



Ministry of Health

Breakfast with the Chiefs 5 fruits and veggies!!

Advancing health care in BC

February 22, 2006

Dr. Penny Ballem

Deputy Minister of Health

What are we trying to achieve?

- Optimal health status for all British Columbians
- Improved access, reduced waiting times: now and in the future
- Improved quality of care; optimal health outcomes for British Columbians
- Sustainable and affordable health care now and in future



Ministry of Health

How Are We Doing?

2001-2006

DEPUTIES:

Nfld:	3
PEI:	2
NS:	2
NB:	1
QUE:	2
ONT:	4
MAN:	2
SASK:	2
ALTA:	3
BC:	1 (+1)
FEDS:	2

MINISTERS:

Nfld:	3
PEI:	2
NS:	2
NB:	3
QUE:	2
ONT:	2
MAN:	2
SASK:	2
ALTA:	2
BC:	3 (+5)
FEDS:	5

Accountability and Transparency

- Progress Board Report – Government of BC
- Budget Transparency and Accountability Act
- Ministry Service Plans
- Ministry Annual Report on Service Plans
- Health Authority Performance Agreements
- Annual Report on Health Authority Performance Agreement
- Auditor General of BC Reports
- Provincial Health Officer Reports
- Vital Statistics
- National Performance Indicator Reports
- Stats Canada Annual Access Survey
- Canadian Institute for Health Information Reports
- National Health Council Reports
- Conference Board of Canada Reports
- First Minister Agreements Reports

CANCER ADVOCACY COALITION OF CANADA

REPORT CARD

2005

The Conference Board of Canada
Insights You Can Count On



Report February 2006



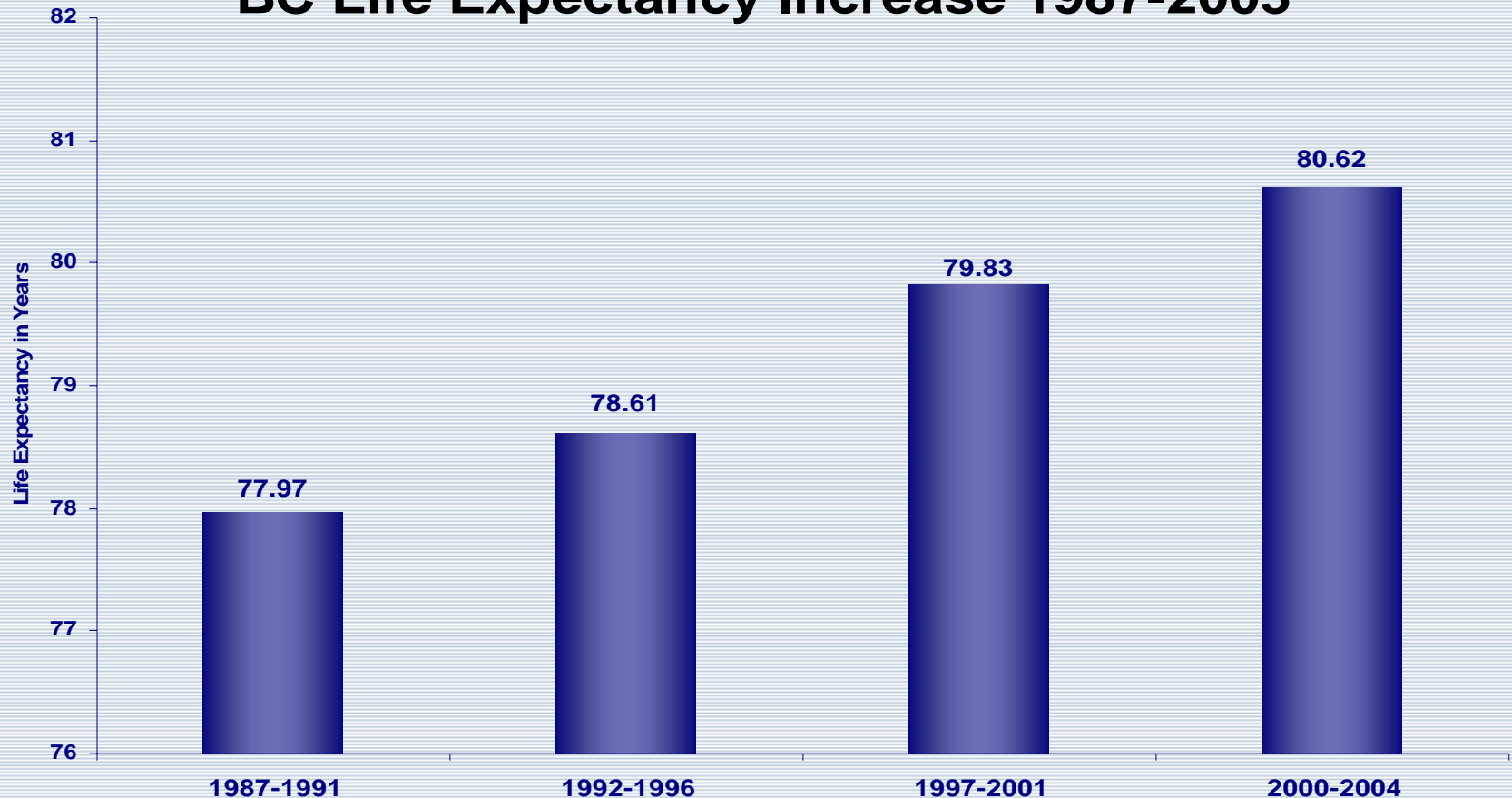
Healthy Provinces, Healthy Canadians A Provincial Benchmarking Report

HEALTH, HEALTH CARE AND WELLNESS

How Does B.C. Compare?

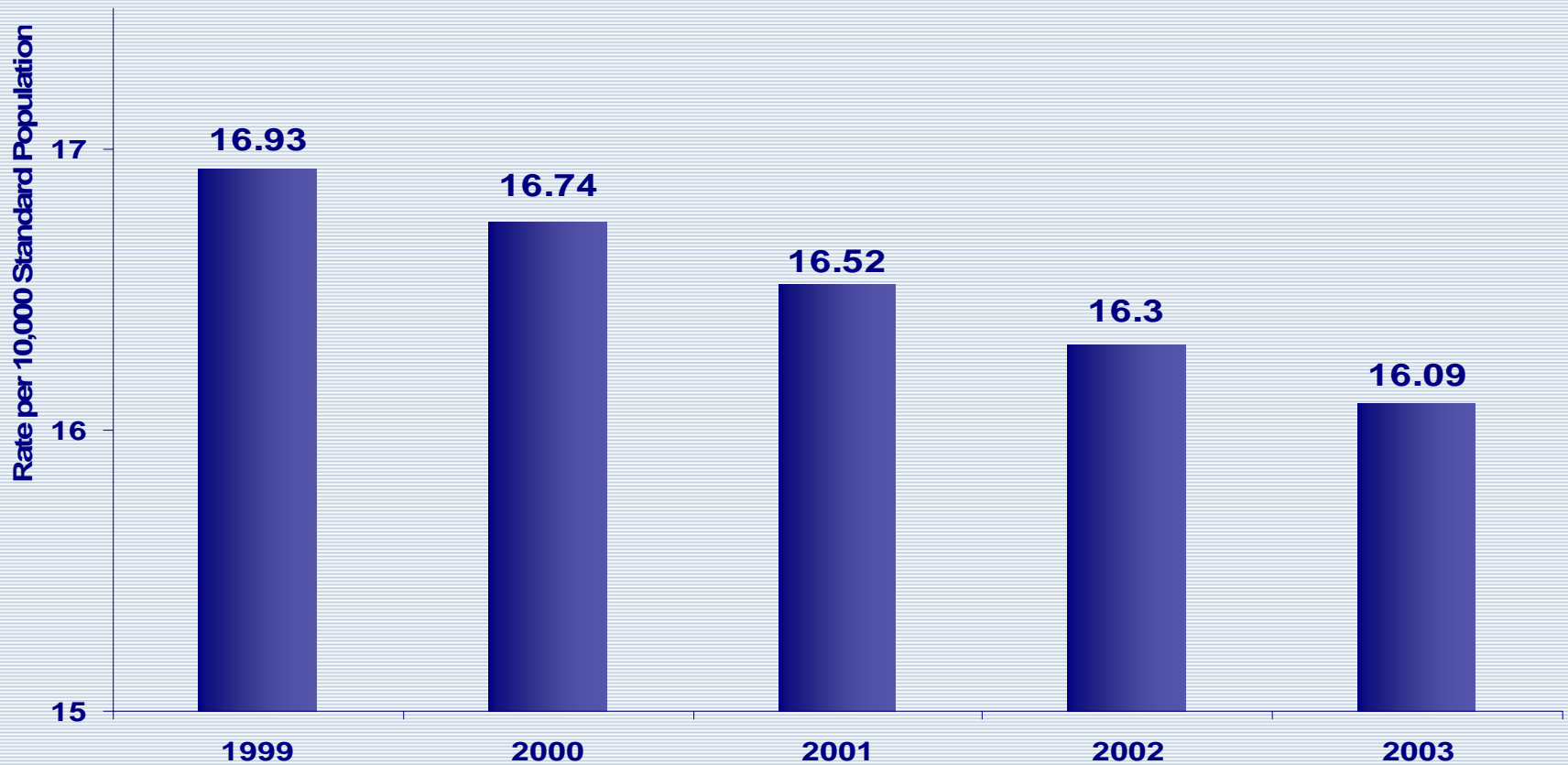
Greater Life Expectancy

BC Life Expectancy Increase 1987-2003



Better Cancer Outcomes

5 Year Age-Standardized Mortality Rate, Malignant Neoplasms, 1999-2003



Source: BC Vital Statistics Agency

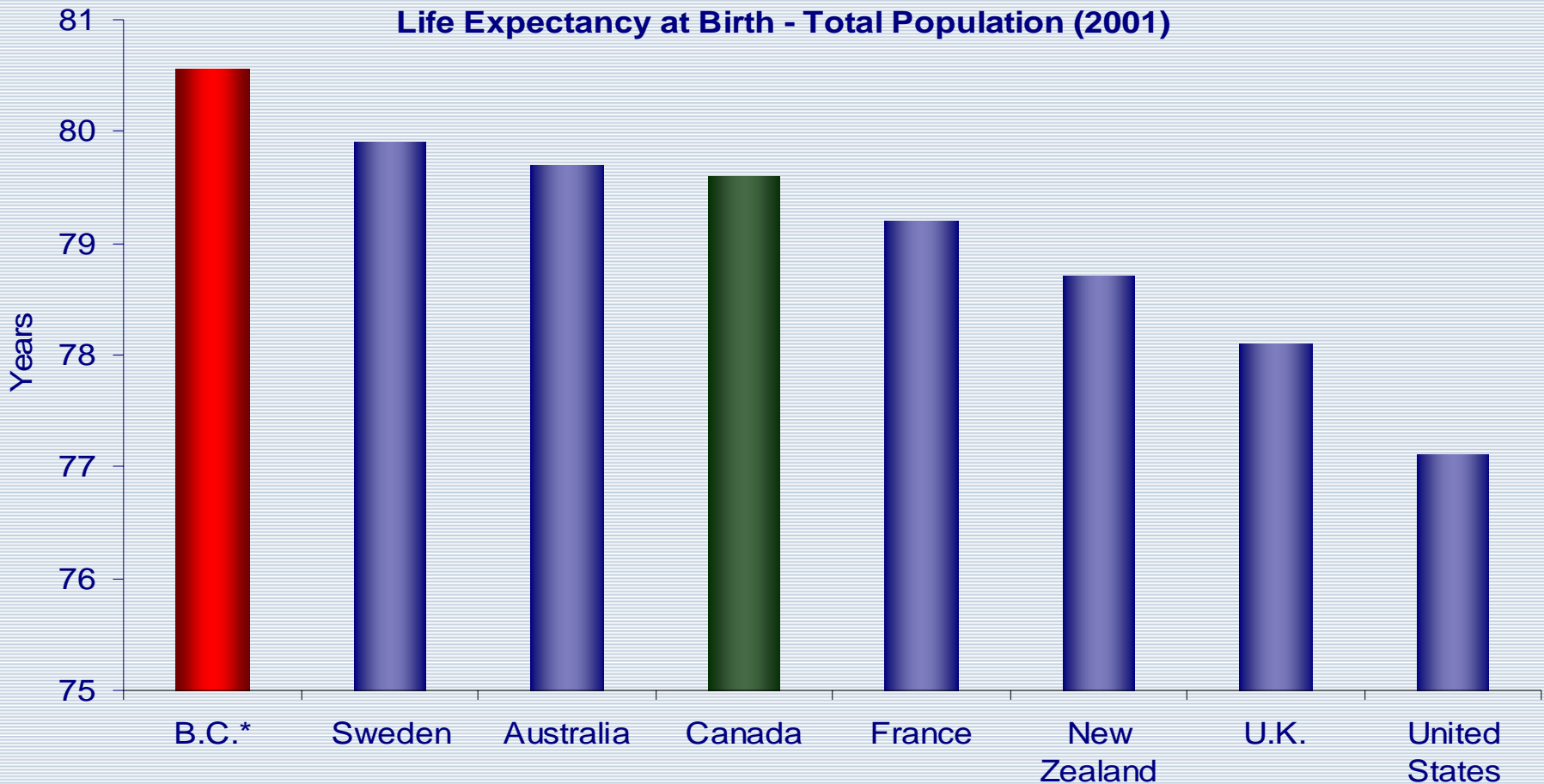
Better Heart Disease Outcomes

Age Standardized Mortality Rate, Ischemic Heart Diseases,
British Columbia, 1999-2003



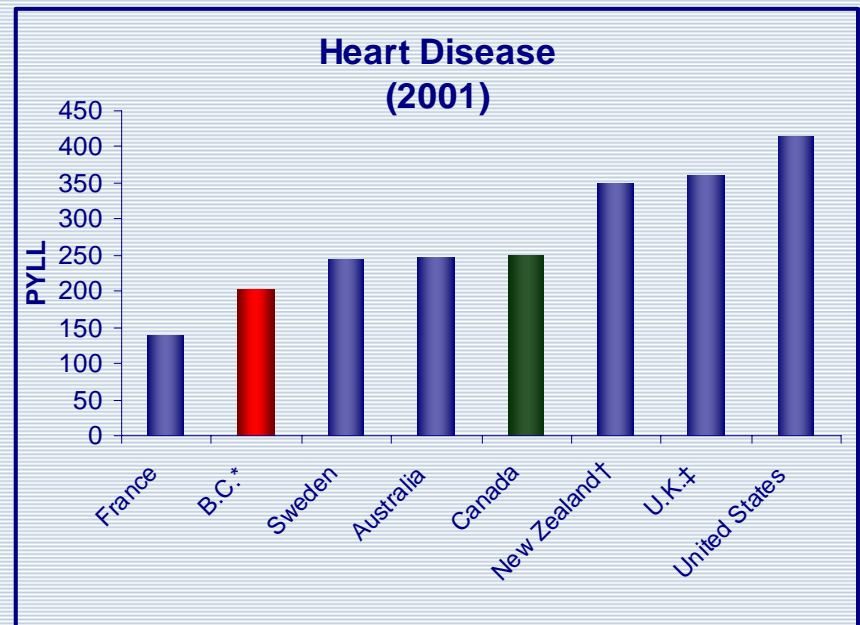
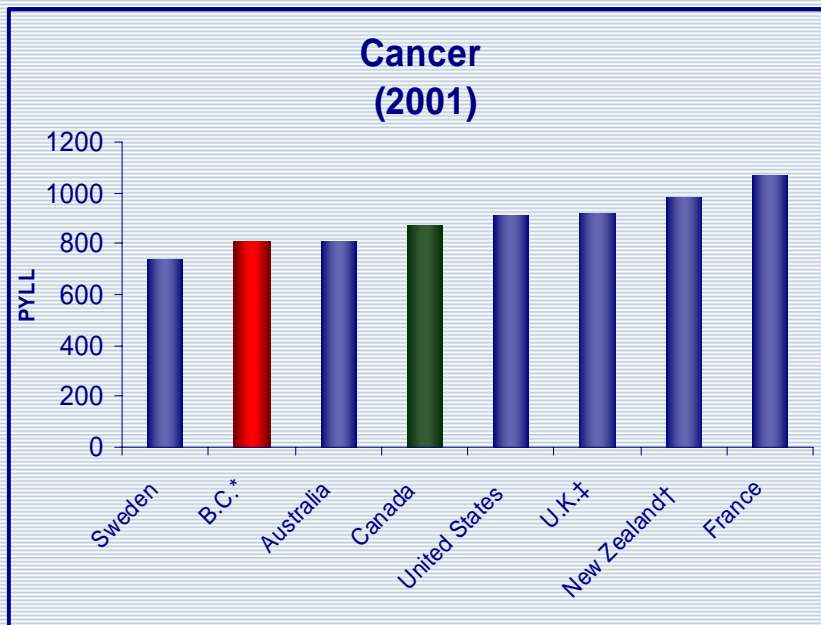
Source: British Columbia Vital Statistics Agency

International Comparisons

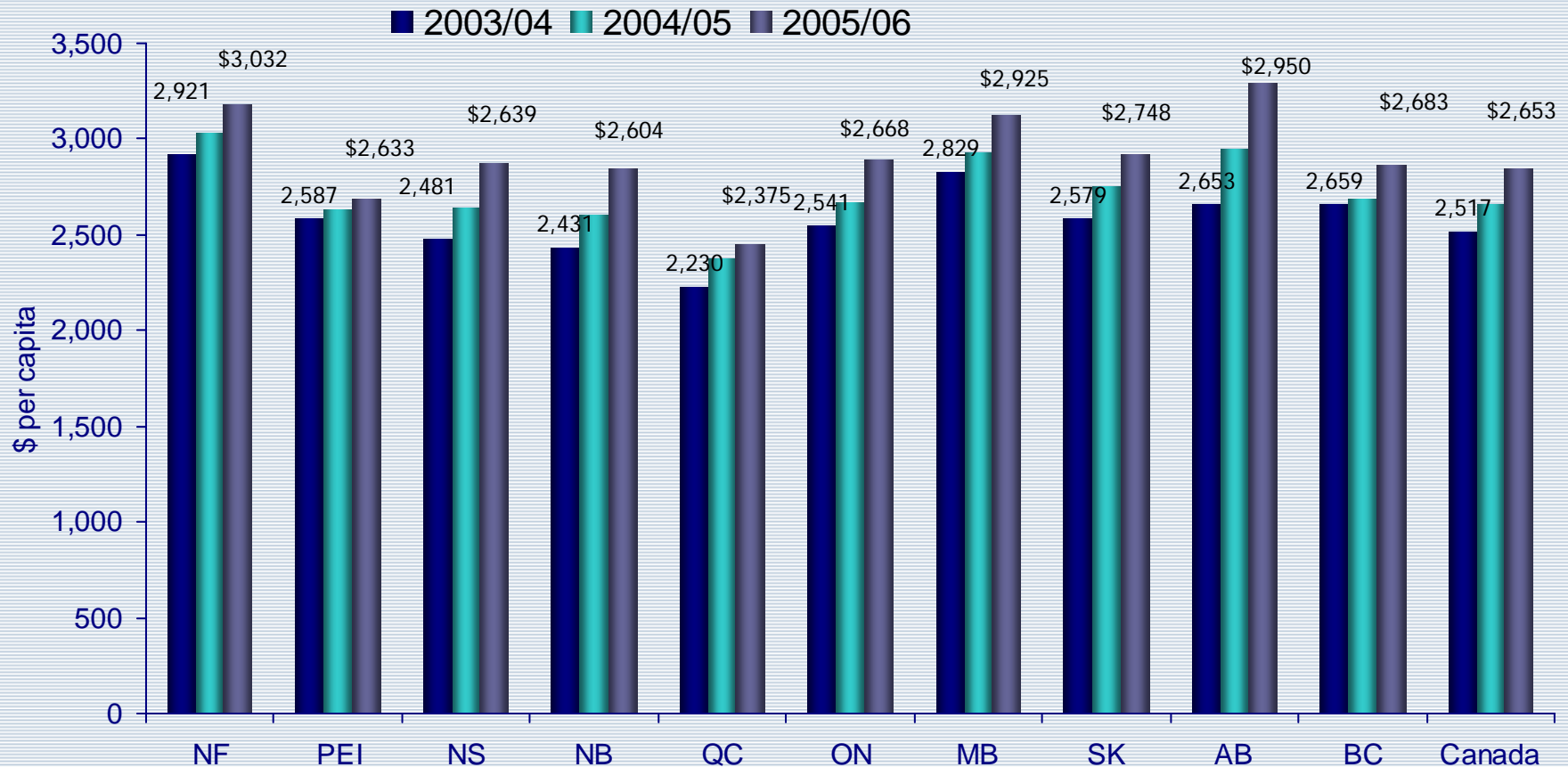


International Comparisons

Premature years of life lost (PYLL) cancer & heart disease
– the lower the number the better



Provincial Government Health Spending per Capita



Amongst the 10 Provinces, BC per capita health care spending ranked 3rd in 2003/04, 5th in 2004/05 and 7th in 2005/06.



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Health System Challenges

CHALLENGES: WAIT TIMES

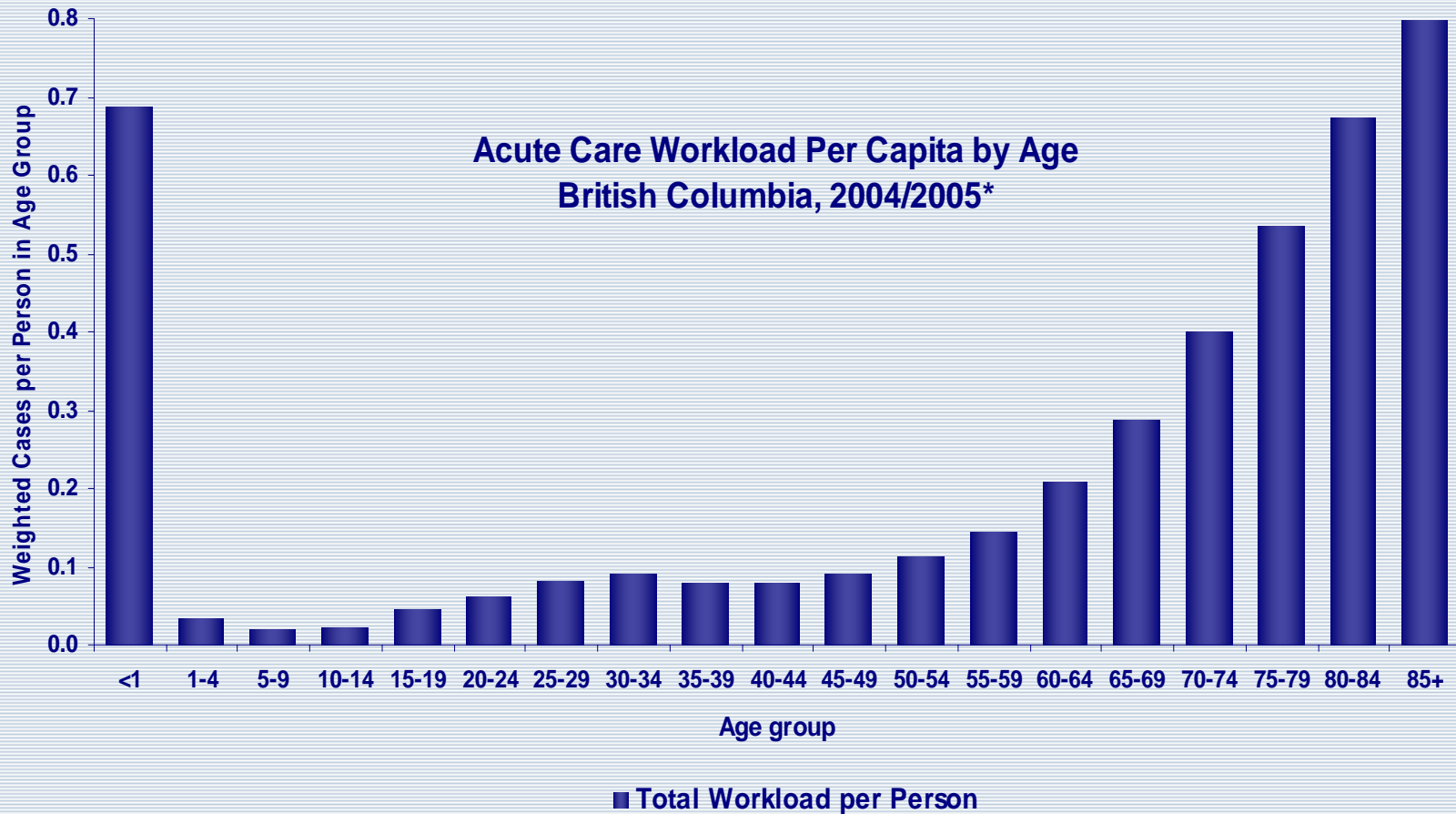
- **Hips:**
 - 1,800 people waiting for a hip replacement have been waiting over 6 months (60% of people waiting).
 - Of those, 1,006 people have been waiting more than a year (35% of people waiting).
- **Knees:**
 - 3,300 people waiting for a knee replacement have been waiting over 6 months (60% percent).
 - Of those, 1,900 have been waiting more than a year (35% of people waiting).

Surgical Demand is Rising

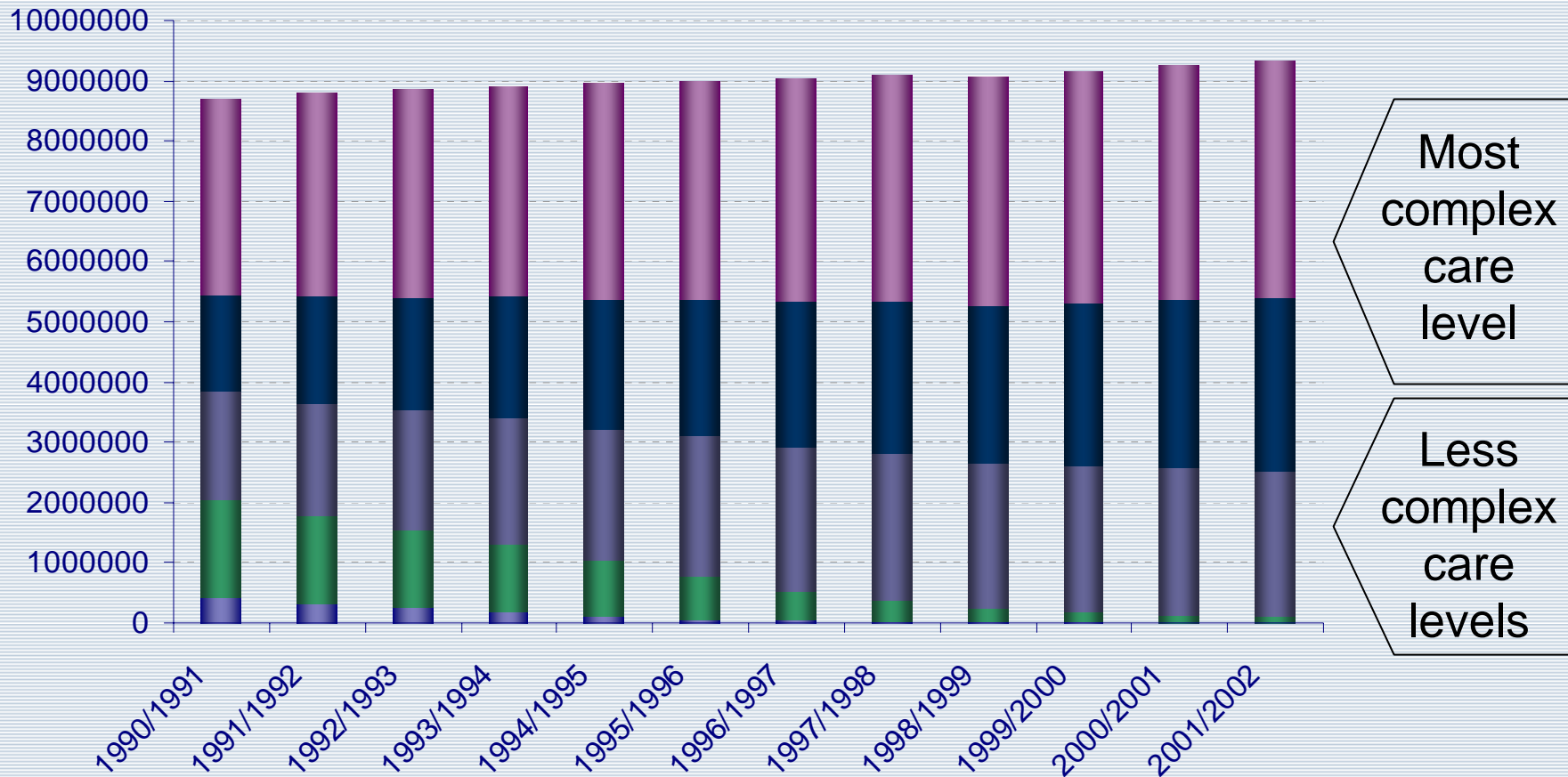
Compared to 1990/91, an 80-year-old British Columbian today is:

- **Twice** as likely to have a knee replacement
- **Twice** as likely to have cataract surgery
- **Twice** as likely to have a coronary bypass
- **Eight times** as likely to have an angioplasty

Seniors Use Health System More Intensively



Residential Care Days 1990 - 2002

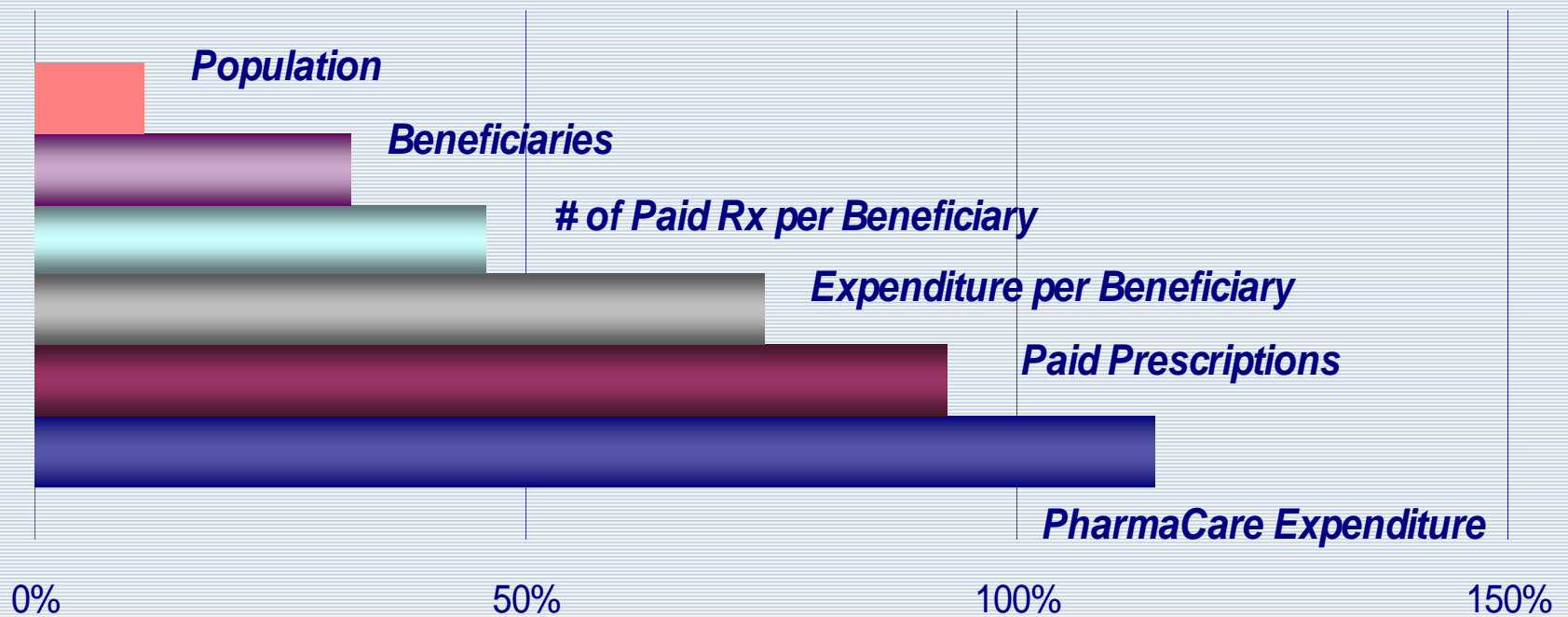


Aboriginal Health in BC

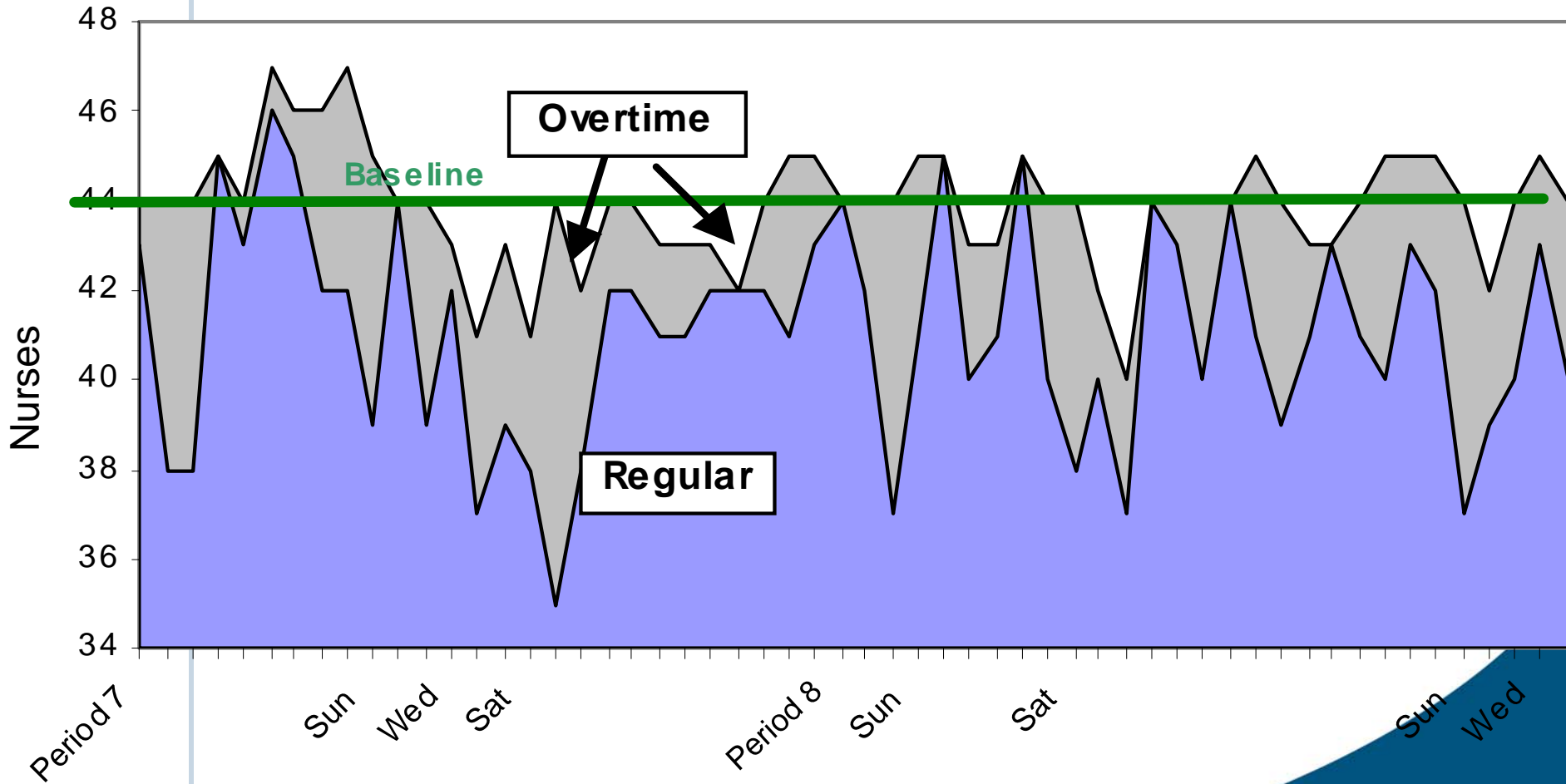
- Life expectancy for Status Indians in BC is approximately 8 years less than for other residents
- The rate of low birth weight births is slightly higher in Status Indian population
- The rate of infant mortality is slightly higher for Status Indians
- Status Indians had almost twice the Age Standardized Mortality Rate of the rest of the population

PharmaCare Growth 1995/96 to 2004/05

BC PharmaCare: 10 Years of Growth



VGH ICU
Regular Shifts and Overtime Shifts worked - 24 Hour Total
Period 7 (9/9-10/6) and Period 8 (10/7-11/3)

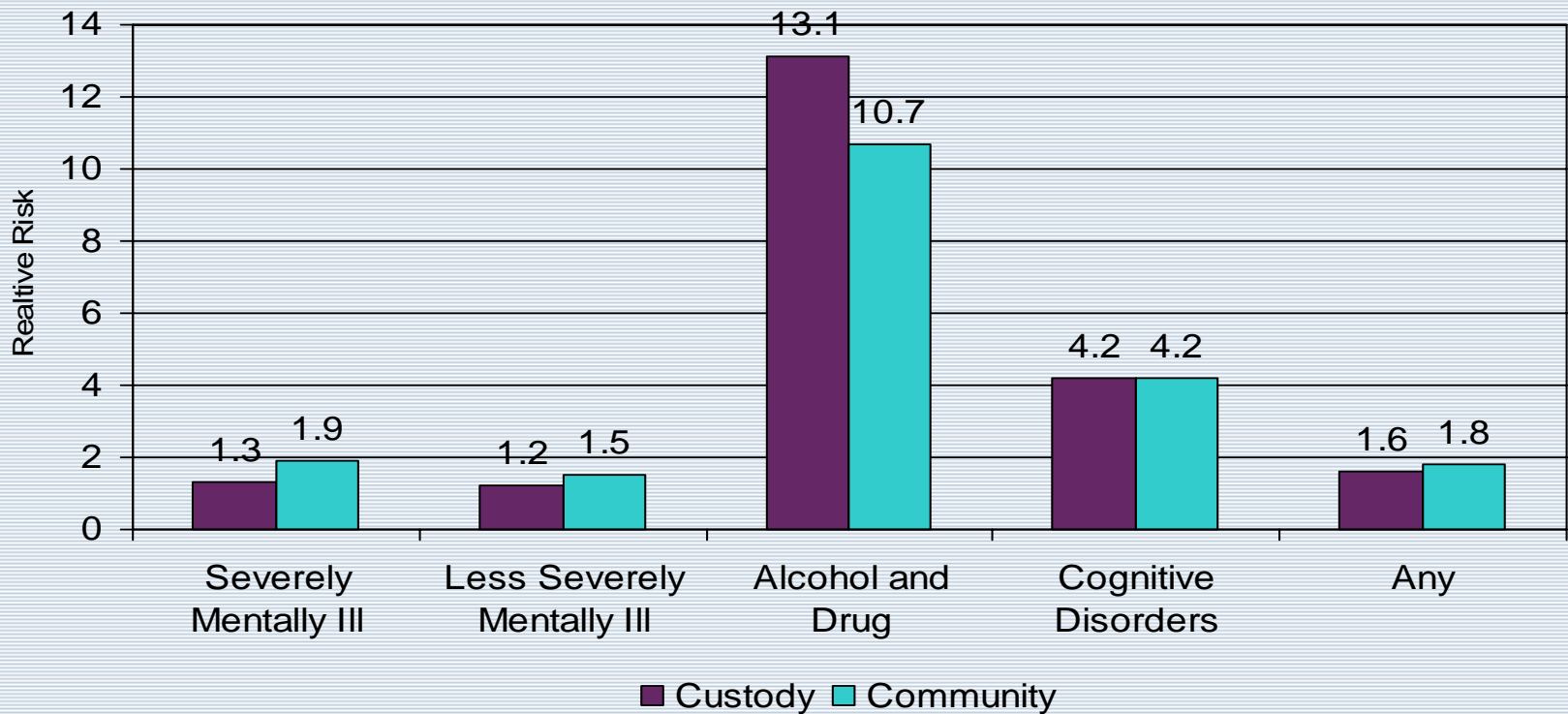


Quality care for patients with chronic disease

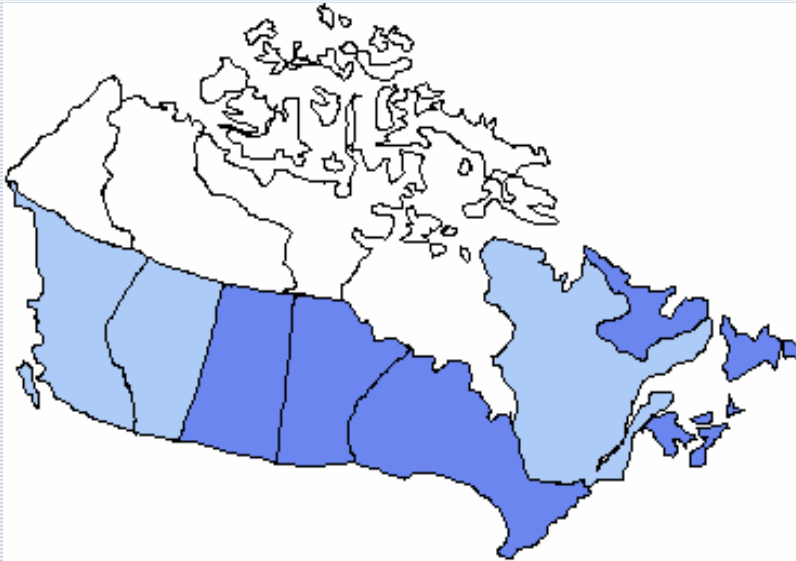
MSP and Pharmacare data shows that few patients were receiving optimal medical diabetes care at the primary care level in 2002/03

- | | |
|------------------------|-----|
| ➤ Northern HA | 28% |
| ➤ Interior HA | 32% |
| ➤ Fraser HA | 35% |
| ➤ Vancouver Coastal HA | 38% |
| ➤ Vancouver Island HA | 38% |

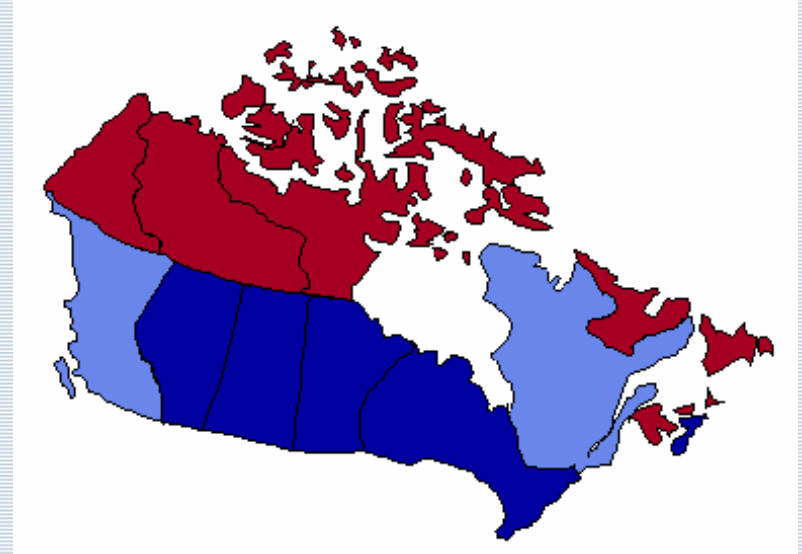
Relative Risks of Mental Health Problems for Adults Involved with the Corrections System








Obesity



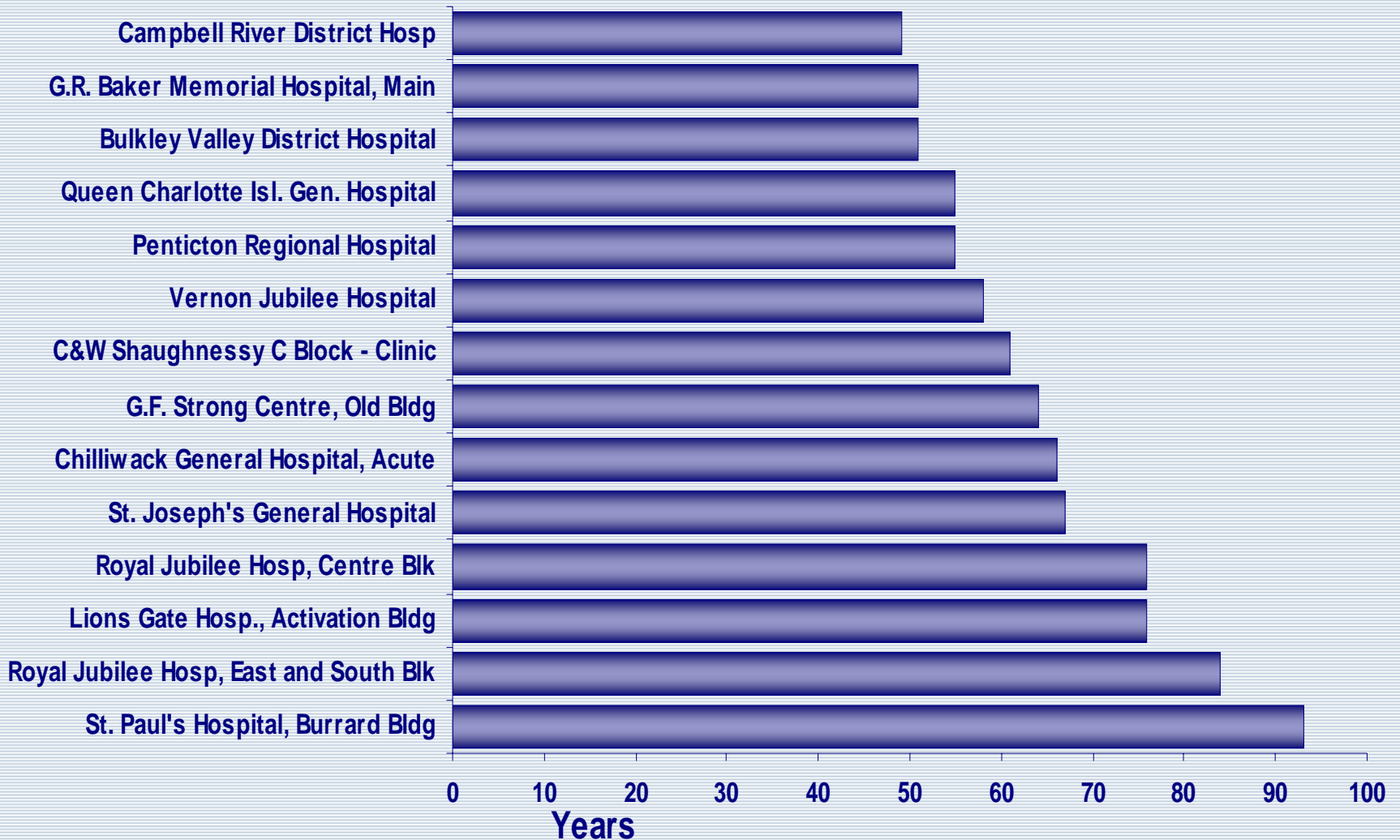
Obesity Trends - 1990



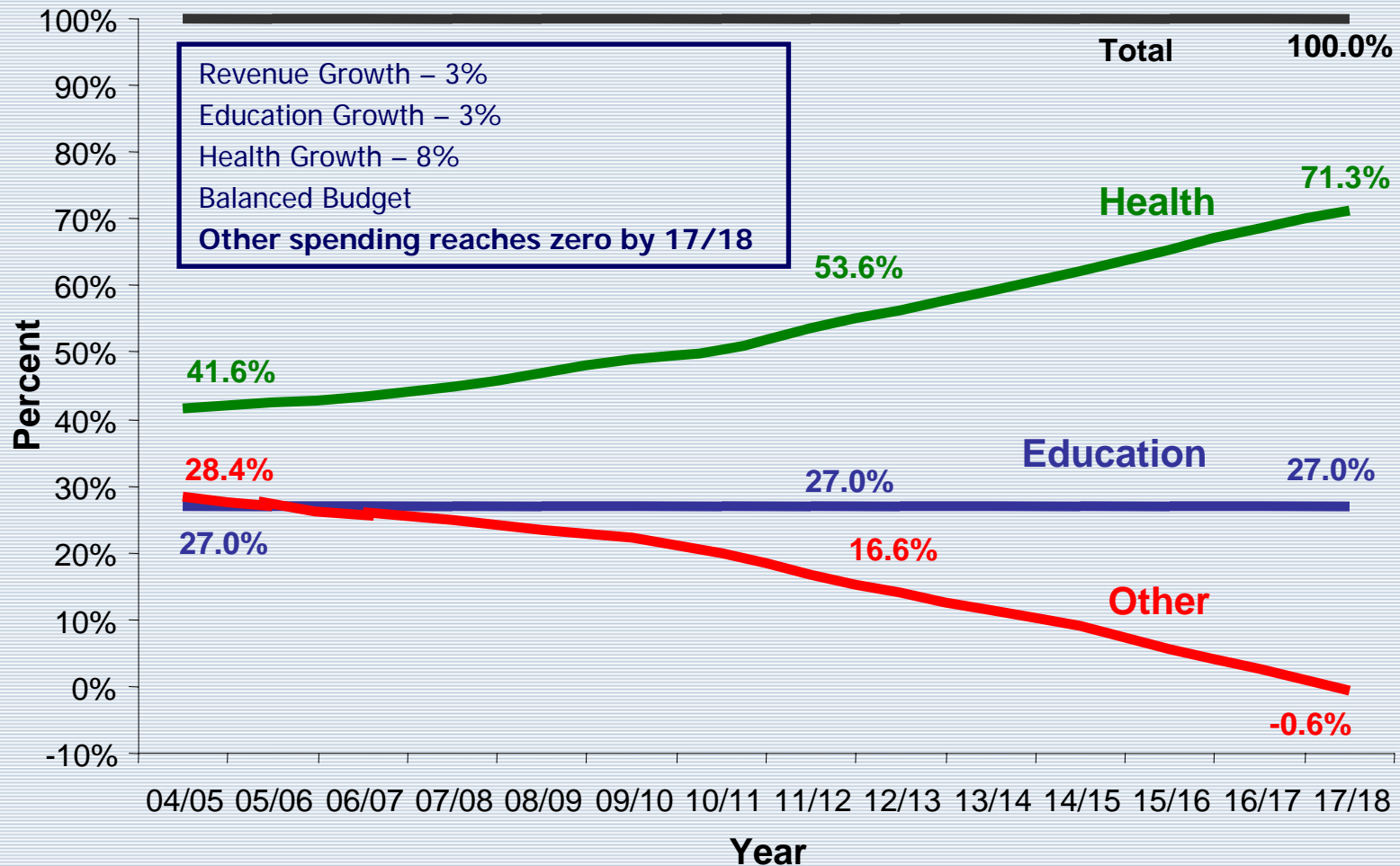
Obesity Trends - 2003

No Data  <10%  10%-14%  15-19%  ≥20% 

Many Health Facilities are Old



Revenue/Spending Scenario



Budget 2006

3.9%/2.0%/1.1% before wages



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Priorities for Change

Optimize Health of the Population and Use of the Continuum of Care

- Public health/prevention/health promotion
- Primary care
- Community programs
- Acute care
- Home care/home support
- Supportive housing/assisted living
- Residential care

ActNow - Results by 2010

- 10% **reduction** in tobacco use
- 20% **increase** in fruits and vegetable intake
- 20% **increase** in physical activity
- 20% **reduction** in overweight and obesity
- 50% **increase** in women counseled re alcohol use during pregnancy



Action Schools! BC

Action Schools! BC is a best practices physical activity model designed to assist elementary schools in creating individualized school action plans to promote healthy living.

... providing **more** opportunities for **more** children to be **more** physically active **more** often.

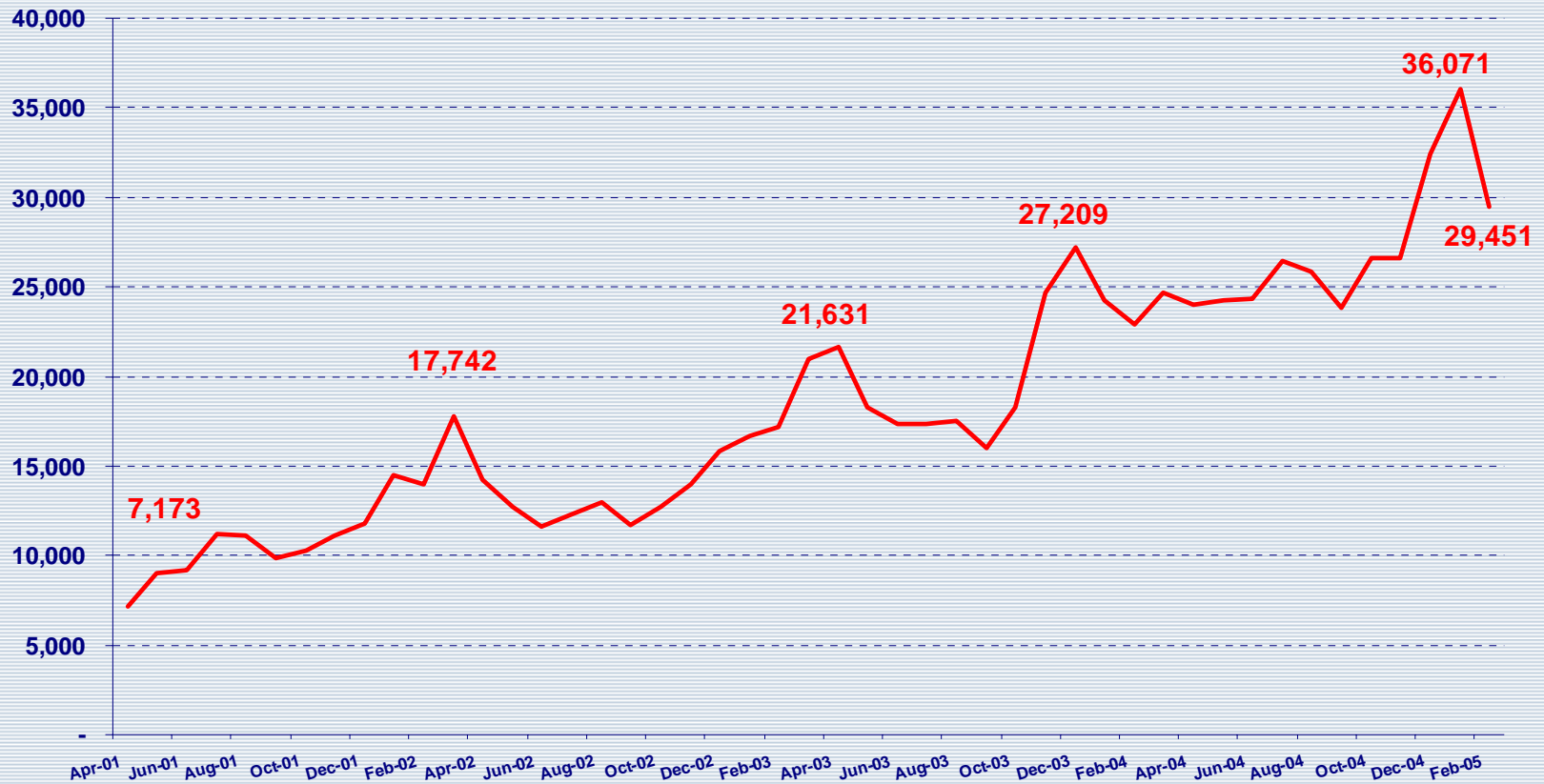


BRITISH
COLUMBIA

Ministry of Community, Aboriginal
and Women's Services
Ministry of Health Planning



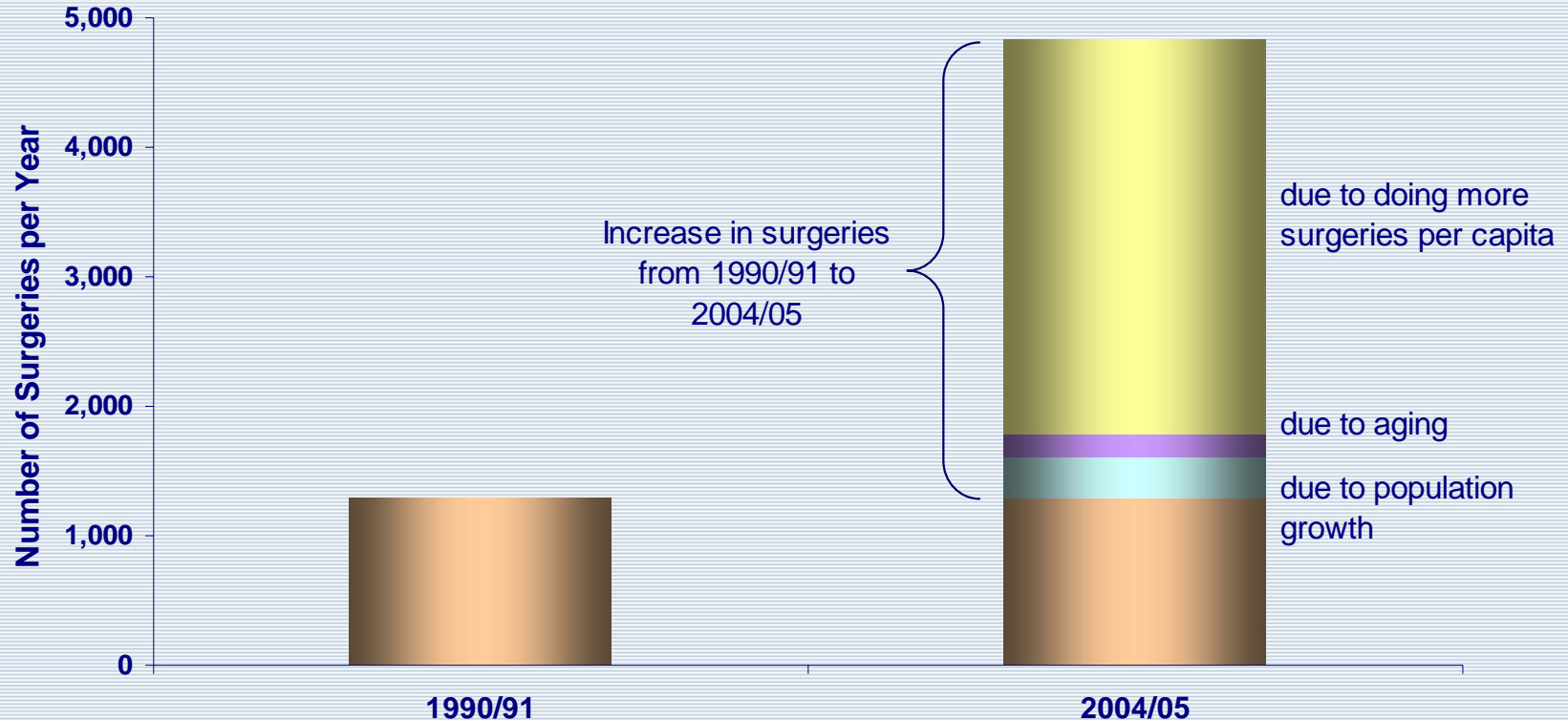
Encouraging Independence - BC NurseLine April 2001 – February 2005



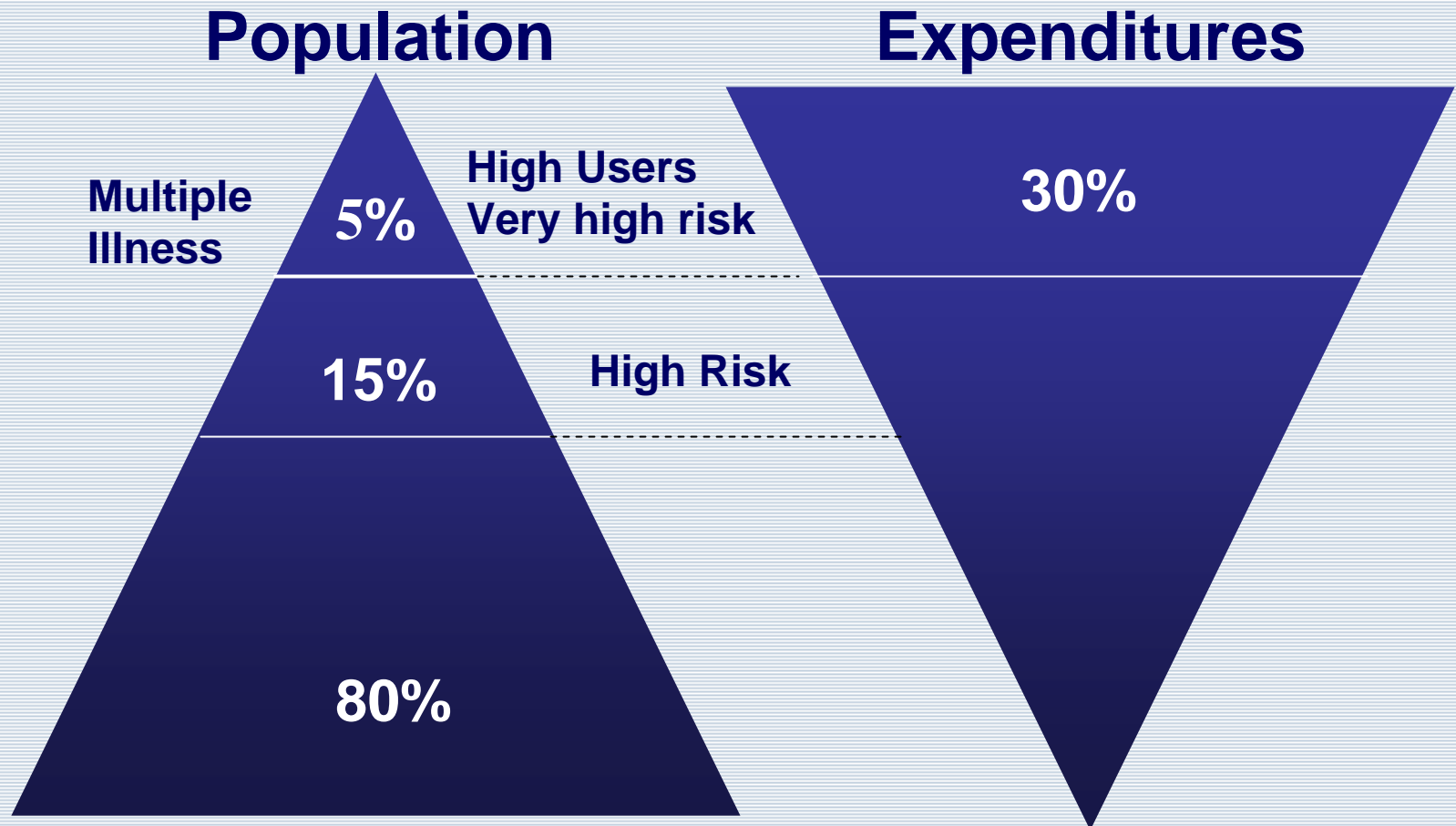
Understanding Increased Capacity

Knee Replacement Surgery - Increased Capacity

1990/91 to 2004/05

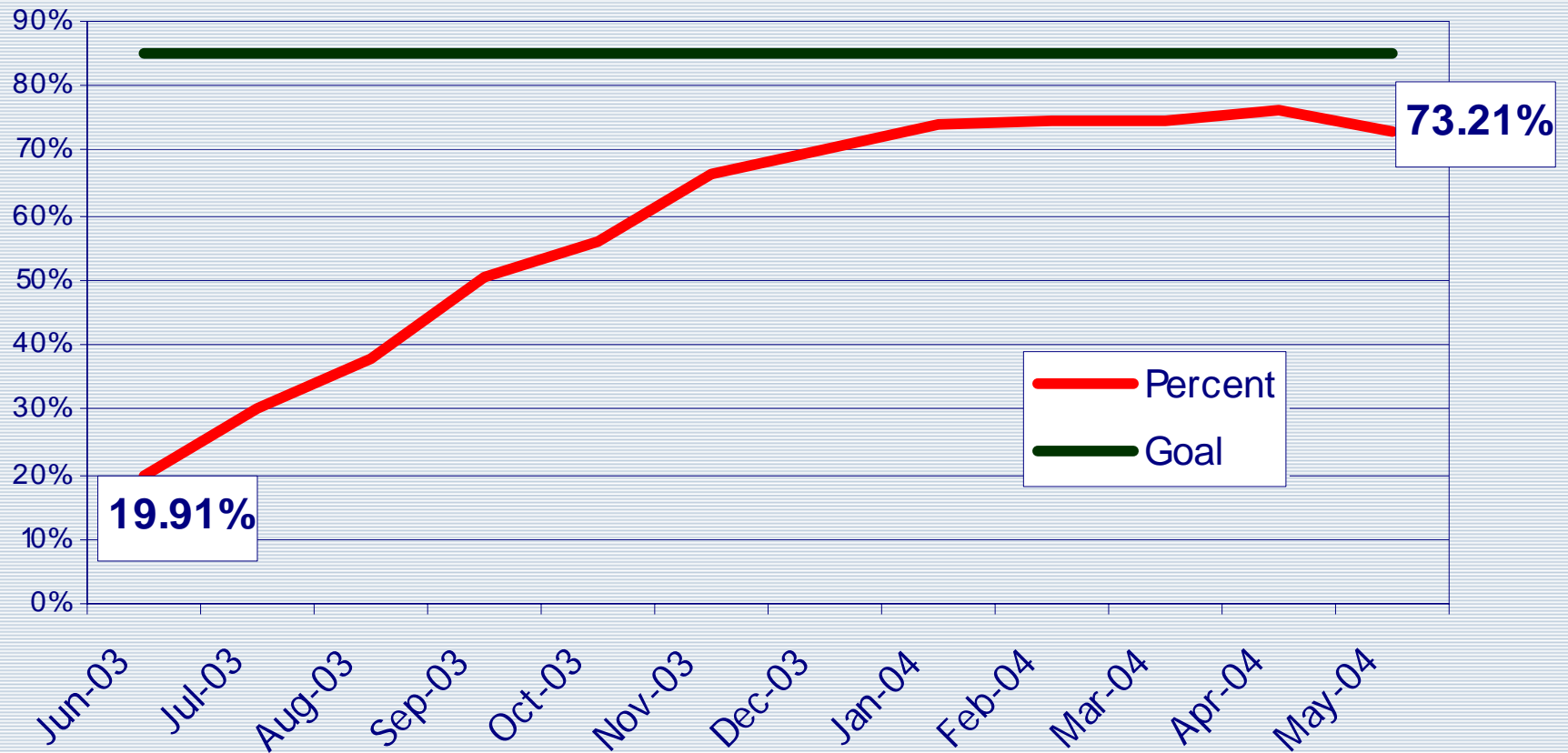


Follow the money



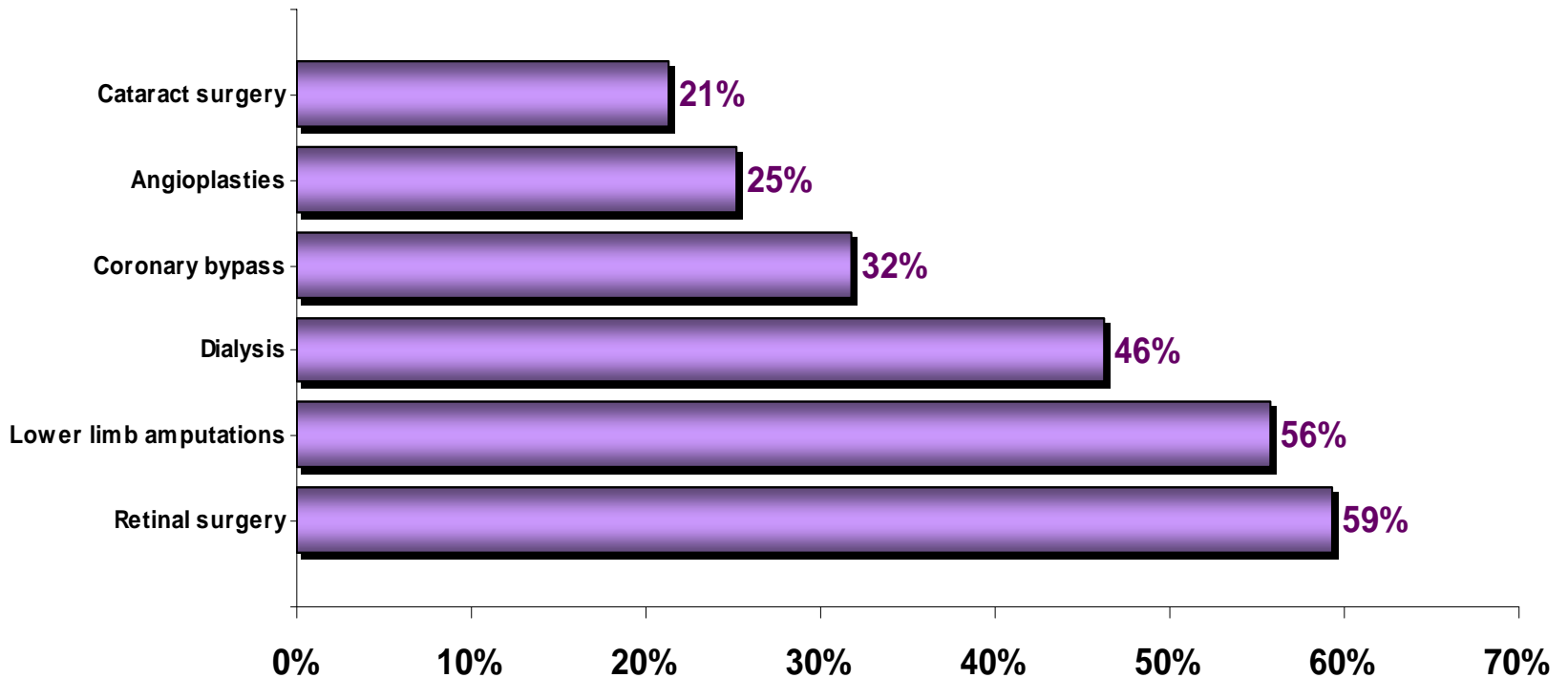
Improve Quality of Care

% CHF Patients with Measurement of Complete Ejection Fraction



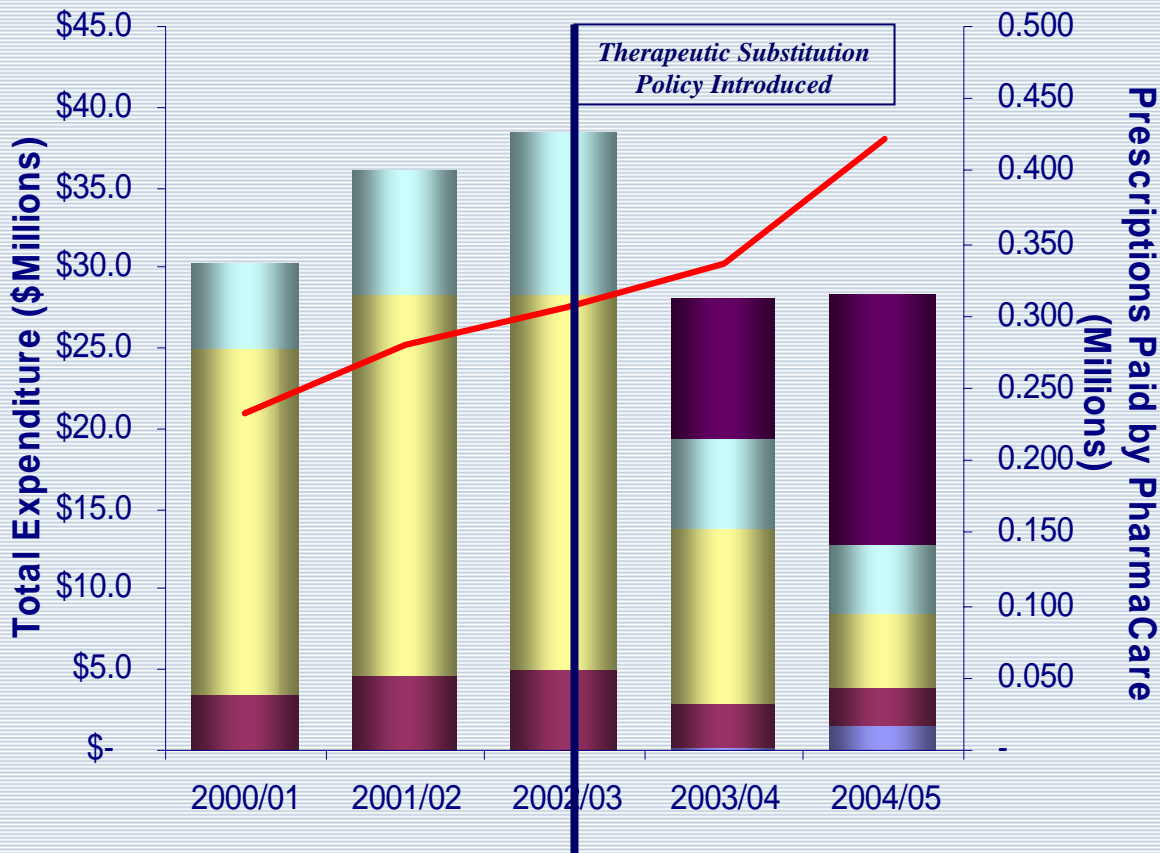
Quality care essential to minimize unnecessary use of resources

Diabetes Patients as a Percentage of Selected Procedures/Surgeries
British Columbia 2002/03



Value for Money - PharmaCare Policy

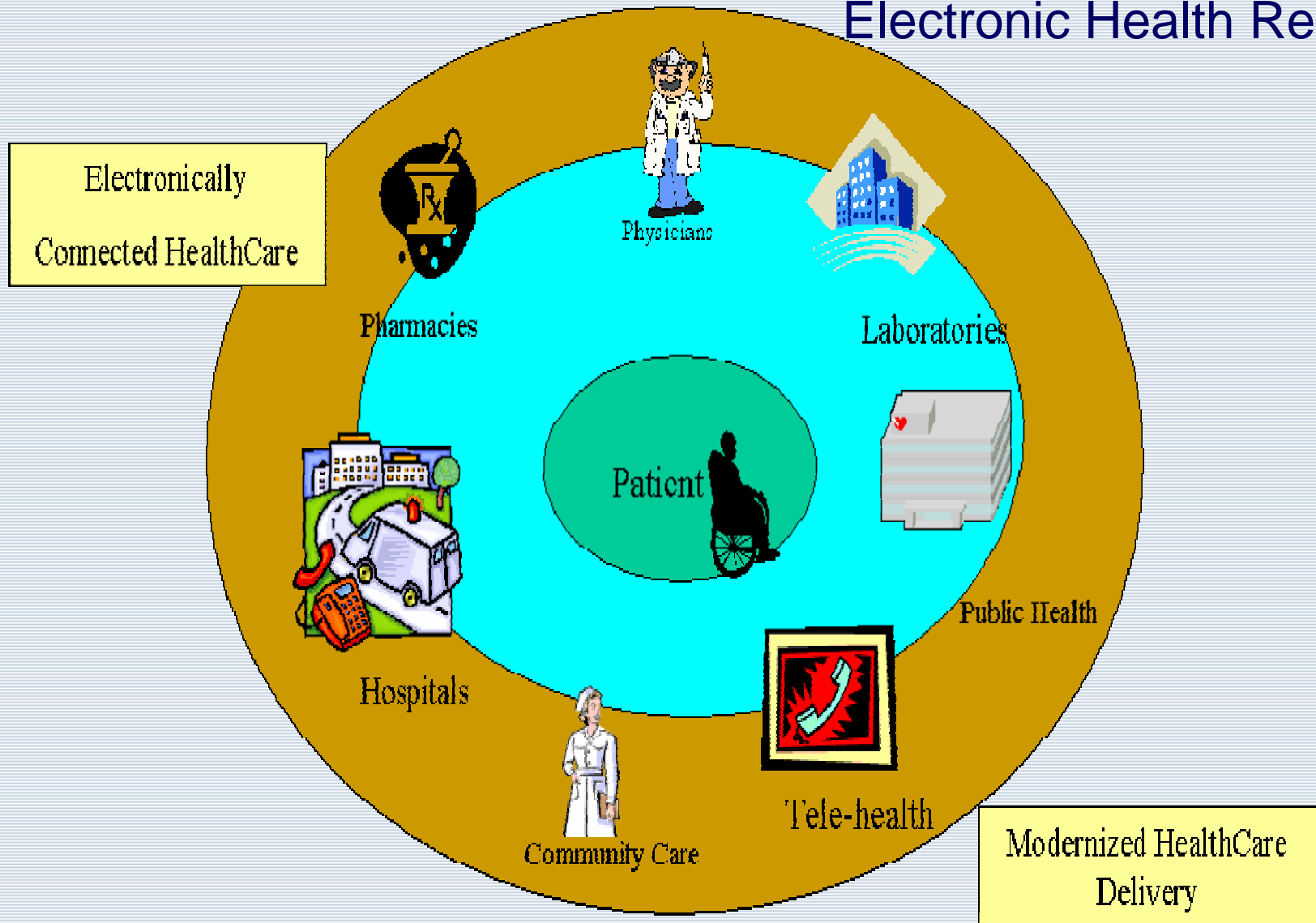
Proton - Pump Inhibitor Expenditure and Utilization Trends



Provincial Wait Times Strategy

- Innovation in service delivery
 - **Richmond Hip and Knee project**
 - **UBC Centre of Excellence**
- Provincial wait list management:
 - **Management of patients: BC Nurseline**
 - **Prioritization tools**
 - **Provincial registry with priority access based on acuity**
- Maximizing capacity in public and private sector; co-ordinated procurement
- Collaboratives to support quality care:
 - **BC Arthroplasty Collaborative (OASIS approach)**
- Health services research:
 - **Centre for Hip Health at VGH**

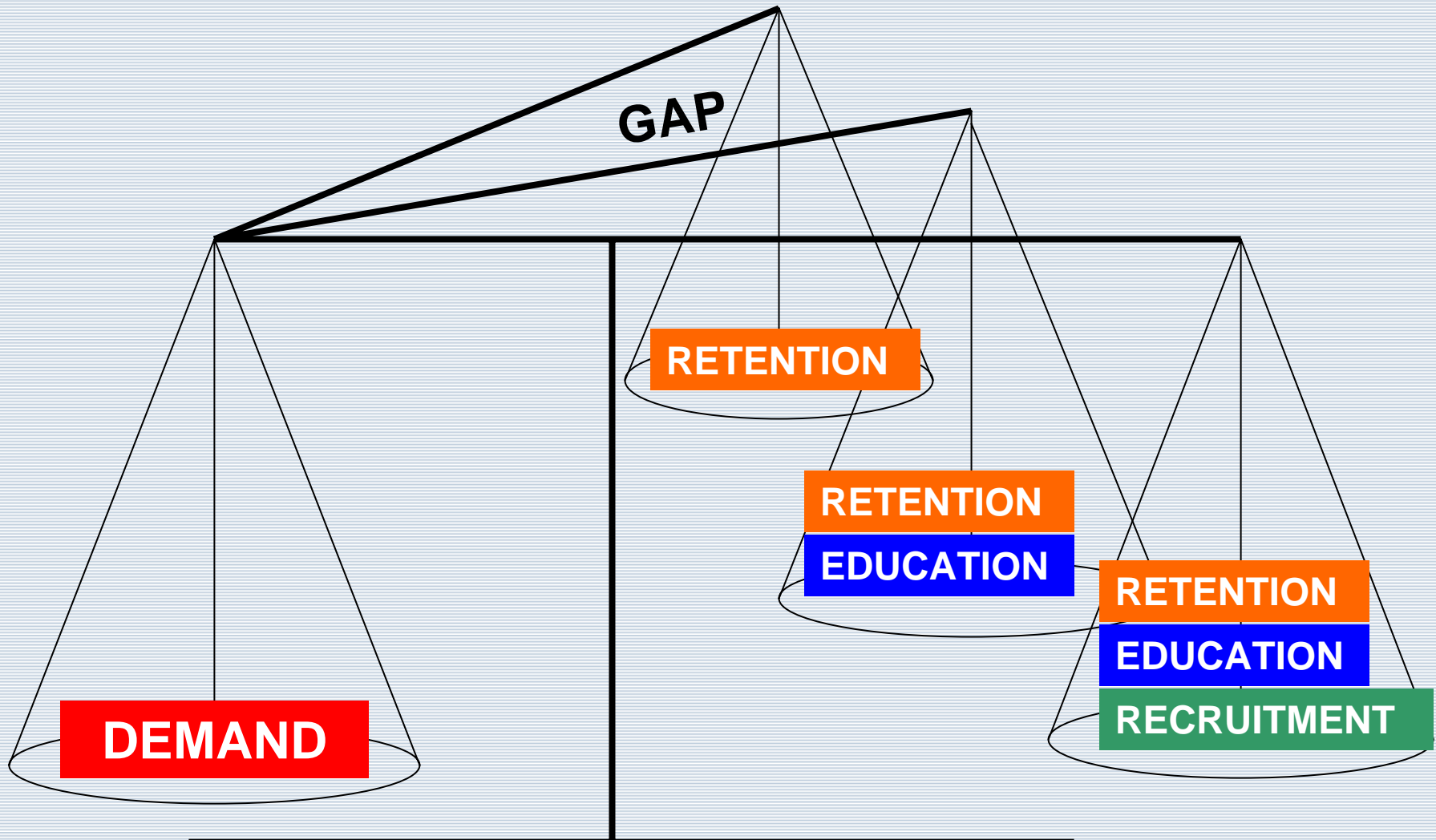
Electronic Health Record



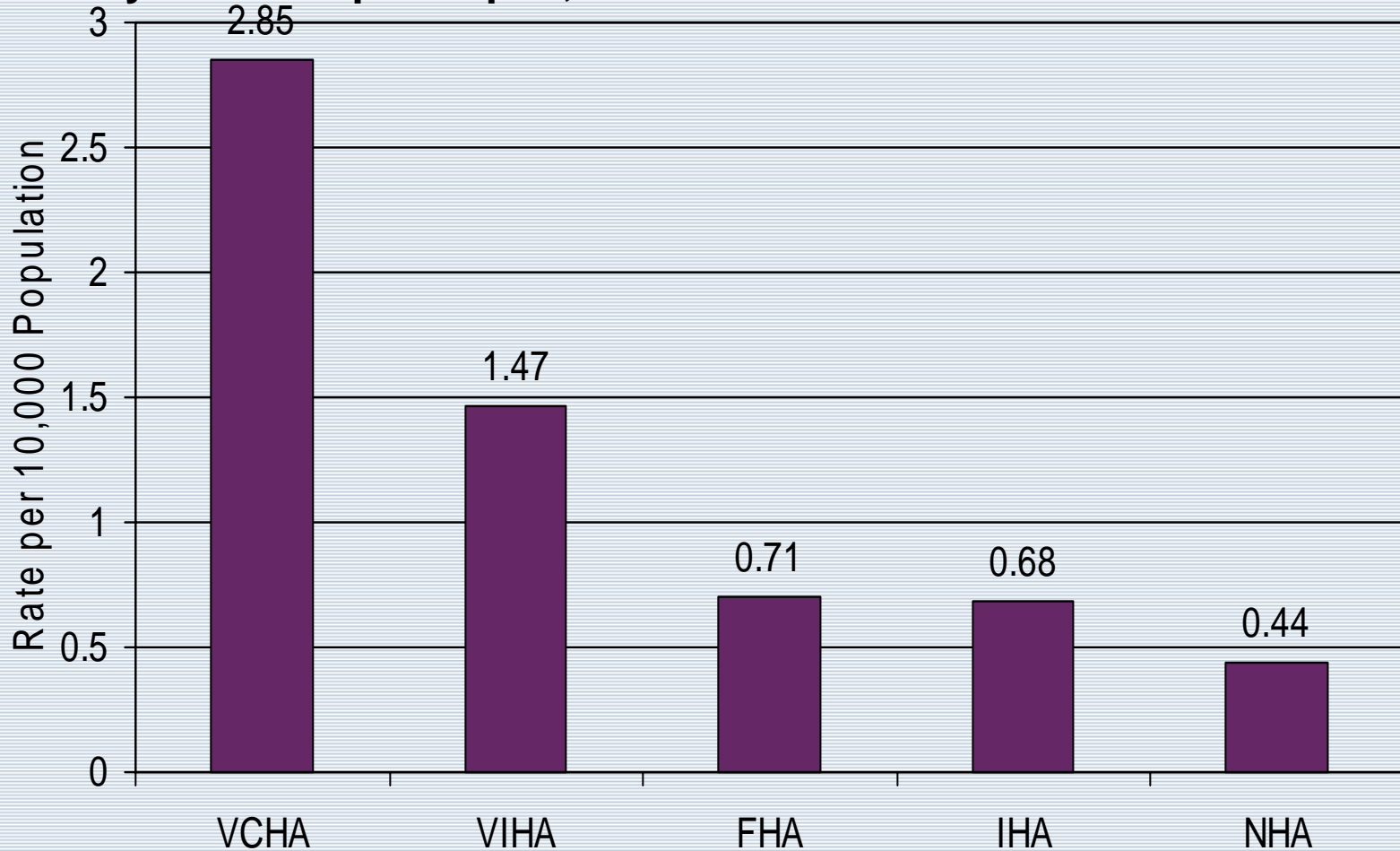
Modernizing and Building New Facilities



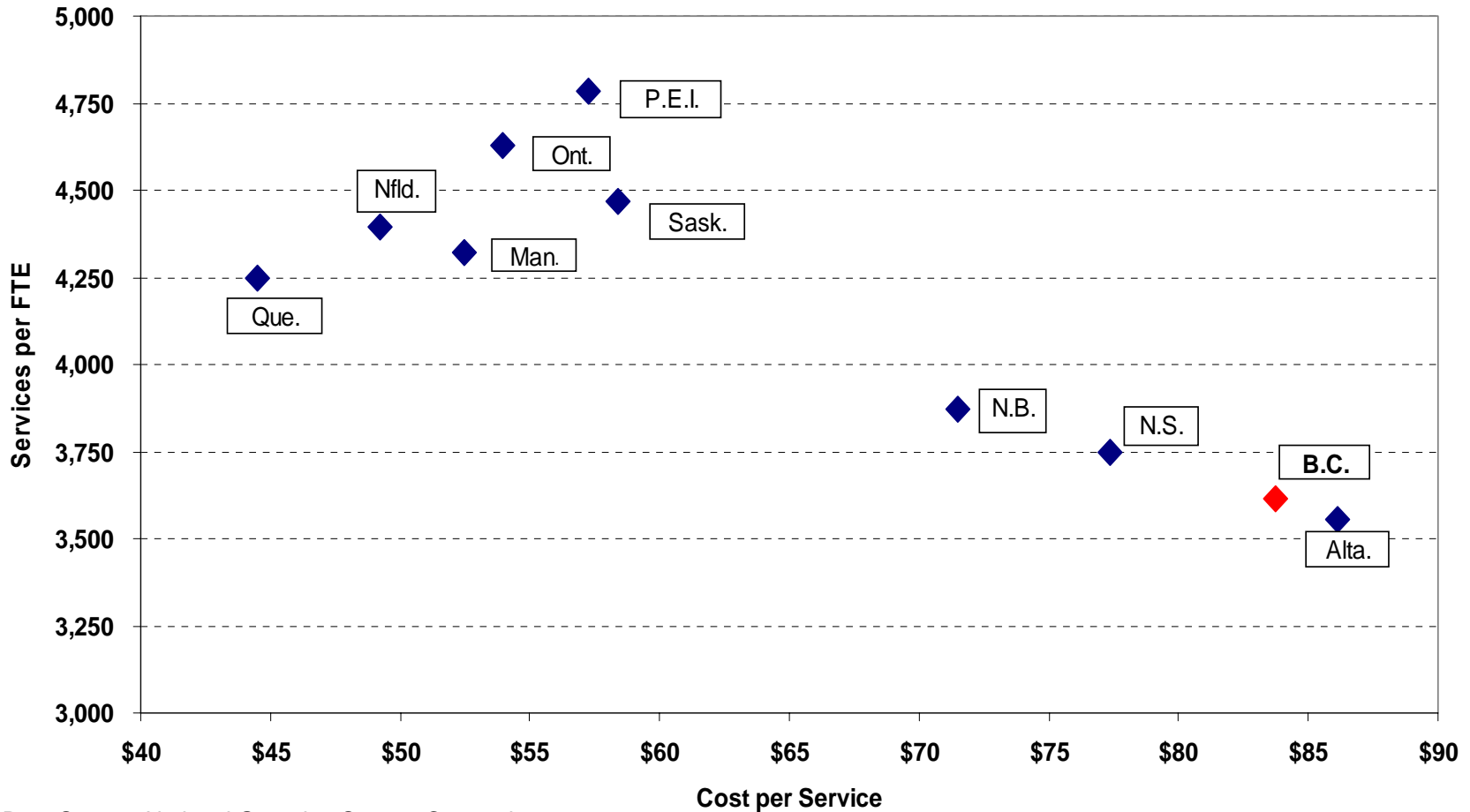
A Multi-Pronged Approach to HHR



Psychiatrists per Capita, British Columbia 2003/04



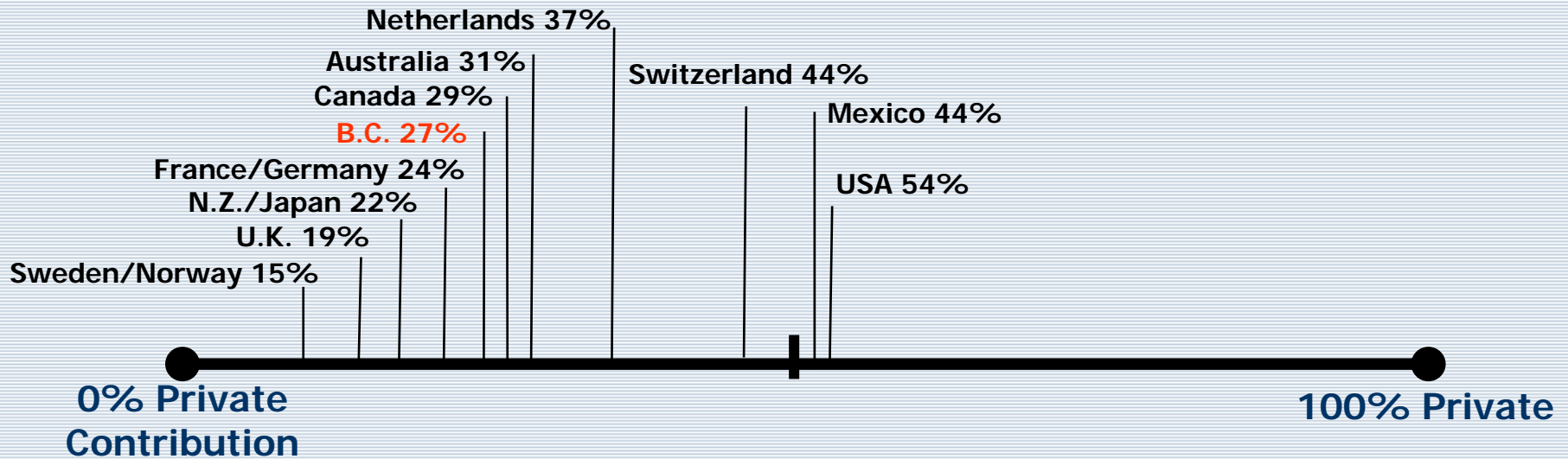
Inter-provincial Comparison of Specialist* Cost per Service and Services per FTE



Data Source: National Grouping System Categories, 2002-03; Full-Time Equivalent Physicians Report, 2002-03, Canadian Institute of Health Information. Data standardized in August 2005.

*Excludes Pathology & Radiology

Learnings from others



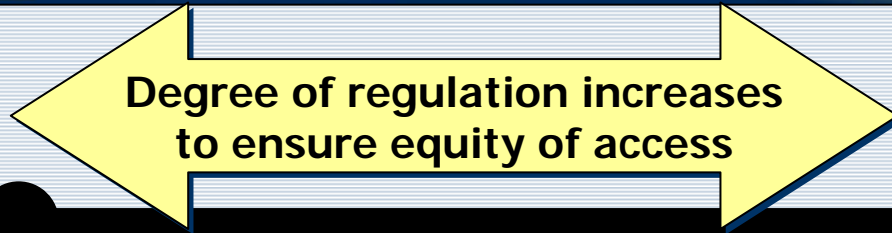
% Private Pay for Health Care Across OECD Countries

Source: Private Health Insurance in OECD Countries, The OECD Health Project, 2004.

B.C. data is based on CIHI National Health Expenditure Database, 2005.

Note: Not all OECD countries shown. Only Iceland, Turkey, Slovak Republic, Czech Republic have no private health insurance.

Ministry of Health



Equity/
Access

- Regulation used to sustain robust access for whole population:
 - User fees to incent behaviour
 - Co-payments to share costs
 - Subsidies for private insurance
 - Incentives/Requirements for doctors attendance in public system
 - Subsidies for low income earners
 - Incentives/requirements/role of private insurers

Choice



There is a natural tension between equity of access and choice

FINAL THOUGHTS