# *Canadian Personal Care Provider (Canadian) 1st edition Wolgin Solutions Manual*

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# 2

# The Canadian Health-Care System

## LEARNING OBJECTIVES

**LO1** Describe the history and current state of health care in Canada.

**LO2** Explain the five principles of the *Canada Health Act*.

**LO3** Identify the roles of the federal and provincial or territorial governments in health care.

**LO4** Discuss current issues and trends for Canada's health-care system.

**LO5** Categorize health-care services by type, urgency, and level.

**LO6** Discuss the interprofessional health-care team.

## CHAPTER OVERVIEW

**Focus on the Person: Johanna Parker, 45-year-old woman, broken bones and concussion**

The History of Health Care in Canada

Canada's Current Health-Care System

- The Role of the Federal Government
- The Role of the Provincial and Territorial Governments

Current Issues and Trends for Canada's Health-Care System

- Canada's Aging Population
- Cost of Health Care in Canada
- Increased Need for Community Services
- Privacy Issues and Electronic Records

Health-Care Categories in Canada

The Interprofessional Health-Care Team

## KEY TERMS

**acute** a qualifier that defines an illness or disease as one with a rapid onset and short duration

**acute-care hospital** a short-term or emergency-care facility that provides health-care services to patients

**adult day program** a program of activities designed to meet the physical, social, emotional, and recreational needs of dependent adults; participants generally live at home and attend the program daily or weekly

**adult group home** a home for small groups of people with physical- or mental-health challenges who are partially independent but require some support with personal care or household tasks

**assisted-living residence** a facility for people with physical- or mental-health challenges who are partially independent but require some support with personal care or household tasks

**birthing centre** small units that are usually staffed by midwives and offer a more home-like atmosphere than hospitals for giving birth

***Canada Health Act*** federal legislation that ensures the accessibility of health care for all Canadians

**chronic** a qualifier that defines an illness or disease as being long term with a gradual onset, often becoming progressively worse over time

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**disability** a loss of function and ability to complete activities of daily life due to disease process or injuries

**disease prevention** identification and minimization of risk factors for disease

**disease** medical diagnosis of abnormalities of the structure and function of the body's organs and systems

**health promotion** education and counselling to support healthy lifestyle choices

**hospice-palliative care facility** a specialized facility that provides health-care services to terminally ill clients and their families

**hospice-palliative care** health care to provide support, relieve suffering, and improve quality of life for people living with or dying from advanced illness

**illness** a condition of impaired physical or mental health

**inpatient** a patient who is admitted to a hospital or similar health-care facility overnight

**interprofessional team** a team made up of both regulated and unregulated health-care providers from different disciplines. They plan, make decisions, and provide client care that is focused on the clients' needs, priorities, and goals. The care centres on the client, not on any particular discipline or department's needs

**mental-health facility** a specialized facility that provides health-care services to clients with mental-health challenges on an inpatient or outpatient basis

**outpatient** a patient who receives care from a hospital or other health-care facility but does not stay overnight

**primary care** a client's first point of contact with the health-care system, which includes prevention, diagnosis, treatment, and follow-up of illness and injury

**rehabilitation facility** a specialized facility for helping clients regain physical function after an illness or injury

**rehabilitation** health care designed to help people return to a previous level of function or as high a level of function as possible

**residential-care home** a facility that provides long-term care for children or dependent adults, such as complex-care or long-term care facilities and nursing homes

**respite care centre** a facility or home that provides short-term care to give family members or significant others a break (respite) from caring for a loved one who needs ongoing care for illness or disability

**secondary care** specialist care received upon referral from a primary-care physician

**tertiary care** highly specialized care involving advanced and complex procedures and treatments over an extended period of time

# TEACHING STRATEGIES AND SUGGESTED STUDENT ACTIVITIES

- Prepare a chart comparing early Canadian health care with health care of today. First show the historical information and then add the current comparison. (LO1)
- Following a discussion of the Canada Health Act, break the students into small groups assigning the five principles of the Act to groups. Ask the groups to discuss examples of the principle they are assigned to and then to present their findings to the class. (LO2)
- Discuss current issues in the media. This can be done with newspaper articles, short news clips, or video clips. Ask the students to discuss. (LO4)
- Break students into small groups and either assign each group a current issue or ask them to chose one. Then assign half the group to be pro issue and half to be against the issue. Ask the groups to debate the issue. The topics and groups could be assigned in one class and then debated during the next class. (LO4)
- After discussing the health care categories, provide the students with situations and ask them to categorize each situation by type, urgency, and level. (LO5) Examples include the following:
  - A child falls off his/her bike and experiences intense leg pain and cannot weight bear.
  - An 85-year-old woman can no longer live on her own due to fire hazards when using her stove.
  - Student requires immunizations updated prior to the clinical component of the course.

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- After discussing the health-care team, describe a scenario to the students and ask the students to discuss who will provide what care. (LO6) For example, a 17 year is admitted to hospital after a car accident. Who will order the care? Who will assist the client to the washroom? Who will fill the prescription for the medications? Who will administer the IV medications? Who will assist the client with his crutches? Who will determine the best oral intake to facilitate healing? Who will assist the client's family in plans for his return home after discharge?

# STUDENT WORKBOOK ANSWER KEY

KEY TERMS REVIEW

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9. v
10. vii
11. xiv
12. xxvi
13. i
14. xxii
15. xii
16. xix
17. xvii
18. xiii
19. xxiii
20. xxi
21. xxiv
22. vi
23. xxv
24. ix
25. ii
26. iii

MULTIPLE-CHOICE QUESTIONS

1. d
2. b
3. d
4. a
5. d
6. c
7. b
8. a
9. c
10. b
11. a

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TRUE OR FALSE QUESTIONS

1. F
2. T
3. T
4. F
5. F
6. T

FILL-IN-THE-BLANK QUESTIONS

1. Victorian Order of Nurses
2. Royal Canadian Mounted Police

APPLICATION EXERCISE

1. Personal Care Provider
    - Provides personal care while Mrs. Parker is in the hospital
    - Provides assistance with bathing, toileting, and meal preparation when Mrs. Parker is discharged from the rehab hospital to home
2. Nurses
    - Plan and evaluate nursing interventions based on assessment and diagnosis of Mrs. Parker's holistic needs while she is in the emergency department at the original hospital and at the rehab hospital
3. Physiotherapist
    - Designs and implements a rehabilitative program to strengthen Mrs. Parker's physical strength, endurance, and flexibility to optimize function while she is at the rehab hospital and at home
4. Lab Technicians
    - Process blood tests and other specimens ordered by the physician
5. Dietitian and Food Service Workers
    - Ensure that Mrs. Parker eats nutritiously while at the hospital
6. Recreational Therapist
    - Plans programs and activities to meet the leisure needs of Mrs. Parker to improve her quality of life while she is at the rehab hospital
7. Occupational Therapist
    - Designs and implements a rehabilitative program to optimize Mrs. Parker's ability to be independent with activities of daily living and to return to work, if possible while Mrs. Parker is at the rehab hospital and after she is discharged home
8. Pharmacist
    - Dispenses medications and provides drug-therapy education for the purpose of disease treatment and/or symptom control to improve quality of life
9. Social Worker
    - Provides counselling to Mrs. Parker about province-to-province health-care coverage and helps to coordinate access to community services when Mrs. Parker is discharged home
10. Imaging Technician
    - Develops X-ray or other images to diagnose the extent of Mrs. Parker's fractures

Note: The instructor and student may identify many other health-care providers appropriate for Mrs. Parker's health-care team.

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# The Canadian Health-Care System

# Chapter 2

# Learning Objectives

1. Describe the history and current state of health care in Canada.
2. Explain the five principles of the *Canadian Health Act.*
3. Identify the roles of the federal and provincial or territorial governments in health care.
4. Discuss current issues and trends for Canada's health-care system.
5. Categorize health-care services by type, urgency, and level.
6. Discuss the interprofessional health-care team.

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# History of Health Care

- The federal, provincial, and territorial governments each have very specific roles and responsibilities that were first outlined in the *British North America Act* in 1867.

- The provincial and territorial governments were given the responsibility of providing health, education, and social services to Canadians. At that time, health-care services were not paid for through taxes.

- People paid for health-care services out of their own pocket when needed.

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# History of Health Care continued

- In 1916, the Canadian Government permitted rural municipalities to collect funds through taxation to pay for physician services.
- In 1927, cost-sharing pension program was implemented for older Canadians.
- In 1939, Saskatchewan passed the *Municipal Medical and Hospital Services Act* to allow taxation to pay for hospital services.
- In 1945, Canada set up its first universal social program.
- In 1947 Saskatchewan established the first pre-paid medical and hospitalization insurance.

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# Current State of Health Care

- The federal *Hospital Insurance and Diagnostic Services Act* in 1957 provided universal insurance services across Canada.
- Old Age Security (1952) and Canada Pension (1965) were passed into law.
- In 1966 universal health care insurance was extended to include physician services through the *Medical Care Act.*
- In 1984 the federal government passed the *Canada Health Act* to ensure universal health care accessibility for all citizens.

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# Canada Health Act

**TABLE 2-1**

**The Five Main Principles of Canada's National Health-Insurance Program**

1. Public Administration
   The health-insurance plan of a province or territory must be administered and run on a non-profit basis by a public authority, which is accountable to the provincial or territorial government and subject to audits.
2. Comprehensiveness
   The plan must cover all medically necessary health services provided by hospitals, medical practitioners, and dentists working in a hospital setting. The province or territory may also provide coverage of additional services, such as prescription drugs, and optometric and chiropractic care.
3. Universality
   All insured persons of a province or territory are entitled to the same level of insured health services.
4. Portability
   Canadians who move or travel between provinces or territories can continue to receive publicly funded health care. Canadians travelling abroad also receive some coverage, depending on their province or territory's rules and limits.
5. Accessibility
   All insured persons must be able to access medically necessary health-care services without financial or other barriers. For example, residents can present a provincial health card at the place where they are receiving care, and do not have to pay for services out-of-pocket, submit paperwork, and wait to be reimbursed as with most private insurance plans.

*Sources:* Based on Madore, O. (1995/2005). *The Canada Health Act: Overview and options*. Retrieved from http://www.parl.gc.ca/content/lop/researchpublications/944-e.pdf; Health Canada. (2014). *Canada Health Act: Annual report 2013–2014*. Retrieved from http://www.hc-sc.gc.ca/hcs-sss/alt_formats/pdf/pubs/cha-ics/2014-cha-lcs-ar-ra-eng.pdf

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# Roles of Federal Government

- The federal government is responsible for how the health-care system is financed.
- A portion of the federal income taxes that Canadians pay each year is allocated to funding health care.

The federal government are also responsible for:

- Health promotions programs
- Disease-prevention policies
- ParticipACTION (promoting physical fitness and healthy living)
- Canada Prenatal Nutrition program

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# Roles of the Provincial and Territorial Governments

- Provincial and territorial governments provide funding for hospital services to inpatients and outpatients for medically required services to maintain health, to prevent disease or treat an injury, illness or disability.

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# Current issues and trends of the Canadian Health-Care System

- Provinces and territories are focusing on providing more cost efficient health-care services in the community, including home care.
- Electronic record keeping allows for more client sharing of health-care information between health-care providers.

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# Canada's Aging Population

- Canadians today are living longer and are in better health than any previous generation.
- The increasing age of Canada's population means a larger portion of Canadians will be at increased risk for illness or disability.
- The demand for health-care services can be expected to rise.

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# Active Canadians



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**FIGURE 2-1** Many Canadians remain active and energetic as they age.

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# Cost of Health Care

- In 2014, the estimated cost for health care in Canada was more than $215 billion or about $6045 per person.
- As the Canadian population ages, politicians, economists and health-care providers continue to debate the affordability of publically funded heath-care.

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# Increased need for Community Services

- Increased need for community services.
- Providing health care to people in their communities and homes tends to me more cost effective than admitting people to high-cost environments like hospitals.
- Most people prefer to remain  in their homes as long as possible.

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# Privacy Issues and Electronic Records

- The privacy of clients' health-care records is protected federally under the *Privacy Act* and the *Personal Information and Electronic Documents Act* and provincially under various laws such as Ontario's *Freedom of Information and Protection of Privacy Act.*

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# Health Care Categories in Canada

Four types of health-care services are found across Canada including:

- Health promotion and disease prevention
- Diagnosis and treatment
- Rehabilitation and health restoration
- Hospice-palliative or end of life care

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# Levels of Health-Care

- Primary care
  - This refers to the clients first point of contact with the health-care system which includes prevention, diagnosis, treatment and follow-up of illness and injury.
- Secondary Care
  - The client may be referred to a specialist or facility for more specialized medical care.
- Tertiary Care
  - Highly specialized medical care over an extended period of time.

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# Five Basic Functions

All health-care providers in all health-care settings should fulfil the following same five basic functions:

- Provide care for ill or injured people
- Prevent disease
- Promote individual and community health
- Provide facilities for the education of health workers
- Promote research in the health-care sciences, including medicine, nursing and others

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# Interprofessional Health-Care Team



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**FIGURE 2-2** The health-care team.

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# Interprofessional Health-Care Team

- The types of  health-care providers included on the interprofessional health-care team depend on the client's unique needs. The client, family members and significant others are the central focus of the team.
- The client's priorities, goals and needs should guide the teams planning, decision making and care delivery.  The teams objective is to provide seamless coordination of services needed from different departments, agencies and facilities.
- The team is working toward the common goal of delivering comprehensive, person centred, cost-effective care.

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# Person-Centred Care

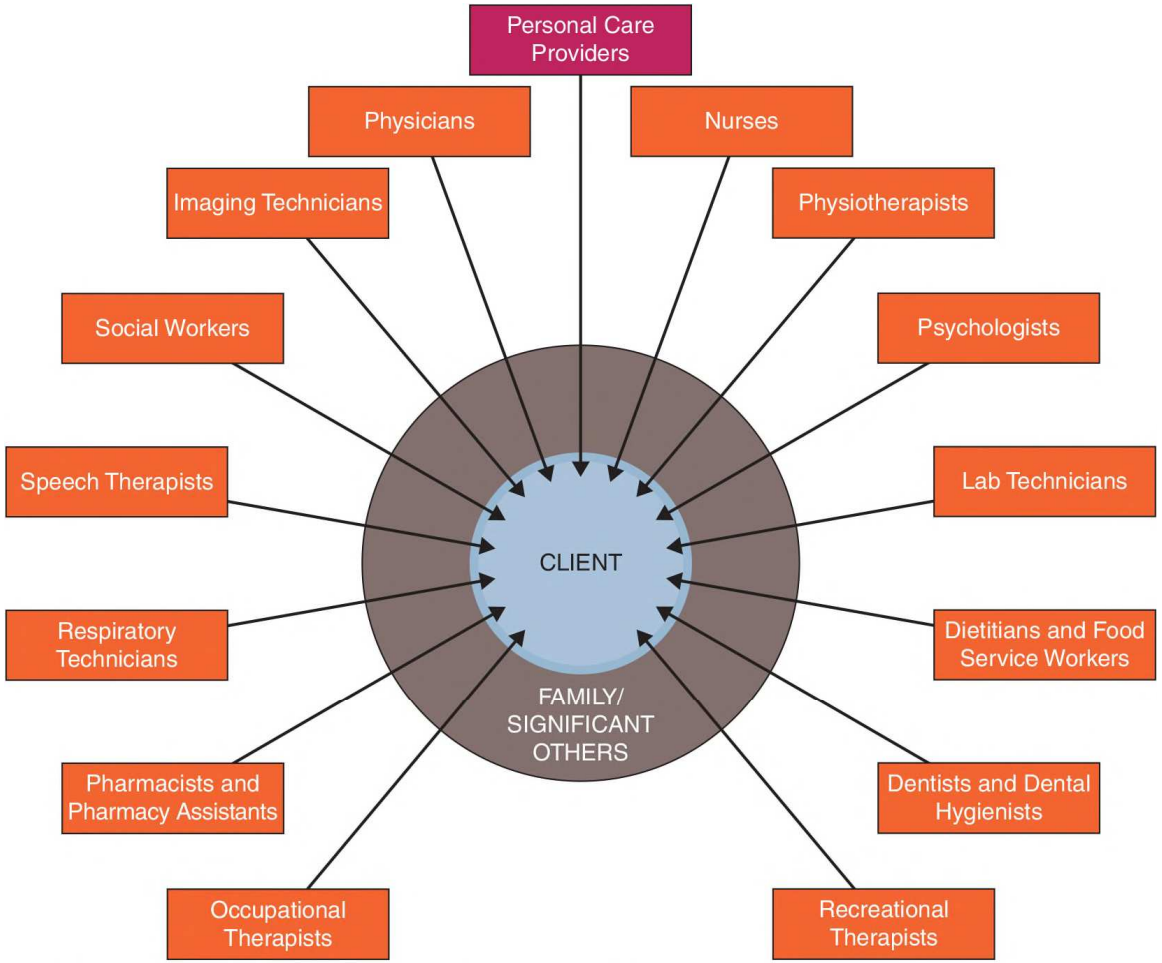



**FIGURE 2-3** An interprofessional team provides person-centred care.

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