The Health Care in Canada Survey

A National Survey of Health Care Providers, Managers and the Public

2016 Results: Chronic Disease – Prescription Medications

Disclaimer

The information herein being shared is for educational purposes and is not intended for publication without the prior consent of the Health Care in Canada Knowledge Translation Committee.

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Background

Membership

- Initially formed 1997
- National, multi-institutional stakeholder representation

Rationale

- Measure real-world, relevant trends - experience / opinion / values
- Sample simultaneously - public / clinicians / administrators
- Inform / influence / improve: practices and policies

Legacy

- Uniquely connected, committed network
- Unique tracking capability (12 surveys 1997 - present)
- Increasing relevance / credible / evidence-based influence

2016 Members

- Canadian Cancer Society (CCS)
- Canadian Foundation for Healthcare Improvement (CFHI)
- Canadian Home Care Association (CHCA)
- Canadian Hospice Palliative Care Association (CHPCA)
- Canadian Medical Association (CMA)
- Canadian Nurses Association (CNA)
- Canadian Pharmacists Association (CPhA)
- Constance Lethbridge Rehabilitation Centre (McGill University)
- Health Charities Coalition of Canada (HCCC)
- HealthCare*CAN*
- Institute of Health Economics (IHE)
- Merck Canada
- Studer Group Canada
- POLLARA
- **Care***Net* / Strive Health

HCIC Methods

Results derived from online survey questionnaires (POLLARA)

- conducted May to June 2016
- with nationally representative samples of:
  - Canadian adult public, MDs, nurses, pharmacists, administrators, allied health professionals.
  - For the purpose of this survey, allied health professionals included nutritionists/dieticians, occupational therapists, physical therapists, psychologists and social workers.

Groups	Sample Size	*Estimated* Margin of Error
Public	1500	± 2.5%
Doctors	102	± 9.7%
Nurses	102	± 9.7%
Pharmacists	100	± 9.8%
Administrators	100	± 9.8%
Allied Health Professionals	100	n/a

Chronic Disease

Prescription Medications

While medications to help chronic illness is down, patients continue to be non-compliant, despite high levels of information about the drugs

- Use of prescription medications is down among those suffering from chronic diseases across the country. Despite a lower rate of usage, non-adherence levels remain constant, with half of those who take prescription drugs not always taking them properly. Usually, this means taking less than what is prescribed, due to Canadians feeling they are not necessary or simply forgetting to take them. This happens despite the fact that most people feel well informed regarding the need and purpose of their medications. That said, they also feel somewhat less informed about side effects.

- Health care providers who deal with prescription drugs (doctors, pharmacists and nurses) also feel they are informing their patients about their medications, particularly why they are on it and what it should do for them. Doctors are somewhat less likely to inform patients how to take the drugs or potential side effects of them.

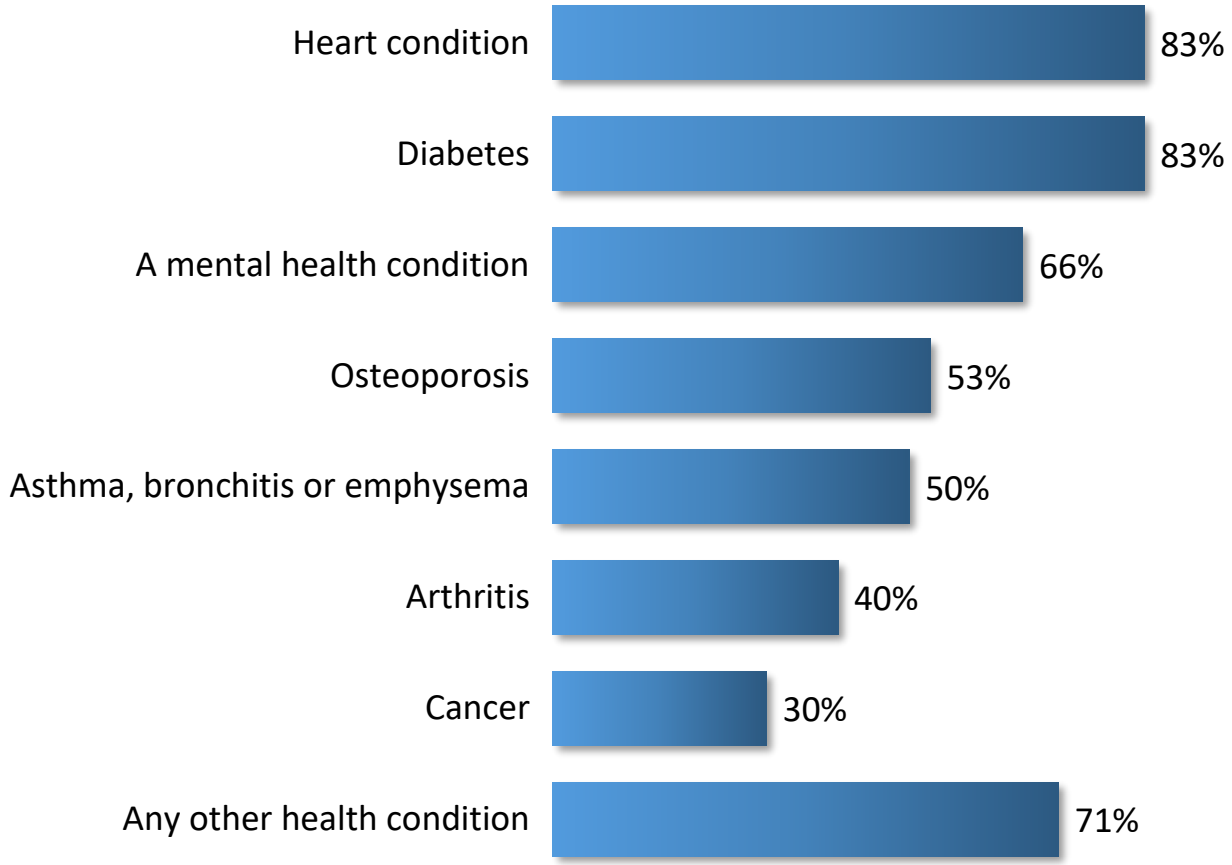
Managing Chronic Care - Medications Public Realities

Mean # of Rx's **3.4**

40% Take Rx regularly

Which Conditions?

Non-adherent **52%**



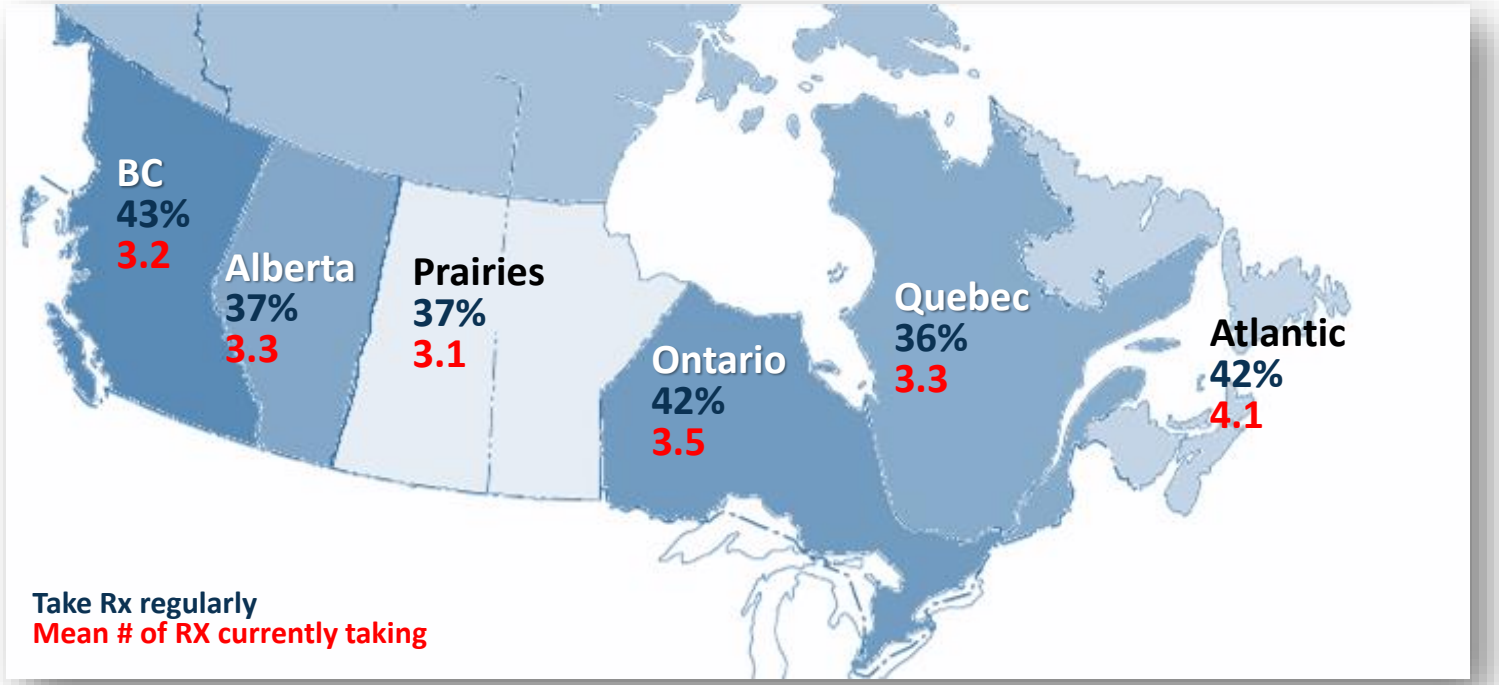
QH1A: Do you currently take any prescription medications on a regular (daily or weekly) basis? (n=1500)
QH2: How many different types of prescription medications are you currently taking in total? (Take Rx regularly n=641)

Managing Chronic Care - Medications
Public Realities - *By Region*

40%

Overall
Take Rx regularly

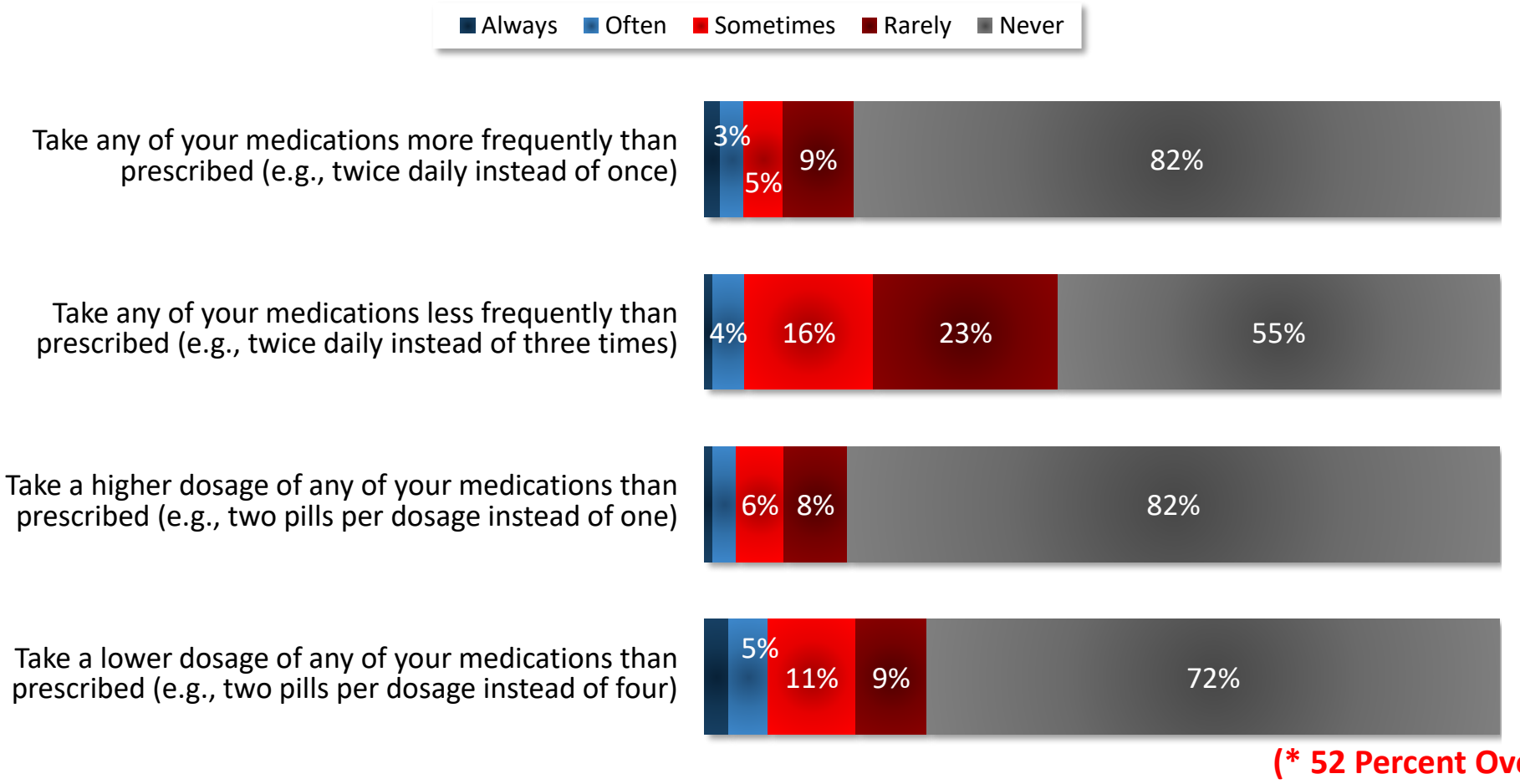
Overall
Mean # of Rx's currently taking
3.4



QH1A: Do you currently take any prescription medications on a regular (daily or weekly) basis? (n=1500)
QH2: How many different types of prescription medications are you currently taking in total? (Take Rx regularly n=641)

Managing Chronic Care
Medication Adherence – Public Perceptions *

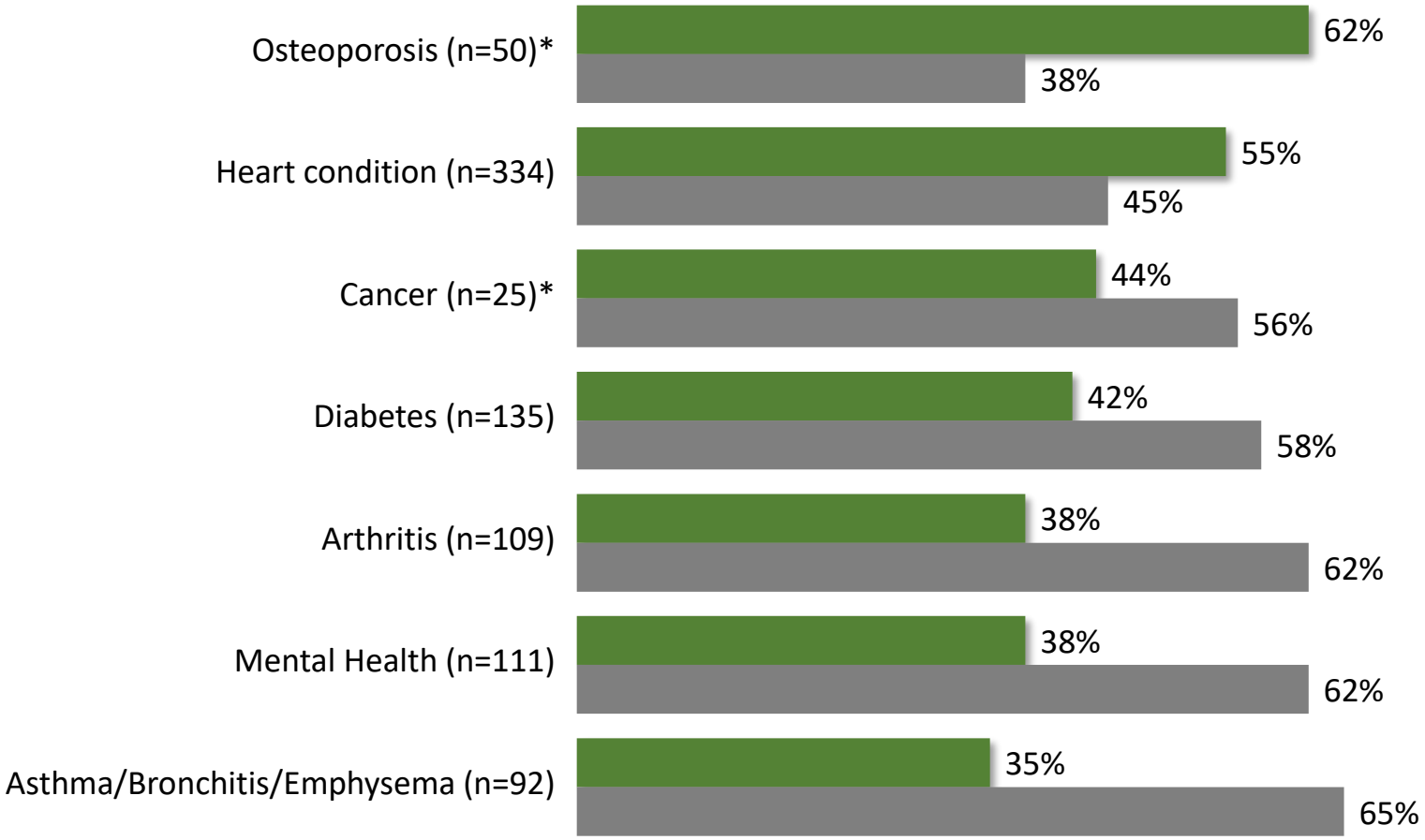
Patterns of Non-Adherence



(* 52 Percent Overall)

QH3: Do you do any of the following when it comes to taking your prescribed medication? (Take Rx regularly n=641)

Managing Chronic Care
Medication Adherence by Condition – Public Perceptions

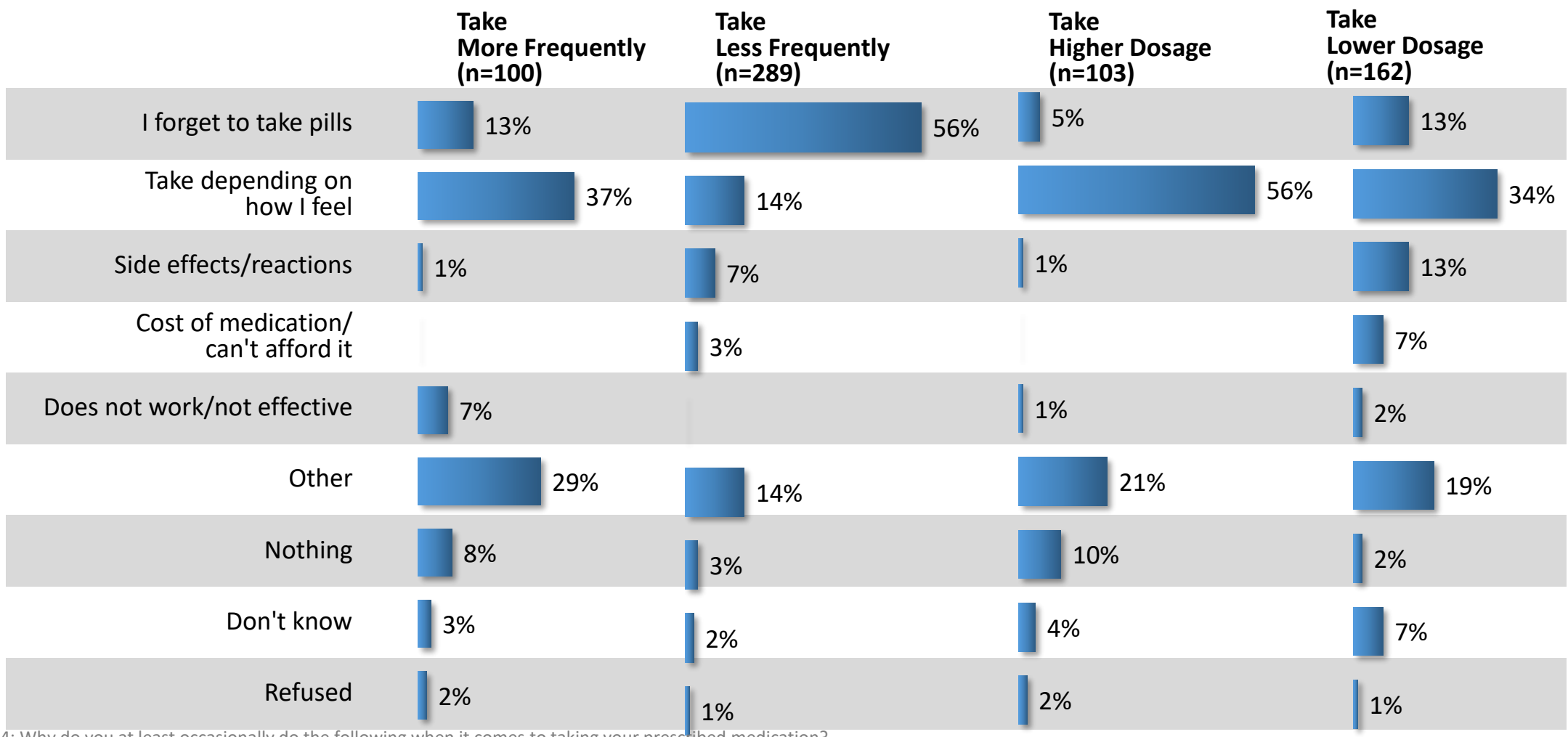


* Results should be interpreted with caution due to small base size.

QH3: Do you do any of the following when it comes to taking your prescribed medication?(n=1,500)

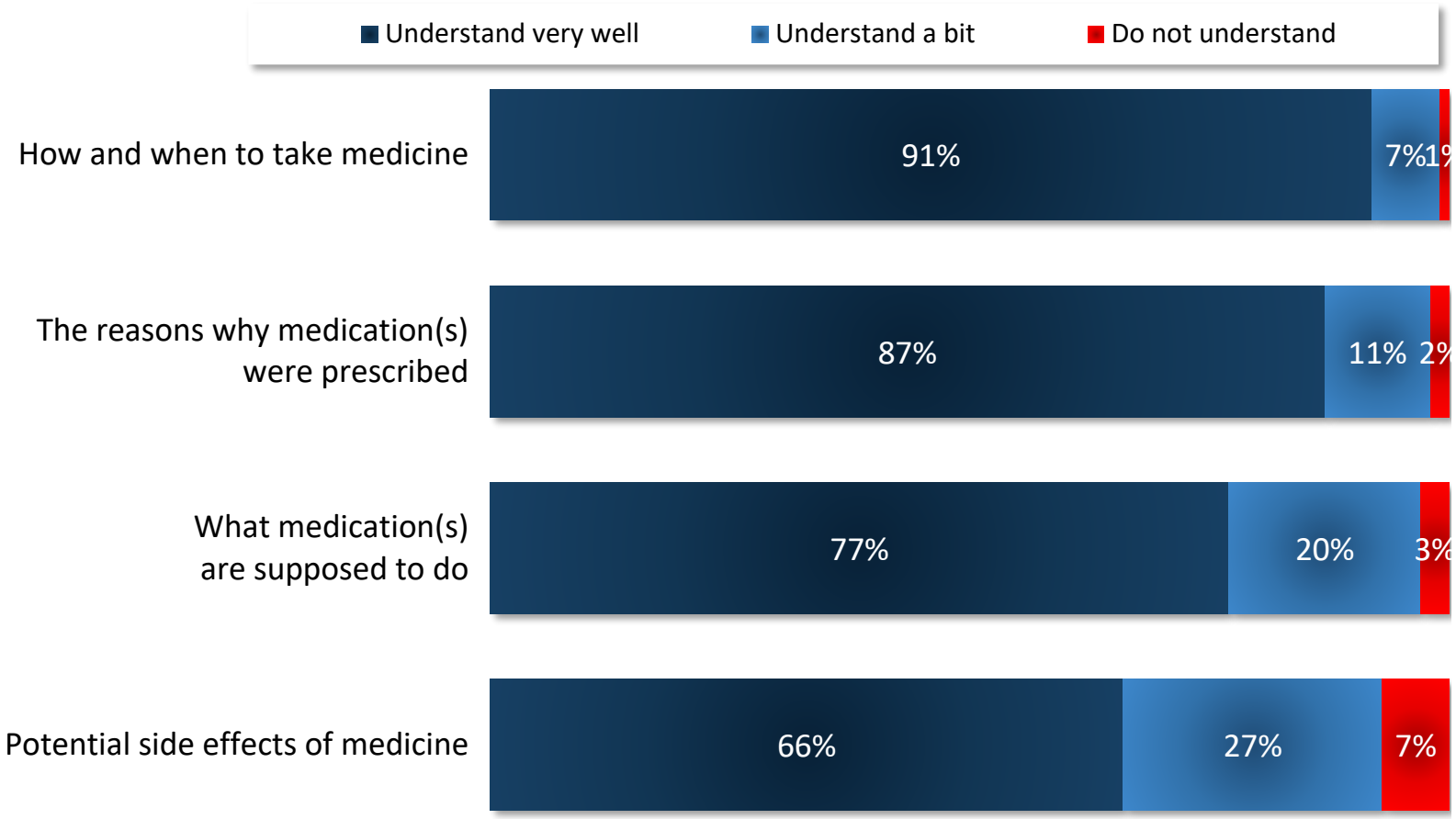
Managing Chronic Care
Medication Adherence – Public Perceptions

Reasons for Non-Adherence



QH4: Why do you at least occasionally do the following when it comes to taking your prescribed medication?

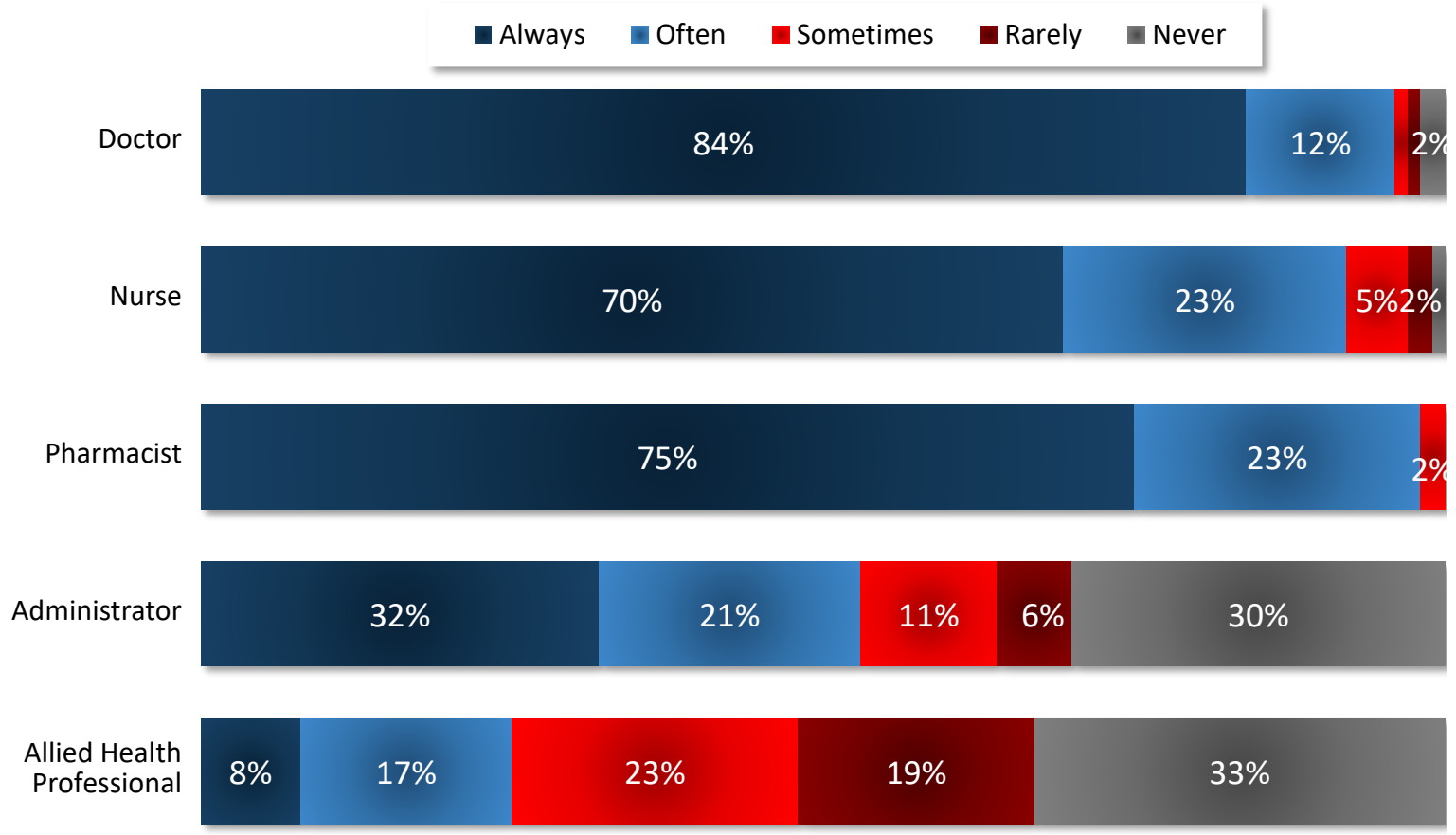
Managing Chronic Care
Medication Adherence - Public Perceptions



QH5: How much would you say you understand about each of the following? (Take Rx regularly n=641)

Managing Chronic Care
Medication Adherence - Professional Perceptions

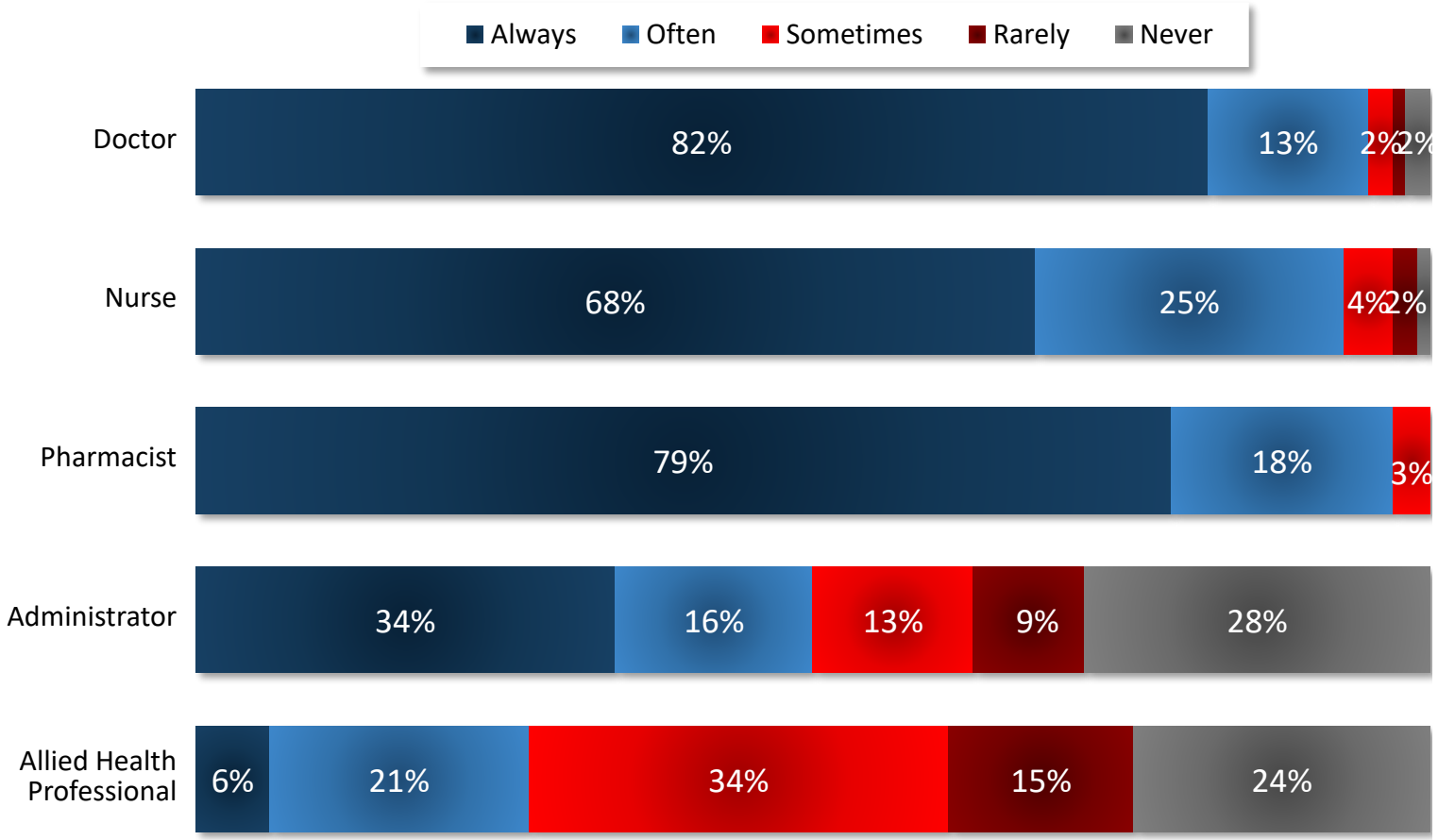
Clinicians Provide Reason For Prescription



H1B. How often do you tell patients why the medication(s) was prescribed? Doctor (n=102), Nurse (n=102), Pharmacist (n=100), Admin (n=100), Allied Health Professional (n=100)

Managing Chronic Care
Medication Adherence - Professional Perceptions

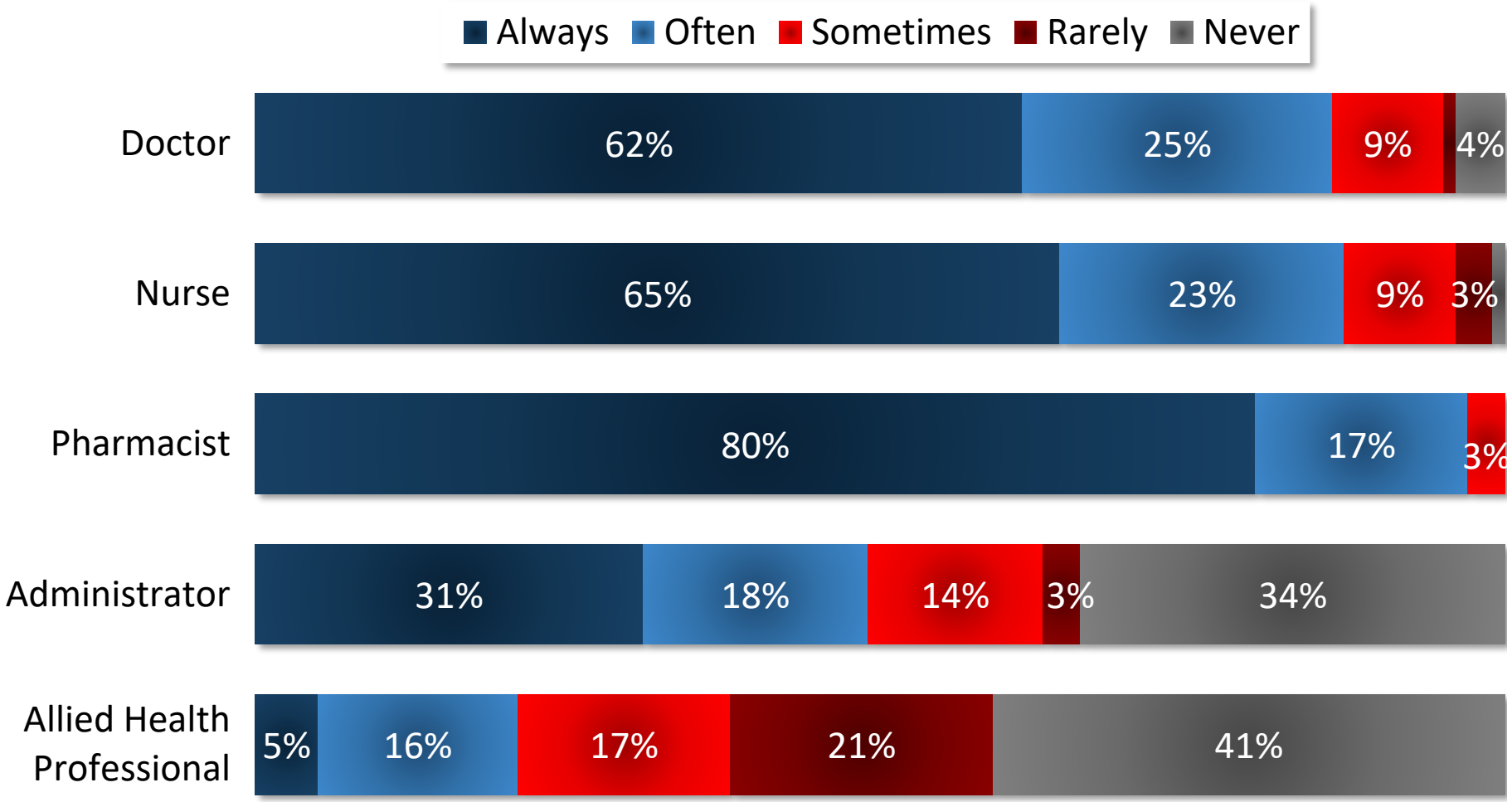
Clinicians Provide Information About How Medications Work



H1C. How often do you tell patients what their medication(s) are supposed to do? Doctor (n=102), Nurse (n=102), Pharmacist (n=100), Admin (n=100), Allied Health Professional (n=100)

Managing Chronic Care
Medication Adherence - Professional Perceptions

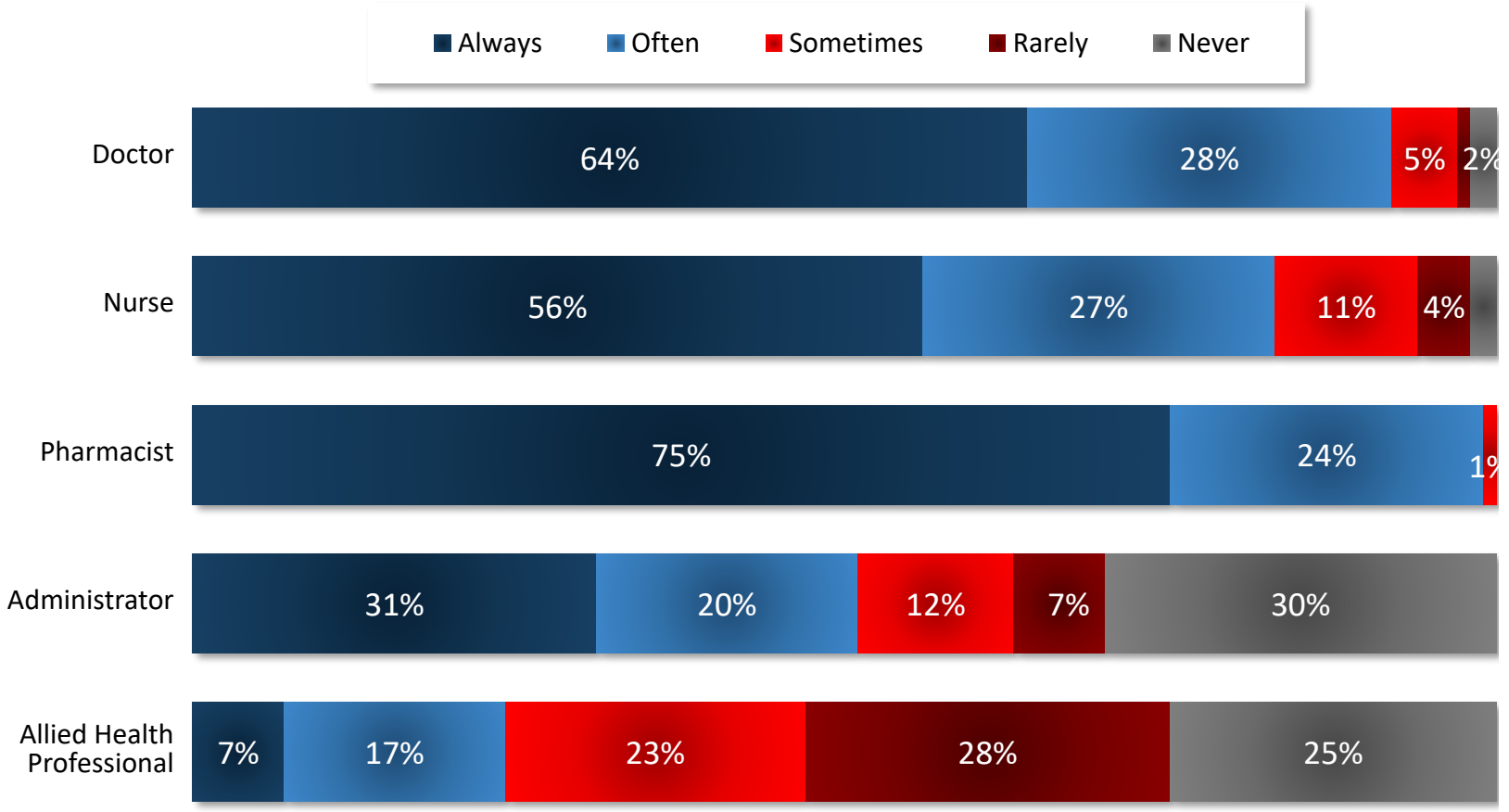
Clinicians Provide Instruction for Use



H1A. How often do you provide patients with instructions on how to take or use their prescribed medication properly? Doctor (n=102), Nurse (n=102), Pharmacist (n=100), Admin (n=100), Allied Health Professional (n=100)

Managing Chronic Care
Medication Adherence - Professional Perceptions

Clinicians Provide Information About Side Effects



H1D. How often do you tell patients what their medication(s) are supposed to do?