

Queue, queue, queue for care

If the experiences of readers of medical journalism were to mirror those of patients in Canada's health care system, you might have to wait 6–12 months before you could read this article. Of course, if you just want something to read in the waiting room when your appointment eventually rolls around, then no worries.

With the exception of a few targeted procedures, medical wait times in Canada remain lengthy, according to two reports released Nov. 29 by the Canadian Institute for Health Information (CIHI).

In international comparisons, Canada is a bottom-dweller with respect to wait times, and the problem will only get worse in some areas. No matter the setting — whether you need to visit a family doctor, receive care in an emergency department or enter a long-term care facility — patients in Canada receive the same message as commuters on a road under construction: expect delays.

“Across the board, Canadian waiting times are longer compared to those in other countries,” says Kathleen Morris, director of health system analysis and emerging issues at CIHI.

Though talk of delays is generally found in discussions about access to surgeries and diagnostic imaging, considerable attention is turning to the wait times for people in hospitals who no longer require acute care services but are waiting for access to alternative forms of care, such as home or resident care.

The time they spend unnecessarily in hospital beds are called ALC (alternate level of care) days. With the percentage of seniors in Canada projected to grow from 15% of the population to 25% by 2036, these delays are expected to become a bigger and very expensive problem, according to a CIHI's report, *Seniors and Alternate Level of Care: Building on Our Knowledge*, which explores the delays patients experience in accessing home and residential care (https://secure.cihi.ca/free_products/ALC_AIB_EN.pdf).



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“We know that, on any given day, 5% of acute care hospital beds are filled with patients waiting for a different kind of care,” says Morris.

Slightly more than half of seniors who wait in hospitals for alternate care are admitted to residential care facilities with an average wait time of 26 days. Wait times are generally longer for patients with dementia or other challenging behaviours.

“They may require a higher level of security or safety, or a setting where they can manage behaviours,” Natalie Damiano, manager of home and continuing care data management at CIHI, says, adding that “there has been a huge, growing interest over the past decade in collecting standardized information in home care and long-term care settings.”

Though most patients who end up in residential care have ALC days, that's true for only about one in six released to home care. Of those, the average wait time before being discharged into home care is a week. In general, those with complex medical problems wait longer, and those with strong support networks are discharged sooner.

A better understanding of the types of people who experience delays transitioning out of hospitals will enable clinicians to identify them quicker, Damiano says. “If we understand the factors associated, we can start our discharge planning as soon as a person arrives in acute care.”

For routine care, wait times are also increasing. In 2004, a quarter of Canadians waited six days or longer to see a family doctor or nurse when sick, and that increased to 33% of patients by 2010, according to the second report released by CIHI, *Health Care in Canada 2012: A Focus on Wait Times* (https://secure.cihi.ca/free_products/HIC2012-FullReport-EN_web.pdf). That puts Canada dead last in a comparison with 10 other countries (www.commonwealthfund.org/~media/Files/Publications/In%20the%20Literature/2010/Nov/Int%20Survey/PDF_2010_IHP_Survey_Chartpack_FINAL_white_bkgd_111610_ds.pdf).

Because visits to family physicians don't necessarily involve pressing health matters, though, only 15% of Canadians report that wait times in this area are unacceptable. “But that

doubles when you talk about a wait for a specialist visit,” notes Morris.

Canada also performs poorly in providing access to specialists, with 41% of patients having to wait two months or longer, again pulling up the rear in the international comparison.

The country doesn’t do any better in getting people through its emergency departments in a timely fashion, with 31% of patients waiting four or more hours for treatment. Guess where that ranks Canada in the international comparison? Hint: last.

One reason emergency departments

have such long delays, the report notes, is that so many Canadians visit them. In a two-year period, 44% of Canadians made at least one visit. The next highest rate, 37%, was in the United States, with Germany and the Switzerland, tied at 22%, enjoying the quietest emergency rooms.

“When Canadians feel that they need medical advice, about half say they are unable to get it on the same day or next day from a family doctor,” says Morris. “Seeing as how they believe they need medical advice, they go to the emergency department.”

The only procedures for which Canada can boast about reducing wait times are the five designated priority areas that were targeted for reduction under Canada’s 2004 Health Accord, i.e., cancer care, cardiac care, diagnostic imaging, joint replacement and sight restoration. Currently, about 80% of patients waiting for procedures in these areas receive them within the benchmark times established under the inter-governmental agreement. — Roger Collier, *CMAJ*

CMAJ 2013. DOI:10.1503/cmaj.109-4365