

PULSE

Health care's declining years

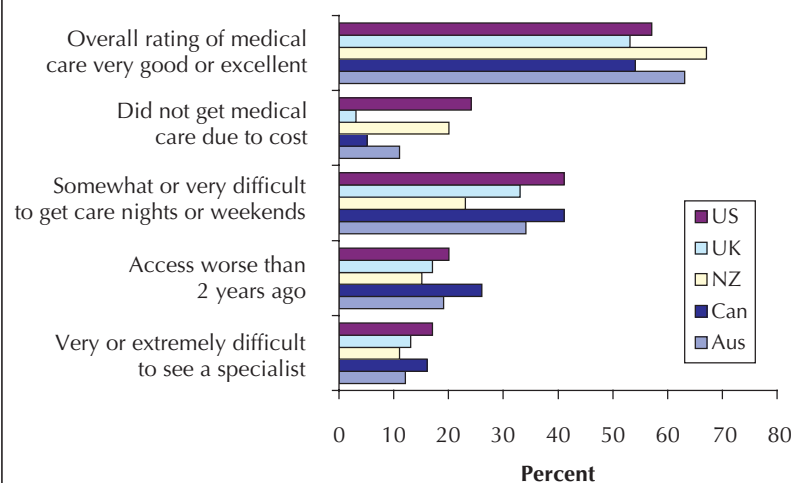
Since 1988, the Commonwealth Fund and the Harvard School of Public Health have conducted periodic, multi-country studies of citizens' perceptions of their health care systems. In 1988, more than half (56%) of Canadian respondents felt their country's health care system required only minor tinkering; only 34% of Australians, 27% of Britons and 10% of Americans felt the same way about their systems. Americans were the most likely (29%) and Canadians the least likely (5%) to feel that a complete rebuilding of their systems was required.

By 2001, Canadians' attitudes had shifted to such a degree that the proportion of respondents calling for a complete overhaul (18%) was very similar to that in Australia (19%), New Zealand (20%) and the UK (18%); Americans were somewhat more likely (28%) to think their health care system needed to be completely rebuilt. Overall, Canadians and Britons were least likely (54% and 53%, respectively) to rate their

medical care as very good to excellent; at 67%, New Zealanders were most likely to think that overall medical care in their country was very good to excellent.

In 2001, Canadians were most likely (26%) to report that access to care was worse than it was 2 years ago; proportions in the other countries ranged from 15% (New Zealand) to 20% (US). Canadians were more likely (16%) than Australians (12%), New Zealanders (11%) and Britons (13%) to feel that it is very or extremely difficult to see a specialist. At 41%, Canadians and Americans were most likely to say it is somewhat or very difficult to get care on nights or weekends; only 23% of New Zealanders shared that view. Canadians were much less likely than Americans to say they did not get medical care due to the cost (5% versus 24%), and were also less likely than Americans to say they had difficulty paying medical bills (7% versus 21%). — *Shelley Martin*, Senior Analyst, Research, Policy and Planning Directorate, CMA

Views on access and quality of care in 5 countries, 2001



Canada's ER problems starting to plague US

In developments that are already common in Canada, American emergency departments (EDs) are periodically shutting down, diverting ambulances and forcing patients to wait longer for beds.

Sixty percent of the nation's EDs are now operating at or over capacity, and 90% of hospitals with more than 300 beds are full or over capacity. The main causes appear to be nursing shortages and shrinking capacity within the emergency care system.

The data emerged from a survey conducted by the American Hospital Association (AHA), in which nearly 90% of trauma centres reported being "overwhelmed" and more than half of urban EDs reported that they have been closed to ambulance admissions at some time.

The survey also found that a trained-worker shortage has become a major contributing factor in the diversion of ambulances — an average of 16% of nursing positions are going unfilled.

Although ED overcrowding is occurring across the country, it is most acute in large urban centres. This is especially true in the northeast, where 52% of EDs report being beyond their capacity. The AHA also reports that the number of hospitals in the US has shrunk by 14% since the mid-1980s and the number of beds has dropped by 18%. Meanwhile, outpatient visits have increased by almost 16% since 1997.

Another survey, released by the US Centers for Disease Control and Prevention, found that Americans made 108 million visits to hospital emergency departments in 2000, up 14% from 1997. However, because the number of EDs decreased from 4005 to 3934 during the same period, the number of visits per ED actually rose by 16% and the average waiting time for patients making nonurgent visits increased by one-third, from 51 minutes in 1997 to 68 minutes in 2000.

This growing use of EDs to supply nonurgent services is considered a key indicator of the difficulty many low-income Americans have in gaining access to primary care, largely because they have no health insurance. — *Milan Korcok*, Florida