



**Humanizing Healthcare**

Access, experience and outcomes

April 2022

**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 industry entities making significant investments to improve the healthcare system in every way, from initial research to services delivered to patients. In fact, in 2019 right before the pandemic, federal healthcare spending increased above inflation (2.9%), representing close to a quarter (\$186.5 bn) of the total federal budget<sup>1</sup>. These numbers dramatically increased during the last 2 years to cover additional services created by the pandemic<sup>2</sup>. In provinces, average healthcare spending account for nearly a third of total spending, and in some cases, goes above 50%<sup>1</sup>. This begs the question, are these investments paying dividends?

Compared to similar developed countries, Canada's healthcare system performs poorly, and research shows that it is getting worse. In the past 4 years, Canada's healthcare system slipped from 9<sup>th</sup> place in 2017, to 10<sup>th</sup> place in 2021, in the Commonwealth's annual evaluation of high-income country's health systems<sup>3</sup>. The weak areas in the Canada system include equity, care outcomes, access, and administrative efficiency, while care process is the only area of better performance.

With this in mind, we need to explore the reasons why our healthcare performance is declining and what can be done to reverse this trend? We believe these questions should be approached by putting patients at the centre, with a citizen's\* perspective on the most critical and important aspects of healthcare. This is even more true as COVID-19 had a significant impact on their engagement with the healthcare system.



# COVID-19 changed the healthcare landscape drastically,

as both citizens and private health industry entities look to play a more active role in Canadian healthcare to drive improvement.

COVID-19 had a significant impact on the healthcare system. It highlighted key gaps in the current 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, industry 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 commercial 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 highlight 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 commissioned Canada health consumer survey, fieldwork May 11-28, 2021, by Dynata



# How do Citizens See the Current Canadian Healthcare System?



## Canadian are generally satisfied with the healthcare system, but opportunities exist to improve access and navigation

Canadians are starting to demand more from the healthcare system by way of more personalized and accessible care, and greater personal health information control. The first step is to make use of the insightful information provided by health data, which Canadians are opened to.

**3 out of 4 respondents would allow their healthcare provider to share their personal health information, especially if it's to inform on personalized treatments and health decisions.**

Additionally, hospitals, family providers and walk-in clinics are the most trusted with personal data, as more than 90% of respondents trust them to keep their personal information safe.

The pandemic, coupled with an aging and complex patient population, puts pressure on the healthcare system to meet all these demands efficiently. Opportunities exist to leverage interest from industry players and citizens to be more involved in improving Canada's healthcare system. However, without the appropriate mechanisms in place there is a risk of duplicated efforts, interoperability challenges, and disparity among Canadians and their access to care.

More than half of Canadians are satisfied with the public healthcare system (53%) and access to various health services (61%)\*.

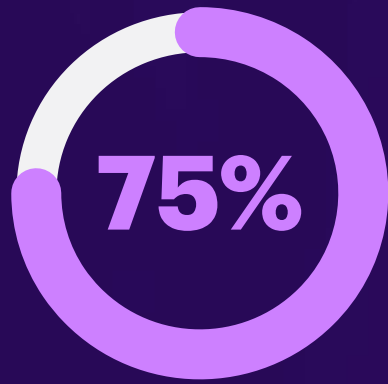
**However, our survey found that one in four (26%)\* Canadians still find it difficult to navigate the healthcare system, whether it's to identify an adequate entry point into the system, find the right medical facility/treatment or where to go for a specific concern, find available services in the community, etc.**

Satisfaction is lower when it comes to accessing financial support (e.g. information on publicly funded health services, insurance coverage, special funding programs for prescription, etc.) and health and wellness coaching (e.g. diet programs, mental health programs, addiction clinics, etc.). Regarding access to a healthcare provider (e.g. family doctor, specialists, nurse practitioner, etc.), Canadians are generally satisfied, but satisfaction decreases for people living in remote areas and people living with a chronic condition.



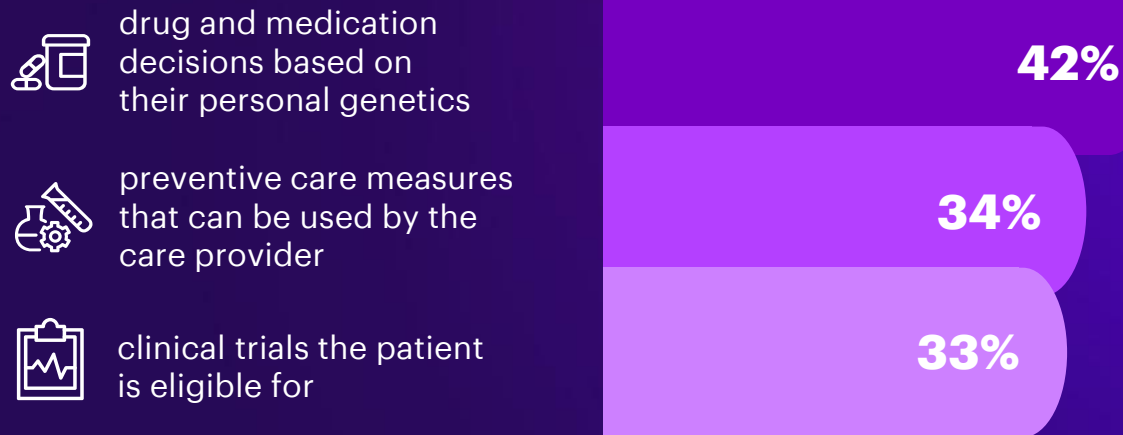
**1 in 4 Canadians still find it difficult to navigate the healthcare system**

\*Sample doesn't include « not applicable » or « don't know » answers



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



# Canadians are not willing to pay for traditional healthcare, but involvement of new players is accepted if it means improved services

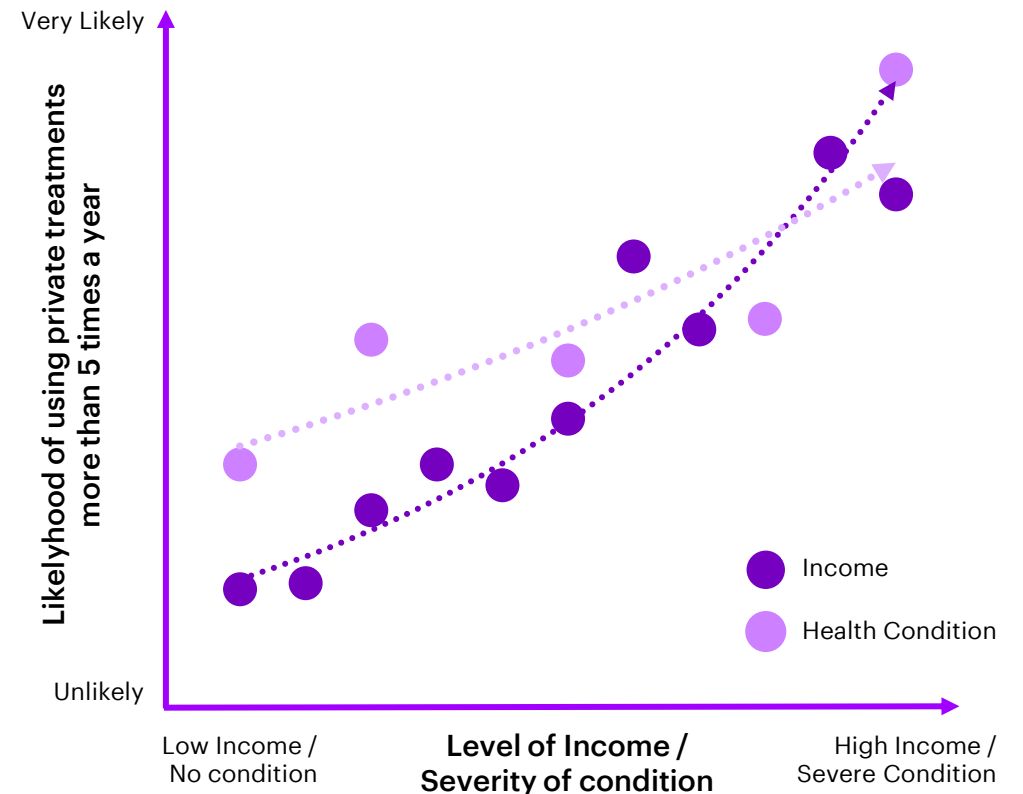
A high percentage (63%) of Canadians would not pay for healthcare services typically provided by the government, unless absolutely necessary – they feel those services should be free as they already pay for them through taxes and insurance.

In the moment, around 60% of Canadians use private health treatments that are not covered by Canada’s public health insurance (e.g. physiotherapy, nutritionist, naturopath, psychology, private primary care services, etc.), and our research shows that two groups of people leverage private treatments more often than the rest of the population. These groups are (1) higher income individuals with a household income of more than CAD\$75k, and (2) people with severe health conditions.

When asked about paying for a subscription or monthly fee to access healthcare services, most (55%) respondents wouldn’t do it as they feel it’s already covered by the public healthcare system. A subscription model would also likely serve a tiny part of the population, mostly high-income bracket, and presumably create more of an equity gap.

**63%** of Canadians wouldn’t pay for healthcare services typically provided by the government, they consider those should be free

## How income and health conditions influence the frequent use of private healthcare



Source: Accenture Canadian health citizens survey 2021  
Visual representation only includes respondents who are the heaviest users of private healthcare  
Sample of n= 273



Canadians may be willing to engage with alternative healthcare service models, as 57% would be more likely to use services that rewards them, and another 33% are comfortable with the private health industry entities providing services that they would need to pay for to access. They also see the value of engaging with non-public players to improve healthcare (e.g. experience, services, etc.) as 72% of our respondents are comfortable or neutral with the private sector playing a bigger role if the mean and result is to improve services available to them. Therefore, there's an opportunity for industry players to collaborate with the Canadian healthcare system to improve it through partnerships that create additional value in the patient journey (e.g. improved convenience of services, better access to care and information, personalized care, stronger communication, closer to home service options, etc.). However, it is clear that Canadians don't want to pay out of pocket for publicly covered health services, unless the services are creating a truly differentiated care experience.

In this context, it is vital to select the right go-to-market model to leverage industry players' expertise and knowledge through partnerships with the public healthcare system, with the end goal being to improve it without creating or widening a healthcare access equity gap.

**72%**

of Canadians are comfortable or neutral with the private sector playing a bigger role in Canada's healthcare system







## Alternate channel strategies and new players need a flexible approach as 'one size does not fit all'

Pressure to change is mounting and Canadians' openness to alternative ways of accessing care is increasing. This is even more true since the onset of the pandemic which has forced new ways of delivering care, and Canadians have had a taste of "the art of the possible" when it comes to new care experiences.

Our survey found that 8 out of 10 Canadians would like to see three new services remain after the pandemic: (1) online booking and scheduling, (2) health services in the pharmacy, and (3) telehealth services.

Canada's healthcare system had to quickly adapt, and it seems like citizens enjoyed some of this innovation. Potential new market entrants should be readying themselves as areas of improvement, and thus opportunities, are becoming clearer.

"The pandemic has allowed pharmacies the ability to provide enhanced services in Canada, like vaccination, and has accelerated investments in scheduling tools and patient engagement platforms to better respond to the population's needs. But the area that was most accelerated by the pandemic is virtual care, which was made accessible across the country."

- Advisor, Pharmacy Software Company

# The top 3 services 80% of Canadians would like to see remain post-pandemic are:



Online booking and scheduling

**77%**



Health services in the local pharmacy

**66%**



Telehealth services

**60%**

*Which changes due to COVID-19 would you like to see continue and remain?*

Source: Accenture Canadian health citizens survey 2021

Sample of n= 1,863

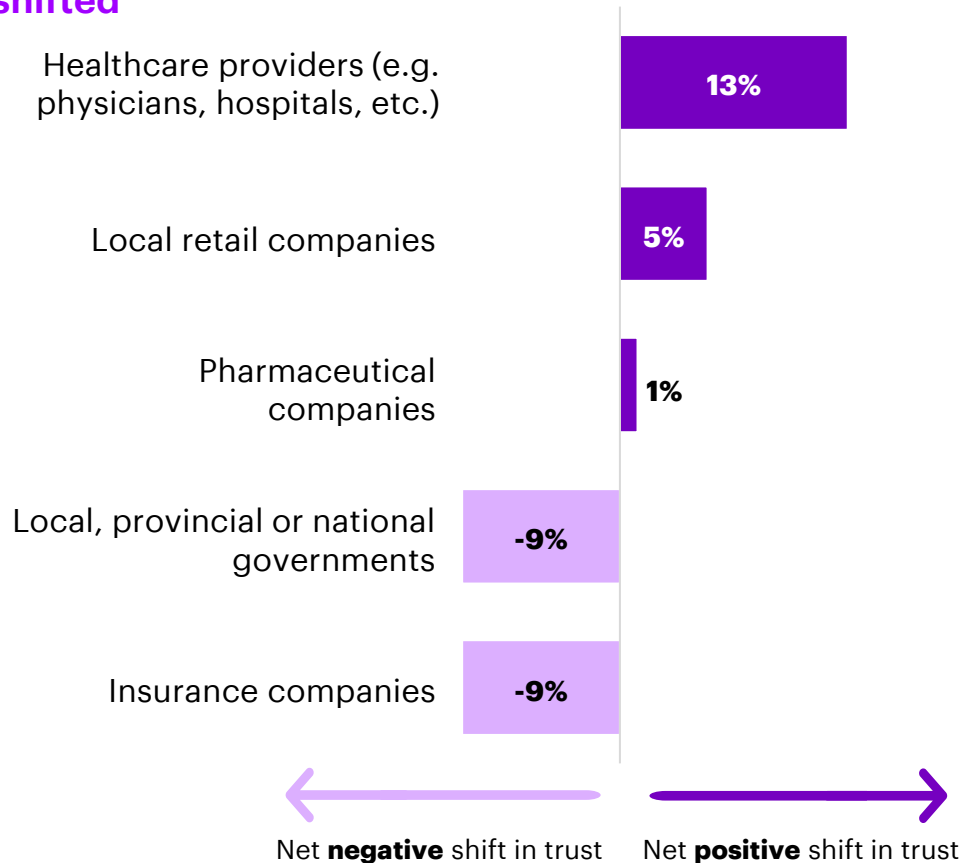




# How did COVID-19 Shift the Canadian Healthcare Landscape?



## Since the pandemic, Canadians trust in external entities to manage their long-term wellbeing has shifted



How has your level of trust in the following providers' ability to manage your long-term wellbeing since the onset of the COVID-19 pandemic changed?

Source: Accenture Canadian health citizens survey 2021  
Sample of n= 1,863

## The pandemic has fundamentally altered people's trust in the Canadian healthcare system

Key areas surfaced are highlighting important perception changes.

First, there is a shift in trust. Canadian's trust in healthcare providers and local retail companies has increased since the onset of the pandemic, as opposed to government entities and insurance companies which have seen a decreased in citizens' trust. There is, crucially, an erosion of trust in government's ability to support wellbeing in any circumstance.

Trust in Canada's local, provincial and national governments was damaged during the pandemic, with nearly one in four (24%) respondents saying that they have less trust in their government to manage their long-term wellbeing since the onset of COVID-19.

This is a greater reduction in trust than experienced by any other entity including healthcare providers (e.g., physicians, nurses, etc.), pharmaceutical companies, insurance companies, and local retail companies (like pharmacies).

Perception is vital to trust, and the pandemic placed health providers practicing in the public domain at centre stage.

On the other hand, this increase of trust in providers' ability to manage Canadian people's wellbeing can be seen as an opportunity. Our results show that 2 out of 3 (66%)\* Canadians are comfortable with receiving care from a pharmacy, which is very similar to receiving care from traditional healthcare providers like doctors and nurse practitioners (64%)\*.

“Patient follow up done by pharmacies would reduce physician workload by taking some of the administrative tasks like medication refills and appointments reminders off the physician's shoulder.”

Senior Medical Liaison, Pharmaceutical Company

A recent study<sup>4</sup>, one of the largest studies of trust by Canadians in leaders, sources and institutions, also confirms these findings as they found that doctors (81%), scientists (77%) and friends and family (64%) are the three most trusted sources of "reliable information". However, business executives and politicians are way behind, with less than a quarter of respondents trusting them (24% and 18% respectively).

\*Sample doesn't include « don't know / not used » answers which represents <5%

Given that trust in providers is the highest and that caregivers are suffering burnout in the wake of the pandemic, other ecosystem players like local pharmacies might have an opportunity to play a more significant role in Canada's healthcare ecosystem and, at the same time, contribute to reduce the pressure on burnt out providers. These results could be leveraged through public-private partnerships where incentives are driven towards health outcomes for patients, bringing a variety of new players into the core circle of care for the benefit of the patient.



2 out of 3 Canadians are as comfortable receiving care from a pharmacy as from a healthcare provider (e.g. doctor, nurse practitioner)

## COVID-19 highlighted key gaps in the current model of Canadian healthcare

including lack of virtual care guidelines and shortage of digital tools

The need for safety precautions during the pandemic forced new ways of delivering care, but it also revealed some reluctance from both providers and patients to transition to virtual care due in part to a lack of clear and common guidelines. The pandemic also uncovered a shortage of digital tools, and a reliance on dated processes and systems that aren't efficient or easy to use. As found in our survey, navigating the healthcare system is still a struggle for many Canadians, putting barriers both at the beginning and throughout the patient care journey. The right digital tools could help reduce this complexity for patients and their providers.

These factors, coupled with an aging and complex patient population, put immense pressure on the Canadian healthcare system to meet rapidly changing demands efficiently.

However, there might be opportunities for better remote care via virtual tools, as 64%\* of respondents agree that with the deployment of virtual care initiatives, they should have options to receive care at home instead of being exposed to hospitals and clinics where they could get infected.



“Remote health monitoring will drastically change the healthcare landscape in the next three years as health providers look at alternative models to discharge patients”

Senior Vice President, Operations,  
Seniors & Homecare Sector

# How Can we Create More Efficient & Personalized Care Experiences?

Four Guiding Principles to Follow



By following four key guiding principles, public healthcare entities and other health stakeholders can, individually and collaboratively, create the future healthcare system that Canadians need.

These principles are:







# 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. Three-quarters of respondents say they would share their personal health information, especially if it results in better care for them—such as targeted advice on medication and treatment based on their personal genetics. However, even if Canadians are willing to share their personal health data, accessing it is still a barrier to develop personalized care solutions.

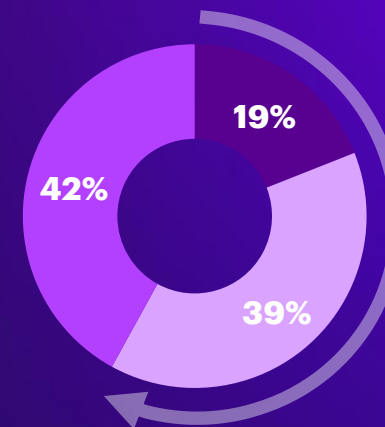
Another challenge with personal health data is the level of trust people have towards entities collecting and using it. 61% of Canadians have moderate to low trust in their government’s ability to keep their information safe—so trust will need to be built if broad-based data-driven population health management is to be delivered. Part of the problem might come from the lack of understanding of what personal data could be used for, as indicated by the conflicting answers we received from respondents. **Almost half of respondents (42%) are not comfortable with their personal health information being collected by mainstream devices to track their health.** However, almost the same number of respondents (39%) would be willing to share their data if they knew what data would be collected, what it would be used for and who would access it.



“By collecting personal health data via wearables, we can provide real-time health information in a proactive way to prevent complications that would burden the healthcare system.”

District Lead, Health Solutions Operations  
Pharmacy Group

*How comfortable would you be with mainstream devices (e.g. cellphone) collecting your personal health information and tracking your health?*



- I am comfortable with my devices collecting my data
- I would be comfortable with devices collecting my data if I knew what it was being used for and who has access to it
- I am not comfortable with any consumer device collecting personal information

**58%**  
Of respondents are comfortable

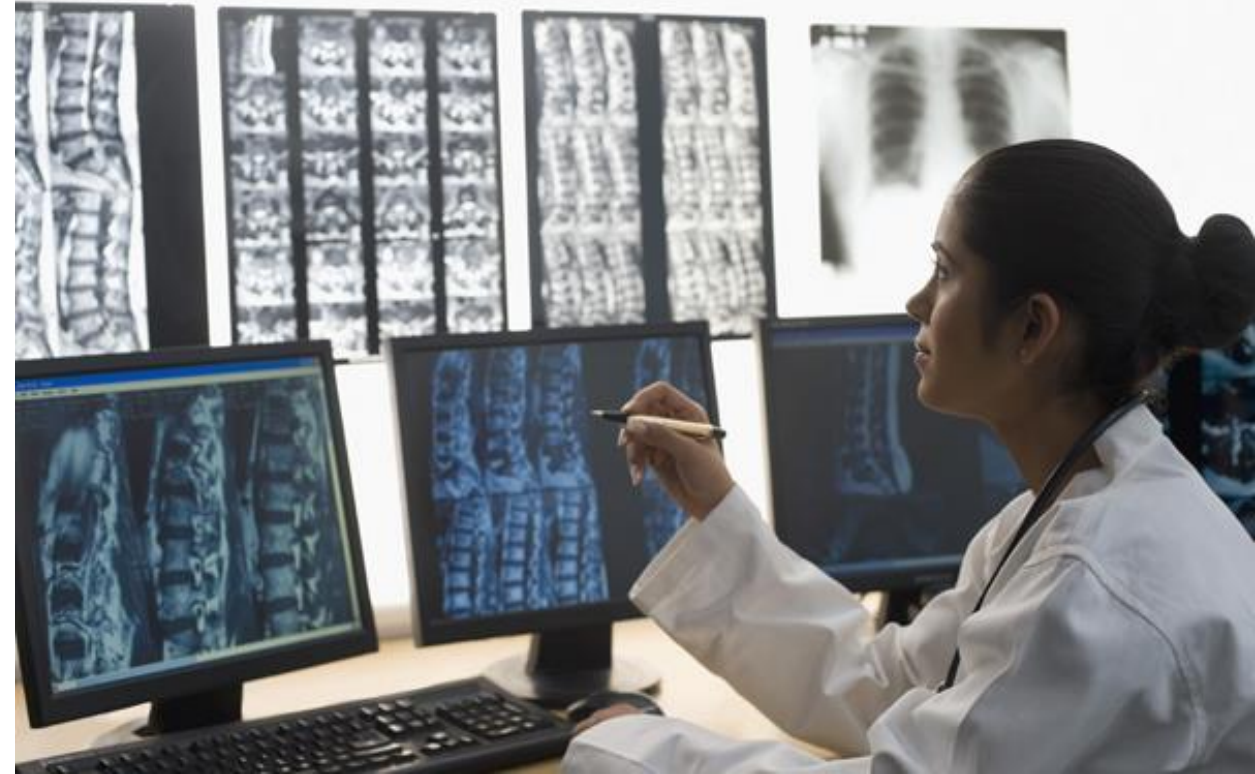
Source: Canadian health citizens survey 2021  
Sample of n= 1,863



To access Canadian's health information, transparency is key, but incentives can also be part of the solution.

Our survey found that half of Canadians are willing to share their personal identifiable information in exchange for easier access to care (e.g. less wait times) and personalized care or wellness recommendations. However, the same number of Canadians would also do it in exchange for monetary or loyalty reward points.

Rewarding people for their data might be a way to collect personal information, including health information, to improve care and services. Canadians are aware of their data's value for various purposes and are getting more reluctant to share it without getting something in return.



**50%** of respondents are willing to share their personal identifiable information in exchange for monetary or loyalty reward points

The need for greater trust and direct value through better care could be met through investment in genomics and personalized medicine. Globally, healthcare companies in the genomics and personalized medicine market receive the most funding (approximately USD\$48 billion per year<sup>5</sup>). That money is currently shared among relatively few players, but they could potentially disrupt and revolutionize the Canadian healthcare ecosystem. This category of players is considered as industry disruptor and likely a key area of opportunity, specifically as it relates to survey findings regarding willingness to share personal data for personalized medicine.



# 1. Personalization in Action

## Achieving Better Health while Collecting Rewards

To encourage its customers to adopt healthier habits and lifestyles, Manulife launched Vitality, a program powered by a digital application collecting personal health data that promotes and rewards positive healthy choices through behavioral changes<sup>6</sup>.

Vitality requires customers to share their personal health information with the platform in order to be able to track progress, promote healthy choices and make recommendations. In exchange of sharing their personal health data, customers earn reward points which can be exchanged with

discounts and offers on products and services at partner brands, like digital wearable devices, restaurants, cinema, etc.

This programs provides Manulife with greater information on its customers, including their changing habits, which is used to personalize offering and services to their needs.

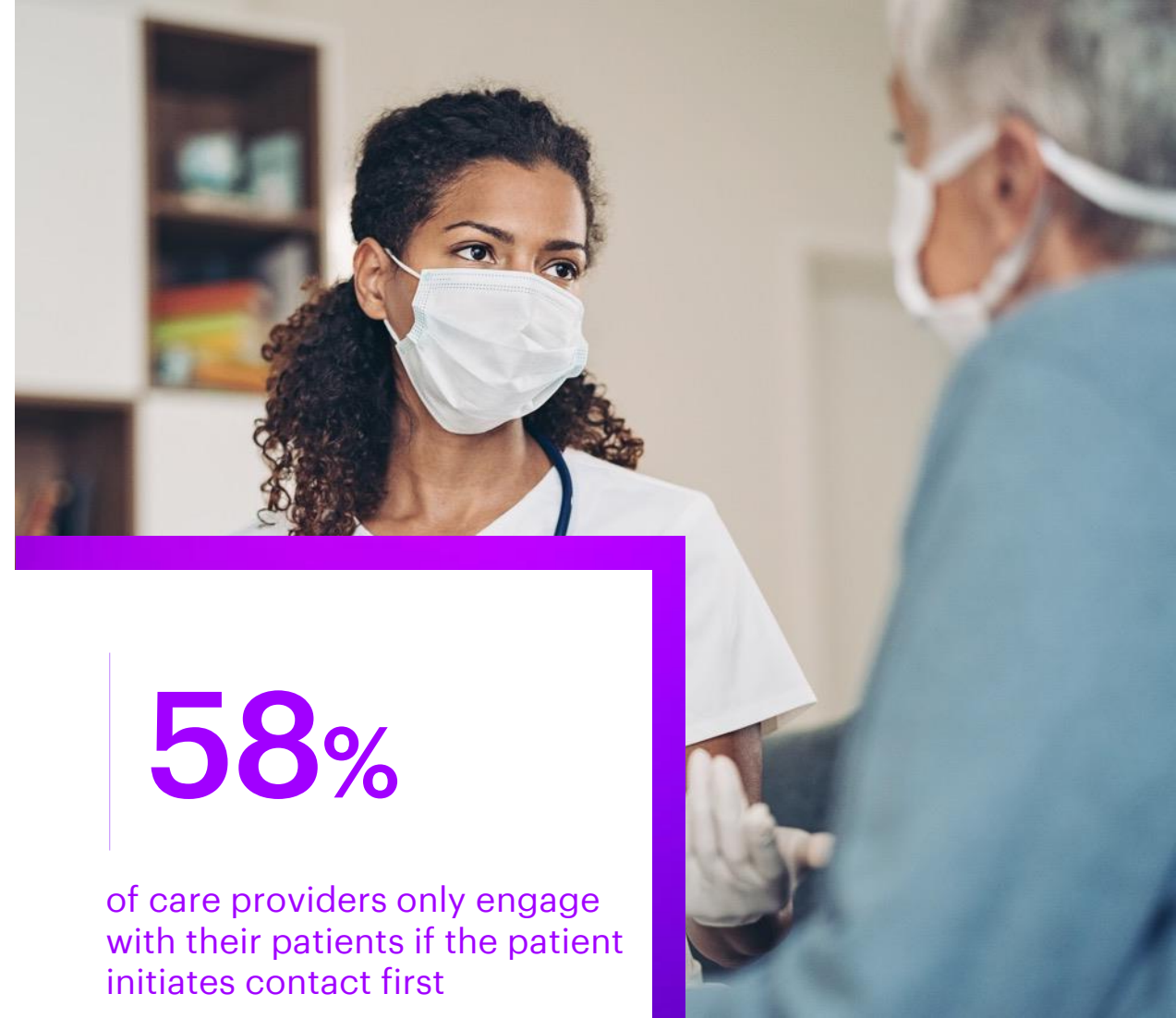


## 2. Drawing closer: increasing proactive engagement

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? It could be both a lack of providers' capacity and time. 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.

Research into health startup investments and funding shows that clinical administration and back-end solutions are the fourth biggest areas of investment for 2020-2021<sup>5</sup>. This highlights both investors and market interest in these solutions. 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

## 2. Engagement in Action

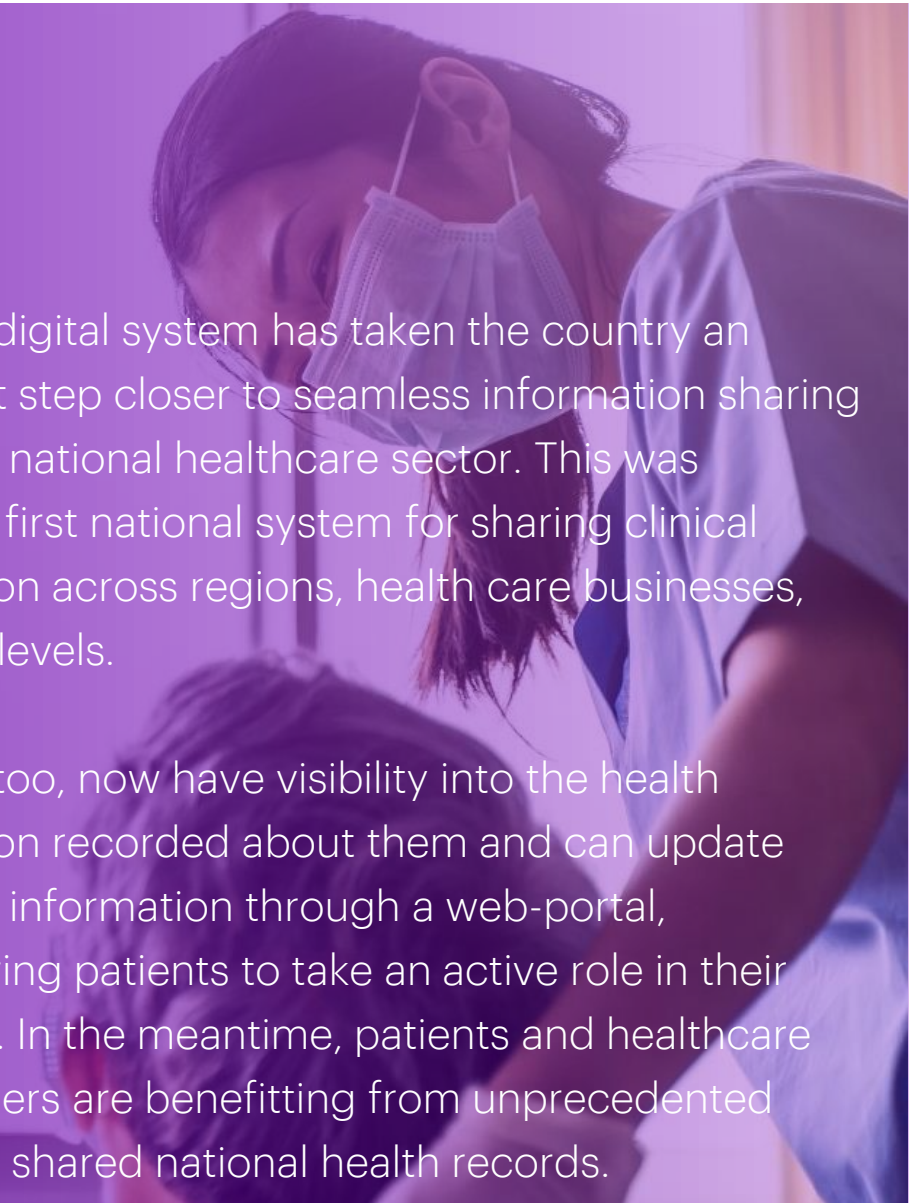
### One Step Closer to Better Population Health

The eHealth Directorate of Norway created a national health records to enable health services to interact and collaborate more effectively, along with empowering patients to manage their own health while improving patient safety<sup>7</sup>. To achieve this goal, the Directorate developed a new digital system making national health records available when and where they're needed by clinicians and patients alike.

The program was rolled out nationally providing all citizens (over 5 Millions) and more than 6,000 healthcare professionals with access to the system.

The new digital system has taken the country an important step closer to seamless information sharing across its national healthcare sector. This was Norway's first national system for sharing clinical information across regions, health care businesses, and care levels.

Patients, too, now have visibility into the health information recorded about them and can update their own information through a web-portal, empowering patients to take an active role in their own care. In the meantime, patients and healthcare practitioners are benefitting from unprecedented access to shared national health records.

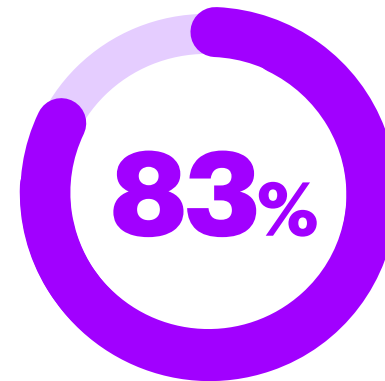


### 3. Refine investment in digital health tools

Canadians don't trust all digital tools equally. **Recommendations coming from an app without human intervention are more trusted if they are related to appointment scheduling and reminders.** However, if recommendations inform on a preliminary diagnosis, chronic disease management or prescription drug alternatives, they won't be trusted as much.

Interestingly, the use of digital tools to optimize experience was one of the least important contributors for a positive care experience. In contrast, the top ranked factors for a positive care experience included soft skills like providing clear explanations around condition and treatment (1), listening and emotional support (2), and well-coordinated care and communication between healthcare staff (3). There is a clear need for physicians to do things that matter to patients, like listening, providing empathetic care and clear explanations.

Appropriately deployed technology could directly support these goals by providing the right data to the physician at point of care and freeing 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.



**83%** of Canadians trust appointment scheduling and reminders from healthcare apps

## Artificial Intelligence must be used carefully—Canadians 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.



53%

of respondents are comfortable with their doctor using AI for administrative purposes\*

\*Sample doesn't include « not applicable » answers which represents <5%

For now, technology adoption among providers is still low, even as broad digitalization increases. According to the VP of Operations at a Canadian social services organization:

“The biggest gap in Canadian health is a lack of technology knowledge. There's lots of people that do know the opportunities technology can provide, but the frontline providers and a lot of healthcare leadership don't even know what are the technologies that could support them. So, part of it is education on what's available and how it could be integrated into current systems to help support both the providers and the patients.”





## 3. Investment in Action

### Improving Care with Robotic Process Automation

A not-for-profit support services entity of a Canadian province was challenged to find innovative and efficient ways to provide primary and community care providers with up-to-date clinical information about clients in their care.

Leveraging Robotic Process Automation (RPA), they were able to address this challenge by solving three problem areas: improve data quality within care records using RPA to scan and replace inconsistently recorded conditions in free text locations; improve sharing of information between a primary care EMR and the province home and

community care patient record repository system; ensure patient follow up for preventative screening visits and appropriate clinicians incentive billing codes to meet preventive care billing incentive criteria.

These three processes were automated with RPA and helped reduce inefficiencies caused by poor data quality, improve point of care decision making through up-to-date care information, improve preventative care screening rates and reduce manual administrative work effort typically required to carry out all processes.

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

78%\* of respondents who received care virtually felt comfortable or neutral about their experience, and if given the choice, 44% of respondents might choose a virtual visit over in-person in the future. Preferred circumstances for virtual care settings are prescription renewal and health problem follow up. Canadians are becoming more comfortable with technology enabled care, as found in a recent study from Canada Health Infoway: even if only 17% of Canadians once visited their health care provider virtually online by video, 57% are interested in receiving care virtually<sup>8</sup>.

However, there's still a perception among just over half (56%) of respondents that virtual care settings provide reduced expected care to patients. If given the choice, this group would prefer in-person consultations in all cases. Major concerns from the respondents include lack of human interaction and reduced quality of care from the provider in virtual settings. These concerns indicate 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.



# 78%

of respondents who experienced virtual care or telehealth felt comfortable or neutral about their experience\*

\*Sample doesn't include « don't know / not used » answers



Respondents would less likely choose a virtual visit in the contexts of an annual exam or assessment of a new health problem. However, Canadians did not identify access to technology, concerns with personal information security or online 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. The benefits of virtual settings are key factors of virtual care adoption, as Canadians who had a recent virtual visit said that it allowed them to save valuable time (86%) and get treatment faster or after hours (77%)<sup>6</sup>. On the other end, not all providers are convinced of the benefits of virtual care settings, and they are asking:

**“What amount of patient care quality are you willing to sacrifice for convenience?”**

**Chief of Surgery, Teaching hospital and medical centre**

There is clearly work to do in terms of dispelling myths around virtual care and providing clearer guidelines for its use, as more and more provinces are establishing public programs to provide access to care to more vulnerable populations<sup>9</sup>.

Telehealth funding has steadily increased since 2011, and 2021 saw the first decline in funding in a decade<sup>5</sup>. Canada has sufficient funding for telehealth leading to a disproportionately large number of competitors in the industry, which makes this a seemingly unattractive market - and the same trend applies to the global market. The number of players is likely to be thinned out, with the winners being players who focus on those aspects of virtual care and telehealth that patients value most.

## 4. Access in Action

### Enhancing Access with Virtual Care

Several Canadian provinces are tackling the access and equity issues with technology, thanks to virtual care platforms being rolled out across the country<sup>9</sup>.

In Nova Scotia, the health authority was faced with challenge of enhancing access to care for a large number of unattached patients due to low physician capacity, limited access to care due to proximity, and an aging, chronically ill population. The province launched an initiative to provide 75,000 unattached patients an opportunity to access the care they need while they wait for a primary care doctor<sup>10</sup>.

Many of these patients end up turning into expensive interventions, such as ED visits, and often do so at a point where their condition is more acute than it would have been with early intervention.

Nova Scotia Health chose a virtual care solution that could potentially be scaled to more services than just primary care. Proper clinical workflows and care model were established to not only provide access but create a positive patient experience. The program was launched in mid 2021 and since then, thousands of unattached patients were able to register and meet a provider through virtual visits.

# Conclusion

While the Canadian healthcare landscape saw drastic change during the COVID-19 pandemic, there are ample opportunities for further improvements. Healthcare providers, industry 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 Across the Patient Journey

Leverage expertise and knowledge of industry players through partnerships with the core publicly funded and coordinated health systems across Canada. Focus should be placed on addressing healthcare providers' administrative burden, access and navigation.

## 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 Healthcare System Experience that is Efficient and Personalized

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



“There are collaboration opportunities to get more value from our investments. We all aim for one integrated health system across the country, and for better outcomes at a lower total cost.”

- Senior Vice President, Operations  
Seniors & Homecare Sector



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For more information about Accenture's Canadian Healthcare practice, please visit <https://www.accenture.com/ca-en/industries/health-index>

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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.

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