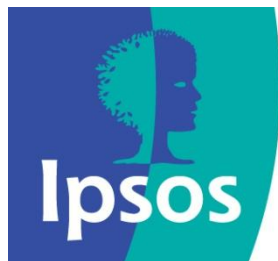


Checking in With Canadians on Their Healthcare System: 2013 Score Cards on Ease of Access, Patient Experience

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Checking in With Canadians on Their Healthcare System: 2013 Score Cards on Ease of Access, Patient Experience

Toronto, ON – A new poll conducted by Ipsos Reid and released at the Canadian Foundation for Healthcare Improvement CEO Forum in Montreal shows that citizen-patient perceptions among the largest segment of the Canadian population (the pre-retirement adult cohort aged 18 to 64) rank Ontario as the most improved healthcare system over past five years for ease of access and patient experience, followed by the Prairies (Manitoba/Saskatchewan) not far behind, with Alberta and Quebec tied in the middle, Atlantic Canada much further back and British Columbia well back at the bottom.

Healthcare has been a top issue among Canadians for decades. And while it has been wrestled from its perch at times by sporadic issues of the day, it always returns to be a primary focus for Canadians – especially for those aged 18 to 64 who are the prime work force, the primary consumer-citizens and the largest citizen-patient group of the nation's healthcare system.

Within this reality, the Ipsos poll shows two very stark realities shaping the context for how healthcare decision-makers and influencers can move things forward.

The first is the significant disparity that exists across the provinces/regions in perceptions that the healthcare system has momentum toward improvement on access overall. Ontario

and the Prairies are clearly out front in assessing their healthcare systems on access improvement with BC, Quebec and Atlantic consistently lower.

The second is the growing importance of “value” in the public opinion healthcare equation. Partly driven by the new economic reality created by the economic collapse in 2008 among citizens and also because of the focus on the “value” of tax payer dollars amidst large government deficits, it might also be the natural result of an increasing focus by many in the healthcare system to view people as “customers.” We know that perceptions of value do not replace the importance of access or the quality care in the public’s mind. But it does add an increasingly important lens through which Canadians evaluate their healthcare system, and therefore an important context within which healthcare decision-makers and influencers need to shape their positioning and delivery of healthcare services to Canadians.

The good news for Canada’s healthcare system is that there appears to be an overall net perception of both improved access to healthcare services and patient experience among this adult segment.

The bad news, however, is that not every province or region has citizen-patients who view the situation that way – some being much worse than the national average – and there is a majority (52%) of respondents who ‘disagree’ that ‘the healthcare system they experience is efficient in a way that maximizes the use of dollars allocated or paid for healthcare in ways that don’t waste money or resources with that statement.

Here are some of the top findings:

Thinking about the times over the past two years when they have been referred by their doctor or caregiver as a patient to other parts of the healthcare system for tests, extra diagnosis or actual treatment, they experience...

- Half (52%) of respondents 'disagree' that the healthcare system they experience is efficient in a way that maximizes the use of dollars allocated or paid for healthcare in ways that don't waste money or resources.
- Eight in ten (84%) 'agree' that generally, as a patient, they are treated with respect and sensitivity when they're interacting with health care providers.
- Two-thirds (64%) 'agree' that it is really very easy where all of the doctors and caregivers talk to each other along the way and know what the other person has done or is doing.
- Seven in ten (68%) 'agree' that they are confident that once they are referred into the healthcare system for further diagnosis and treatment that the doctor or caregiver that referred them will get continuous updates and copies of what's happening to them so everything is in one place.
- Three-quarters (76%) 'agree' that if a diagnosis came back to their doctor that was bad and they required treatment they know they would call them at home right away and tell them what to do.
- Three-quarters (76%) 'agree' (26% very much/51% somewhat) that their personal doctor who refers them is always up to date with information about their diagnosis and treatment.

- Most (55%) Canadians ‘agree’ that the healthcare system they experience is efficient in the best possible way without wasting time or effort.
- Four in ten (43%) Canadians ‘agree’ that their experience has made them not trust any process in the healthcare system or its professionals.
- Three in ten (31%) ‘agree’ that they are scared to be referred to other parts of the healthcare system because ultimately their experience in terms of how others treat them for their ailment will be bad.
- One-third (35%) of respondents ‘agree’ that they feel abandoned and on their own to figure out what to do next.
- Four in ten (41%) agree that no parts of the diagnosis and treatment process are coordinated to get regular and important information about their condition.

Thinking about their access to their healthcare system over the past five years, the citizen-patient scorecards rank their provinces/regions as follows:

- Nationally the aggregate “net score”^{*} sense is easier access Nationally the aggregate “net score” sense is easier access (+20), however there are wide variances in the provinces/regions: Ontario leads (+55), followed by the Prairies (Saskatchewan/Manitoba) (+50) and then in not easier territory with Alberta at -4 followed by British Columbia (-9), Quebec (-11) and Atlantic Canada at -13.

Total Access Perception	4
Drugs	19
Test for diagnosis	12

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A doctor	3
A hospital	-6
Specialist such as surgeon	-12
Net Total	+20

- Nationally the aggregate “net score”* sense is a better patient experience in their healthcare system (+84) among seven tested elements, however there are wide variances in the provinces/regions: Quebec leads (+108), followed by Alberta (+101), Ontario (+88), the Prairies (+87), Atlantic Canada (+68) and then British Columbia (+20).

Better information shared	18
More options for treatment	16
Better level of care	12
Better coordinated	14
More sensitive to needs:	12
Better quality	12
Speedier	0
Net Total	+84

As such, if there are “winners” and “losers” of various provincial/regional healthcare systems based on the perceptions and experiences of citizen-patients over the past five years, the ranking would be Ontario (+143) at the top, followed by the Prairies (Saskatchewan/Manitoba +137), Quebec (+97) and Alberta (+97) tied, then Atlantic Canada (+55) and British Columbia (+11).

	Overall	BC	Alberta	Prairies (Sask/Man)	Ontario	Quebec	Atlantic
Net Total	+104	+11	+97	+137	+143	+97	+55

**Net scores were determined on select questions by removing those who felt there was “no change” and then calculating the difference from the positive and negative results.*

Access to the Canadian Healthcare System in the Local Community Perceived Better than Five Years Ago—Not Everywhere Though...

Respondents were asked to think about the access that they and members of their household personally have to healthcare services overall—including doctors, specialist physicians such as surgeons, hospitals, tests for diagnosis and drugs to treat various ailments—as a patient in their local community and indicate how much easier is their ability to access those services today compared to five years ago (in 2008).

- Three in 10 (29%—7% much/22% somewhat) Canadians find it easier to access health services today than they did five years ago. Women (30%) and men (27%) equally have gained easier access but it’s in the age demographic where the differences are noted most: Younger Canadians (37%), aged 18-34, are most likely to indicate that access has been easier compared with those middle-aged (23%) Canadians, aged 35-49, and older Canadians (26%), aged 50+. From a regional perspective, those in the Prairies (Manitoba/Saskatchewan) rank highest (34%) followed by Ontario (33%), Atlantic Canada/Alberta/British Columbia (27%) and Quebec at 23%.

- One quarter (25%) believe that access is worse than five years ago, they are most likely to be women (27%) compared with men (24%) and are more likely to be older (32%) compared with middle-aged (26%) and younger (19%) Canadians. Regionally, those most likely to indicate that ease of access has worsened over the last five years come from Québec (32%) followed by those from British Columbia (28%), Alberta (23%), Ontario (20%), and Atlantic Canada and the Prairies (Manitoba/Saskatchewan) at 19%.
- As such, while three in ten (29%) of Canadians believe it's easier to get access to health care services in their community, one quarter (25%) believe that access is worse than five years ago producing a net score (subtracting worse from easier) of just 4% or "+4 pts". The regional net scores are as follows: the Prairies (Manitoba/Saskatchewan +15 pts.), followed by Ontario (+11 pts.), Atlantic Canada (+8 pts.), Alberta (+4 pts.), British Columbia (-1 pt.) and Québec (-9 pts.).

And Now For the Healthcare Players: Easier or Worse Access?

Drugs (+19 pts): Three in ten (30% - 6% much easier/23% somewhat easier) respondents 'agree' that it's easier to access drugs to treat various ailments today compared to five years ago. Among Canadian regions, respondents from Quebec (36%) report the greatest ease of access, followed by the Prairies (33%), Ontario (30%), Alberta (25%), and Atlantic Canada (22%). The lowest increase in access to drugs compared to five years ago is reported in British Columbia (19%). Only one in ten (10%) believe that their access to drugs to treat various ailments is worse than five years ago. This produces the net score of "+19 pts.". The regional net scores are as follows: the Prairies (+29 pts.), followed by Quebec (+24 pts.), Ontario (+20 pts.), Atlantic Canada (+13 pts.), Alberta (+12 pts.), and British Colombia (+10 pts.)

Test for diagnosis (+12 pts.): Three in ten (28% - 5% much easier/23% somewhat easier) respondents believe that it's easier today than five years ago to access such health services as x-ray, blood, or urine tests. Those who agree are equally represented by men (27%) and women (29%), and are more likely to have low household income (35%), compared to those with medium income (29%) and high income (24%). Regionally those who agree are most likely to be from Ontario or Quebec (both 31%), followed by the Prairies (28%), Alberta (24%), British Columbia (23%), and Atlantic Canada (16%). Two in ten (17%) indicate that their access to tests for diagnosis is worse than five years ago. This produces a net score of "+12". The regional net scores are as follows: Ontario (+18 pts.), followed by Quebec (+13 pts.), the Prairies (+10 pts.), Alberta (+3 pts.), British Columbia (+2 pts.), and Atlantic Canada (-3 pts.).

Doctor (+3 pts.): One quarter (25%--6% much/19% somewhat easier) of Canadians indicate that it's easier to access a doctor today than five years ago. Regionally, easier access to a doctor is reported highest in Ontario and Alberta (29%) followed by the Prairies, (Manitoba/Saskatchewan) at 28%, Quebec and British Columbia (21%) and Atlantic Canada (13%). This compares to two in ten (22%) who believe that their ability to access a doctor today is worse than five years ago. The net score produced is "+3 pts". The regional net scores are as follows: the Prairies (+11 pts.), followed by Ontario (+10 pts.), Alberta (+7 pts.), British Columbia (-3 pts.), Atlantic Canada (-2 pts.), and Quebec (-7 pts.).

A Hospital (-6 pts.): Two in ten (20% - 5% much easier/14% somewhat easier) Canadians believe that it's easier to access a hospital care today than five years ago. While men (19%) and women (20%) equally say that access is easier, it's the younger people (under 35 - 25%) that gained the ease of access compared to middle-aged (17%), and older (16%) Canadians.

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Regionally, those who say it's easier are from Ontario (24%), followed by British Columbia (19%), Alberta (18%), Quebec (17%), Prairies (16%), and Atlantic Canada (13%). While 20% of Canadians believe it's easier to access a hospital today, one quarter (25%) of respondents believe that access is worse than five years ago. This produces a negative "net" score of 6% or "-6 pts". The regional net scores are as follows: British Columbia/Ontario (+1 pt.), followed by the Prairies (-6 pts.), Atlantic Canada (-7 pts.), Alberta (-13 pts.), and Quebec (-15 pts.).

A Specialist such as Surgeon (-12 pts.): Only two in ten Canadians (18%--3% much easier/15% somewhat easier) believe that their ability to access a specialist physician such as a surgeon is easier today than five years ago. Regionally, those who say it's easier today are most likely to come from Ontario (22%), followed by Alberta (21%), Prairies (18%), Quebec (15%), British Columbia (13%) and Atlantic Canada (12%). Three in ten (31%) Canadians indicate that access to a specialist physician such as surgeon is worse than five years ago. Those who say that access is worse are most likely to come from Alberta (39%) and Atlantic Canada (33%), followed by those from Quebec (32%), British Columbia (31%), Ontario and the Prairies (both 27%). This produces a negative net score of "-12 pts" with the regional net scores as follows: Atlantic Canada (-21 pts) followed by Alberta and British Columbia (both -18 pts.), Quebec (-17 pts.), the Prairies (-9 pts.), and Ontario (-5 pts.).

	Net Scores By Region						
	Overall	BC	Alberta	Prairies (Sask/Man)	Ontario	Quebec	Atlantic
Total Access Perception	4	-1	4	15	11	-9	8
Drugs	19	10	12	29	20	24	13
Test for	12	2	3	10	18	13	-3

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diagnosis							
A doctor	3	-3	8	11	10	-7	-3
A hospital	-6	1	-13	-6	1	-15	-7
Specialist such as surgeon	-12	-18	-18	-9	-5	-17	-21
Net Total	+20	-9	-4	+50	+55	-11	-13

Nationally the aggregate “net score” sense is easier access (+20), however there are wide variances in the provinces/regions: Ontario leads (+55), followed by the Prairies (Saskatchewan/Manitoba) (+50) and then in not easier territory with Alberta at -4 followed by British Columbia (-9), Quebec (-11) and Atlantic Canada at -13.

Thinking about their patient experience recently compared to five years ago (in 2008) in going to a doctor and then being diagnosed, referred to a specialist or for surgery, or treated for an accident or serious ailment or condition Canadians, nationally, rated six out of seven areas as better and one as neutral.

Better information shared (+19 pts.): Three in ten (30%) ‘agree’ (6% very/24% somewhat) that during their recent patient experience better information was shared with them. Those who agree are more likely to be women (33%) than men (28%), but the most noticeable difference appears to be among the different age groups: older respondents (37%) are more likely to agree that better information was shared than those who are middle-aged (28%) and younger (27%). Regionally, Albertans (39%) most agree that better information was shared during their patient now compared to five years ago, followed by Quebecers (33%), Ontarians (31%), Atlantic Canadians (26%), residents of the Prairies (26%), and British

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Columbians (20%). Only one in ten (11%) indicate that information shared with them was worse than five years ago. Women (13%) edge men (10%) in believing information shared was worse than five years ago, while younger (12%) and older (12%) Canadians equally believe this is the case during their last patient experience, ahead of those who are middle-aged (10%). Across different regions of the country, British Columbians, Ontarians, and Albertans (all 12%) most believe that better information shared was worse than five years ago, followed by Atlantic Canadians (11%), Quebecers (10%), and Prairies residents (8%). This produces the net score of “+19 pts.”, while Albertans (+28 pts.) produce the highest positive regional net scores, followed by those Quebec (+22 pts.), Ontario (+19 pts.), Atlantic Canada (+15 pts.), the Prairies (+14 pts.), and British Columbia (+8 pts.)

More options for treatment (+16 pts.): Three in ten (28%) ‘agree’ (5% very/ 22% somewhat) that they were given more treatment options during their last patient experience than five years ago. Women (34%) are more likely to agree with this sentiment than men (22%), while lower income (35%) earners are more likely to agree than those with medium (28%) and high (24%) incomes. Those in Alberta (34%) ranked highest, in terms of agreement, followed by Ontario (31%), Atlantic Canada (28%), Quebec (26%), the Prairies (24%), and British Columbia (19%). One in ten (12%) say that options given for treatment were worse than five years ago. Those most likely to say that options given for treatment was worse than five years ago are women (14% vs. 10% men), younger and older Canadians (13% vs. 11% middle-aged), and have low incomes (13% vs. 12% medium/high incomes). Those from British Columbia (15%) are most likely to believe that options for treatment are worse than five years ago, ahead of Ontarians (13%), Atlantic Canadians (12%), Albertans (11%), Quebecers (11%), and Prairies residents (6%). This produces the net score of “+16 pts.”, while Albertans (+23

pts.) produce the highest positive regional net scores, followed by those from Ontario (+18 pts.), the Prairies (+17 pts.), Atlantic Canadians (+16 pts.), Quebecers (+14 pts.), and British Columbians (+4 pts.)

Better coordinated (+ 14 pts.): Three in ten (28%) ‘agree’ (4% very/23% somewhat) that their recent patient experience was better coordinated than five years ago. Respondents who agree are slightly more likely to be women (30%) than men (26%), in the older (33%) age category, compared to those who are younger (29%) or middle-aged (23%). Respondents who are more likely to be low income (33%) earners most agree with this statement, compared to medium (27%) and high income (26%) earning Canadians. Those who agree that their patient experience was better coordinated recently than five years ago most likely come from Alberta (32%) or Quebec (32%), followed by Ontario (27%), British Columbia (24%), Atlantic Canada (23%), and the Prairies (22%). Only 14% of the respondents indicate that their recent patient experience was coordinated worse than five years ago. Women (16%) are slightly more likely than men (13%) to believe coordination is worse now than it was five years ago, while older (17%) Canadians edge those who are younger (14%) and middle-aged (12%) in saying coordination is worse now. Respondents earning a medium (16%) income are more likely than those earning a high (13%) or low (12%) income to believe coordination has gotten worse over the past five years. Regionally, British Columbians (16%) most believe that coordination of their experience was worse than five years ago, ahead of Quebecers (15%), Ontarians (15%), Albertans (14%), Prairies residents (11%), and Atlantic Canadians (9%). This produces the net score of “+14 pts.” nationally, while Quebecers and Albertans (+18 pts.) produce the most positive regional net scores, followed by, Atlantic Canadians (+14 pts.), Ontarians (+12 pts.), residents of The Prairies (+11 pts.), and British Columbians (+7 pts.) .

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Better level of care (+12 pts.): 26% of respondents 'agree' (4% very/21% somewhat) that they received a better level of care during their last patient experience than five years ago. Women (29%) are more likely than men (22%) to agree, while those who believe they received a better level of care are more likely to have low income (34%), compared to those with medium (25%) and high (21%) income levels. Across the provinces Quebec (29%) ranks highest, followed by Ontario (27%), Alberta (26%), British Columbia (20%), Manitoba/Saskatchewan (21%), and Atlantic Canada (18%). Only one in ten (14%) indicate they received worse level of care than five years ago. Those most likely to believe this are women (15% vs. 12% men), older Canadians (17% vs. 13% younger and 12% middle-aged), and earn low or high incomes (14% vs. 13% medium incomes). Regionally, those from Ontario and British Columbia (both 17%) are most likely to believe that level of care is worse than five years ago, ahead of those from Atlantic Canada (15%), Alberta (14%), Quebec (9%), and the Prairies (8%). This produces the net score of "+12 pts.", with Quebec (+21 pts.) ranking highest, followed by the Prairies (+13 pts.), Alberta (+11 pts.), Ontario (+10 pts.), Atlantic Canada (+3 pts.), and British Columbia (+3 pts.).

Better quality (+12 pts.): A quarter (25%) 'agree' (4% very/21% somewhat) that their recent patient experience was better in quality than 5 years ago. Women (28%) are more likely to agree than men (23%), while those with low income (34%) are also more likely to agree than their medium income (25%) and high income (22%) earning counterparts. Among the Canadian regions, those who agree are more likely to be in Quebec and Alberta (both 30%), followed by Ontario (26%), Manitoba/Saskatchewan/ Atlantic Canada (all 18%), and

British Columbia (17%). One in seven (14%) respondents say that the quality of their patient experience was worse than five years ago. While there is not significant variation across demographics when it comes to saying the quality of their patient experience was worse than five years ago, those who say the quality is worse are more likely to be women (15% vs. 12% men), older (15% vs. 13% younger and 12% middle-aged), and earn medium incomes (15% vs. 13% low/high incomes). British Columbians (16%) are most likely to believe that the quality of their patient experience was worse than five years ago, followed by Ontarians (15%), Albertans (14%), Quebecers (12%), Atlantic Canadians (10%), and Prairies residents (9%). This produces the net score of “+12 pts.”, with Quebec (+18 pts.) ranking highest, regionally, ahead of Alberta (+16 pts.), Ontario (+11 pts.), the Prairies (+9 pts.), Atlantic Canada (+8 pts.), and British Columbia (+1 pt.)

More sensitive to needs (+ 12 pts): One in four (26%) ‘agree’ (4% very/22% somewhat) that their patient experience was more sensitive to their needs. Those who agree are more likely to be women (32%) compared to men (21%), with low income respondents (39%) agreeing the most compared to medium (26%) and high (20%) income earning respondents. Regionally, three in ten (30%) in Manitoba/Saskatchewan/Quebec agree followed closely by Alberta (28%), Atlantic Canada/Ontario (both 24%) and British Columbia (23%). One in five (15%) respondents believes their patient experience was not more sensitive to their needs and it was worse than five years ago. There is little variation among different demographics when it comes to opinions on patient experience being worse than five years ago when it comes to sensitivity of needs, although women (15%) barely edge men (14%), middle-aged (12%) respondents are least likely this experience is worse than five years ago compared to 16% of younger and older Canadians, and those earning low incomes (17%) barely edge

medium (16%) and high (12%) income earners. Residents of British Columbia (20%) most believe that the sensitivity of their needs during their last patient experience was worse than five years ago, followed those from Quebec (15%), Alberta (15%), Ontario (15%), the Prairies (10%), and Atlantic Canada (9%). Overall, this experience produces a net score of “+12 pts”, while the Prairies (+20 pts.) rank highest in terms of regional net scores, ahead of Atlantic Canada (+15 pts.), Quebec (+15 pts.), Alberta (+14 pts.), Ontario (+10 pts.), and British Columbia (+3 pts.)

Speedier (No difference): Two in ten (23%) respondents ‘agree’ (4% very/19% somewhat) their recent patient experience was speedier than five years ago. Those who agree are more likely to be women (25%) than men (21%). Respondents with low income (29%) agree the most, compared to those with medium income (22%) and high income (21%). Regionally, the highest increase is reported in Ontario (26%) followed by Quebec (25%), Alberta/Manitoba/Saskatchewan (all 23%), British Columbia (17%) and Atlantic Canada (11%). Two in ten (23%) say their patient experience was not speedy at all and it was worse than five years ago. The most significant difference appears to be in income demographics among respondents whose experience was worse than five years ago, with medium income (27%) earners most likely to believe that their experience wasn’t speedy at all, compared to respondents with low (17%) and high (23%) incomes. Albertans and British Columbians (each 26%) are most likely to believe that the speed of their patient experience was worse than five years ago, followed closely by Quebecers (25%), Ontarians (22%), Atlantic Canadians (22%), and Prairies residents (13%). This produces the net score of “no difference.” Regional nets are highest in Quebec (+21 Pts.) followed by the Prairies (+13%), Alberta (+11 pts.), Ontario (+10 pts.), British Columbia (+3 pts.), and Atlantic Canada (+3 pts.)

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	Net Scores By Region						
	Overall	BC	Alberta	Prairies (Sask/Man)	Ontario	Quebec	Atlantic
Better information shared	18	8	28	14	19	22	15
More options for treatment	16	4	23	17	18	14	16
Better level of care	12	3	11	13	10	21	3
Better coordinated	14	7	18	11	12	18	14
More sensitive to needs:	12	3	7	20	10	15	15
Better quality	12	1	16	9	11	18	8
Speedier	0	-6	-2	3	8	0	-3
Net Total	+84	+20	+101	+87	+88	+108	+68

Nationally the aggregate “net score” sense is a better patient experience in their healthcare system (+84), however there are wide variances in the provinces/regions: Quebec leads (+108), followed by Alberta (+101), Ontario (+88), the Prairies (+87), Atlantic Canada (+68) and then British Columbia (+20).

So, Where are the “Winners” and “Losers”?

By adding the two net scores together from both of the charts above there are some clear “winners” and “losers” when patients assess their current healthcare system:

	Overall	BC	Alberta	Prairies (Sask/Man)	Ontario	Quebec	Atlantic
Net Total	+20	-9	-4	+50	+55	-11	-13
Access							
Net Total	+84	+20	+101	+87	+88	+108	+68
Experience							
Net Total	+104	+11	+97	+137	+143	+97	+55

As such, if there are “winners” and “losers” of various provincial/ regional healthcare systems based on the perceptions and experiences of citizen-patients over the past five years, the ranking would place Ontario (+143) at the top, followed by the Prairies (Saskatchewan/Manitoba +137), Quebec (+97) and Alberta (+97) tied, then Atlantic Canada (+55) and British Columbia (+11).

How Canadians Access their Point of Entry to the Healthcare System...

Respondents were also asked ‘do you have your own regular doctor that you and members of your household visit when you have a health related issue and can treat you directly or refer you to another part of the healthcare system for diagnosis or treatment?’ and this is what the data reveal...

- Six in ten (62%) indicate that they do see the same doctor regularly. Of those who see the same doctor, 67% are more likely to be ages 50-64, compared to those ages 35-49 (61%) and under 35 (58%). Regionally, Atlantic Canada ranked the highest (86%), followed by Ontario (70%), British Columbia (65%), Alberta (60%), and Manitoba/Saskatchewan (57%). Quebec ranked the lowest with 45 %.
- 16% of the respondents say they do have a regular doctor who is a part of a healthcare team, and if they cannot see their doctor personally, they can always see someone else who has access to medical records and can provide treatment.
- 15% of respondents indicate that they do not have a regular doctor and they go to a public (walk-in) clinic and meet any doctor who is available. Across the provinces, respondents who do not have a doctor and go to a public clinic are most likely to be from Quebec (26%), followed by Alberta/British Columbia (both 16%), Manitoba/Saskatchewan (15%), Ontario (10%), and Atlantic Canada (3%).
- Only 4% of respondents indicate that they do not have a doctor and they only access the healthcare system in case of emergency.
- 2% of respondents say they go to the emergency ward to see a doctor.

Thinking about the times over the past two years when they have been referred by their doctor or caregiver as a patient to other parts of the healthcare system for tests, extra diagnosis or actual treatment, they experience...

Not Efficient Healthcare System...

Half (52% - 37% somewhat/15% very) of respondents disagree that the healthcare system they experience is efficient in a way that maximizes the use of dollars allocated or paid for

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healthcare in ways that don't waste money or resources. Respondents who disagree that the healthcare system is efficient are equally likely to be women (51%) and men (53%), with those ages 25-49 (55%) are slightly more likely to disagree compared to those ages under 35 (50%), and ages 50-64 (51%). Regionally, those in British Columbia (56%) ranked the highest, followed by Quebec (55%), Atlantic Canada/Ontario (52%), Alberta (47%), and the Prairies (40%). The other half (48%) of respondents 'agree' (8% very much/40% somewhat) with this statement. Women (49%) are slightly more likely to agree than men (47%), as are younger (50%) respondents in comparison to older (49%) and middle-aged (45%) respondents. Regionally, those from the Prairies (60%) most agree, ahead of Albertans (53%), Atlantic Canadians (48%), Ontarians (48%), Quebecers (45%), and British Columbians (44%).

But a More Likely Coordinated System...

Four in ten (41% - 7% very/34% somewhat) 'agree' that no parts of the diagnosis and treatment process are coordinated to get regular and important information about their condition. Women (43%) are slightly more likely to agree than men (39%), but the most noticeable differences are in the Age and Income demographics: those under 35 (48%) are much more likely to agree that no parts of diagnosis/treatment are coordinated than those ages 35-49 (36%) and 50-64 (38%). In addition, respondents with Low household income (49%) are much more likely to agree than those with Medium income (42%) and High income (35%). There are significant differences across the Provinces as well: Quebec (53%) ranked the highest, followed by British Columbia (45%), the Prairies (37%), Alberta/Ontario (36%), and Atlantic Canada (28%). Six in ten (59%), however, 'disagree' (13% very much/46% somewhat) with this assessment. Those most likely to disagree are men (61% vs. 57%

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women), middle-aged (64% vs. 62% older and 52% younger), and earn a high income (65% vs. 58% medium and 51% low). Atlantic Canadians most disagree, ahead of Albertans (64%), Ontarians (64%), Prairies residents (63%), British Columbians (55%), and Quebecers (47%).

One Third Feel Abandonment...

One Third (35%) of respondents 'agree' that they feel abandoned and on their own to figure out what to do next. Those who feel abandoned are more likely to be women (38%) than men (32%); they are more likely to be under 35 (39%) compared to those ages 35-49 (36%), and ages 50-64 (29%). The greatest difference is noted in the Income demographics, with Low income respondents ranked the highest (43%), compared to those with medium income (39%) and high income (27%). Regionally, those who agree that they feel abandoned are most likely to be from Quebec (47%), followed by the Prairies (41%), British Columbia (39%), Ontario (29%), Alberta (28%), and Atlantic Canada (22%). Two thirds (65%) 'disagree' (24% very much/41% somewhat) with those most to do so being men (68% vs. 62% women), older Canadians (71% vs. 64% middle-aged and 61% younger), and high income earners (73% vs. 61% medium income earners and 57% low income earners). Atlantic Canadians (78%) most disagree ahead of Albertans (72%), Ontarians (71%), British Columbians (61%), Prairies residents (59%), and Quebecers (53%).

And Almost as Many are Scared...

Three in ten (31%) 'agree' that they are scared to be referred to other parts of the healthcare system because ultimately their experience in terms of how others treat them for their ailment will be bad. Men (29%) and women (32%) are equally agreed, but there is a significant difference in the Age and Income demographics: those under 35 (39%) are more likely to be scared when referred to different parts of healthcare system compared to those ages 35-49 (27%) and those ages 50-64 (25%). Respondents with Low income (36%) are more likely to agree than those with Medium income (33%), and High income (25%). Across the provinces, respondents in Quebec (37%) ranked the highest, followed by Ontario (31%), the Prairies/ Alberta (27%), British Columbia (25%), and Atlantic Canada (20%). Seven in ten (69%), however, 'disagree' (21% very much/49% somewhat) with those most likely to disagree being men (71% vs. 68% women), older Canadians (75% vs. 73% middle-aged and 61% younger Canadians), and be high income earners (75% vs. 67% medium income earners and 64% low income earners). Atlantic Canadians (80%) most disagree, ahead of British Columbians (75%), Albertans (73%), Prairies residents (73%), Ontarians (69%), and Quebecers (63%).

Experience Leading to Distrust for Some...

Four in ten (43%) Canadians 'agree' (10% very much/33% somewhat) that their experience has made them not trust any process in the healthcare system or its professionals. Women (47%) are significantly more likely than men (38%) to agree with this statement, while younger Canadians (46%) edge older (44%) and middle-aged (39%) Canadians in agreement. Low income (51%) earning Canadians are significantly more likely than high income earners (38%) to agree and are ahead of those earning a medium income (44%). Regionally,

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Quebecers (53%) most agree that their experience has led to this distrust, ahead of Albertans (43%), Prairies residents (43%), British Columbians (39%), Ontarians (39%), and Atlantic Canadians (34%). A majority (57%), however, 'disagree' (14% very much/43% somewhat) with this sentiment, with men (62%) significantly more likely to disagree than women (53%), middle-aged (61%) Canadians edge their older (56%) and younger (54%) counterparts, and high income earners (62%) disagree more than those earning medium (56%) and low (49%) incomes. Atlantic Canadians (66%) most disagree, followed by British Columbians (61%), Ontarians (61%), Albertans (57%), Prairies residents (57%), and Quebecers (47%).

Most Believe Experience is Efficient in Best Possible Way...

Most (55%) Canadians 'agree' (10% very much/54% somewhat) that the healthcare system they experience is efficient in the best possible way without wasting time or effort. Women (55%) and men (54%) similarly agree with this statement, while younger (60%) Canadians are more likely to agree than older (53%) and middle-aged (51%) Canadians. Low income earners (61%) most agree, ahead of medium (55%) and high (51%) income earners.

Regionally, Quebecers (65%) are most likely to agree, followed closely by Atlantic Canadians (64%), Prairies residents (55%), Ontarians (53%), Albertans (50%), and British Columbians (38%).

A sizeable minority (45%), however, 'disagree' that the healthcare system they experience is efficient in the best possible way without wasting time or effort. Men (46%) and women (45%) are on equal footing in disagreement, while middle-aged (49%) Canadians edge their older (47%) and younger (40%) counterparts. High income earners (49%) most disagree,

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ahead of medium (45%) and low (39%) income earners. British Columbians (62%) are most likely to disagree with this sentiment, followed distantly by Albertans (50%), Ontarians (47%), Prairies residents (45%), Atlantic Canadians (36%), and Quebecers (35%).

Three Quarters Believe Personal Doctor is Always Up to Date...

Three-quarters (76%) 'agree' (26% very much/51% somewhat) that their personal doctor who refers them is always up to date with information about their diagnosis and treatment. Women (77%) and men (76%) equally believe this, while older Canadians (83%) are more likely than middle-aged (76%) and younger (71%) Canadians to agree. Low and High income earners are equally as likely to agree (both 77%), ahead of medium income earners (75%). Regionally, Atlantic Canadians (82%) most agree with this, ahead of Ontarians (77%), Quebecers (77%), British Columbians (76%), Albertans (73%), and residents of the Prairies (67%). One-quarter (24%), however, 'disagree' (4% very much/20% somewhat) that their personal doctor who refers them is always up to date with information about their diagnosis and treatment. Men (24%) and women (23%) equally disagree, while younger Canadians (29%) are more likely than those who are middle-aged (24%) and older (17%) to disagree. Those who earn medium-level incomes (25%) are slightly more likely than those earn low or high incomes (23% each) to be in disagreement. Residents of the Prairies (33%) are most likely to disagree, ahead of Albertans (27%), British Columbians (24%), Ontarians (23%), Quebecers (23%), and Atlantic Canadians (18%).

Doctors as Likely to Make Home Calls to Deliver Bad News and Advice...

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Another three in four (76%) ‘agree’ (32% very much/45% somewhat) that if a diagnosis came back to their doctor that was bad and they required treatment they know they would call them at home right away and tell them what to do. Those most likely to agree with this statement are women (78% vs. 74% men), older Canadians (81% vs. 76% middle-aged and 73% younger), and be high income earners (78% vs. 77 % medium income earners and 73% low income earners). Regionally, Albertans (84%) are most likely to agree, ahead of British Columbians (77%), Atlantic Canadians (77%), Prairies residents (76%), Ontarians (75%) and Quebecers (74%). One in four (24%), though, ‘disagree’ (4% very much/20% somewhat) that their doctor would call them at home right away should they need to deliver a bad diagnosis or a recommendation for urgent care. Those most likely to think this way are men (26% vs. 22% women), younger Canadians (27% vs. 24% middle-aged and 19% older), and be low income earners (27% vs. 22% medium income earners and 21% high income earners). Quebecers (26%) are most likely to disagree, slightly edging Ontarians (25%), Prairies residents (24%), Atlantic Canadians (24%), British Columbians (23%), and Albertans (16%).

Most Believe Diagnosis and Treatment Referrals Will Be Organized...

Two in three (68%) ‘agree’ (17% very much/51% somewhat) that they are confident that once they are referred into the healthcare system for further diagnosis and treatment that the doctor or caregiver that referred them will get continuous updates and copies of what’s happening to them so everything is in one place. Men (69%) and women (68%) equally agree, while older Canadians (74%) are more likely to agree than middle-aged (68%) and

younger (63%) Canadians. Medium income earners (70%) most agree, slightly ahead of low income (69%) and high (66%) income earners. Regionally, Atlantic Canadians (71%) and Quebecers (71%) are most likely to agree, followed closely by Albertans (69%), Ontarians (68%), British Columbians (67%), and Prairies residents (59%). One in three (32%), however, 'disagree' (5% very much/27% somewhat) with this statement of confidence. Women (32%) and men (31%) equally disagree, while younger Canadians (37%) are most likely to disagree compared to their middle-aged (32%) and older (26%) counterparts. Those who earn a high level of income (34%) disagree more than those who earn medium (30%) and low (31%) levels of income. Regionally, residents of the Prairies (41%) most disagree, followed by British Columbians (33%), Ontarians (32%), Albertans (31%), Atlantic Canadians (29%), and Quebecers (29%).

Similarly, Most Believe Dialogue and Communications is Quite Easy...

Two in three (64%) 'agree' (17% very much/46% somewhat) that it is really very easy where all of the doctors and caregivers talk to each other along the way and know what the other person has done or is doing. Those most likely to agree with this sentiment are men (67% vs. 61% of women), older Canadians (65% vs. 64% middle-aged and 62% younger Canadians), and be medium income earners (67% vs. 64% low income earners and 60% high income earners. Quebecers (77%) are most likely to be in agreement, well ahead of Atlantic Canadians (63%), Ontarians (62%), Albertans (56%), British Columbians (56%), and Prairies residents (52%). Having said this, four in ten (36%) still 'disagree' (6% very much/30% somewhat) that this process of open dialogue and communication is very easy. Those who

are more likely to disagree are women (39% vs. 33% men), younger Canadians (38% vs. 36% middle-aged and 35% older Canadians), and be high income earners (40% vs. 36% low income earners and 33% medium income earners). Regionally, half of Prairies residents (48%) are likely to disagree, putting them ahead of Albertans (44%), British Columbians (44%), Ontarians (38%), Atlantic Canadians (37%), and Quebecers (23%).

Relatively Few Not Treated With Respect and Sensitivity...

A full eight in ten (84%) 'agree' (28% very much/56% somewhat) that generally, as a patient, they are treated with respect and sensitivity when they're interacting with health care providers. Men (85%) and women (84%) are in equal agreement on this matter, as are older and middle-aged (86%) Canadians, followed by younger Canadians (81%). Low income earners (88%) most agree, ahead of high (84%) and medium (82%) income earners. Prairies residents (93%) are most in agreement, followed closely by Atlantic Canadians (92%), Albertans (90%), British Columbians (87%), Ontarians (81%), and Quebecers (80%). Less than two in ten (16%) 'disagree' (2% very much/14% somewhat) that they are generally treated with respect and sensitivity when interacting with health care providers as a patient. Women (16%) and men (15%) are in equal disagreement, as are middle-aged and older (14%) Canadians, although behind younger Canadians (19%). Medium income earners (18%) are most likely to disagree compared to their high (16%) and low (12%) income earning counterparts. Regionally, Quebecers (20%) most disagree, followed closely by Ontarians (19%), British Columbians (13%), Albertans (10%), Atlantic Canadians (8%), and Prairies residents (7%).



These are some of the findings of an Ipsos Reid survey conducted between January 4th and 18th, 2013. For this survey, a sample of 1,000 Canadians, aged 18-65, from Ipsos' Canadian online panel was interviewed online. Weighting was then employed to balance demographics to ensure that the sample's composition reflects that of the adult population according to Census data and to provide results intended to approximate the sample universe. The precision of Ipsos online surveys is measured using a credibility interval. In this case, the survey is accurate to within +/- 3.5 percentage points had all Canadians adults been polled. All sample surveys and polls may be subject to other sources of error, including, but not limited to coverage error, and measurement error.

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