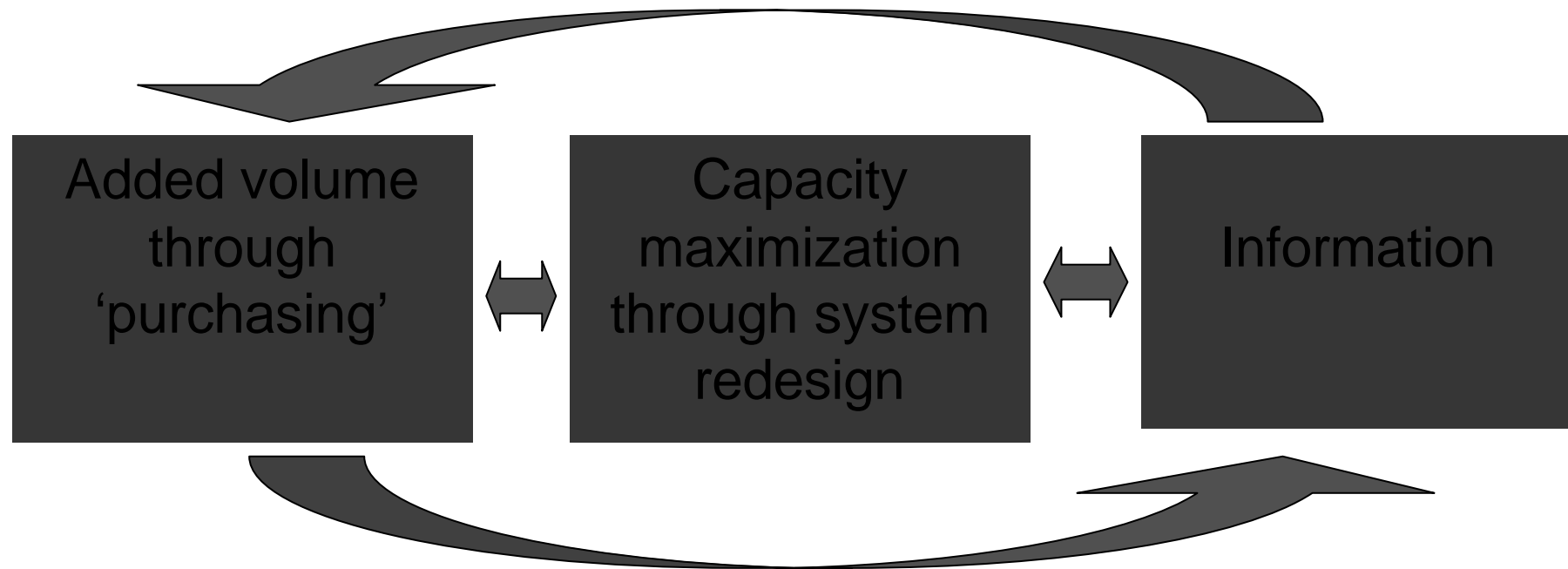


Ontario's Wait Time Information Strategy

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Cancer Care Ontario
February 9, 2007

Ontario's Wait Time Strategy: A Multipronged Approach



Wait Times is an Information Problem . . .

In November 2004

- **Surgeons** maintained their own patients' queues in their offices
- **Hospitals/surgical chiefs** had no way of knowing what the access picture looks like
- **Hospitals** allocated resources (OR time) with minimal if any regard to access issues
- **Government allocated** resources to hospitals with minimal if any regard to access issues
- **Patients and primary caregivers** referred to surgeons based on relationships and hearsay
- **Public** could not hold government and system accountable on the most critical issue of the day

Principles

- Leverage other work
- Wait list management AND wait times reporting are equally pressing goals
- One solution
- Focus on “big five” scope – to build out later
- Transparency in all respects
- Field expert-driven and defined (and redefined)
- Momentum outweighs alignment and perfection

Wait Time Information System . . .

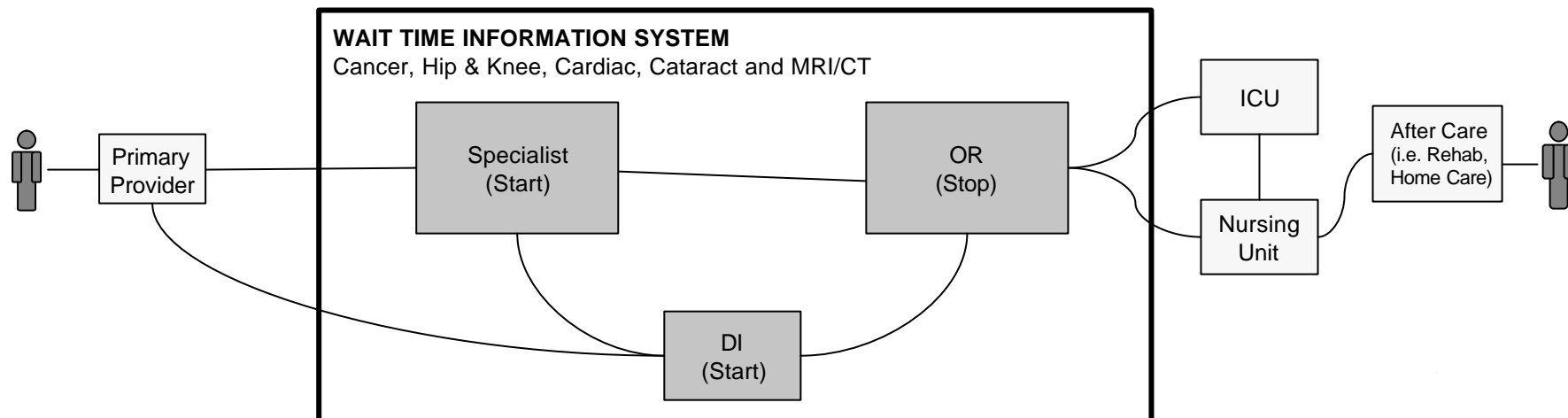
DOES

1. Provides ***waitlist management*** info at the surgeon, service and hospital level
 - Who is waiting for which surgeon;
 - How long people have been waiting;
 - How long people are waiting compared to target time
2. Provides ***wait time reporting*** to support:
 - Public accountability
 - Patient choice

DOES NOT

- Replace hospital's surgical scheduling processes and systems
- Automatically manage patients waiting for surgery and/or procedures
- Provide surgeon level public reporting

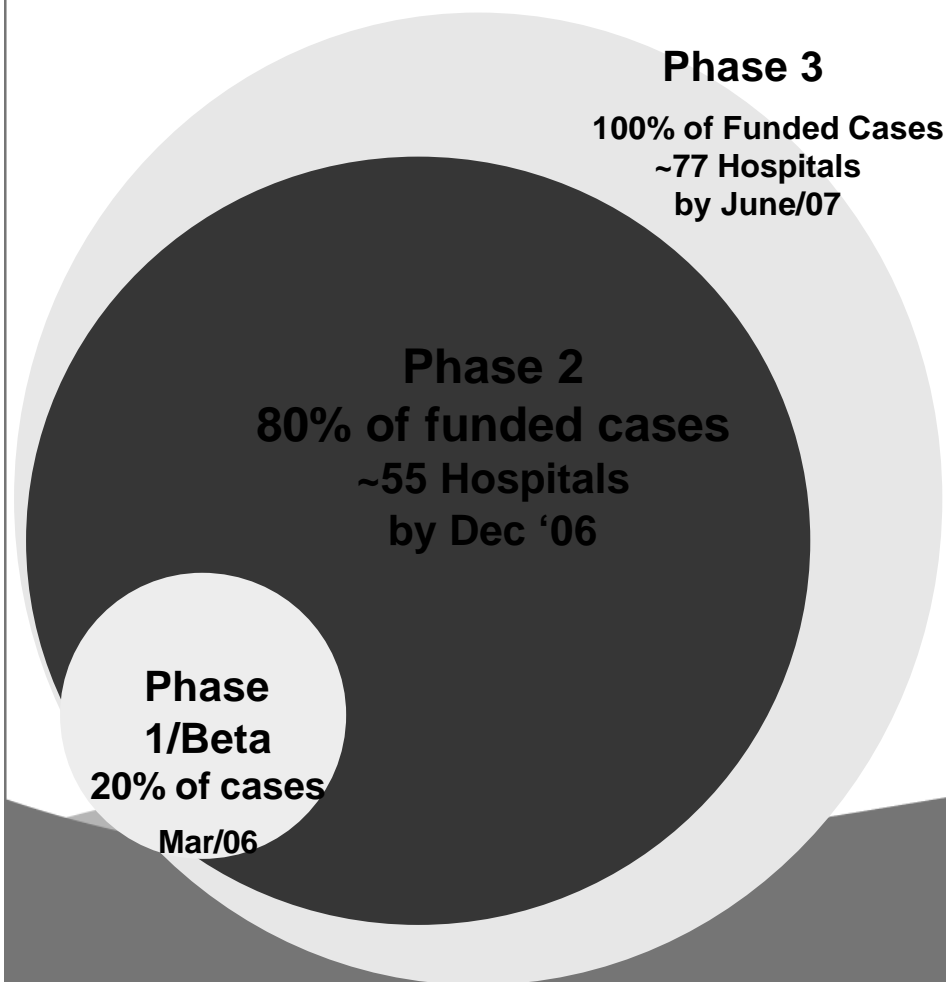
How it works . . .



- WTIS captures actual waits in near real-time electronically from surgeon's offices, diagnostic imaging departments and hospital information systems

Implementation has exceeded objectives

Objectives



Achievements



Phase I/Beta: March '06

- 18% of funded cases
- 300 surgeons, 36,000 surgical cases
- 250,000 MRI and CT scans

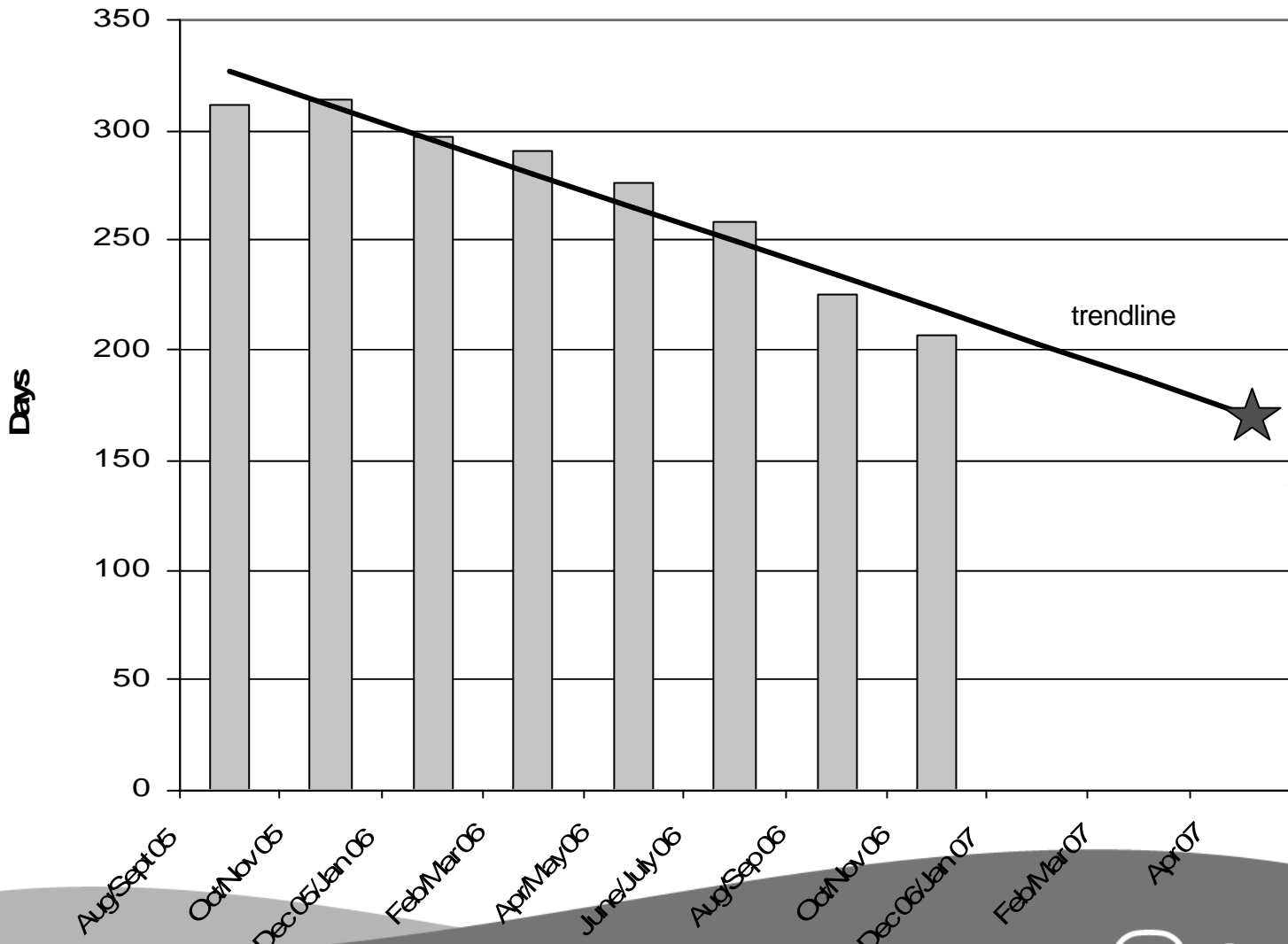


Phase II: Nov '06

- 90% of funded cases, 537 hospitals
- 1,400 surgeons, 2,050,000 surgical cases
- 1.1 million MRI and CT scans

Results

90% of Cataract Surgeries Completed Within



Surgeons can track and assess patient queues

Wait Times Strategy

Better Access to Care

Wait Time Information System

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Selected profile: OGH - Dr. Cedric F ...

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My Waitlist Entries

All Surgery/Service Approaching Access Target

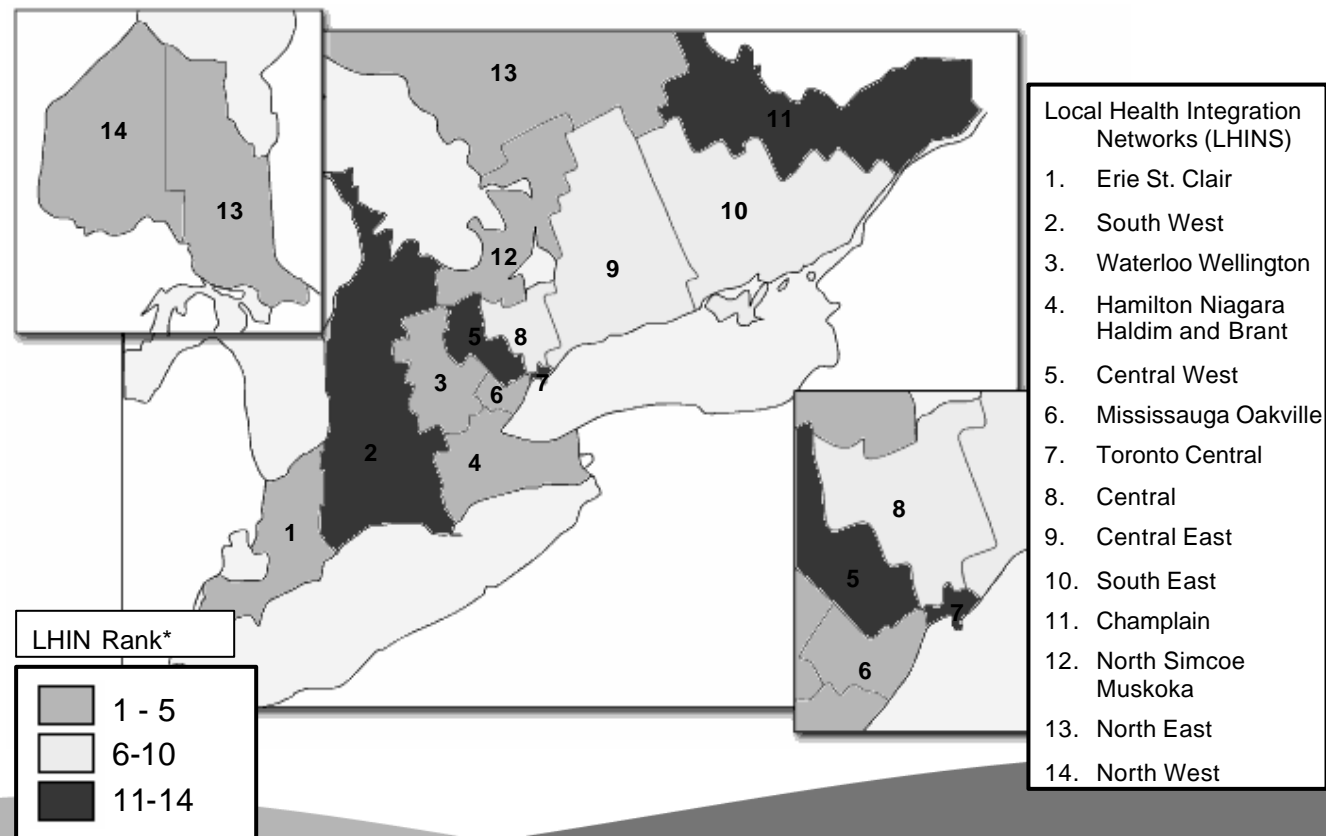
Patient Name	Service	Site	Healthcare Professional	Priority	Status	Access Target (Days)	Total Wait (Days)	Variance (Days)	NA
Todd, Lucas Patrick	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	152	(138)	
Boysen, Avery	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	149	(135)	
Mayberry, Tristan Liam	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	146	(132)	
Alinger, Cameron Ben	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	143	(129)	
Horkan, Brooke Jada	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	140	(126)	
Atcock, Sebastian Julian	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	137	(123)	
Sturm, Connor Mason	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	134	(120)	
Ehler, Gavin Xavier	Oncology Procedures - Skin - Melanoma, Diagnostic	East Community Hospital	Lejeune, Cedric Felix (34567)	2	Open	14	131	(117)	
Looney, Mia	Oncology Procedures -	East Community	Lejeune, Cedric						

WWTIS116		Patients on Surgical Wait List by Surgeon			Run Date: 2006-08-15	
Facility: Facility1					Run Time: 3:58pm	
Site(s): Site1, Site2						
As Of Date: 2006-04-01						
Facility	Site	Service Area	Service Detail 1	Surgeon Name	No. Of Patients on Wait List	
Facility1	Site1	Hip & Knee	Hip	Surgeon A	26	
				Surgeon B	29	
				Surgeon C	31	
				Surgeon D	25	
			Subtotal		111	
			Knee	Surgeon A	23	
				Surgeon B	26	
				Surgeon C	29	
				Surgeon D	22	
			Subtotal		100	
		Total			211	
		Cataract	Cataract Bilateral	Surgeon A	26	
				Surgeon B	29	
				Surgeon C	32	
				Surgeon D	28	
			Subtotal		115	
			Cataract Left Eye	Surgeon A	19	
				Surgeon B	27	
				Surgeon C	29	
				Surgeon D	32	
			Subtotal		107	
			Cataract Right Eye	Surgeon A	19	
				Surgeon B	27	
				Surgeon C	29	
				Surgeon D	32	
			Subtotal		107	
		Total			329	

Hospitals/chiefs monitor detailed wait lists.

Government has a more detailed understanding of regional differences to target improvement efforts

Cancer Surgery 90 % Completed Within June/July '06













































*(1 = shortest wait time, 14 = longest wait time)

Patients using information to decide about care

Public/media can hold government to account

Public information is engendering competition and innovation

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CANCER SURGERY Summary			
Oct - Nov 06			
Hospital Name	Wait times (days)	Average Wait Time (days)	Median Wait Time (days)
View All Ontario (Hospital Reporting: 45 of 68)	78 	35 	22 
Hamilton Niagara Haldimand Brant (HNHB)	81 	34 	22 
Niagara Health System (Niagara)	43 	22 	17 
Hamilton Health Sciences Corporation (Hamilton)	50 	28 	21 
The Brantford General Hospital (Brantford)	76 	33 	22 
Joseph Brant Memorial Hospital (Burlington)	90 	41 	30 
St. Joseph's Healthcare Hamilton (Hamilton)	97 	43 	27 
Hamilton Niagara Haldimand Brant (HNHB)			
Oct - Nov 06			
Hospital Name	Wait times (days)	Average Wait Time (days)	Median Wait Time (days)
CANCER SURGERY Bone, Joint and Muscle Cancers For All Of Ontario	48 	23 	14 
Hamilton Niagara Haldimand Brant (HNHB) LHIN	127 	41 	29 
Hamilton Health Sciences Corporation (Hamilton)	127 	49 	29 
Niagara Health System (Niagara)	NV 	NV 	NV 
The Brantford General Hospital (Brantford)	NV 	NV 	NV 
St. Joseph's Healthcare Hamilton (Hamilton)	NV 	NV 	NV 
Joseph Brant Memorial Hospital (Burlington)	NV 	NV 	NV 
View shortest wait times in the province for this service			

Next?

- Build out piece by piece to reflect and help clinicians, administrators, patients and their families navigate through the **whole** system
 - All Surgery
 - Wait 1
- Continue bottom up and pan-canadian collaboration
 - Ontario and the Western Health Information Collaborative leading this effort
 - Critical mass requires greater structure, support and investment
- Leverage current investments, and advocate for more
 - Broad transformation effects have significant benefit

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