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It's not a bad idea to occasionally spend a little time thinking about things you take for granted. Plain everyday things. Evan Davis



On the heels of the recent elections in the United States of America and immediate discussions regarding their Affordable Care Act (colloquially known as "Obama Care") and the ongoing discussions between our own Federal government and Provinces in Canada regarding health care transfers, I thought it timely to discuss a personal experience that shines some light on "how good we have it in Canada".

If you recall a couple years ago, after "binge watching" the *Breaking Bad* television series during the holidays, I wrote an article about healthcare differences between Canada and the United States.

http://www.wrh.on.ca/Site_Published/wrh_internet/Document.aspx?Body.Id=54663

For those of you not familiar with *Breaking Bad* the premise of the story is that the main character had to start "cooking meth" to pay for his cancer treatments in the USA. My

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comments related to how we take for granted the "cost" of our healthcare and maybe receiving an annual statement detailing the cost associated with our use would give us a greater appreciation for the system we have, in large part, that is free.

This story is similar but has real life application. My son had to have two surgeries in the past 6 months for a pilonidal cyst. For those of you not familiar with the issue or the surgery I asked you to google it. Unfortunately, like many with this health problem, it came back with a vengeance after the first surgery with some complications because of its proximity to his rectum. In any event he is recovering from the second surgery and all is going well. His surgeons and nurses have been amazing.

What I want to highlight is the homecare my son had to receive following surgery. With this surgery the wound is "open". Meaning after the second surgery my son had an open wound that was approximately 10cm long, 5 cm deep and 4 cm wide. It needs to be packed at least once daily with sterile packing and bandaged. Running shower water through the wound plus cleaning with saline before the packing is applied allows for the body's normal healing process to take over and the wound heals from "bottom up". This takes about 8 weeks to totally heal subject to infections or setbacks.

My son attends school in the United States. The second surgery occurred immediately before this past Christmas. During the Christmas holidays we once again accessed the services of our local Community Care Access Centre (CCAC) to change the packing once daily in Ontario. Once school started again we had to arrange for home care in the United States. The home nursing care in both Canada and the United States is exceptional. The individuals involved in providing the care on both sides of the border have been outstanding and the communication between care providers both inside of Canada and across the border has been outstanding.

The issue is what we, as Canadians, take for granted.

My son's supplies are pretty basic for his wound. Some sterile gauze, bandage and tape to hold the bandage. From time to time, as the wound heals, you have to use different types of medicated strips, like Inadine, to promote healing.

In Canada, as you all know, the home care post surgery is free. It is arranged for the patient by a physician's order when discharged from the hospital. You receive a call from CCAC once you arrive home and once you are in a pattern, everything moves smoothly so long as the underlying

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OUR VISION: OUTSTANDING CARE - NO EXCEPTIONS! OUR MISSION: DELIVER AN OUTSTANDING CARE EXPERIENCE DRIVEN BY A PASSIONATE COMMITMENT TO EXCELLENCE issue heals, as it should. We do not pay for the nursing/patient service workers' time or supplies. At most we have to pick up the supplies ourselves at a local pharmacy for use by the CCAC staff. In fact, up until my experience with the USA system for homecare I never thought twice about it.

The arranging of the USA homecare system is similar. The one we are using is operated by the USA Hospital system itself so is very seamless from that point of view in my opinion. You pretty much have one agency to call if the home care promised at the hospital is not what happens at home. However, this is where the difference lies. The types of supplies used and the cost of the service and supplies.

Unlike Canada, where we take this home care for granted, in the USA the level of homecare is determined by the insurance coverage you have. The insurance company will determine the type of service you are provided and even the type of supplies that are used. If you pay privately you get access to a certain level of supplies.

The one example that hit home for me is the tape used to ensure the bandage adhere to the skin. A tape that is used in our hospitals and by CCAC is called Medipore[™] and comes in ten yard rolls. Typically 3-4 inch width is used.



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OUR VISION: OUTSTANDING CARE - NO EXCEPTIONS! OUR MISSION: DELIVER AN OUTSTANDING CARE EXPERIENCE DRIVEN BY A PASSIONATE COMMITMENT TO EXCELLENCE For a ten yard roll it costs our hospital \$5.83 CDN. I assume it costs our local CCAC the same or similar.

In arranging homecare in the USA, since I was a private pay, we had to review the supply list and procure the supplies to be used. What was fascinating is that this tape was not available for homecare use. It is used in USA hospitals but the only tape that I could procure for USA home care was not this type but another less expensive but less patient/nurse friendly/caregiver product. If I wanted this product I would have to procure it myself. I had a similar issue with the type of saline that we used in Canada that I ended up procuring on my own in the USA through a private company.

I am a huge proponent of standardizing care, supplies and reducing costs where possible.

The "one payer" system in Canada needs to be maintained as long as we can. I cannot even imagine having to first "shop" for healthcare coverage and then on pretty much every single healthcare decision – as simple as what tape to use - to have to negotiate that with the insurance company or provider.

No doubt our Canadian healthcare system has its issues. Timely access for non-emergent care is one of them. Universal access is not one of them. However, we do not have to worry about premiums, deductibles and even supplies.

So the next time you have to access our Canadian healthcare system, please take a step back and say "we have no idea how good we have it".



I would be remiss if I did not thank Drs. Takahashi and Ravid for their surgical expertise. Also, our WRH wound care Nurse, Jessica. We do not take a step without Jessica's advice. Thanks to Max's CCAC nurses, Justin and Tayna as well as his USA homecare nurses, Lynne and Dawn.



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