

Backgrounder

Report of the Wait Time Monitoring Project Steering Committee

January 2004

Co-Chair: Mary McKeen, Former Acting Chief Information Officer, Department of Health

Co-Chair: Dr. Mike MacKenzie, Chief of Staff, Guysborough Antigonish Strait Health Authority

- In its plan, *Your Health Matters: Working Together Toward Better Care* (2003), the Province of Nova Scotia identified shortening wait times for tests, treatment, and care as one of its key priorities. Getting standardized information is the first step in this process. The Provincial Wait Time Monitoring Project Steering Committee was formed to look at ways to standardize wait-time information across the province.
- The Steering Committee consists of a mix of physicians and senior health administrators from across the province and staff of the Department of Health. The Steering Committee focused on three main areas: surgical services with a beginning focus on orthopedic services; diagnostics with a beginning focus on MRI/CT scans and genetic services; and referrals for consultation from general practitioner to specialist (medical oncology, plastic surgery and gastroenterology).
- The Committee first met in June 2003 and submitted its first set of recommendations to the Deputy Minister in January 2004. The recommendations deal with the definition of a wait time, the priority rating tool to be used to determine the urgency of each case, the priority bands for grouping cases by their degree of urgency, target wait times for each priority band, and a method for data collection.
- Wait time definitions recommended are specific to the particular service; for example, the wait time definition recommended for diagnostic services begins when the requisition arrives in the diagnostic imaging department and ends when the patient has received their scan. The recommended wait time definition for surgery begins when the patient and the surgeon agree that surgery is required and ends when the surgery has been completed.
- Also recommended were ways to collect and report the data across the province. These recommendations include reporting the information to the public by district health authority; by high volume procedure in the case of orthopedics, and by facility in the case of MRI/CT scans.
- The next report from the Steering Committee (spring 2004) will provide advice on the implementation of those recommendations endorsed by the department.