

Intelligence MEMOS



From: Colin Busby
To: Provincial Ministers of Health
Date: January 29, 2018
Re: **FROM BAD TO WORSE IN HEALTHCARE: HOW THE PROVINCES RANK INTERNATIONALLY**

Canadian provincial healthcare systems fare poorly compared to peer countries according to our [new report](#). We examined how the provinces, the major healthcare deliverers in Canada, fare compared to other nations in healthcare provision.

We analyzed provincial healthcare systems in Canada, drawing on data from the Commonwealth Fund, a renowned New York foundation focusing on healthcare. Every three years, the Commonwealth Fund releases international rankings based on rolling surveys of patients, doctors and the public in 11 developed nations. Among the variables assessed were: access to care, infant mortality, life expectancy at age 60, deaths that were potentially preventable with earlier care, delivery of preventive services, safety of care, coordinated care, and patient engagement, in-hospital mortality rates for a heart attack or stroke, breast cancer survival, and overall administrative efficiency.

Provinces' overall performance ranks in bottom tier of advanced western countries, placing them only above the United States, and in some cases, France. Some provinces, like BC and Alberta, are relatively strong performers in areas like preventative care and patient engagement, however, their overall results fall short of the international average or even that of middle-tier nations. Other provinces, particularly in Atlantic Canada, appear to have much deeper and widespread issues, ranking near the US.

A close examination of the Commonwealth Fund data raises the following issues:

- Troubling results in the Atlantic Provinces on a number of metrics including preventable adult mortality and life expectancy above 60.
- Poor performance on coordinating care and wait times in Quebec, which could be reversed with greater integration and communication between hospitals and family practice clinics.
- A universal challenge in wait times, with no province reporting average waits anywhere near the international average; and
- Shortcomings regarding access to dental services and drugs in most provinces.

The authors also find that despite Medicare's egalitarian principles, provinces have among the lowest equity scores across all Commonwealth Fund countries. Drug and dental care access is linked to income levels. After-hours access to a regular doctor and time spent with a physician also differ by income level.

Progress can and should be made with improved coverage and shorter wait times, however improvement in these areas would still be insufficient to move most Canadian provinces from the rankings' bottom, absent broader, far-reaching change.

Provinces can learn lessons from each other. The federal government should support these comparison efforts to promote more innovation within Canada. The federal government should create an environment in which provinces could more readily experiment with new approaches to policy.

Colin Busby is Associate Director of Research at the C.D. Howe Institute.

To send a comment or leave feedback, email us at blog@cdhowe.org.