
NEWS RELEASE

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Ministry of Health

B.C. OUTLINES NEW VISION FOR PRIMARY HEALTH CARE

VICTORIA – Making sure that more British Columbians have their own family doctor, ensuring that patients with chronic conditions such as diabetes or hypertension are better managed, and reducing pressures on acute care – these are some of the goals of the Primary Health Care Charter launched today by Health Minister George Abbott.

The Charter sets the direction and establishes seven health priorities that are supported by a number of high-impact projects to transform the primary health-care system in British Columbia. The Charter reflects the growing prevalence of chronic disease with three of the Charter's priorities centred on improving care for individuals living with chronic conditions and prevention among those at risk.

“The primary health-care system is usually the first point of access – and for the majority of people, the only regular contact with our health system,” said Abbott. “By concentrating on individuals who use the system most often we can improve their quality of care, their overall health and well-being, and reduce pressures and costs across the health system. These are critical targeted changes, and done well, they will produce a big impact.”

Chronic disease is the biggest obstacle to sustainability of the public health-care system. More than 1.3 million people in B.C. suffer from one or more chronic conditions and over 90,000 people suffer from four or more. While people with chronic conditions represent around 34 per cent of the B.C. population, these individuals consume approximately 80 per cent of the combined MSP, PharmaCare and acute care budgets.

“Achieving the priorities set out in the Charter will make British Columbia a leader in patient-centred care,” said Dr. Margaret MacDiarmid, president of the BC Medical Association. “The doctors of B.C. welcome the opportunity to work with government, health authorities, and other clinicians to improve primary care, which in turn will reduce the burden in other areas of health care.”

A key element in transforming the episodic health care that patients have received over the last 30 years is the shift that re-orientes health services to work with patients as they journey through the health care system. For some patients this could mean integrated teams of health-care providers; for others, it could mean tools and training to support patient self-management. It could also be as simple as planned care, where patients with a chronic condition or complex health problem will have a plan for their care developed with their family physician.

General practitioners constitute the largest workforce in primary health care, with over 4,600 practising in British Columbia in 2005/06. The recent agreement signed between the government and the province's physicians focused on system change, not just compensation. The focal point is \$422 million allocated for primary health care over the next four years through investments in chronic disease management and encouraging GPs to pursue full service family practice.

A number of new and enhanced programs and fees have already been introduced that will support the principles of the charter. These include grants to community agencies for stroke and cognitive behavioural therapy. Other programs and fees have been implemented for health-care providers that give them access to the tools and training they need to better assist patients suffering from chronic disease and redesign their practices to see more patients.

Approximately 80 per cent of British Columbia's population will have contact with the primary care system in any one year, making it the most important point of contact for accessing services and care and a key focus in the discussion on sustainability. The Charter was developed in partnership between the Ministry of Health, health authorities, the BC Medical Association, regulatory bodies, primary care providers and community organizations across British Columbia and ties together the various activities and investments in the Primary Health Care system.

Over the coming days and months, new initiatives will be rolling out that will ensure the priorities established under the Primary Health Care Charter are achieved.

Copies of the charter are posted on the Ministry of Health website at www.PrimaryHealthCareBC.ca.

1 backgrounder(s) attached.

Media contact: Marisa Adair
Communications Director
Ministry of Health
250 920-8500 (cell)
250 952-1887 (media line)

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BACKGROUND

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SEVEN PRIORITIES FOR PRIMARY HEALTH CARE

The seven health priorities identified in the Charter are all supported by projects that have common themes of supporting physicians in redesigning their practices to improve care and see more patients, building networks of interdisciplinary care for individuals living with chronic conditions and supporting patients as partners – instead of passive recipients of care.

Priority #1: Improved Access to Primary Health Care

While B.C. has the second highest number of GPs per population in Canada, there is still a need for family physicians providing a full scope of health services to patients.

Priority #2: Increased access to primary maternity care

There are over 40,000 births in B.C. each year, making maternity care an important component of primary health care.

Priority #3: Increased chronic disease prevention

Many chronic diseases, such as diabetes and cardiovascular disease have similar risk factors, and addressing these common risk factors is the motivation behind programs like ActNowBC.

Priority #4: Enhanced Management of Chronic diseases

Chronic conditions already affect over one in three British Columbians and the prevalence increases as we get older. With B.C.'s older population expected to double in the next 25 years, better management for individuals living with chronic conditions will help control the associated growth in health-care costs.

Priority #5: Improved co-ordination and management of co-morbidities

Health services must be organized to support family physicians in taking the time to develop thoughtfully crafted treatment plans in collaboration with the patient, their support network, and other health-care providers.

Priority #6: Improved care for the frail elderly

The focus of care with the frail elderly population is on function and quality of life. Co-ordinated patient-centred team planning, including advanced care-planning, is central to the care of the frail elderly.

Priority #7: Enhanced end-of-life care

Compassionate care, including symptom management, is a critical part of the primary health-care continuum. Primary health-care providers are seen as key in preparing patients and families for the decisions that will be required.

Funding supporting the Charter

The 2006 negotiated agreement between the B.C. government and the BCMA is foundational to the current Charter, and the source of a number of key initiatives in the seven priority areas, including access. As a whole, the Agreement represents a \$422-million investment in family physicians. This will have a positive impact on patient care and health outcomes, and support physician recruitment and retention.

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