Birthplace of medicare braces for more health care reform

A sigh of relief was heard across rural Saskatchewan Dec. 5 after the provincial government announced it will not be shutting 50 small hospitals. Their closure had been recommended in a comprehensive review of the province's medicare system completed last April.

Saskatchewan premier Lorne Calvert said that recommendation was too disruptive and would not save much money. "If we were to select 20 of our smallest community hospitals and close them, I'm told the savings would [amount to] about \$14 million. That represents about 2 days of funding for the department of health."

But Calvert did adopt many of the

less controversial recommendations contained in the report, which was prepared by Kenneth Fyke, a former deputy minister of health in Saskatchewan and British Columbia.

Included in the new Action Plan for Saskatchewan Health Care is the creation of primary health care teams — physicians, nurses, mental health professionals, social workers and other health providers — that will serve rural communities. Doctors who voluntarily join a team will be on a contract or salary, rather than receiving fee-for-service payments.

Dr. Bev Karras, president of the Saskatchewan Medical Association

(SMA), said this is not a novel approach because many physicians already work in teams. "It is essential that [the SMA be involved] before the programs are implemented," she said. "Physicians must have a choice and must be able to feel comfortable with the work arrangements, and that would include how they are paid."

The SMA had criticized the Fyke report because its authors had not consulted physicians, particularly those in rural practice.

Saskatchewan currently spends almost 40% of its budget on health care, a total of \$2.2 billion in 2001. — *Amy Jo Ebman*. Saskatoon

III PULSE

Older MDs rushing to the Internet

According to the CMA's 2001 Physician Resource Questionnaire (PRQ), Internet use among physicians continues to rise, with 84% of physicians reporting that they use the Internet, compared with 76% in 2000. Younger physicians are most likely to be online, with 92% of those under 35 and 89% of those

aged 35–44 reporting that they use the Internet, compared with 80% of those in the 45–54 age group and 64% of those 65 years and older. While the rate of Internet use is up among all age groups in the past year, the largest increase was in the 65-and-older cohort, which stood at only 44% in 2000.

Forty-three percent of non-Internet users indicated that they plan to start using the medium in the next 12 months.

Following a pattern evident in previous years, GP/FPs are somewhat less likely to use the Internet (78%) than medical (89%) and surgical specialists (88%).

For the first time in 2001, the PRQ asked about the locations at which physicians engage in Internet activities. Thirty-eight percent of respondents indicated that they use the Internet only at home, 6% use it only at a professional location and 55% use it at home as well as at a professional location. Seventy-eight percent of respondents said they spend most time online at home, while only 19% indicated that most of their Internet use takes place at a professional location.

The PRQ is Canada's largest annual survey of the professional activities of physicians. The 2001 survey was mailed to a random sample of 7756 doctors, and the response rate was 42%. Results at the national level are considered accurate to ± 1.8%, 19 times out of 20. Tables from the 2001 PRQ are available at www.cma.ca/cmaj/vol-165/issue-5/prq/index.asp. — Shelley Martin, shelley.martin@cma.ca

