

Note cards



CBC News, Crunch looms for access to health care: Doctors Survey, October 27. <http://www.cbc.ca/story/canada/national> Paraphrase: Canada too is experiencing the same lack of doctors and they have to work in excess of fifty hours a week on a regular basis (CBC News, 2004).

Use as support for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Information: provides 10 adverse effects of nationalized health insurance in Britain and Canada,

Use in Introduction

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Quote: “ over time, government officials will claim a compelling interest in many areas now considered private” (Fleming, 2006, Introduction, section politicalization and lost liberty).

Use in main idea 1 – loss of privacy protection

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Paraphrase: more than 800, 000 patients are queuing for hospital care in Britain, while in Canada people usually have to wait seventeen weeks to see

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a specialist after having obtained a referral from their doctor (Fleming, 2006)

Use as support in main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Paraphrase and Quote: People who may not have sought medical help for minor ailments like the common cold, headaches or sunburn because of the cost of insurance and treatment will more readily elect to seek help if they believe that treatment is free and they believe they will “ remain insulated from the direct costs of health care” (Fleming, 2006, Introduction, section financing crisis).

Use as support in Main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Paraphrase: According to Hammond (2002) it will take until 2024 before Britain can attain the same staffing levels as Europe, thus existing staff are ridiculously overburdened. (as cited in Fleming, 2006)

Use as support for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

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Paraphrase: that this shortage has resulted in almost twenty percent of Canadians having trouble locating a doctor, together with a lack of other health professionals such as radiologists, psychiatrists and obstetricians. He further stated that almost two thirds of family doctors are refusing or limiting new patients. (Fleming, 2006)

Use as support for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Paraphrase: The lack of doctors and nurses in Canada is quickly reaching crisis point; in 2004, one hospital in Vancouver was forced to farm out almost a thousand patients because of a shortage of nurses and in 2006 another hospital had to cease all surgery for over a week because of a lack of nurses (Fleming, 2006).

Use as example for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Paraphrase and quote: The lack of equipment in Britain has “ reduced availability and eroded quality” and in Canada over fifty percent of equipment is outdated and only when it no longer functions, is it replaced (Fleming, 2006).

Use as example for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer

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health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Paraphrase: In Canada, doctors are not able to work properly because of inadequate availability time of operating rooms, and the limitations placed on the number of patients they can operate on means that those deemed not crucial often have to wait years before receiving surgery. (Fleming, 2006)

Use as support for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

Paraphrase: a study conducted by Alter, Naylor, Austin, Chan and Tu in 2003, wherein thirty percent more people living in Alberta were able to receive heart surgery than those living in Prince Edward Island. Another study undertaken by Pilote et al. in 2004, found that in Nova Scotia patients have to wait three weeks longer for heart surgery after a heart attack, than those living in Alberta. People living in the north of England are more liable to die of cancer than those living in the south of England; those living in the north are poorer and older and those in the south (Fleming, 2006).

Use as example for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care

system. <http://www.heritage.org/research/healthcare/bg1973.cfm>.

Accessed 7/22/09

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Paraphrase and Quote: Health care for the elderly is inadequate in both Britain and Canada. In terms of ‘ long-term care and home health services” government cuts in Canada have resulted in many elderly patients who do not have money or family support having to go without care until they reach crisis point and have to be admitted to hospital. (Fleming, 2006, section, exploration #8)

Use as support for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care system. <http://www.heritage.org/research/healthcare/bg1973.cfm>. Accessed 7/22/09

Paraphrase: bias against people suffering from weight problems is extremely evident in

Britain and some areas such as Staffordshire are limiting access to surgery for those deemed obese by ‘ Body Mass Index measurement.’ (Fleming, 2006)

Use as example for main idea 3 – lowering of quality

Fleming, K. C. (2006) High-priced pain: What to expect from a single-payer health care system. <http://www.heritage.org/research/healthcare/bg1973.cfm>. Accessed 7/22/09

Paraphrase: Walter (2004) raised the issue of a considerable number of doctors in Canada allowing important, rich or personal friends and family to receive treatment faster than others. (as cited in Fleming, 2006),

Use as example for main idea 3 – lowering of quality

Goodman, J. C., Musgrave, G. L., Herrick, D. M. (2004) Lives at risk: single-payer

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national health insurance around the world. Roumon and Littlefield Publishers.

Information: provides 20 adverse effects of nationalized health insurance in Britain and Canada,

Use in Introduction

Is congress importing health care rationing from Britain? (n. d) CPR,

Conservatives for

Patient Rights. http://www.cato.org/pdf/HealthCareRationing_5-04-09.pdf

Paraphrase and quote: The mandate of this board is to “ monitor the ‘ effectiveness’ of medical treatments and preventative measures” but in reality it focuses on reducing health care costs “ by rationing patient care” (“ Is Congress Importing Health Care Rationing from Britain?” n. d. p. 1).

Use in support of main idea 2 – lack of choice

Is congress importing health care rationing from Britain? (n. d) CPR,

Conservatives for

Patient Rights. http://www.cato.org/pdf/HealthCareRationing_5-04-09.pdf

Paraphrase and quote: Numerous case studies are available in the media, relaying occurrences of patients in Britain being denied certain healthcare or medication based on cost. NICE uses an appraisal system called ‘ QALY’ (quality-adjusted life year) to determine the value of a particular treatment; in other words mathematical calculations are used to ascertain the worth of a patient’s life (“ Is Congress Importing Health Care Rationing from Britain?” n. d).

Use as support in main idea 2 – lack of choice

Is congress importing health care rationing from Britain? (n. d) CPR,

Conservatives for

<https://assignbuster.com/note-cards/>

Patient Rights. http://www.cato.org/pdf/HealthCareRationing_5-04-09.pdf

Paraphrase: As illustration, The Daily Telegraph (as cited in “ Is Congress Importing Health Care Rationing from Britain?” n. d.) reported that NICE denied 100, 000 Alzheimer’s patients a particular treatment because it was deemed too expensive. Similarly, a 23 year old woman who was diagnosed with cervical cancer was denied a pap test because the National Health Insurance only pays for such tests for women over 25 years of age, in their endeavour to cut costs. As a result, when found, the cancer was too far advanced and is terminal (“ Is Congress Importing Health Care Rationing from Britain?” n. d.).

Use as example in main idea 2 – lack of choice

Rodwin, V. G. (1989) Inequalities in private and public health systems: The United States, France, Canada and Great Britain, in Ethnicity and Health, ed. W. Van Home, Milwaukee: University of Wisconsin System American Ethnic Studies. <http://www.nyu.edu/projects/rodwin/inequ.html>

Paraphrase and Quote: British consultants, for example, refer to " bed blocking" when such patients take up badly needed space (Rodwin, 1989).

Use as support in Main Idea 3 – lowering of quality

Shaw, A. (2006) Diagnostic imaging across Canada: The emperors still have no clothes.

Canadian Healthcare Technology, January/February.

<http://www.canhealth.com/jan02.html#anchor19080>

Paraphrase: Some equipment in Canada is not safe and worse than in countries such as Brazil and Chile. (Shaw, 2006)

Use as example for main idea 3 – lowering of quality

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Stossel, J. (2009) Better health care: With government, there's no free lunch.
ABC News,

June 30. <http://abcnews.go.com/2020/Stossel/story?id=7968656&page=1>

Paraphrase: some towns in Canada hold lotteries for designating who gets a family

doctor; due to crucial shortages over one and a half million people are without a family doctor (Stossel, 2009)

Use in support of main idea 3 – lowering of quality

Stossel, J. (2009) Better health care: With government, there's no free lunch.
ABC News,

June 30. <http://abcnews.go.com/2020/Stossel/story?id=7968656&page=1>

Quote: “ tried to save money by not changing bed sheets. Instead of washing sheets, the staff was encouraged to just turn them over”.

Use as example in Main Idea 3 – lowering of quality

Tanner, M. (2008) The grass is not always greener: a look at national health care systems

around the world. Policy Analysis, No. 613, pages 1-48. March 18.

www.cato.org/pub_display.php?pub_id=9272

Paraphrase: Most doctors and nurses are direct employees of the government and thus paid by the government (Tanner, 2008, p. 31)

Use in section on information on Britain's single payer system.

Tanner, M. (2008) The grass is not always greener: a look at national health care systems

around the world. Policy Analysis, No. 613, pages 1-48. March 18.

www.cato.org/pub_display.php?pub_id=9272

Paraphrase: Problems arose in 2004 when in order to save further costs, the

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government bargained with general doctors that resulted in GPs reducing work hours for lower pay; this in turn has led to fewer doctors working at night or on weekends (Tanner, 2008, p. 23).

Use as support for main idea 3 – lowering of quality

Tanner, M. (2008) The grass is not always greener: a look at national health care systems

around the world. Policy Analysis, No. 613, pages 1-48. March 18.

www.cato.org/pub_display.php?pub_id=9272

Paraphrase: Canadians also have the option of private insurance which is usually given by their employer (Tanner, 2008 p. 24)

Use in section on information on Canada's insurance system

Tanner, M. (2008) The grass is not always greener: a look at national health care systems around the world. Policy Analysis, No. 613, pages 1-48. March 18.

www.cato.org/pub_display.php?pub_id=9272

Quote: “ clearly there is limited access to modern medical technology in Canada” (page 32).

Use as support in Main Idea 3 – lowering of quality

Tanner, M. (2008) The grass is not always greener: a look at national health care systems

around the world. Policy Analysis, No. 613, pages 1-48. March 18.

www.cato.org/pub_display.php?pub_id=9272

Paraphrase: Canada only has about 2.1 doctors per 1000 people but even more dire is that the ratio has not increased since 1990 and the ratio of nurses to patients is in decline (Tanner, 2008, p. 32).

Use as example for main idea 3 – lowering of quality

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Tanner, M. (2008) The grass is not always greener: a look at national health care systems

around the world. Policy Analysis, No. 613, pages 1-48. March 18.

www.cato.org/pub_display.php?pub_id=9272

Paraphrase: In Britain, elderly patients may be denied treatment completely if the process is not deemed cost effective (Tanner, 2008, p25).

Use as example for main idea 3 - lowering of quality

Tanner, M. (2008) The grass is not always greener: a look at national health care systems

around the world. Policy Analysis, No. 613, pages 1-48. March 18.

www.cato.org/pub_display.php?pub_id=9272

Paraphrase and Quote: almost two-thirds of Britons think that this reform is 'urgent', while another quarter think it is 'desirable'(page 25), while a Canadian survey found that almost sixty percent of Canadians think their system is in need of 'fundamental' reform and almost another twenty percent think it should be destroyed and reconstructed completely (page 33).

Use as example for main idea 3 - lowering of quality

Wollstein, J. B. (1992) National Health Insurance: a medical disaster. October, Vol. 42: 10

www.thefreemanonline.org/columns/national-health-insurance-a-medical-disaster

Paraphrase and Quote: In Britain the "waiting time for routine, non-emergency surgery has increased to years" and it takes five months for women to have pap smears and up to eight months for mammograms (Wollstein, 1992, p. 2).

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Use as example in Main idea 3 – Lowering of quality

Wollstein, J. B. (1992) National Health Insurance: a medical disaster. October, Vol. 42: 10

www.thefreemanonline.org/columns/national-health-insurance-a-medical-disaster

Paraphrase: Britain has a serious shortage of doctors and nurses because the NHS (National Health System) did not foresee the increase in demand and after waiting hours, patients usually receive only five minutes with their doctor; a visit so short places concern as to the quality of care and judgment of treatment. (Wollstein, 1992, p. 2)

Use as example for main idea 3 – lowering of quality

Wollstein, J. B. (1992) National Health Insurance: a medical disaster. October, Vol. 42: 10

www.thefreemanonline.org/columns/national-health-insurance-a-medical-disaster

Paraphrase: after thirty years of nationalized health general doctors had very few ‘ medical instruments’ and were forced to send their patients to hospitals for routine care, and in Canada medical equipment is in short supply. (Wollsten, 1992)

Use in support of main idea 3 – lowering of quality

Wollstein, J. B. (1992) National Health Insurance: a medical disaster. October, Vol. 42: 10

www.thefreemanonline.org/columns/national-health-insurance-a-medical-disaster

Paraphrase: people living in rural areas are less likely to receive medical treatment, particularly specialist medical treatment, than those in major

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cities (Wollsten, 1992)

Use as support for main idea 3 - lowering of quality