

Slow progress made on wait times: report

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[CBC News](#)

Slow progress is being made on wait-time targets, but governments need to build on the momentum and expand targets to new areas, the president of the Canadian Medical Association said Thursday.

"We must underscore the report card released today underscores both challenges and some failures," Dr. Colin McMillan said in presenting the Wait Times Alliance's spring report card, called Time's Up, to the National Press Club in Ottawa.

"We must maintain progress and take the critical steps to create a pan-Canadian wait-time guarantee — a wait-time guarantee that actually works for all patients."

From 2005 to 2006, wait times decreased for most procedures in most provinces. But in many cases, waits are still too long, whether measured against the alliance's benchmarks or provincial ones, the report said.

The Wait Time Alliance was created in 2004 to provide governments with advice from the physicians' perspective on medically acceptable wait-time benchmarks. It includes the CMA and other national organizations representing experts such as radiation oncologists and cardiovascular specialists.

The report card gives government a "D" for no progress on setting a timetable to achieve targets, which the group wants to see by the end of the year.

Since an interim report in November 2006, grades for sight restoration rose from a "C" to a "B." Joint replacements received a "C" in 2006, compared with "B" for hip replacements and a "C" for knee replacements in the latest report.

Provincial, territorial announcements a 'small step'

Grades for the other priority areas, bypass grafting in cardiac care and radiation oncology, remained at "A," but McMillan said the cardiovascular targets are too narrowly focused on bypass surgery.

The grade for diagnostic imaging stayed unchanged at "incomplete" because no benchmarks have been established.

Earlier this month, Prime Minister Stephen Harper announced all provinces and territories have agreed to provide wait-time guarantees in a treatment of their choosing by 2010. During the last election, Conservatives campaigned on guaranteed wait times for all five key areas.

"It's important in principle but it's only one step, and a small one," said McMillan, referring to guarantees in one area rather than in all five as originally planned by the Tories.

Health Minister Tony Clement defended the guarantees negotiated with the provinces and territories as a change in how health care is done, while repeating that more work needs to be completed.

Expanding benchmark areas

The report introduced a new category called "access enablers" — actions to reduce wait times by adding staff and equipment or improving efficiency, such as through patient registries.

"Benchmarks and care guarantees are critical, but we'll never be able to meet them without more doctors, nurses and other professionals," McMillan said.

The original five areas still need work, agreed Dr. Lorne Bellan, co-chair of the alliance. The next phase of the project will develop benchmarks for emergency care, psychiatry, gastroenterology and facial reconstruction, as well as primary care, Bellan said.

In the report, an "A" grade means that 80 per cent of all people are being treated within the time set in the benchmark. This falls to 70 per cent to 79 per cent for "B" and 60 per cent to 69 per cent for "C."

With files from the Canadian Press