

IN THIS ISSUE

- **What's New?**
- **Season's Greetings**
- **Putting the WCWL Tools to Use**
- **Mr. Romanow on Waiting Lists**
- **WCWL Webmaster Needed**

WHAT'S NEW?

The Commission on the Future of Healthcare in Canada has issued its report. What does it say about waiting lists? Visit [http://www.healthcaremission.ca](http://www.healthcarecommission.ca) to download the full report.

SEASON'S GREETINGS



Season's greetings to all, and best wishes for a peaceful and prosperous 2003. The WCWL Office will be closed from Tuesday December 24 to Thursday January 2, 2003.

USING THE WCWL TOOLS

The WCWL Newsletter will provide regular implementation updates from the regions, and this month we feature the **Winnipeg Regional Health Authority**.

As many readers know, we have identified progressive stages of implementation for health authorities (RHAs). This starts with examining the feasibility of implementation through extensive intra-region consultation in clinical, management and technical areas. The next step "implementation without prioritization" moves the tools into hands of the clinicians and collects urgency data but not (yet) using it to prioritize patients. In this stage, we evaluate the feasibility of universal use of the tools in a region. If supported by the work completed to this point, the region moves on to use the scores to prioritize patients and manage their waiting lists.

In Winnipeg a regional Waitlist Steering Committee has been formed, chaired by Jan Currie, Vice-President & Chief Nursing Officer and Dr. Brock Wright, Vice-President & Chief Medical Officer. Included is representation from the surgery program (Dr. Mark Taylor, Mary Lessing-Turner, Laurie Walus), child and adolescent mental health (Dr. Keith Hildahl, Marg Synyshyn, Leslie Shafer) and orthopedics (Linda MacDonald). Their team includes staff from the WRHA Population Health Unit (Dr. Jan Trumble-Waddell) and representation from Manitoba Centre for Health Policy (Dr. Carolyn DeCoster) and Manitoba Health (Pat Hosang). Liaison with WCWL has been established through WCWL Research Associate, Elaine Dunn, and a research assistant has recently been hired to support the implementation/evaluation work.

Child and adolescent mental health implementation is at stage 1, with a view to using the WCWL tool in its region-wide centralized intake program. Given its considerable experience with the general surgery tool, WRHA is moving to stage 2 implementation in one site with that tool in the new year. Orthopedics is currently 'at the table' and implementation will be addressed as experience is gained from the other two areas.

The next meeting of the WRHA Steering Committee is set for January 6, 2003.

MR. ROMANOW ON WAITING LISTS

Many readers will be well aware that the **Commission on the Future of Health Care in Canada** tabled its report in the House of Commons on November 28. But what did the Commissioner, Mr. Romanow, have to say about waiting lists in general and WCWL in particular?

While the need to improve accessibility of healthcare is a theme which recurs throughout the report; it does include a specific section and recommendations on reducing waiting times and managing waiting lists. Mr. Romanow identifies three acute problem areas: access to diagnostic technology; access to specialists for consultation; and access to certain surgical procedures. The report names the first as its top priority on the grounds that investment there would deliver a variety of benefits to the healthcare system. A \$1.5B Diagnostic Services Fund is recommended.

Making reference to the haphazard management of waiting lists in general, the Commissioner restates the frequently cited problems which serve to confuse and frustrate patients unable to obtain the treatment they need. WCWL learned this first-hand during the public opinion focus groups conducted in 2001. The report identifies shortages of resources (broadly defined) and the fact that patients may make decisions affecting the time they wait as factors which, combined with the lack of definitions and procedures for list management, contribute to the severity of the problem.

While the commission points to the existence of wait list management systems in critical care areas such as cardiac surgery and cancer treatment, it also notes that these methods have not been universally applied across Canada, nor has their methodology been successfully transferred to non life-threatening conditions.

WCWL is described as having made important and encouraging progress in understanding the current problems and in developing tools physicians would use to rank patients on the basis of their urgency. The report sees value in wait lists being managed in a comprehensive, objective, and transparent manner, based on the information generated by standard objective tools. Further WCWL is described as a good model of stakeholders (provinces, health authorities and physicians) working together to affect needed change.

The report describes, as a limitation, the fact that WCWL has not addressed life-threatening conditions. The decision not to deal with such conditions, of course, was due to the fact that effective models such as the Cardiac Care Network were already available to health authorities when WCWL began its work. Dealing with the absence of ways to solve long waiting lists for procedures such as major joint replacement and cataract removal - and the underlying illnesses which severely limit peoples' day to day activities - remains a high priority for WCWL.

The report moves on to consider briefly then reject the idea of guaranteed wait times for elective procedures. It does so largely because no methods of setting an appropriate length of waiting time exist and the "guarantees" would have to be "pulled out of the air."

The concept of using an objective measure of urgency to set a standardized maximum wait time is the backbone of the Ontario Cardiac Care Network. While not a guarantee, per se, it is the basis of a commitment from government to meet a certain level of care.

The report goes on to say that long wait times for life-threatening conditions are unacceptable, and to imply that long waits for elective procedures are acceptable. There is some inconsistency here. The previous section lauded the work of WCWL, and others, in developing precisely the measures of urgency for elective surgery that would allow the development of rational and justifiable wait times for elective or planned procedures. Another reason to be skeptical of the value of care guarantees is based on experience in the UK where this policy makes it difficult to allocate scarce resources between acute patients and those approaching their "guarantee" date.

In summary, the commissioner calls for the provinces and regions to 'walk more quickly' and take deliberate action to:

- implement centralized management of waiting lists
- employ standardized objective measures of urgency
- train physicians in the use of such measures
- communicate these policies clearly to the public

This chapter concludes by stating that an important outcome of reform in wait list management is a public better informed about: **fairness** (wait times based on objective standards universally applied); **appropriateness** (wait time is appropriate for their condition); and **certainty** (patients will know how long they will have to wait and why).

JOB OPPORTUNITY:WCWL WEBMASTER

Those of you who have viewed our website of late will beware that the content has not been kept up-to-date. While it still represents the original tool development work well, and provides links to similar projects worldwide, it needs to be revamped and made current. Further, the renewed site it will address our role as 'clearing house' on access to healthcare, and will facilitate communication among implementation sites, the partners and other interested parties. Interested parties should inquire via info@wcwl.org

UPCOMING MEETINGS

December 4 & 5, 2002 - meetings of the WCWL Steering Committee and Partners at the Delta Calgary Airport Hotel.

March 26 - 28, 2003 - Meeting Patient Needs- Managing Hospital Demand, Melbourne, Australia.

June 15 - 18, 2003 - The International Health Economics Association: Waiting times for non-emergency surgery, San Francisco, USA.

UPDATE

THE UPDATE is the monthly newsletter of the Western Canada Waiting List Project. It is published at the Department of Community Health Sciences, University of Calgary, 3330 Hospital Drive NW, Calgary, Alberta, Canada T2N 4N1. For more information, please contact John McGurran, Project Director, at 403-210-3813 info@wcwl.org or visit our website at <http://www.wcwl.org>

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