

Wait Times: Causes and Cures

“Canadians could potentially have same day access to primary health care, one or two weeks access for appointments with medical specialists, and almost no waiting for tests and surgeries.”

— Dr. Brian Postl, National Wait Time advisor, CEO Winnipeg Regional Health Authority

BY THE NUMBERS:

90%

The drop in wait times from first visit with an orthopaedic surgeon to surgery when Alberta implemented a project to cut wait times for orthopaedic surgeries in the public system.

4.6 hours

The maximum amount of time spent in emergency rooms by 90% of Ontario patients with minor or uncomplicated conditions. Most emergency room visits are for minor conditions.

16 weeks

longer to wait for cataract surgery. A Manitoba study showed that patients whose doctor worked only in public facilities waited 10 weeks, while patients whose doctors worked in both private & public facilities waited 26 weeks.

75%

Reduction in wait times for hip and knee reconstruction surgery at B.C.'s Richmond Hospital after a pilot project to reduce wait times in the public health care system.

2 weeks

used to be the wait time it took to see a family doctor in one area of Halifax. Improving systems has meant that most patients can get an appointment the next day.

Wait times: Privatization is not the answer

When you are ill or in pain, there is nothing more frightening or frustrating than having to wait for treatment. Too many Canadians face long wait times for health services. Not only does this hurt the patients, it makes all Canadians wonder if our public health care system is broken.

People who want private for-profit health care use wait times as a reason to justify the introduction of a parallel private system for those who can afford to pay.

Privatization is not the answer

In fact, in places where there are for profit parallel systems, wait times are as long or longer. The good news is that wait times are fixable, and the solutions are found in the public health care system. By changing some of the ways that we now carry out important health services, we can cut wait times dramatically, improve patient care and reduce costs.

Why are we waiting?

There are many complex reasons for longer wait times, and there is not one single cause. That's why reducing wait times will require system-wide improvements.

Here are some of the reasons for longer wait times:

- **Poorly organized services** – inefficiencies, lack of coordination among all those involved in delivering services and poor planning slow down the system and create bottlenecks in providing surgeries and other services.
- **Shortages of health care workers** – if patients can't get to see a doctor quickly (or at all) they turn to emergency rooms (ERs), extending wait times in ERs.
- **Physicians don't work in teams** – most doctors' offices work alone, so all appointments and procedures leading up to surgery are managed individually, leading to delays and inefficiencies at every step.
- **Cuts to hospital services** — between 1988 and 2002 there were 64,000 hospital beds cut.
- **The need for more long-term care and home care** – under-funding of home care and residential long-term care has increased inappropriate and preventable hospitalization and adds pressure on emergency rooms.
- **Better outcomes** – when we improve services, more people can benefit from them (e.g. many patients now have surgeries that would have been too dangerous a few years ago).

Wait times: Why for-profit is not the answer

People who own private for-profit clinics often make the case that by letting the wealthy pay for private services, it will take the pressure of the public system and reduce wait times for the rest of us. In fact, the evidence shows this is not true.

Wait times are longer where this is a parallel for-profit system – In countries with parallel for-profit and public systems, wait times are longer, not shorter than wait times in countries where there is only a public system.

For-profit clinics take doctors and nurses out of the public system – there are limited resources in our health care system. A for-profit private clinic takes doctors and nurses out of the public system to care for those who can afford it, while the rest of us face longer public lines as a result.

“Cream-skimming” in for-profit care chooses easy-to-treat patients - this practice leaves the higher risk, higher cost patients to the public system while make money off the simple cases. This means longer wait times in the public system.

For-profit care isn't as safe – Research shows that for-profit facilities are not as good for your health. One study estimated that if all Canadian hospitals were converted to for-profit, there would 2,200 additional deaths every year. That's not the way to shorten wait times.

For-profit care costs more – costs in a parallel system are higher than in the public system. For example, knee replacement surgery in a public hospital costs \$8,000; in a private facility, between \$14,000 and \$18,000. That's not a cost most of us can pay.

Health care should be based on need, not on ability to pay – it's one of the strongest beliefs of most Canadians. Our public health care reflects our Canadian values of equality and fairness. We want all Canadians to get access to quality and timely care – not just those who can afford to pay out of their own pockets.

Wait times: The public health care solutions

To reduce wait times, we need to make important system-wide improvements in our health care system. Many of these changes have already been tried successfully in some regions of the country.

Fund the public solutions – governments need to make system-wide improvements based on the successful projects in public hospitals and clinics that are dramatically reducing wait times. We need more than isolated pilot projects.

Put patients before profits – it seems obvious, but when efficient and appropriate patient care is made a priority, administrative and clinical practices improve and wait times are shortened.

Common waiting lists– all patients waiting for certain surgeries go into a single list for the first available surgeon. Patients could still choose their surgeon, but they might have to wait longer.

Better coordination – by staggering start-time for surgery and standardizing surgical equipment and procedures including pre-screening and tests. Where this has been tried, wait times dropped 75% and the number of surgeries completed increased by 136%.

Expand team work – establishing teams of health care providers including physicians, nurses, nurse practitioners and other health professionals eliminates duplication, improves coordination and makes better use of scarce resources.

Modernizing electronic information systems – so everyone in the health care team has timely access to accurate and up-to-date patient information and there is no unnecessary waiting for patient records.

Improve community care – by putting resources into long-term care, home care and home support, we can keep people healthier and out of hospital, and relieve the pressure on hospital beds.

Improve access to family health care – when patients can get timely access to family health care teams, through community clinics and urgent care centres, the wait time in ERs drops dramatically.

About the Canadian Health Coalition:

The Canadian Health Coalition is a not-for-profit, non-partisan organization dedicated to protecting and expanding Canada's public health system for the benefit of all Canadians. It includes organizations representing seniors, women, churches, nurses, health care workers and anti-poverty activists from across Canada. For more information: www.medicare.ca

