



Analysis in Brief

Taking health information further

February 2007

Wait Times Tables—A Comparison by Province, 2007

Improving access to care has consistently been identified as a priority for Canadians from coast to coast. When the First Ministers met in the fall of 2004, they listed timely access to quality care at the top of their collective agenda. They committed to achieving "meaningful reductions in wait times in priority areas such as cancer, heart, diagnostic, imaging, joint replacements, and sight restoration. In December 2005, health ministers agreed to benchmarks for medically acceptable wait times for these priority areas. As part of the 10-year plan, the Canadian Institute Health Information was asked to report on progress on wait times across jurisdictions.

Much work on wait times is underway across the country although there is no Canada-wide waiting list for care. Comparable data about who is waiting for what and for how long are being developed, but are still far from comprehensive. For example, reporting currently covers a mix of types of patients, employs various start and end points for measuring waits and uses a range of summary measures to describe the distribution of wait times. Different methods for monitoring wait times can yield different results. Each has strengths and weaknesses, but data generated from different methods often cannot be combined to make valid comparisons. We discussed these and other challenges in measuring wait times and interpreting the results in a report released last year, Waiting for Health Care in Canada: What We Know and What We Don't Know.

The report also included the results of a scan of provincial websites and of reports that gathered information on wait times reporting for the First Ministers' priority areas. We provided an overview of the approaches that each province was using to report on wait times, including definitions, measures and timeframes, as well as a snapshot of wait times reported.

i. In the companion agreement, Asymmetrical Federalism That Respects Quebec's Jurisdiction, it was noted that Quebec would apply its own wait times reduction plan, in accordance with the objectives, standards and criteria established by the relevant Quebec authorities.³



On December 1, 2006, one year later, we repeated the scan to determine the extent of change in wait times reporting. Detailed tables with provincial results are attached. Key findings include:

- 1. The breadth and depth of reporting has improved, with several provinces anticipating further development over the next year. Additional provinces have begun reporting priority area wait times on publicly accessible websites. For example, Newfoundland and Labrador, Prince Edward Island, and New Brunswick began providing wait times on their provincial websites. Several provinces have also expanded their reporting to cover more priority areas. Four additional provinces reported on cataract surgery, two on hip and knee replacements and one on diagnostic imaging wait times. That said, not all provinces report on wait times for all of the priority areas. The availability of information on wait times outside of the priority areas varies greatly.
- 2. The timeliness of wait times has improved in some areas. In several provinces, regular reporting replaced older, more static reports for specific areas, such as cardiac and joint replacement surgeries.
- 3. Several provinces have begun to report against wait times benchmarks. For instance, Newfoundland and Labrador is reporting against pan-Canadian wait times benchmarks agreed to by the health ministers, where possible. In addition, Quebec is using province-specific targets and Alberta is reporting against the province-specific access targets set to meet the pan-Canadian goals.
- 4. Wide variation in reporting methods continues, making comparisons challenging. The methods for wait times reporting are not uniform and did not converge between December 2005 and December 2006. The variation in summary measures, time periods reported and time elapsed between data collection and reporting limits the potential for pan-Canadian comparisons and analysis. The time periods reported vary between provinces and also within provinces for different procedures. The most commonly reported time periods are 1 month for 4 provinces, 3 months for 3 provinces, 6 months for 2 and 12 months for 1. The time lags between the time period and the reporting date also differ by province.

ii. The data in the tables are as shown on provincial websites as of December 1, 2006, or provided by provinces during a validation process that took place in December 2006. In some cases, more current information may now be posted on provincial websites. The links provided in the tables can be used to identify the most recent data available.



For More Information

This Analysis in Brief is part of CIHI's ongoing program of work related to access to care, including wait times. This area was identified as a priority through consultations leading up to the development of CIHI's *Strategic Directions*—2005–2006 to 2007–2008. Specific topics for analysis were selected based on subsequent focused consultations on priorities for better information about access to care.

Copies of this document are available free of charge in both official languages on the CIHI website at www.cihi.ca. You can also find related reports such as Surgical Volume Trends Within and Beyond Wait Time Priority Areas, Waiting for Health Care in Canada: What We Know and What We Don't Know and the Health Care in Canada series.

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About CIHI

The Canadian Institute for Health Information (CIHI) collects and analyzes information on health and health care in Canada and makes it publicly available. Canada's federal, provincial and territorial governments created CIHI as a not-for-profit, independent organization dedicated to forging a common approach to Canadian health information. CIHI's goal: to provide timely, accurate and comparable information. CIHI's data and reports inform health policies, support the effective delivery of health services and raise awareness among Canadians of the factors that contribute to good health. For more information, visit our website at www.cihi.ca.



Appendix

Overview of Provincial Reporting of Wait Times Tables

Table 1. Provincial Reporting on Priority Wait Time Areas*

Province	Wait Times Website(s)	Cancer	Cardiac	Diagnostic Imaging	Joint Replacement	Sight Restoration	Reporting Includes All Facilities
N.L. [†]	www.releases.gov.nl.ca/ releases/2006/health/ 0822no1.htm	•	•		•	•	Yes
P.E.I. [‡]	www.gov.pe.ca/index.php3? number = news⟨ = E≠ wsnumber = 4418	•		•	•	•	Yes
N.S.	www.gov.ns.ca/health/ waittimes/	•	•	•	•	•	Yes
N.B.	www.gnb.ca/0217/ NBSCN-RSCNB/wait-e.asp		•		•	•	Yes
Que.	www.msss.gouv.qc.ca/en/ sujets/organisation/ waiting_lists.html	•	•		•	•	Yes
Ont.	www.ontariowaittimes.com www.cancercare.on.ca/index _statisticsandResearch.htm	•	•	•	•	•	No [§]
Man.	www.gov.mb.ca/health/ waitlist/index.html	•	•	•	•	•	Yes
Sask.	www.sasksurgery.ca/ wait-list-info.htm www.saskcancer.ca**	•	•		•	•	Yes
Alta.	www.ahw.gov.ab.ca/waitlist/ WaitListPublicHome.jsp	•	•	•	•	•	No
B.C.	www.healthservices. gov.bc.ca/waitlist/	•	•		•	•	No

- * Information retrieved from provincial websites on December 1, 2006.
- 1 Newfoundland and Labrador released updated wait times data on December 22, 2006. The updated release can be found at http://www.releases.gov.nl.ca/releases/2006/health/1222n06.htm.
- ‡ P.E.I. does not offer cardiac services, and patients receive care out of province.
- § Only hospitals funded by the Ontario Wait Time Strategy are reporting on the provincial website. This represents about 90% of all cases performed in the province (100% of cardiac services).
- ** See Saskatchewan Cancer Agency 2005-06 Annual Report page 10.



Provincial Reporting of Wait Times for Cancer Services

Table 2-1. Specific Cancer Services Reported by Province and Reporting Unit*

Service	N.L.	P.E.I.	N.S.	N.B. [†]	Que.‡	Ont.	Man.	Sask.	Alta.	B.C.	
Services Reported	Services Reported										
Radiation	•	•	•		•	• [§]	•	•	•	•	
Cancer Specialist			•					•	•		
Cancer Surgery			•††			•					
Chemotherapy						• §		•	•	•	
Level of Reporting			•		•		•				
Province	•	•	• ‡ ‡			• * *	•			•	
Geographic Region			•			• * *					
Facility					•	• §		•	•		
Physician											

Notes:

- * Information retrieved from provincial websites on December 1, 2006.
- † The New Brunswick Cancer Network is developing a website and plans to begin reporting on wait times for cancer services in early 2007.
- ‡ Quebec will begin reporting from the time a patient is medically ready until surgery in spring 2007. The benchmark will be less than 4 weeks.
- § Information obtained from Cancer Care Ontario for chemotherapy and radiation therapy.
- ** Surgery only.
- †† Mastectomy and surgery for gynecological cancer only.
- ‡‡ Mastectomy only.

Some provinces also reported on wait times for types of surgery that might include procedures for persons with cancer (e.g. gynecological surgery), but do not separate these patients out in reporting.



Table 2-2. Radiation Therapy Wait Times Reporting Methods and Wait Times Estimates by Province*

	N.L.	P.E.I.	N.S.	Que.	Ont.	Man.	Sask.	Alta.	B.C.
Wait Segment(s) Measured	From decision-to- treat to treatment for all new cases	From booking to treatment	From decision-to- treat to treatment	From ready- to-treat to treatment	From referral to cancer centre to treatment	From ready- to-treat to treatment	Two-part definition: A. From referral to appointment with oncologist B. From oncologist visit to treatment	Two-part definition: A. From referral to appointment with oncologist B. From oncologist visit to treatment	From ready- to-treat to treatment
Summary Measure	Percent completed within national benchmark of 4 weeks (w)	Median	Mean by region and priority level [‡]	Of those who are ready in a given week, the percentage who started within 4 w	Median by facility and body site [§]	Median	Mean by facility ^{§§}	Expected time from last day of the previous month by facility and body site*	Median
Emergency Cases Excluded	Yes	Yes	Yes	Yes	No	Yes	No	Yes	Yes
	Retro- spective	Retro- spective	Retro- spective	Retro- spective	Retro- spective	Retro- spective	Retro- spective	Prospective	Retro- spective
Time Frame	January to March 2006	January to June 2005	October 2006	Average over fiscal quarter—last date available: August 19, 2006	June to August 2006	September 2006	November 2005 to March 2006	October 31, 2005, to next available date	3 months ending September 30, 2006
Estimates	100% within 30 days (4.3 w)	2 w	Range: 0 to 4.1 w ^{‡,††}	75 to 100% ^{‡‡}	Range: 0.4 to 13.7 w [§]	1.0 w	Range: 3.3 to 3.9 w ^{†,††,§§}	Range: <2 to 3.5 w ^{†,**}	0.9 w

- * Information retrieved from provincial websites on December 1, 2006.
- † Alberta and Saskatchewan presented the waits in two stages. To enhance comparability with other jurisdictions, the second wait segment (B) estimates are presented.
- [‡] Nova Scotia reported separately for four priority levels. Nova Scotia also reported separately for two regions that provide radiation therapy services. The range represents the region and priority level-specific values.
- § Ontario reported separately for each facility and nine body sites (breast, central nervous system, gastrointestinal, genitourinary, gynecologic, hematology, head and neck, lung and sarcoma). The range represents the facility- and site-specific values. Ontario excluded any patients who waited longer than 20 weeks. Some estimates were flagged as unstable due to low numbers of patients. These were not included in the range.
- ** Alberta reported separately for each facility and two body sites (breast and prostate). The range represents the facility- and site-specific values.
- †† Nova Scotia and Saskatchewan reported number of days. This was converted to number of weeks.
- ‡‡ Quebec reported for 10 facilities in 7 regions. The range represents the facility-specific values.
- §§ Saskatchewan reported separately by facility (Allan Blair Cancer Centre and Saskatoon Cancer Centre). The range represents the facility-specific values.



Table 2-3. Oncologist Wait Times Reporting Methods and Wait Times Estimates by Province*

	N.S.	Sask.	Alta.
Wait Segment(s) Measured	From referral arrival in cancer centre to appointment	From referral to first appointment	From referral to oncologist to appointment
Summary Measure	Mean by region and subspecialty †	Mean by facility and subspecialty**	Expected wait from last day of the previous month by body site and subspecialty [‡]
Emergency Cases Excluded	Yes	No	Yes
Perspective	Retrospective	Retrospective	Prospective
Time Frame	October 2006	November 2005 to March 2006	From October 31, 2005, to next available date
Estimates	Range: 1.9 to 4.7 weeks ^{†,§}	Range: 3.0 to 7.7 weeks ^{§,**}	Range: <1 to 5 weeks [‡]

- * Information retrieved from provincial websites on December 1, 2006.
- Nova Scotia reported separately for regions that provide cancer specialist services and subspecialty (medical, radiation and gynecologic). The range represents the region- and subspecialty-specific values. The percentages of patients who saw a gynecologic cancer specialist within 1, 2, 3, 4, 5 and 6 weeks were also reported.
- ‡ Alberta reported separately for each facility, two body sites (breast and prostate), and subspecialty (medical and radiation). The range represents the facility-, site- and subspecialty-specific values.
- § Nova Scotia and Saskatchewan reported number of days. This was converted to number of weeks.
- ** Saskatchewan reported separately by facility (Allan Blair Cancer Centre and Saskatoon Cancer Centre) and subspecialty (medical and radiation). The range represents the region- and subspecialty-specific values.



Table 2-4. Cancer Surgery Wait Times Reporting Methods and Wait Times Estimates by Province*

	N.S.	Ont.
Wait Segment	From initial visit to gynecologic cancer surgery or mastectomy	From decision-to-treat to treatment
Summary Measure	Mean wait for gynecologic cancer surgery Cumulative percentages within time periods for mastectomy [†]	Median, mean, 90th percentile
Emergency Cases Excluded	Yes	No
Perspective	Retrospective	Retrospective
Time Frame	October 2006 for gynecologic cancer surgery April 1 to June 30, 2006, for mastectomy	August/September 2006
Estimates	Gynecologic cancer: 5.0 weeks [‡] Mastectomy: 79% within 4.3 weeks	3.9 weeks [‡]

- * Information retrieved from provincial websites on December 1, 2006.
- Nova Scotia only reported for gynecologic cancer surgery and mastectomy. The percentages of patients who received gynecologic surgery within 1, 2, 3, 4, 5 and 6 weeks were also reported.
- ‡ Nova Scotia and Ontario reported median wait times in days. These were converted to weeks.



Table 2-5. Chemotherapy Wait Times Reporting Methods and Wait Times Estimates by Province*

	Ont.	Sask.	Alta.	B.C.
Wait Segment	From referral to cancer centre to treatment	The part of the pa		From medically able to receive to treatment
Summary Measure	Median by facility and body site [†]	Mean by facility**	Expected wait time from last day of the previous month by facility and body site	Maximum
Emergency Cases Excluded	No	No	Yes	No
Perspective	Retrospective	Retrospective	Prospective	Retrospective
Time Frame	June to August 2006	November 2005 to March 2006	From October 31, 2005, to next available date	N/A
Estimates	Range: 2.1 to 8.4 weeks [†]	Range: 1.9 to 2.1 weeks**	1 week [§]	2 weeks

- * Information retrieved from provincial websites on December 1, 2006.
- † Ontario reported separately for each facility and eight body sites (breast, gastrointestinal, genitourinary, gynecologic, hematology, head and neck, lung and sarcoma). The range represents the facility- and site-specific values. Some estimates were flagged as unstable due to low numbers of patients. These were not included in the range.
- ‡ Alberta and Saskatchewan presented the waits in two stages. To enhance comparability with other jurisdictions' waits, the second wait segment (B) estimates are presented.
- § Alberta reported separately for each facility and two body sites (breast and prostate). In this case, all 4 estimates were the same, at 1 week.
- ** Saskatchewan reported separately by facility (Allan Blair Cancer Centre and Saskatoon Cancer Centre). Wait times were reported in number of days. This was converted to number of weeks.



Provincial Reporting of Wait Times for Cardiac Services

Table 3-1. Specific Cardiac Services* Reported by Province and Reporting Unit

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.‡	Alta.	B.C.
Services Reported										
Cardiovascular Surgery			•					•		
Cardiac Surgery					•		•		•	•
Bypass Surgery	•			•		•	•	•	•	• §
Angioplasty			•			•				
Catheterization			•			•				
Level of Reporting										
Province	•		•	•		•	•	• * *	•	•
Geographic Region	•		•	•		•	•	•	• † †	
Facility				•	•	•	•		•	•
Physician									•	•

- * Not all categories of cardiac services are mutually exclusive. For example, cardiovascular surgery is a broad category that encompasses cardiac surgery. Likewise, cardiac surgery includes bypass surgery.
- † Information retrieved from provincial websites on December 1, 2006.
- ‡ Saskatchewan is currently developing a strategy to collect wait times information on procedures performed in cardiac catheterization labs.
- § Obtained from the Comparable Health and Health System Performance Indicators for Canada, the Provinces and Territories, November 2004 at http://secure.cihi.ca/cihiweb/dispPage.jsp?cw page = prtwg 2004 e>.
- ** Website reports provincial numbers for cardiovascular surgery only.
- †† Reporting against Alberta's access goals (time period in which 90% of patients should be treated) occurred at a regional level for bypass surgery.



Table 3-2. Cardiovascular/Cardiac Surgery Wait Times Reported by Provinces*

	N.S. [†]	Que.‡	Man.‡	Sask. [†]	Alta.‡	B.C. [‡]
Wait Segment	From decision- to-treat to surgery	From medically ready to surgery	From booking to surgery	From booking form received to surgery	From decision- to-treat to surgery	From booking to surgery
Summary Measure	Mean by priority level [§]	Percentage within time period for priority level benchmarks	Median	Median with and without emergency ^{††}	Median ^{‡‡}	Median
Emergency Cases Excluded	Yes	No	No	No	Yes	Yes
Perspective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective
Time Frame	October 2006	September 17 to October 14, 2006	September 2006	January to June 2006	90 days preceding October 31, 2006	3 months ending September 30, 2006
Estimates	Range: 3 to 182 days [§]	Range: 57 to 100%**	13 days	2 days including emergency; 7 days non-	43 days	75 days
				emergent		

- * Information retrieved from provincial websites on December 1, 2006.
- † Reported on cardiovascular surgery.
- ‡ Reported on cardiac surgery.
- § Nova Scotia reported separately for 4 priority levels. The range represents the priority level-specific values.
- ** Quebec presented facility-specific numbers by priority level. The benchmarks were as follows: Level 1, 24 hours; Level 2, 72 hours; Level 3, 2 weeks; Level 4, 6 weeks; Level 5, 3 months. The range represents the facility-specific percentage meeting the benchmarks.
- †† Saskatchewan also reported percentages within time periods.
- ‡‡ Alberta reported the median wait time in weeks, which was converted to days. Note: Alberta also reported separately for day surgery and inpatient groups. It also reported percentages within time periods.



Table 3-3. Bypass Surgery Wait Times Reported by Provinces*

	N.L.	N.B.	Ont.	Man.	Sask.	Alta.	B.C.
Wait Segment	From decision-to- treat to surgery	Last major consult to surgery	From decision-to- treat to surgery	From booking to surgery	From booking form received to surgery	From decision- to-treat to surgery	From catheterizatio n to surgery
Summary Measure	Percent completed within national benchmark of 26 weeks	Percentages within time periods	Median, mean, 90th percentile	Median	Percentages within time periods [†]	Median [‡]	Median
Emergency Cases Excluded	Yes	Yes	Yes	No	No	Yes	No
Perspective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective
Time Frame	January to March 2006	April 2004 to March 2005	August/ September 2006	September 2006	January to June 2006	90 days preceding October 31, 2006	2002–2003
Estimates	98.6% within 182 days	<3 months (m): 88% 3-6 m: 10% 6-9 m: 1% 9-12 m: 1% >12 m: <1%	17 days, 27 days, 62 days	13 days	3 weeks (w) or less: 87% 4-6 w: 7% 7 w-3 m: 5% 4-12 m: 1% 13-18 m: 0% 18 m or more: 0%	40 days	24 days

- * Information retrieved from provincial websites on December 1, 2006.
- † Saskatchewan's website presents data for the two regions where bypass surgery is performed. The provincial distribution was obtained from Saskatchewan Health and was calculated using the same data.
- [‡] Alberta reported the median wait time in weeks, which was converted to days. Alberta also reported separately for day surgery and inpatient groups. It also reported percentages within time periods and against access goals.



Table 3-4. Angioplasty Wait Times Reported by Provinces*

	N.S.	Que.	Ont.
Wait Segment	From decision-to-treat to treatment	From medically ready to treatment	From decision-to-treat to treatment
Summary Measure	Mean by priority level [†]	Percentage within time period for priority level benchmarks	Median, mean, 90th percentile
Emergency Cases Excluded	Yes	No	Yes
Perspective	Retrospective	Retrospective	Retrospective
Time Frame	October 2006	September 17 to October 14, 2006	August/September 2006
Estimates	Range: 13 to 29 days [†]	Joint estimate for angioplasty and cardiac catheterization: 75%-100% [‡]	3 days, 8 days, 23 days

- * Information retrieved from provincial websites on December 1, 2006.
- † Nova Scotia reported separately for three priority levels (urgent, semi-urgent and elective). The range represents the priority level-specific means.
- ‡ Quebec presented facility-specific numbers by priority level. The benchmarks were as follows: Level 1, immediate; Level 2, 24 hours; Level 3.1, 72 hours; Level 3.2, 1 week; Level 4, 2 weeks; Level 5.1, 1 month; Level 5.2, 2 months. The range represents the facility-specific percentage meeting the benchmarks.



Table 3-5. Cardiac Catheterization Wait Times Reported by Provinces*

	N.S.	Que.	Ont.
Wait Segment	From decision-to-treat to treatment	From medically ready to treatment	From decision-to-treat to treatment
Summary Measure	Mean by priority level	Percentage within time period for priority level benchmarks	Median, mean, 90th percentile
Emergency Cases Excluded	Yes	No	Yes
Perspective	Retrospective	Retrospective	Retrospective
Time Frame	October 2006	September 17 to October 14, 2006	August/September 2006
Estimates	Range: 14 to 26 days [†]	Joint estimate for angioplasty and cardiac catheterization: 75%-100% [‡]	14 days, 17 days, 34 days

- * Information retrieved from provincial websites on December 1, 2006.
- † Nova Scotia reported separately for three priority levels (urgent, semi-urgent and elective). The range represents the priority level-specific means.
- ‡ Quebec presented facility-specific numbers by priority level. The benchmarks were as follows: Level 1, immediate; Level 2, 24 hours; Level 3.1, 72 hours; Level 3.2, 1 week; Level 4, 2 weeks; Level 5.1, 1 month; Level 5.2, 2 months. The range represents the facility-specific percentage meeting the benchmarks.



Provincial Reporting of Wait Times for Diagnostic Imaging

Table 4-1. Specific Diagnostic Imaging Procedures Reported by Province and Reporting Unit*

	N.L. [†]	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.‡	Alta.	B.C.
Services Reported										
CT Scans		•	•			•	•		•	
MRI Scans		•	•			•	•		•	
Level of Reporting										
Province		•				•	•		•	
Geographic Region						•	•		• §	
Facility			•			•	•		•	
Physician										

- * Information retrieved from provincial websites on December 1, 2006.
- 1 Newfoundland and Labrador anticipates starting reporting by the end of the 2006-2007 fiscal year.
- ‡ Saskatchewan is collecting diagnostic imaging data. A diagnostic imaging website is being planned for 2007.
- § Reporting against Alberta's access goals (time period in which 90% of patients should be treated) occurred at a regional level.



Table 4-2. CT and MRI Scan Wait Times Reported by Provinces*

	P.E.I.	N.S.	Ont.	Man.	Alta.
Wait Segment	From booking to scan	From when request arrives to next day with three open appointments	From date exam ordered to date exam completed	From booking to scan	From decision- to-treat to scan
Summary Measure	Median	Number of days by facility [†]	Median, mean, 90th percentile	Mean facility- specific maximum	Median [‡]
Emergency Cases Excluded	Yes	Yes	Yes	Yes	Yes
Perspective	Retrospective	Prospective	Retrospective	Retrospective	Retrospective
Time Frame	June to December 2005	October 2006	August/ September 2006	September 2006	90 days ending October 31, 2006
CT Wait Estimate	7 days (urgent) 70 days (routine) [§]	Range: 2 to 65 days	13 days, 29 days, 79 days	77 days [§]	9 days [§]
MRI Wait Estimate	7 days (urgent) 105 days (routine) [§]	Range: 34 to 177 days	39 days, 50 days, 104 days	56 days [§]	80 days [§]

- * Information retrieved from provincial websites on December 1, 2006.
- † The ranges for Nova Scotia represent facility-specific estimates.
- ‡ Alberta also reported percentages within time periods and against access goals.
- § Estimates were reported in weeks. These were converted to days.



Provincial Reporting of Wait Times for Joint Replacement

Table 5-1. Specific Joint Replacement Surgeries Reported by Province and Reporting Unit*

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.
Services Reported										
Orthopedic Surgery								•		•
Hip Replacement	•	•	•	•	•	•	•	•	•	•
Knee Replacement	•	•	•	•	•	•	•	•	•	•
Level of Reporting										
Province		•	•	•	•	•		• †	•	•
Geographic Region	•		•	•	•	•	•	•	• ‡	
Facility				•	•	•			•	
Physician									•	•

- * Information retrieved from provincial websites on December 1, 2006.
- † Orthopedic surgery only.
- ‡ Reporting against Alberta's access goals (time period in which 90% of patients should be treated) occurred at a regional level.



Table 5-2. Joint Replacement Wait Times Reported by Provinces*, †

	N.L.	P.E.I.	N.S. [‡]	N.B.	Ont.	Man.	Sask.	Alta.	B.C.
Wait Segment	From decision- to-treat to surgery	From booking to surgery	From 2nd previous appointment with orthopedic surgeon to surgery	Last major consult to surgery	From decision- to-treat to surgery	From booking to surgery	From booking form received to surgery	From decision- to-treat to surgery	From booking to surgery
Summary Measure	Percent completed within the national benchmark of 26 weeks (w) (182 days [d])	Median	Percentages within time periods	Percentages within time periods	Median, mean, 90th percentile	Median	Median [§] (orthopedic surgery) Percentages within time periods (hip and knee) **,††	Median [§]	Median
Emergency Cases Excluded	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
Perspective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective	Retrospective
Time Frame	January to March 2006	January to June 2005	April to June 2006	April 2004 to March 2005	August/ September 2006	September 2006	January to June 2006	90 d ending October 31, 2006	3 months (m) ending September 30, 2006
Orthopedic Surgery Wait Estimate							44 d including emergency 122 d non-emergent		56 d ^{††}
Hip Replacement Wait Estimate	90-100% within 182 d ^{§§}	119 d ^{††}	<30 d: 10% <60 d: 18% <90 d: 28% <180 d: 57% <270 d: 73% <360 d: 84%		95 d, 127 d, 281 d	112 to 161 d ^{††,‡‡}	3 w or less: 17% 4-6 w: 4% 7 w-3 m: 15% 4-12 m: 44% 13-18 m: 6% > 18 m: 14%	97 d ^{††}	114 d ^{††}
Knee Replacement Wait Estimate	50-100% within 182 d ^{§§}	168 d ^{††}	<30 d: 1% <60 d: 3% <90 d: 10% <180 d: 43% <270 d: 58% <360 d: 72%	<3 m: 26% 3-6 m: 27% 6-9 m: 18% 9-12 m: 10% >12 m: 20%	117 d, 164 d, 353 d	175 to 329 d ^{††,‡‡}	3 w or less: 2% 4-6 w: 3% 7 w-3 m: 9% 4-12 m: 43% 13-18 m: 16% >18 m: 26%	134 d ^{††}	139 d ^{††}

- * Information retrieved from provincial websites on December 1, 2006.
- 1 Quebec provided a snapshot of the number of patients who had been waiting 6 months or more on September 19, 2006, as a proportion of the number of surgeries performed in 2004–2005. The resulting ratios were 0.09 for hip replacements and 0.18 of those awaiting knee replacements.
- ‡ Nova Scotia reported separately for revision surgeries. These estimates are not included in the above table.
- § Alberta and Saskatchewan (for orthopedic surgery) also reported percentages within time periods. Alberta also reported against provincial access goals.
- ** Saskatchewan's website presents data for the 4 regions where hip and knee replacement surgery is performed. The provincial distribution was obtained from Saskatchewan Health and was calculated using the same data.
- †† Estimates were presented in weeks and converted to days.
- ‡‡ Manitoba presented estimates in weeks separately for each region. The range represents region-specific values.
- §§ Region-specific ranges were presented.



Provincial Reporting of Wait Times for Sight Restoration

Table 6-1. Specific Eye Surgeries Reported by Province and Reporting Unit*

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.
Services Reported										
Eye Surgery								•	•	•
Cataract Surgery	•	•	•	•	•	•	•	•	•	•
Level of Reporting										
Province		•	•	•	•	•		• †	•	•
Geographic Region	•		•	•	•	•	•	•	• ‡	
Facility				•	•	•	•		•	
Physician									•	•

- * Information retrieved from provincial websites on December 1, 2006.
- † Website reports provincial numbers for eye surgery only.
- ‡ Reporting against Alberta's access goals (time period in which 90% of patients should be treated) occurred at a regional level.



Table 6-2. Sight Restoration Wait Times Reported by Provinces*

Summary Measure Perc com with natic bene 16 v (1112 Emergency Cases Excluded	ercision-to- eat to ercent empleted eithin etional enchmark of 5 weeks (w) 12 days [d])	From booking to surgery Median	with ophthal- mologist to surgery Percentages within time	major consult to surgery Percentages within time periods	Ratio of number waiting 6 months (m) or more to	From decision-to- treat to surgery Median, mean, 90th percentile	From booking form received to surgery Median	form received to surgery	From decision-to- treat to surgery Median ^{‡,§}	From booking to surgery Median
Summary Measure Perc comwith nation bendered 16 v (1112 Emergency Cases Excluded	eat to argery ercent empleted ithin ational enchmark of 5 weeks (w) 12 days [d])	surgery	with ophthal- mologist to surgery Percentages within time	to surgery Percentages within time periods	Ratio of number waiting 6 months (m) or more to	treat to surgery Median, mean, 90th	form received to surgery	surgery Percentages within time	treat to surgery	,
Summary Measure Perc com with natic bene 16 v (1112 Emergency Cases Excluded	ercent ompleted ithin ational enchmark of 5 weeks (w) 12 days [d])		mologist to surgery Percentages within time	Percentages within time periods	Ratio of number waiting 6 months (m) or more to	surgery Median, mean, 90th	received to surgery	Percentages within time	surgery	Median
Summary Measure Measure com with natic bene 16 v (112 Emergency Cases Excluded	ercent ompleted ithin ational enchmark of 5 weeks (w) 12 days [d])	Median	surgery Percentages within time	within time periods	number waiting 6 months (m) or more to	Median, mean, 90th	surgery	Percentages within time		Median
Measure comwith nation benefit	ompleted ithin ational enchmark of 3 weeks (w) 12 days [d])	Median	Percentages within time	within time periods	number waiting 6 months (m) or more to	mean, 90th		within time	Median ^{‡,§}	Median
Measure comwith nation benefit	ompleted ithin ational enchmark of 3 weeks (w) 12 days [d])	Median	within time	within time periods	number waiting 6 months (m) or more to	mean, 90th	Median	within time	Median ^{‡,§}	Median
with native benefits the control of	ithin ational enchmark of 5 weeks (w) 12 days [d])			periods	waiting 6 months (m) or more to	90th		within time		
native bender 16 v (112) Emergency Cases Yes Excluded	ational enchmark of 5 weeks (w) 12 days [d])		periods		months (m) or more to					1
bend 16 v (112 Emergency Cases Yes Excluded	enchmark of 6 weeks (w) 12 days [d])				or more to	percentile		iperiods '		İ
Emergency Cases Excluded	6 weeks (w) 12 days [d])							F		
Emergency Cases Excluded (112	12 days [d])									
Emergency Cases Excluded Yes					number of					
Cases Yes Excluded	es				surgeries					
Excluded	es									
		Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes
Doronostino Dota										
rerspective her	etro-	Retro-	Retro-	Retro-	Retro-	Retro-	Retro-	Retro-	Retro-	Retro-
		spective	spective	spective	spective	spective	spective	spective	spective	spective
Time Frame Janu	nuary to	January to	April to June	April 2004 to	Number	August/	September	January to June	90 d ending	3 m ending
Mar	arch 2006	June 2005	2006	March 2005	waiting as of	September	2006	2006	October 31,	September
					September	2006			2006	30, 2006
					19, 2006.					
					Number of					
					surgeries in					
					2004-2005					
Eye Surgery								11 w including	91 d ^{**}	51 d ^{**}
Wait								emergency		
Estimate								11.3 w non-		
								emergent		
Cataract 25 t	5 to 100%	147 d**	<30 d: 29%	<3 m: 51%	4%	77 d, 107 d,	49 to		104 d**	56 d**
	ithin	147 U	<60 d: 49%	3–6 m: 20%		225 d	140 d ^{††}	24%	104 u	30 u
Wait 112	12 d ^{‡‡}			6–9 m: 6%			140 u	4–6 w: 10%		
Estimate			<180 d: 86%					7 w-3 m: 19%		
			<270 d: 94%					4–12 m: 42%		
			<360 d: 97%	72111. 10/0				13–18 m: 5%		
			300 a. 37 /0					> 18 m: 1%		

- * Information retrieved from provincial websites on December 1, 2006.
- † Saskatchewan's website presents data for the 8 regions where cataract surgery is performed. The provincial distribution was obtained from Saskatchewan Health and was calculated using the same data.
- ‡ Alberta and Saskatchewan (for eye surgery) also reported percentages within time periods. Alberta reported against access goals.
- § Alberta also reported separately for day surgery and Inpatient groups.
- ** Estimates were presented in weeks and converted to days.
- †† Manitoba presented estimates in weeks separately for each region. Estimates were converted to days. The range represents region-specific values.
- ‡‡ Region-specific values were presented for Newfoundland and Labrador. Data were not collected according to risk category.



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