



Humanizing Healthcare

Access, experience and outcomes

Executive Summary

All In for Transforming Canadian Healthcare


accenture

A Relentless Pursuit to Transform Healthcare

Healthcare remains a top priority for the Canadian government, and we see public and private entities making significant investments to improve the healthcare system in every way, from initial research to services delivered to patients¹.

Compared to similar developed countries, Canada's healthcare system performs poorly, and research indicates that it is getting worse, especially in areas like areas equity, care outcomes, access, and administrative efficiency, while care process is performing better overall².

With this in mind, we seek to understand Canadians' perception of the most critical and important aspects of healthcare. We believe this should be done by putting patients at the centre, as Covid-19 had a significant impact on their engagement with the healthcare system³.





COVID-19 changed the healthcare landscape drastically, as both citizens* and private health stakeholders look to play a more active role in Canadian healthcare to drive improvement.

The pandemic highlighted key gaps in the current healthcare operating model, including reliance on in-person visits, a lack of digital tools, and inefficient use of resources. As a result, digitalization of public healthcare delivery and modernization of key infrastructure were accelerated.

Similarly, private players invested in opportunities to play a direct role in the provision of care to Canadians. These entities can bring new ideas to the forefront on how to improve the current system, but in a country where healthcare is the government's responsibility and accountability, how can we leverage the private sector? Are Canadians ready to see new partnerships arise between the public and private sectors?

To answer these questions, Accenture surveyed 1,863 citizens across Canada** to understand how they perceive healthcare, how they interact with the system, and how the COVID-19 pandemic has shifted their opinion of the Canadian health landscape. Our findings highlights key principles to follow to create more efficient and personalized care experiences.

* Throughout this report, the term 'citizens' refers to Canadians, both citizens and permanent residents

** Accenture Canadian health citizens survey 2021, fieldwork May 11-28, 2021, by Dynata

Our major research findings

Two key themes emerged from the Canadian respondents:

Dynamics of trust have shifted due to the COVID-19 pandemic

The pandemic has impacted people's trust in the Canadian healthcare system and has highlighted key gaps in its current model (e.g. lack of telehealth guidelines, shortage of digital tools).

1 / 4

Canadians have less trust in local and national government's ability to manage their long-term wellbeing since the onset of the pandemic

Opportunities to improve Canada's healthcare exists within the ecosystem

Canadians are generally satisfied with the healthcare system, but opportunities exist to improve how care is delivered, by leveraging new players and technology.

64% of respondents are most comfortable to receive care from pharmacies



To address these findings, we asked

**what should public
and private healthcare
stakeholders do to
transform the
Canadian healthcare
system?**



Canadian healthcare stakeholders should base their transformation strategy on four guiding principles

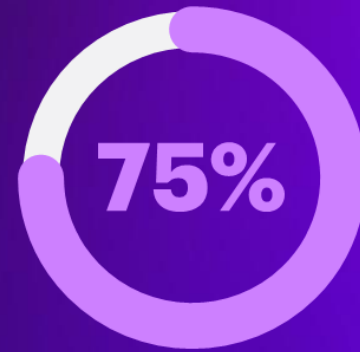




1. Personalization based on data sharing in return for better care

Canadians are willing to share their data, but only in return for real value, like improved or personalized services. However, accessing their data is still a barrier to develop personalized care solutions as they don't always trust entities collecting and using them. Healthcare providers are the most trusted as 3 out of 4 respondents would let them share their personal health information, especially if it's to inform on personalized treatments and health decisions. On the other hand, 61% of Canadians have moderate to low trust in their government's ability to keep their information safe, so trust will need to be built if broad-based data-driven population health management is to be delivered.

Incentives can also be part of the solution as our survey found that half of Canadians are willing to share their personal identifiable information in exchange for easier access to care and personalized care or wellness recommendations. The same number of Canadians would also do it in exchange for monetary or loyalty reward points, so rewards might be a way to collect health data as people are aware of its value and are getting more reluctant to share it without getting something in return.



of respondents would allow their healthcare provider to share their personal health information.

Top reasons are to inform on...



For which of the following reasons would you allow your healthcare provider to share your personal health information?

Source: Accenture Canadian health citizens survey 2021

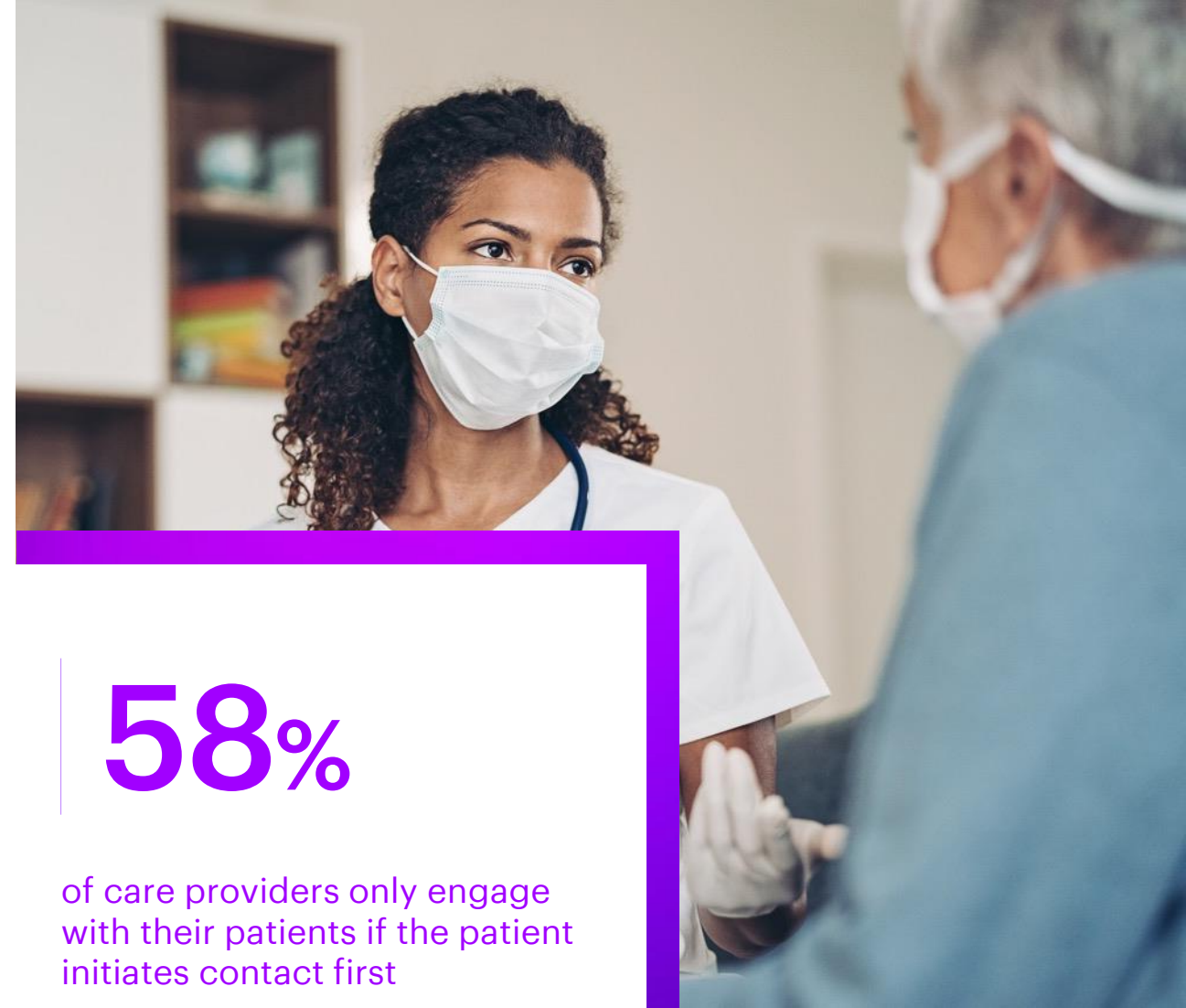
Sample of n= 1,863



2. Drawing closer: increasing proactive engagement

Most respondents (54%) only engage with their provider when they need care, while their providers mostly engage with them if they initiate contact (58%). Furthermore, just 15% of the respondents' care providers adopt a more proactive approach and are invested in the respondents' health (either taking interest beyond immediate needs or helping to plan and manage health).

What could explain these results? Both lack of incentive, and time. While physicians may prioritize what they are paid for, certain bonuses are not unlocked simply due to time constraints. Investment in technology to automate non-clinical or non-value-added processes could help reduce the admin burden from the providers' shoulders which, due to dated systems, currently add to physicians' workload and make it difficult to be proactive. Investing in administrative and back-end solutions could free up healthcare workers' time, which could then be used more proactively and for value-added tasks.



58%

of care providers only engage with their patients if the patient initiates contact first

3. Refine investment in digital health tools

Respondents don't trust all digital tools equally. Recommendations coming from an app without human interaction are more trusted if they are related to appointment scheduling and reminders than if they inform on a preliminary diagnosis, chronic disease management or prescription drug alternatives.



83% of Canadians trust automated scheduling and reminders from healthcare apps

Interestingly, top ranked factors for a positive care experience don't include the use of digital tools to optimize experience but were related to soft skills:

1. providing clear explanations around condition and treatment
2. listening and emotional support
3. well-coordinated care and communication between care staff

Care providers need to focus on things that matter to patients, like listening, providing empathetic care and clear explanations, and appropriately deployed technology could directly support these goals by providing the right data to the physician at point of care and free up time for empathetic actions. Right now, technology is too often a drain on time due to data capture requirements and data searches across multiple systems.

Artificial Intelligence must be used carefully as people's trust is still limited. AI is not yet mainstream and limitations around willingness to use it exist among both patients and providers. Patients are comfortable if their doctor uses AI for administrative purposes, but less comfortable if it's for diagnosis or decisions related to treatment. This is similar to their level of trust in recommendations coming from an app powered by AI as they are more comfortable if they are related to scheduling than diagnosis or treatment. These results point to the conclusion that patients do not feel comfortable with major decisions being informed by AI, unless a provider is reviewing them.

However, the sweet spot seems to be in care administration where AI can be used to reduce administrative burden and unlock real value to patient by streamlining non-clinical processes and focusing the patient and its provider's time on clinical tasks. This would improve patient's experience by increasing factors they consider as important to have a positive care experience, like time to explain the condition and treatment clearly and time for the provider to listen and understand the need and provide emotional support.

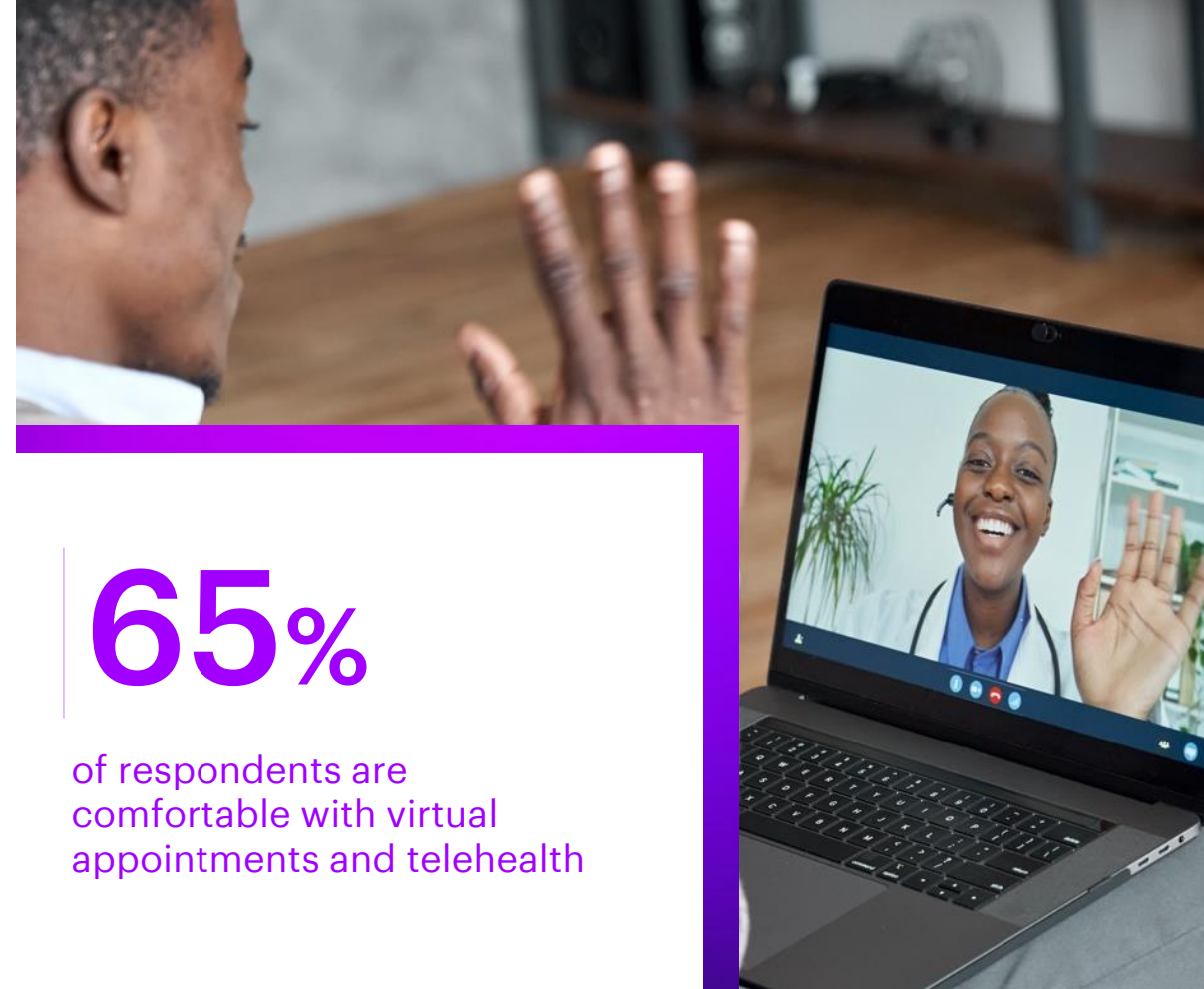


1 out of 2 respondents are comfortable with their doctor using AI for administrative purposes

4. In-person health visits are still favoured by patients, but Canadians are getting more comfortable with receiving care virtually

Most respondents are comfortable with virtual appointments and telehealth, but if given the choice only 16% would always choose a virtual visit. Prescription renewal and health problem follow up are the preferred circumstances for virtual care settings.

However, there's still a perception among just over half (56%) of respondents that virtual care settings provide reduced expected care to patients as this group would always prefer in-person consultations if given the choice. Respondents' concerns include lack of human interaction and reduced quality of care from the provider, which indicates that Canadians are still unsure of how much further virtual care can extend without compromising the healthcare experience. In current Canadian initiatives, virtual care is mostly focused on very basic healthcare needs, such as medication renewals, minor ailments, etc. If we want to extend to more specialized services, clear guidelines should be established and shared with patients and providers.



65%

of respondents are comfortable with virtual appointments and telehealth

Canadians did not identify access to technology, concerns with personal information security or navigation as reasons to avoid virtual visits. This informs on potential use for virtual appointments, as patients might see them as convenient in certain settings, especially for a health concern follow up or to get a prescription. There is work to do in terms of dispelling myths around virtual care, as more and more provinces are establishing public programs to provide access to care to more vulnerable populations⁴.

Conclusion

While the Canadian healthcare landscape saw drastic change during the COVID-19 pandemic, there are ample opportunities for further improvements. Healthcare providers, commercial players and citizens would benefit by collaborating to address the current system burdens and should consider technology as an ally and key success factor to overcome long overdue priority challenges. Next steps should include:

Improve System Access

Commercial providers' expertise and knowledge could be leveraged through partnerships with the public healthcare stakeholders. Focus should be placed on addressing healthcare providers' administrative burden and access.

Increase Trust in all Health Entities

Highly trusted health entities, like pharmacists, could be leveraged to reduce the pressure on front line providers. Public-private partnerships should be considered and focus on incentives that are driven towards health outcomes for patients, like improving health monitoring for better aging at home.

Design a Care Experience that is Efficient and Personalized

Greater personalization, increasing patient-provider engagement, refining investment in digital health tools, and reducing system incumbrance should be the focus to improve Canada's healthcare system.



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About this Research

Accenture conducted a survey with a representative sample of 1,863 Canadians on their perception and experience with Canada’s healthcare system. Confidential and anonymous answers were collected by Dynata in May 2021. In addition to their responses, Accenture also conducted expert interviews with 10 senior executives of Canadian public and private healthcare organizations, through our partner Atheneum from June to July 2021. Results for the Canadian sample are statistically significant with a confidence level of 95 percent and a margin of error of +/- 2.3 percent.

