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Manitoba Patients as Partners  
Forum Report



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## MANITOBA PATIENTS AS PARTNERS FORUM REPORT

Health care occupies a unique position in the lives of Canadians. Not only is it an issue of great personal importance to families, but it has been, and likely always will be, of great significance to elected policy makers. Our health care system plays an important role in our identity as Canadians. The roots of a successful, strong and growing economy and community are found in an effective health care system. Health care policy has profound impacts on us, and our families. Overall, Canada spends 10% of its GDP on public health care. When it comes to policy debates that surround long-term challenges facing our current system in Canada, we consider our own health care needs and the needs of our loved ones.

Manitoba is no exception. Expenditure on health care has increased by nearly 20% since 2010 alone, consuming 38% of the provincial budget. Per-capita spending on health care in Manitoba is above the national average and fourth-highest among Canadian provinces. Manitobans value their health care system and the care it provides as it is a vital part of our community fabric. That system, however, is facing several long-term challenges driven by demographic trends, emerging technology and evolving expectations from patients and their families. A strong health care system is vital to Manitoba's future, and the future is challenging the strength of Manitoba's health care system.

A significant driver of change in the modern public health care environment is the evolution of the relationship between the patient, the patient's family and the caregivers in the health care system. Empowered by new technology and easy access to vast amounts of data, patients today are looking to take more ownership in their health care experiences. They are looking to be engaged in different ways. They are seeking relationships with care providers that are more "two-way". They want to hear more, understand more, and have a personalized health care relationship. This is a relationship that public health care systems and practices are just starting to respond to.

There is much opportunity to be found for positive change in this environment. It was with this in mind that the Manitoba Chambers of Commerce launched the President's Advisory Committee on Healthcare in December, 2011. This committee published a report – "Shaping Manitoba's Future: Our Healthcare" – in 2013 which touched on three key areas of focus for a stronger health care system - Economic Sustainability, Healthy Living and Patients as Partners.

While all of these areas represent critical areas of challenge and opportunity for Manitoba health care policy, the area of "Patients as Partners", where new technologies, new patient expectations and challenges to the current system structure all meet, is a particular one where members of the Life Science Association of Manitoba (LSAM) have a particular opportunity to make a strong and positive difference. This report provides a synopsis of LSAM's "Patients as Partners" Forum and the outcomes of the various roundtable discussions at the event.

## PATIENTS AS PARTNERS FORUM

With this opportunity firmly in focus LSAM, in partnership with the Manitoba Chambers of Commerce, hosted its first Patients as Partners Forum on September 26th 2014. The LSAM team channelled the strength and depth of its diverse membership base and strong stakeholder connections to assemble an event that shone a clear light on the challenges and opportunities surrounding the idea of "Patients as Partners" and the forces and trends that make it possible and impossible to ignore.

Dale Lacombe, Executive Vice President, Corporate Sales of DMT Development Systems Group Inc., and Chair of the Manitoba Chambers of Commerce President's Healthcare Advisory Committee opened the Forum with an overview of his committee's efforts to date and touched on the three areas of focus the committee had addressed in their report. He noted that "Patients as Partners" would be an area of focus for the committee into 2015. They would be looking to work collaboratively with the Government of Manitoba to increase patient understanding, education and awareness regarding health care issues. He also spoke of an example from Australia – the physician-patient contract – outlining the joint responsibility of the caregiver and the patient when it comes to wellness and care.

The next presenter brought the perspective of the patient. For the first time, Arlene Kramble-Krasnesky, a retired City of Winnipeg police officer, shared the story of her experience confronting Type 2 Diabetes. Diagnosed in 2003, Arlene explained how the standard one-way health care treatment process did not work for her in the context of her work, family demands and ever shifting medication changes and related administrative problems that often confront patients. Arlene's health challenges stemming from Diabetes complications became, in her words, a crisis. She could no longer work.

Arlene's story was a very personal example of a circumstance which, viewed from a macro perspective, creates challenges for employers and public health care systems alike. Chronic conditions such as diabetes have a significant impact on the overall economy and health care system, creating losses for employers and extra medical costs for the system. A Conference Board of Canada Study placed the cost of sick and absent workers to the entire Canadian economy at over \$16 billion for 2012 alone. The annual cost to Manitoba's health care system of providing care for a chronic disease such as diabetes is over \$675 million. The cost of a patient with diabetes to the medical system has been estimated to be 3.6 times that of a standard per-capita expenditure.

Arlene faced emotional challenges from her situation, but was able to get back on track. A Diabetes Nurse Educator, who came as a referral to Arlene, changed the course of her treatment and ultimately her life. The empowering and educating approach of the Diabetes Nurse Educator had a very significant positive influence on Arlene's health. It was a powerful story that brought home to all present how a different relationship between patient and care provider can be powerful and empowering, setting the stage, in Arlene's words, for someone to make their own health a priority in their own life.

A trio of presentations provided further illumination around different perspectives on the idea of Patients as Partners. Earl Gardiner shared the story of how his organization, RANA, made significant improvements in patient care by involving their patients in a process to improve their health care program. Brian Eckhardt of InfoMagnetics Technologies Corporation and Kirby Smith of Merck Canada each gave an overview of the incredible advances in information technology and data gathering that are giving both patients and care providers new platforms and new opportunities to engage regarding their care, and improve health care outcomes.

Dr. Sharon Macdonald then provided an overview of the mandate of the Manitoba Patient Access Network, an effort that began with a focus on lowering wait times and has since grown to search for new opportunities to support innovation in health care.

The keynote address was given by Noah Wayne of York University. His detailed presentation touched on the importance of changing patient behaviours when it came to systemically addressing chronic disease. He discussed the skills of behaviour change, and put forward the idea of health coaching as a new role in public health care in Canada. Harnessing new technologies and building on new patient expectations, Noah discussed current research available on how health coaches can make a positive difference for patients.

The Forum concluded with an address from the Hon. Erin Selby, Minister of Health. Minister Selby spoke of the Manitoba government's desire to create partnerships in health care to improve patient experiences and ultimately lower the cost of care for taxpayers.

LSAM's goal for the Patients as Partners Forum was to encourage discussion among important stakeholders about the idea of Patients as Partners, and how the Manitoba health care system can take further steps in that direction.

### Roundtable Discussion

The roundtable discussion was divided into two parts, each part based on a single key question related to Patients as Partners. All roundtable participants were divided into four groups, and the groups were asked to consider these two key questions:

1. *When it comes to Patients as Partners, what are our current strengths we can build on?*
2. *What is the one thing you wish you could see to make Patients as Partners a reality?*

## SUMMARY OF FINDINGS

### QUESTION 1

The roundtable discussion regarding the current strengths of the Manitoba health care system brought a number of ideas from participants. Participants saw a number of different strengths in the provincial health care system. This report has grouped the findings that emerged from the roundtable discussion around question one into four theme areas:

#### Manitoba Has The Tools

Roundtable participants noted the strong research & development and technology sectors within Manitoba. Different private sector players within Manitoba are already making important contributions to the technological advances that make a Patients as Partners vision possible – but they are doing this for other jurisdictions. The private sector was seen to have much to offer.

Meanwhile, participants also noted some parts of the health care system are already embracing small but significant technological tools to connect with patients – examples might include communicating with patients via text message, or sending appointment notices as calendar invitations. Roundtable participants felt that Manitoba already has many strengths in its own back yard to leverage in order to improve the provincial health care system and make Patients as Partners a reality.

#### Manitoba Is Gathering Good Data

All of the presenters had unique perspectives on Patients as Partners, but one common theme each touched on was the role that data played in making the Patients as Partners vision a reality. It was felt by a number of roundtable participants that the Manitoba health care system is currently gathering a lot of good data that could be useful in furthering Patients as Partners. Manitoba has large segments of what participants felt were a prime target population concentrated in urban areas. These target populations can be reached by an expanding network of access clinics as well as the established tertiary care facilities in the system. This prime target population shares demographic and economic characteristics that make it more possible for various components of the health care system to gather medical data and put it to use improving health care. This was seen by roundtable participants as a key strength in allowing Patients as Partners to move forward.

#### Health Care Providers Are Open To Change

Participants in the roundtable discussion cited many references to the positive anticipation of these changes from within the provincial health care system. Doctors, nurses and other health care providers are open to seeing patients in a different light, and seeing the relationships with patients as more of a two-way street. Private sector contributions to the public sector health care system are evolving and growing, and the public health care system can learn from these. The scope of care of different health care providers is expanding and evolving. There are new practices in both private and public sector areas of the health care system emphasizing new attitudes and approaches toward patients. Different administrative functions and care areas that in the past may have seen each other as rivals are open to working together. Collaboration efforts are already under way in many places within the system. It is understood that improved collaboration is already improving patient care. Participants felt strongly that building on this process from a Patients as Partners perspective will lead to better care for patients and better, more efficient performance, of the public health care system.

#### Patients Want To Be Partners

At the end of the day, there can be no Patient as Partners vision unless patients themselves embrace this opportunity. The feeling among roundtable participants was that Manitoba's patients are very keen to explore new opportunities to become partners in their own health care. They are looking to embrace the new health care tools that are coming their way, new tools all the time – some of them even being developed in whole or in part here in Manitoba. Access to new information has given them more confidence and a desire to take more ownership of their health and their health care experiences.

### QUESTION 2

For the second question, the roundtable discussion participants were asked what one thing they wish could happen in order to make Patients as Partners a reality. The discussion this elicited touched on challenges within the current health care system as well as hopes and wishes for the system. This report has grouped the findings that emerged from the roundtable discussion around question two into four theme areas:

#### The System Needs To Adapt

Participants recognized those who provide health care in the various areas of the public health care system are ready to embrace the changes involved with Patients as Partners, but the systems and processes that often surround them are not. "Red tape" and administrative processes block material increases in collaboration among different areas of the health care system needed to more fully embrace Patients as Partners. Data is being

gathered, but still resides in siloes. Participants noted the health care system is large with many complexities, and too often these complexities continue to present barriers to improved engagement with and empowerment of patients. Finally, there was also discussion, inspired by the keynote presentation, that health care coaches are a potential role that could be explored as a more formal part of the health care system.

### Technology Needs to Be Embraced

Roundtable discussion of the second question noted the significant ongoing innovation in personal communications technology. Some participants noted that privacy responsibilities needed to be reconciled with the simple and convenient access to medical records that patients are increasingly seeking. Other participants suggested the health care system needed a strong process to evaluate technology, improving acceptance of new tools among patients as well as providers and the system itself.

### Private Sector Can Add Value To Public Health Care

Participants in this section of the roundtable discussion noted that the private sector elements in Manitoba's health care system had much to offer. They were hopeful the public health care system could shift its ideology and approach to be more open to the solutions Manitoba's own private sector can offer for the public health care system. It was expressed that private sector entities bring more than money to the table, that private and public sector can have shared goals within the provision of quality public health care in Manitoba.

### Patients Must Take Ownership

Many participants in the roundtable discussion expressed hope that patients would continue to seek and embrace responsibility for their health care. Even with all the change that has happened to date, participants hoped the trend would continue. Sharing the sentiment expressed by guest presenter Arlene Kramble-Krasnesky, participants hoped members of the public would continue to increase their health literacy, to take ownership of their own health care, to make the most of the opportunity Patients as Partners will present them.

## RECOMMENDATIONS

As the voice and organizational nucleus of the life science industry in Manitoba, LSAM is encouraged by the active and engaged roundtable discussion inspired by the panel of guests during its first Patients as Partners Forum.

Based on the information shared and the ensuing roundtable discussion, LSAM is pleased to make the following recommendations on behalf of its members:

1. *The Association recommends the development and implementation of a comprehensive process to evaluate, validate and improve the uptake of new products and services within the next 12 months, to improve the adoption of technology within the provincial health care system. The pace of innovation in technology is relentless, and these innovations are already finding their way to people in the health care system. Patients are already getting the tools and will increasingly expect the health care system to work with them. Technology will be the cornerstone to empowering and engaging patients while helping the health care system make the right changes to fully embrace Patients as Partners.*

2. *The Association recommends that the provincial government embrace the innovation happening right here at home. Manitoba is home to a diverse and wide-ranging life science sector. Manitoba firms are innovating and developing new systems and solutions that are making a difference in other provinces and other countries. Patients at home should benefit too. The Manitoba patient experience and quality of care can be enhanced by firms based right here in this province. Manitoba businesses offer services, tools and innovations that will make a difference for patients in the Manitoba health care system.*
3. *To encourage patient ownership of their own health care plan, the Association recommends that the Manitoba Government develop and implement a standard practice in the next 12 months to engage patients for guidance and feedback on new initiatives and policy developments that can affect the standard of care. The main purpose will be to exceed patient expectations on processes and ensure that communications they receive are clear and understood. The goal of this process would be to make medical information more understandable and relevant to the patient.*
4. *To further improve the engagement of patients with the health care system, the Association recommends that the Manitoba Government further develop and implement standard practices in the next 12 months for the consistent sharing of relevant health information, such as test results and health records, with patients.*
5. *Finally, the Association challenges our own members and the community to continue dialogue and develop relationships with health stakeholders, so that they can better understand the unmet needs, in an effort to develop solutions and have positive impact on the patient and health outcomes. Utilizing the resources available through the Manitoba Centre for Health Policy and Centre for Health Innovation, we recommend the initiation of a data evaluation project in the next 18 months that explores the root cause of poor adherence in therapeutics. It is clear that a better understanding of this issue is needed. Are there social or economic factors that can be identified as markers? Is there consistency or inconsistency when it comes to disease state? This project will assist policy makers in understanding patient needs and responding to them in a more relevant way.*

LSAM will continue engagement with the Manitoba Chambers of Commerce President's Advisory Committee on Healthcare. 2015 will be a year of focus on the Patients as Partners component of the Committee's report. The constructive and positive engagement process between government and the stakeholders on the committee holds strong potential to evolve and develop the concept of Patients as Partners within the Manitoba public health care system. The Association believes the recommendations contained in this report provide solid opportunities for demonstrable progress and improvements to the patient experience in Manitoba over the next 12 to 18 months. The technology changes that empower patients and drive their new expectations cannot be reversed. The potential for improvement is tremendous. It is time to embrace the opportunities they offer.

<sup>i</sup> Conference Board of Canada: <http://www.conferenceboard.ca/hcp/hot-topics/healthspending.aspx#top>

<sup>ii</sup> Manitoba Budget 2014 <http://gov.mb.ca/finance/budget14/papers/summary.pdf>

<sup>iii</sup> Canadian Institute for Health Information, National Health Expenditure Trends, 1975 to 2012

<sup>iv</sup> Conference Board of Canada – Absent Workers Cost the Economy Billions [http://www.conferenceboard.ca/press/newsrelease/13-09-23/absent\\_workers\\_cost\\_the\\_canadian\\_economy\\_billions.aspx](http://www.conferenceboard.ca/press/newsrelease/13-09-23/absent_workers_cost_the_canadian_economy_billions.aspx)

<sup>v</sup> Manitoba Centre for Health Policy: Chronic Disease in Manitoba, What are the costs?

<sup>vi</sup> *ibid*



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