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Time's Up for Showing Progress on Wait Times

Ottawa, April 19, 2007 – The Wait Time Alliance (WTA) spring report card released today reveals that governments' collective action on cutting wait times is achieving some positive results in implementing the wait-time commitments made in the 2004 First Ministers' *10-Year Plan to Strengthen Health Care*.

“Our spring report card shows governments continue to make progress,” said WTA co-chair Dr. Lorne Bellan. “The members of the Wait Time Alliance and their patients now need their governments to build on that momentum with further action.”

The WTA first graded governments on their progress to reduce wait times in November 2006 in its Interim Report Card. In terms of overall progress, there are two significant differences between the November 2006 Interim Report Card and today's spring Report Card, those being:

- The grade for sight restoration rose from a C to a B;
- The grade for joint replacement is now assessed separately for hip and knee replacement. In 2006 joint replacement received a C grade — today's report card assigns a B grade for hip replacement and a C for knee replacement.

The grading for the three other priority areas remains unchanged; cardiac care (bypass grafting only) and cancer care (radiation oncology) both retain their A grade. The grade for diagnostic imaging remains unchanged as well because no benchmarks have been established.

The timing of the release of the WTA spring Report Card reflects the commitment made, as part of the *10-Year Plan*, by all governments to have secured “meaningful reductions in wait times” for the five priority areas by March 31, 2007.

In terms of “Access Enablers”, or actions taken by government to address the key barriers to access in each of the five priority areas, the national grades are as follows;

- Cardiac care (bypass grafting only) and sight restoration gets an A grade;
- CT, hip replacement and cancer care get a B grade; and, knee replacement and MRI get a C grade.

In regard to the provincial “Trends” in reducing wait times between 2005 and 2006, the Report Card again shows progress is being made in most areas in a majority of the provinces.

Accompanying the WTA spring Report Card is the WTA Progress Report, which identifies significant challenges that must be overcome and recommended actions to do so. To move forward, the WTA is now calling for action in several other areas including:

- Clarifying and standardizing wait-time definitions/criteria among provinces,
- Creating a *National Health Workforce Strategy*,
- Creating a *Health Delivery Infrastructure Fund*; and,
- Expanding wait time reduction efforts and the creation of wait time benchmarks in other areas of care.

“Workforce and capacity issues remain the key hurdles to be overcome to improve patient wait times,” said CMA President, Dr. Colin McMillan. “Benchmarks and care guarantees are critical, but we’ll never be able to meet them without more doctors, nurses and other health care professionals working in the system.”

The WTA also announced today that it is fulfilling its mandate to support improved access to health care services as broadly as possible by expanding to develop benchmarks in the areas of emergency care, psychiatry and gastroenterology and facial reconstruction.

“While the job is not completely done in the original five areas, the WTA believes it’s time to look ahead,” said Dr. Bellan. “That is why we are expanding to the next phase of the wait time benchmark development process.”

Joining the existing member of the WTA will be the:

- Canadian Anaesthesiologists’ Society;
- Canadian Association of Emergency Physicians;
- Canadian Association of Gastroenterology;
- Canadian Psychiatric Association;
- Canadian Society of Plastic Surgeons.

The expanded WTA, while continuing to focus on the original five priority areas, will develop access benchmarks in these five new areas over the coming months and will present them to governments. The WTA will also work with other specialty and primary care associations to identify and develop further medically acceptable performance goals and benchmarks for obtaining timely access to high quality health care.

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The Wait Time Alliance of Canada (WTA) is comprised of the Canadian Association of Nuclear Medicine, the Canadian Association of Radiation Oncology, the Canadian Association of Radiologists, the Canadian Cardiovascular Society, the Canadian Medical Association, the Canadian Ophthalmological Society, and the Canadian Orthopaedic Association.

Media can access the Interim Report Card and background materials at www.waittimealliance.ca

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