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What's New?

- Phase 2 pilot-testing proposals for hip and knee replacement and general surgery have received favourable ethics reviews, and protocols are being implemented in Edmonton and Winnipeg respectively.
- Phase 2 pilot-testing proposals for children's mental health and cataract surgery are in development; these will be centred in Vancouver/Richmond and Victoria respectively.
- Elements of the beta version of the WCWL MRI priority form have been added to the standard MRI requisition in the Calgary Regional Health Authority. Data will be collected and comparisons between the two systems will be assessed.
- I am pleased to announce that Mr. Don Schurman has been retained to complete an environmental scan of partner RHAs. This project, to be conducted in January 2001, will focus on the preparedness of RHAs to utilize the prioritization tools such as those developed by the five WCWL clinical panels.
- Drs. D'Arcy Lawrence, Heather Hadjistavropoulos, Tom Noseworthy, and Mark Taylor gave presentations at the inaugural meeting of the Ontario Wait List (OWL) Project on Friday, November 10. John McGurran will participate on the OWL Steering Committee. The December UPDATE will provide more information on this initiative of the Ontario Joint Policy and Planning Committee.

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WCWL White Papers

As part of our extension research agenda, two white papers are being prepared by Dr. Claudia Sanmartin. It is expected that these will be published early in the new year. These are being prepared as documents to further discussion and debate on these topics. The two papers, one on standard waiting times and the other on the establishment of acceptable waiting times, are described in the following paragraphs.

Standard Definitions of Waiting Times

Despite a growing concern and interest in waiting lists and waiting times for medical services in Canada, there are currently no standard or universally accepted definitions of waiting times for a broad range of services nor standards regarding when waiting periods should begin. The WCWL Project, like others, has recognized the need to establish such standards to improve the accuracy and comparability of waiting time information across procedures and jurisdictions. The primary purpose of this WCWL White Paper is to lay the groundwork for the development of standard definitions for the five procedure/specialty areas defined by the Project (i.e. hip and knee replacement, general surgery, MRI, cataract surgery, and children's mental health).

Building on information currently available regarding definitions and measures for waiting times in Canada and abroad, work is currently underway to develop "standard" paths to care that reflect the experiences of patients and the potential waiting periods they face on the road to care. It is important that all waiting periods are considered and discussed before consensus can be reached regarding standard definitions and measures. Furthermore, this type of information is also expected to result in the identification of key milestones or processes that may serve to define the start of various waiting periods. The paper also addresses key issues, challenges, and processes relevant to the establishment of standard definitions of waiting times in these areas and to propose possible definitions for further consideration.

Acceptable Waiting Times

The presence of waiting lists and waiting times for medical services in Canada has raised concerns regarding reasonable access to health care. Specifically, the variation in waiting times and the effect of lengthy waits on the patients have been particularly troublesome. These concerns have led to calls for the establishment of acceptable or reasonable waiting times for a broad range of medical services. The WCWL Project has elected to contribute to this discussion through the development of a White Paper focussed primarily on the exploration of the issues and methods related to the establishment of acceptable waiting times for selected medical services. The work begins with a review of the international experiences regarding the establishment of acceptable waits and the effects of these policies on waiting lists and times as well as on other sectors within the health care system. The lessons learned in countries such as the UK, Sweden, and Australia can prove valuable for those in Canada struggling with these issues. The paper also addresses key issues associated with the establishment of acceptable waiting times such as the effects of treatment delay on patients awaiting care and on the outcomes once they have received care, as well as the potential uses of acceptable waiting time targets at both the clinical and policy level. The work concludes with a presentation of proposed methodologies for the establishment of acceptable or reasonable waits for consideration.

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Phase 2 Reliability Studies

The second phase of reliability testing for the five priority criteria tools is now under way and will be completed by January 2001. The reliability assessment utilizes the revised tools that were modified in June 2000 as a result of earlier reliability and pilot-testing work.

The methods for the current reliability assessment are similar to that of the first phase in June. The current work involves an evaluation of both inter-rater and test-retest reliability. In addition, focus sessions are being conducted to obtain insights into raters' interpretations of the priority criteria items and to identify potential ambiguities in the tools.

In the reliability data collection, participants view a videotape of six patient/physician interactions (scripted or

actual patients) or review written cases of hypothetical patients, and rate each scenario using the appropriate priority tool. This phase of the project involves clinicians and health administrators who have contributed to earlier reliability and pilot-testing work, as well as some new raters. Participants are from seven RHAs across Western Canada.

Initial ratings were completed in November 2000 and a second assessment (for test-retest reliability) is being conducted approximately one month after the initial test. Details of the test and retest procedures vary for the five panels and reflect the current status of the tools and the extent of June instrument revisions.

A second objective of the reliability work is to obtain insights into raters' interpretations of the priority criteria items, through discussions at focus group sessions. These sessions will involve invited participants in Vancouver (children's mental health and cataract surgery), Calgary (MRI), and Winnipeg (general surgery).

The reliability work will identify opportunities for future refinement of the criteria instruments, and the findings will be incorporated into guidelines for future use of the tools.

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Upcoming Events

- Nov 28 — MRI focus session
- Nov 30 — General Surgery focus session
- Dec 4 — Children's Mental Health focus session
- Dec 5 — Cataract Surgery focus session
- Dec 18 — WCWL Implementation Panel meeting
- Dec 20 — WCWL Steering Committee meeting

UPDATE

WESTERN CANADA WAITING LIST PROJECT

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