



## **New Brunswickers' Experiences with their Health Care Services**

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Moncton, NB (NBHC) – The New Brunswick Health Council (NBHC) is publishing the results of its primary health care survey, the most detailed of New Brunswick's history. Over 14,000 citizens responded to the survey by telephone between February and April, in all areas of the province and in all demographics. Its aim was to understand and report on New Brunswickers' experiences with primary health care services, more specifically, at a community level.

Primary health care is defined as the first place people go when they have health concerns, often to a family physician, a nurse practitioner or other health professional. It typically includes routine care, care for urgent but minor or common health problems, mental health care, maternity and child care, psychosocial services, liaison with home care, health promotion and disease prevention, nutrition counseling, and end of life care. The survey looked closely at key elements of primary care such as accessibility, continuity, coordination of care, preventative care and health promotion, while also focusing on patient centeredness and equity.

Although 93% of New Brunswickers have a personal family doctor, compared to 86% in Canada, only 22% of New Brunswickers reported that their family doctor has an after-hour arrangement when the office is closed, and only 30% can get an appointment on the same day or the next day. As a consequence, New Brunswickers turn to other providers of primary care, like after-hours clinics or the hospital emergency room.

Improving accessibility to primary health care providers can potentially reduce unnecessary visits to emergency departments or after-hours or walk-in clinics, which in turn can improve continuity and coordination of care. For example, the coordination of care can lead to more appropriate care through fewer medical errors, more appropriate medication and less re-hospitalization. Only 59% of citizens reported that their personal family doctor "always or usually" helps them coordinate the care from other healthcare providers and places when they needed it (compared to 68% in Canada).

The survey revealed that 29% of New Brunswickers with three or more chronic health conditions "rarely or never" talk with a doctor, nurse, or other health professional about what they could do to improve their health or prevent illness. "When it comes to chronic health conditions like diabetes, high blood pressure or heart disease, for example, the continuity and coordination of care is very important," says Stéphane Robichaud, CEO of the NBHC. "Establishing an ongoing relationship with a primary health care provider is the key to managing chronic illnesses. Given the tools to succeed, citizens can better manage their conditions at home."



It is important to note that wait times across NB for hospital emergency departments are at par with the rest of Canada. However, there is room for improvement in the number of people visiting emergency departments each year (42% of individuals in NB, compared to 24% in Canada). In New Brunswick, 12% use the emergency room as their regular place of care. Men, those living in a rural area, younger New Brunswickers, lower income individuals, citizens with a lower education level and those who prefer French as their language of service use the emergency room more often as their regular place of care. There was no significant difference between Aboriginals and non-Aboriginals.

The survey showed that geography has no impact on overall satisfaction with health services; there is no significant difference between urban and rural areas of the province. However, Aboriginal people are less satisfied with the services received from their personal family doctor and are less likely to have a family doctor.

Responsiveness to community needs is also a key element of primary health care. Twenty-eight (28) New Brunswick primary health care communities were created from the large sample size to provide information that will allow decision makers to respond to the needs of smaller communities.

The analysis of the primary health care services in these 28 communities revealed huge variations in the use of service; although improving certain elements of primary care will enhance the quality of the care being delivered, the challenge will be in identifying which models of delivery systems and funding are producing the best health outcomes for the population.

The NBHC has been established as an independent organization that measures, monitors and evaluates New Brunswick's health system performance through a citizen-centered dual mandate of performance measurement and citizen engagement. Please visit [www.nbhc.ca](http://www.nbhc.ca) to get the complete results for your community.

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