medication recommended for coverage since CDR introduced.
Medications & hospitalization

- 12% of emergency department visits related to medication problems.
  - 72% of adverse events reported by patients within 14 weeks of hospital discharge related to medication error. (SOURCE: HCC January 2009.)

- Estimated cost of preventable medication related incidents in seniors: $11 billion. (SOURCE: HCC January 2009.)
Some patients don’t comply with physician’s prescriptions:

- **28% of medication related visits by adults to a Vancouver hospital were due to not taking medications or taking them inappropriately.** *(SOURCE: HCC January 2009.)*

- **25% of heart attack survivors did not fill all of their discharge prescriptions 120 days after an AMI.*
And some physicians don’t prescribe according to the best available evidence.

- 33% of elderly patients living with diabetes receive anti-hypertensive drugs & about 25% receive lipid-lowering drugs in Ontario.  

- Nearly 40% of Ontario patients over 65 with coronary artery disease are not prescribed statins despite known benefits.  
In 1978, the World Health Organization stated:
"Individuals have a right & duty to participate individually & collectively in the planning & implementation of their health care."

Australia, the UK & USA engage patients & the public in health policy, planning, implementation & evaluation as well as decision-making.

Does Canada?
Other jurisdictions

- UK introduced **NHS Constitution** in January 2009 outlines rights for patients, public & staff.

- Australia’s **National Patient Charter of Rights** in July 2008 sets out basic rights as: Access, Safety, Respect, Communication, Participation, Privacy & Comment.
Canadian experience

- Engagement tends to be *ad hoc*, reflecting jurisdictional preferences:
  - **Consultations**
    - Public meetings
    - Web-based
  - **Focus groups & surveys**
  - **One or two citizen representatives**
  - **Meetings with patient organizations**
  - **Contracts with experts in patient engagement**
  - **Elections**
In uncertain economic times

- There are benefits to greater engagement of public & patients:
  - Easier to gain support for tough economic choices.
  - Educated public & patients support government’s role in making policies that impact them.
  - Will help ensure that the investments being made result in positive “real world” health & social outcomes.
  - May help to address the current barriers to integration across the silos in healthcare.
Any questions?

Thank you!