



MEDIA RELEASE: Attention Assignment Editors and Health Reporters

Health Council of Canada Releases Report on Wait Times and Guarantees

Toronto June 26, 2007 – While there has been significant progress to improve and manage centralized information on wait times for targeted health care procedures, the data needed to see changes over time and compare wait times on a national level is not available from all jurisdictions, the Health Council of Canada says in its wait times report, released today.

Wading through Wait Times: What Do Meaningful Reductions and Guarantees Mean? reviews progress by provinces and territories in reducing wait times for non-emergency care from a patient's perspective through a true story about Frank, a hip replacement patient.

This report is a look at one of the key public concerns about health care, set in the context of the national commitment to achieve meaningful reductions in wait times in five priority areas – cancer, heart, diagnostic imaging, joint replacements and sight restoration – by March 31, 2007.

“Clearly there has been progress, and we can see many areas where jurisdictions are doing more and reporting in more accessible ways to citizens,” said Dr. Jeanne Besner, Chair, Health Council of Canada. “Reporting wait time information to citizens on the Internet has been no small task. These information systems have considerable potential to improve patients’ experiences with waits for care.”

Approximately one in 10 Canadians sees a health care specialist each year, with many patients reporting delays in accessing care. On average, Canadians reported waiting four weeks to see a specialist, according to surveys done in 2003 and 2005. Although provinces and territories report wait times in different ways, information shows median wait times for non-emergency care have clearly declined for some services. For example:

- In British Columbia the wait time for cataract surgery has been reduced to 7.6 weeks from 9.9 weeks;
- In Ontario the wait time for radiation for cancer care has been reduced to 4.4 weeks from 6.4 weeks;
- In Alberta the wait time for hip replacement has been reduced to 12 weeks from 16 weeks and for knee replacement has dropped to 17 weeks from 22 weeks.

These and other positive developments come at the same time the volume of services has increased in targeted areas. For some services, in some parts of the country, more people are getting care more quickly.

While the information now available for wait times is not sufficient for Canada-wide monitoring, having this data in the public realm is a significant step forward and means wait lists are beginning to be managed centrally in a fair and logical way. Until recently most surgeons kept their own waiting lists and data were rarely compiled at the provincial, regional or hospital level. Unfortunately, gaps remain in the availability of wait times information and the Health Council of Canada continues to call for accelerated investments in the development of comparable data systems across the country.

Developed, in part, through interviews with leaders of innovative programs (see backgrounder), *Wading through Wait Times* identifies a number of factors that are critical for success in reducing health care wait times. They are:

- Support from government leaders;
- Strong program leadership;
- Full-time program staff;
- Information systems to centralize and track waiting lists;
- Adequate funding for information systems and program leadership;
- A comprehensive approach to all the changes required to reduce wait times.

In addition to reporting on progress in reducing wait times for care as agreed to in the 2004 10-Year Plan to Strengthen Health Care, this update provides Canadians with information on the new patient wait time guarantees.

“Ideally, the best guarantee is one that rarely, if ever, needs to be invoked,” said Councillor Les Vertesi, an emergency physician from British Columbia. “Jurisdictions have chosen to implement guarantees for services they already provide, or are well on their way to delivering, within the guaranteed time frame.”

As *Wading through Wait Times* concludes, international experiences with wait time guarantees may be instructive, but they cannot tell us what impact Canadians can expect from these policies until they are coupled with reliable and comparative data. Guarantees may play a valuable role in resolving Canada’s wait time problem. But unless access also improves for other health services, the guarantees by themselves may fall short of meeting the expectations of Canadians.

Visit www.healthcouncilcanada.ca to download *Wading through Wait Times: What Do Meaningful Reductions and Guarantees Mean?* and the backgrounder highlighting regional success stories in reducing wait times.

Background

The Health Council of Canada, created by the 2003 First Ministers’ Accord on Health Care Renewal following the recommendations of the Romanow and Kirby reports, is mandated to monitor and report on the progress of health care renewal in Canada. The 26 Councillors were appointed by the participating provinces, territories and the Government of Canada and have expertise and broad experience in community care, Aboriginal health, nursing, health education and administration, finance, medicine and pharmacy.

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