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What's New? What's Next?

Since the publication of our newsletter at the end of March, there has been significant progress toward the goal of completing the initial empirical phase of the project by the end of June.

Pilot testing of the prioritization forms ended in late April and, thanks to the support and participation of more than seventy specialists in the Western Provinces, the statistically required number of completions was obtained for each of the five clinical panels.

Data entry and cleaning has been completed and analysis is under way with the assistance of Dr. NG Prasad. We anticipate preliminary discussion of the results with the panel members at the early June telephone meetings. As you read this, the reliability studies (described elsewhere in this newsletter) are well under way and on target for completion in late June.

The clinical panels will meet in late June for their final scheduled sessions. We anticipate that the forms, including the weights for the elements, will be signed off to the

Steering Committee. We also anticipate convening a meeting of the Partnership in mid July to discuss our findings and to begin drafting an interim report to our funding agency.

Our website (www.wcwl.org) has been updated recently and now includes pdf versions of the newsletters and priority forms.

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What About Reliability?

What's the next step? Having completed the pilot testing of the priority forms, we must now verify their stability in advance of any form of implementation in the system. This will be accomplished by evaluating their inter-rater and test-retest reliability.

We propose to accomplish this by having a number of clinicians assess and complete a prioritization form on six standard cases. For the MRI and children's mental health panels, we will employ a review of "paper cases." General surgery and cataract surgery will view videotapes of "programmed" patient interviews, and hip/knee joint replacement will use videotapes of actual patients.

A second viewing and assessment will occur approximately three weeks after the first. This phase of the project will utilize the physicians who were involved in the pilot testing. Later stages will engage a much broader sample.

The panel co-chairs have worked closely with our research team to develop realistic clinical scenarios and sound methodology. The University of Alberta's Health Ethics Review Board judged the protocol, the consent, and patient information materials to be acceptable. All case descriptions were produced specifically for this exercise, and will eventually become available on our website.

WCWL Extension!

In late March, we applied to our funding agency, Health Canada's Health Transition Fund, for permission to continue the work defined in our June 1998 proposal, and to submit a final report on March 31, 2001. This will NOT alter our plan to issue an interim report on the prioritization tools early this fall. What it will do is allow us to complete four overlapping and related projects, described briefly below.

The first consists of a nine-month evaluation and refinement period, the object of which is to introduce the instruments into selected RHAs to provide an

opportunity to evaluate their real-world applicability in a regional health authority setting.

The second is a six-month "think piece," in which we will synthesize current views about and propose a standard definition for "waiting time" that would be accepted across a wide array of health care procedures and regions.

In the third project, we will develop and pilot test a methodology to establish acceptable or benchmark waiting times for selected procedures.

For the fourth, we propose to assemble a group of health care system decision-makers, ethicists, researchers, politicians, clinicians, and members of the public, and to conduct a forum on prioritization. Conceptual and operational aspects of priority setting and resource allocation across disciplines will be addressed and summarized in a conference proceedings.

Canadian Medical Association: Access to Quality Health Care

At the 1997 Canadian Medical Association (CMA) General Council, Minister of Health Allan Rock challenged the CMA to find solutions to the health care system's inadequacies. The CMA responded with a proposal titled "Access to Quality Health Care." At the CMA's 1998 General Council, the Minister announced funding for the Western Canada Waiting List (WCWL) Project through the Health Transition Fund (HTF) with the CMA as one of the founding partners. General Council also passed a series of resolutions on access to quality health care highlighting the CMA's concerns for timely access to quality health care services for Canadians (www.cma.ca/inside/annmeet/131/resolutions.htm).

Over the past three years, the CMA has been tracking the perceptions of Canadians regarding their access to selected health care services (www.cma.ca/advocacy/access/report.htm). In all instances, from waiting in the hospital ER, waiting for surgery, waiting for tests, availability of nurses in hospital, availability of home care, to access to family physicians and specialists, Canadians believe that access to these services has been deteriorating.

The CMA, with input from public opinion research as well as stakeholder groups, has also developed a series of principles, "Operational Principles for the Measurement and Management of Waiting Lists" for use by those dealing with waiting lists (www.cma.ca/inside/policybase/

1999/11-27.htm). Of particular importance is the need for benchmarking and clinical input into the prioritization criteria. On the issue of governance, it was recommended that "An independent, stakeholder-based, non-governmental organization with an advisory committee should be responsible for overseeing and administering systems for managing waiting lists."

Presently the CMA is developing "Guidelines for Assessing Health System Performance" as well as an approach to dealing with privacy and confidentiality surrounding professional and non-professional physician information.

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Access to Quality Health Care Project
Canadian Medical Association

Upcoming Events

- May 29 — Steering Committee meeting, Vancouver
- June 2-7 — Clinical Panel Teleconferences
- June 19 — WCWL Presentation to the National Healthcare Leadership Conference, Ottawa
- June 22 — MRI Panel Meeting, Calgary
- June 23 — General Surgery Panel Meeting, Calgary
- June 26 — Hip & Knee Replacement Panel Meeting, Vancouver
- June 27 — Children's Mental Health Panel Meeting, Vancouver
- June 28 — Cataract Surgery Panel Meeting, Vancouver
- July 25/26 — Tentative date for the next WCWL Partners Meeting, location TBA
- November 22 — Third International Conference on Priorities in Health Care, Amsterdam

UPDATE

WESTERN CANADA WAITING LIST PROJECT

THE UPDATE is the monthly newsletter of the Western Canada Waiting List Project. It is published at the Department of Public Health Sciences, 13-103 Clinical Sciences Building, University of Alberta, Edmonton, Alberta, Canada T6G 2G3. For more information, please contact John McGurran, Project Director, at 780-492-2647 or john.mcgurran@ualberta.ca visit our website at <http://www.wcwl.org>

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