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IN THIS ISSUE

- **Note from the Chair**
- **Senate Committee Presentation**
- **UK Implementation**
- **Ontario Prioritization**
- **OECD Health Project**
- **Notice of WCWL Workshop**
- **WCWL Mailing List Audit**

Note from the Chair

As we approach this very special time of year, which has central meaning for so many faiths and cultures, we would do well to reflect on the many things for which we can be justifiably thankful.

As regards the Western Canada Waiting List Project, it has been gratifying to collaborate over this past year, and to bring at least our initial phase of work to fruition. Although we have repeatedly stated that we have not solved the problem of long waiting times in Canada, we do, nonetheless, believe that working as a Partnership, we have advanced our project as a contribution to better management of waiting lists and times. We have shown that groups with substantially different perspectives and objectives can work effectively together on common health service delivery problems.

Now that we have seen the power of this collaboration and its potential, we must find a way to sustain our continuing work and to maintain a community of interest in quality management of waiting lists and times. As I write this, we are developing the prospectus for WCWL_2. Driven directly from the recommendations in our March Final Report, from what we have learned through the phase-2 pilot projects, and from recent meetings of WCWL researchers and the Partnership, we are advancing the details of a proposal for tool implementation and the development of benchmark waiting times. This material will be presented to the Western provincial deputy ministers of health on December 17 and discussed with the Western health authority CEOs in January.

It is our intention to have the final work plan available for commencement April 1, 2002. This, of course, depends

on receiving the necessary support from federal and provincial sources. While we cannot be guaranteed success, I believe that with the work to date and that which will be completed over this next month, we will be in an ideal position to maintain a meaningful role for WCWL—one that is beyond that of a clearinghouse and that actualizes the notion of a community of interest by offering stewardship and support to the implementation agenda, which is clearly owned and must be realized by the regional health authorities.

WCWL has the opportunity of offering "economies," by retaining core resources and personnel that can ensure sound evaluation skills, and coordination and assistance with project management and activities across regions and provinces. Shared learning and intellectual exchanges have been key to WCWL_1 and will also be key to WCWL_2.

I think that the future is extremely promising and exciting for our agenda. Notwithstanding the uncertainties that exist, I anticipate an engaging and productive year ahead. On behalf of all of those connected to the WCWL Project, may I extend to you, your families, and loved ones the Peace and Joy of the Season, and every best wish for success in 2002.

*Tom Noseworthy
Chair, WCWL Steering Committee*

Senate Committee Presentation

On October 17, John McGurran made a presentation to the Standing Senate Committee on Social Affairs, Science and Technology at its stop in Edmonton. Three main messages were delivered. First, WCWL has produced beta wait list management tools that have the potential to standardize and make access to elective, planned care fairer for Canadians. The development of these tools represents an important first step towards system improvement. Second, the public's perspective, which came to light in a series of focus groups we ran, is that these prioritization tools, and the process of wait list management that would utilize them, is appropriate and acceptable. And third, it is important to move forward with implementation and evaluation of these tools and to begin work on establishing benchmark waiting times.

UK Implementation

Overseas interest in the WCWL prioritization tools continues to flourish. A group in Lambeth Southwark and Lewisham Health Authority is setting up a demand management project that will include implementation of clinical priority scoring systems. Serious consideration is being given to use of the WCWL hip and knee replacement, general surgery, and cataract removal instruments.

Ontario Prioritization

In mid-November, the Ontario Waiting List (OWL) Project Steering Committee met to review a draft of its final report. Work on prioritization tools for MRI scanning, general surgery, and cataract removal had been completed and consideration will be given extending the pilot testing to include additional evaluations of reliability and validity.

Supplementing their developmental work, the OWL group conducted a detailed survey of Ontario hospitals and developed a "minimum data set" approach for an information system to manage priority setting for non-emergency medical services.

We look forward to the release of their report and to the opportunity of continuing working together. For further information, visit their website at www.jppc.org.

OECD Health Project

Hosted by Health Canada in Ottawa, the conference Measuring up: Improving health systems performance in OECD countries brought together policy makers and healthcare stakeholders to share best practices in measuring the performance of health systems and to discuss their experiences in using performance measures to achieve improvements. The meeting took place from November 5th to 7th.

Health ministers from OECD countries outlined the key challenges they faced and described national initiatives to achieve improvements. The Hon. Allan Rock underlined the importance of performance measurement and reporting. "The value of performance measurement lies in its ability to inform our health policy decision making," said Minister Rock. "It can help us to ensure citizens everywhere are able to obtain good health, lead productive lives and ensure that health systems work to their benefit."

The conference was part of a three-year Health Project launched by the OECD in May 2001 to provide concrete information to national policy makers, helping them to improve their systems' performance and make difficult resource allocation decisions. The Health Project will ultimately address the public policy dilemma of deciding the appropriate amount of resources to be devoted to health care, as well as how these resources should be financed and allocated. Among the components of this project is an inquiry into waiting times among OECD countries.

Notice of WCWL Workshop

Please be advised that we intend to conduct a workshop on waiting list priority tool development and implementation early in March of 2002. The session will focus on the results of our five phase-2 pilot projects, and we anticipate including presentations on work completed in Ontario and elsewhere. This meeting will result in the development of a broad, ideally international collaboration of wait list management issues. If you have work that you would like to present or can suggest initiatives to be included, please let us know. Look for a notice of meeting and draft agenda ahead via e-mail early in the New Year.

WCWL Mailing List Audit

To remain useful, any mailing list requires a regular audit resulting in additions, modifications, or deletions to maintain its accuracy. Please review your name and particulars on the address label. Do we have it right? Shall we add any of your colleagues? Would you like to receive additional copies of the newsletter? Please e-mail any changes to info@wcwl.org prior to January 31, 2002.

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 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 or jjmcg@telusplanet.net

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