



Topic Overview

Addressing Overuse of Health Services in Canada

Stakeholder Dialogue

18 November 2015

The McMaster Health Forum convened a stakeholder dialogue on the subject of **Addressing Overuse of Health Services in Canada**. With the support of the Canadian Institutes of Health Research through a **Knowledge Synthesis Grant (grant number 315602)**, the dialogue brought together 20 participants from across Canada to examine the problem, elements of a comprehensive approach for addressing it, and key implementation considerations.

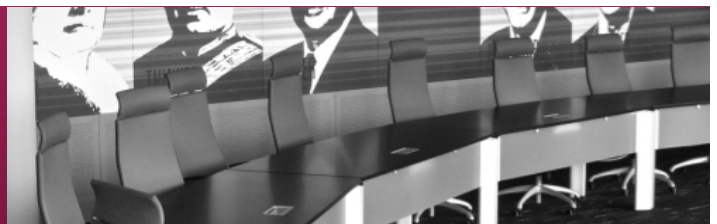


CIHR IRSC
Canadian Institutes of Health Research
Instituts de recherche en santé du Canada

Deliberation about the problem

Dialogue participants generally agreed with the features of the problem described in the evidence brief, which included the overuse of health services leading to unneeded and potentially harmful care for patients, a range of system-level factors, a culture of ‘more is better’ combined with competing priorities between patients and providers, and fragmented approaches to address overuse with a lack of evaluations of them. Dialogue participants identified several additional features of the problem and its causes, including: 1) the language and framing used in discussing the overuse of health services (e.g., not considering the full spectrum of services, including harmful, marginally effective and low-value services); 2) a broader array of complex and interrelated causes of overuse (e.g., patient-level heterogeneity, provider remuneration and incentives, the role of industry in overuse, the lack of role clarity, and the lack of integrated approaches to addressing the issue); and 3) implications of provincial contexts for the problem (e.g., political and economic commitments, and variability in the availability of data, evidence, groups and processes that are needed to address the problem).

The views expressed in the evidence brief and dialogue summary are the views of the authors and should not be taken to represent the views of the funder.





Participants drawn from government and from health, professional and research organizations gather during a McMaster Health Forum event on 18 November 2015.

Deliberation about an approach

Overall, participants emphasized that in order to make a concerted effort towards addressing overuse of health services in Canada, there is a need for system leaders who will take ownership of the issue, and who can lead a process to develop a coherent framework and approach that everyone can use (instead of a fragmented approach across different groups). Participants generally agreed that identifying and prioritizing the services that need attention (element 1) could be strengthened by making better use of practice-variation data, technology reassessment and engagement of patients and stakeholders in identifying priorities to address. However, participants indicated that this needs to be coupled with efforts to diagnose the drivers of the problem, and determine the right level at which action is needed and the nature of that action. Participants also indicated that stakeholder-led action (element 2), particularly education coupled with meaningful clinician and patient engagement, is needed to support long-term cultural shifts, including stewardship roles for clinicians and appropriate expectations among patients. Lastly, for government-led actions, participants indicated that the focus should be on what governments are uniquely positioned to do to discourage the use of some services over others, including the development of strategic directions and accountability frameworks, stakeholder engagement, data integration, changing remuneration mechanisms, and behaviour-change supports.

Deliberation about next steps

Participants identified three type of activities for initially addressing overuse of health services in Canada. The first related to implementing processes to better harness and share data, developing a common framework with which to identify, diagnose and address overuse, and packaging evidence for use by policymakers when needed. Second, participants emphasized the need to develop role clarity among and synergy between system actors in diagnosing and addressing the problem using a common framework, and that that this needs to be combined with concerted efforts for building commitment and accountability for inter-provincial work to foster national action. Lastly, many participants indicated that both of these activities will require the implementation of approaches to get traction with different groups, including engaging at a grassroots level with the public, finding 'early wins' to garner political support, and positioning the issue within existing health-system priorities.

Dialogue deliverables

To learn more about this topic, consult the evidence brief that was presented to participants before the dialogue, the summary of the dialogue, and view the interviews with dialogue participants.

Our products are also available on our website www.mcmasterhealthforum.com.

>> Contact us

McMaster Health Forum
1280 Main St. West, MML-417
Hamilton, ON Canada L8S 4L6
Tel: +1.905.525.9140 x 22121
Email: mhf@mcmaster.ca

>> Follow us

mcmasterhealthforum.org
healthsystemsevidence.org
healthsystemslearning.org



tinyurl.com/mhf-YouTube
tinyurl.com/mhf-Facebook
tinyurl.com/mhf-Twitter