

Waiting for health care services:

The views and experiences of Canadian patients

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The Context.....

- In 2000, provincial Ministers of Health across Canada agreed to report on a set of nationally comparable indicators to monitor the performance of the health care system.
 - Waiting times for selected health care services
- Soon realized that there was a lack of standardized and comparable data on waiting times



Filling the information gap....

- Is waiting for care an issue?
- How long do patients wait for specialized services?
- What are the views and experiences of those who waited for care?
 - Acceptability of waiting times
 - Burden of waiting for care



Health Services Access Survey 2001 (HSAS)

- First national study designed to collect comprehensive and comparable information on access to health care services, specifically waiting times;
- Cross-sectional providing national level estimates
 - Provincial level estimates for 3 “buy-in” provinces (PEI, Alberta, BC)
- Sample:
 - Sub-sample of respondents from the Canadian Community Health Survey (15+ yrs)
 - n=14,210



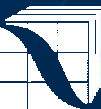
HSAS 2001

- First contact services:
 - Health information and advice
 - Routine care
 - Immediate care for a minor health problem
- Specialized services:
 - Specialist visits for a new illness or condition
 - Non-emergency surgery
 - Diagnostic tests (MRIs, CT Scans, angiographies)



HSAS 2001

- Standard Definitions for wait times:
 - Specialist visits: "...time between when you and your doctor decided you should see a specialist and the day of the specialist visit"
 - Non-emergency surgery: "...time between when you and your doctor decided to go ahead with the surgery and the day of surgery"



Is waiting for care an issue?



Waiting reported as #1 reason for unmet needs for health care services

Table 10

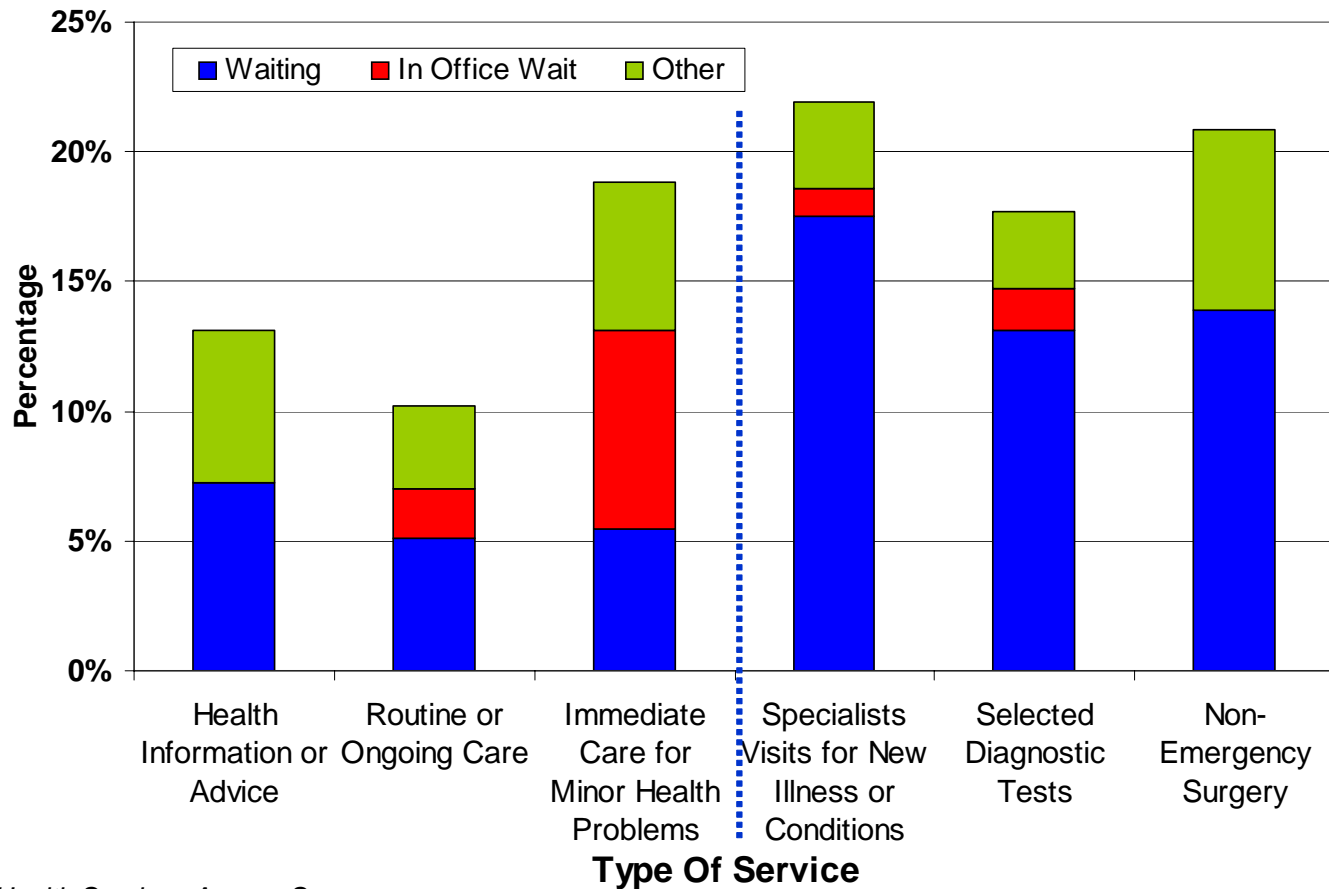
Reasons for self-reported unmet needs for health care services, Canada, 2001

	%	95% confidence interval	
Waiting time too long	49.4	42.1,	56.7
Service not available when needed	23.3	15.8,	30.8
Service not available in the area	13.3	9.4,	17.2
Felt service would be inadequate	7.5	5.1,	9.8
Cost	..	..	..
Didn't get around to it or didn't bother	3.1 ^E	1.3,	4.9
Too busy	3.7 ^E	1.7,	5.7
Didn't know where to go	1.4 ^E	0.6,	2.3
Transportation problems	..	..	..
Personal or family responsibilities	..	..	..
Language problems	..	..	..
Dislikes physicians or afraid	2.2 ^E	0.8,	3.6
Decided not to seek care	..	..	..
Other	15.9 ^F	9.6,	22.2

Data source: Statistics Canada, Health Services Access Survey 2001



Proportion of Canadians Reporting Difficulty Accessing Health Care Services, 2000-2001



Source: Health Services Access Survey



Statistics Canada
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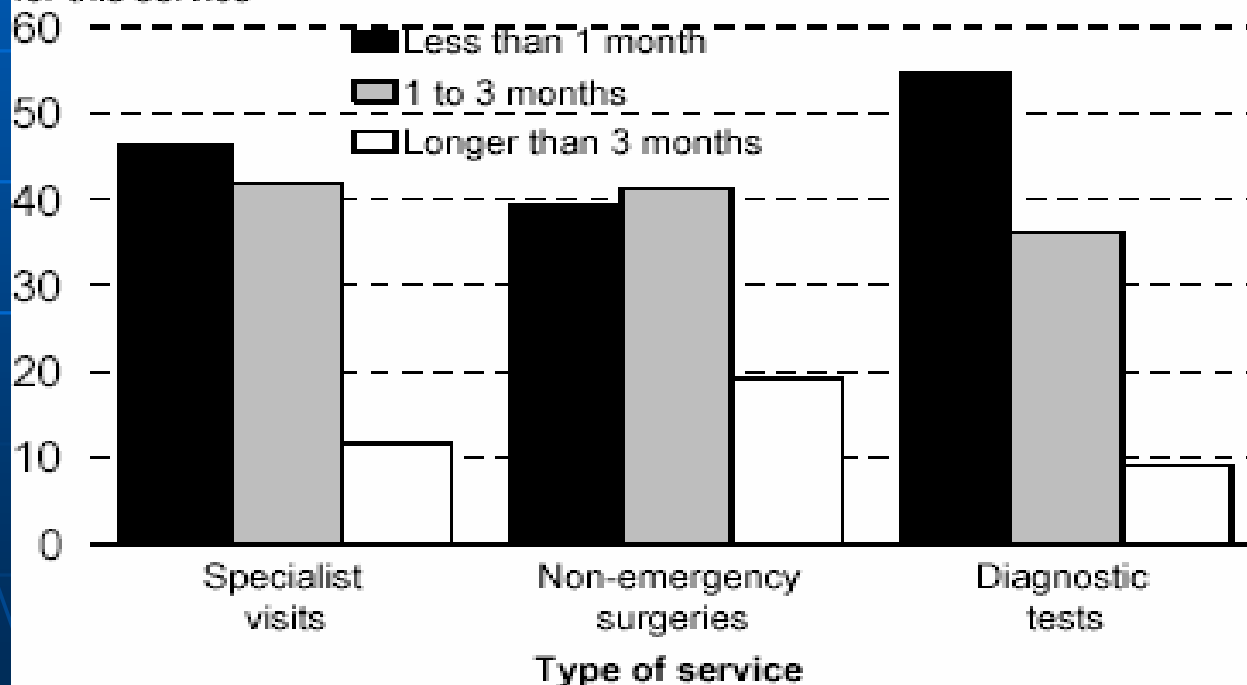
How long do patients wait for specialized services?



Most reported waiting times less than 3 months for specialized services

Chart 8
Distribution of waiting times for specialized services†, Canada, 2001

% of those who waited
for this service



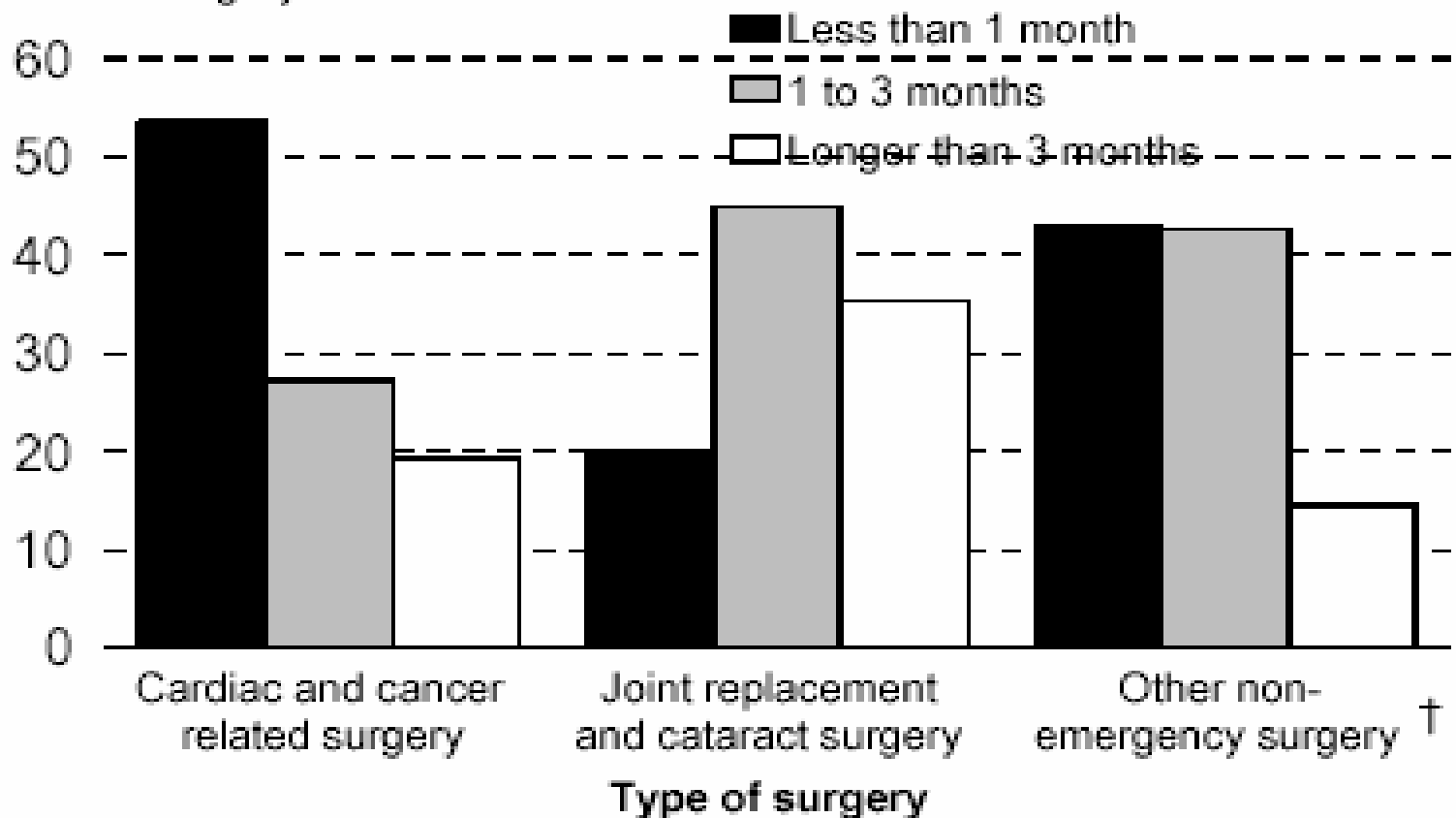
Data source: Statistics Canada, Health Services Access Survey 2001



Chart 9

Distribution of waiting times by type of non-emergency surgery, Canada, 2001

% of those who waited for this surgery



Data source: Statistics Canada, Health Services Access Survey 2001

10% waited longer than 1 year for non-emergency surgery

Waiting times at selected percentiles for specialized services[†], Canada, 2001

	Specialist visits		Non-emergency surgeries	
		95% confidence interval		95% confidence interval
50th percentile (Median waiting time)				
Time (weeks)	4.3	3.8, 4.7	4.3	2.9, 5.7
# of individuals with waiting time ≥ percentile ('000)	1,945	1,711 - 2,179	571	467 - 676
75th percentile				
Time (weeks)	8.6	7.0, 10.2	13.0	10.4, 15.6
# of individuals with waiting time ≥ percentile ('000)	1,609	1,394 - 1,824	332	248 - 416
90th percentile				
Time (weeks)	17.3	14.1, 20.5	26.0	20.0, 32.0
# of individuals with waiting time ≥ percentile ('000)	559	436 - 682	117 ^E	69 - 164
95th percentile				
Time (weeks)	26.0	25.1, 26.9	34.7 ^E	18.7, 50.7
# of individuals with waiting time ≥ percentile ('000)	346	251 - 440	68 ^E	27 - 108

Data source: Statistics Canada, Health Services Access Survey 2001

What are the views and experiences of those who waited for care?



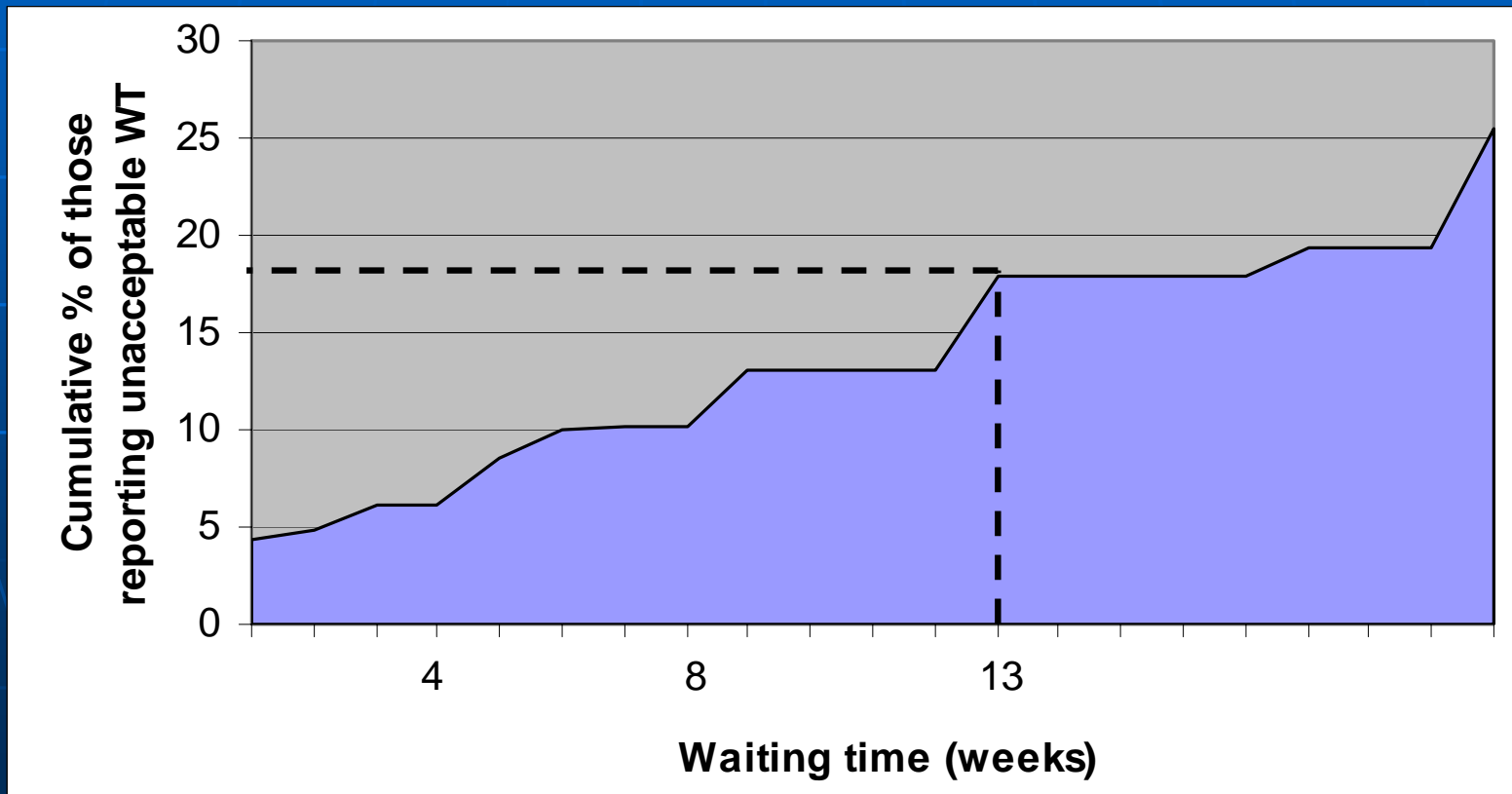
Were waiting times acceptable to those who waited?

■ Unacceptable waiting times

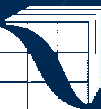
- Specialists visits : 26.7 %
- Non-emergency surgeries : 21.7 %
- Diagnostic tests : 25.3 %



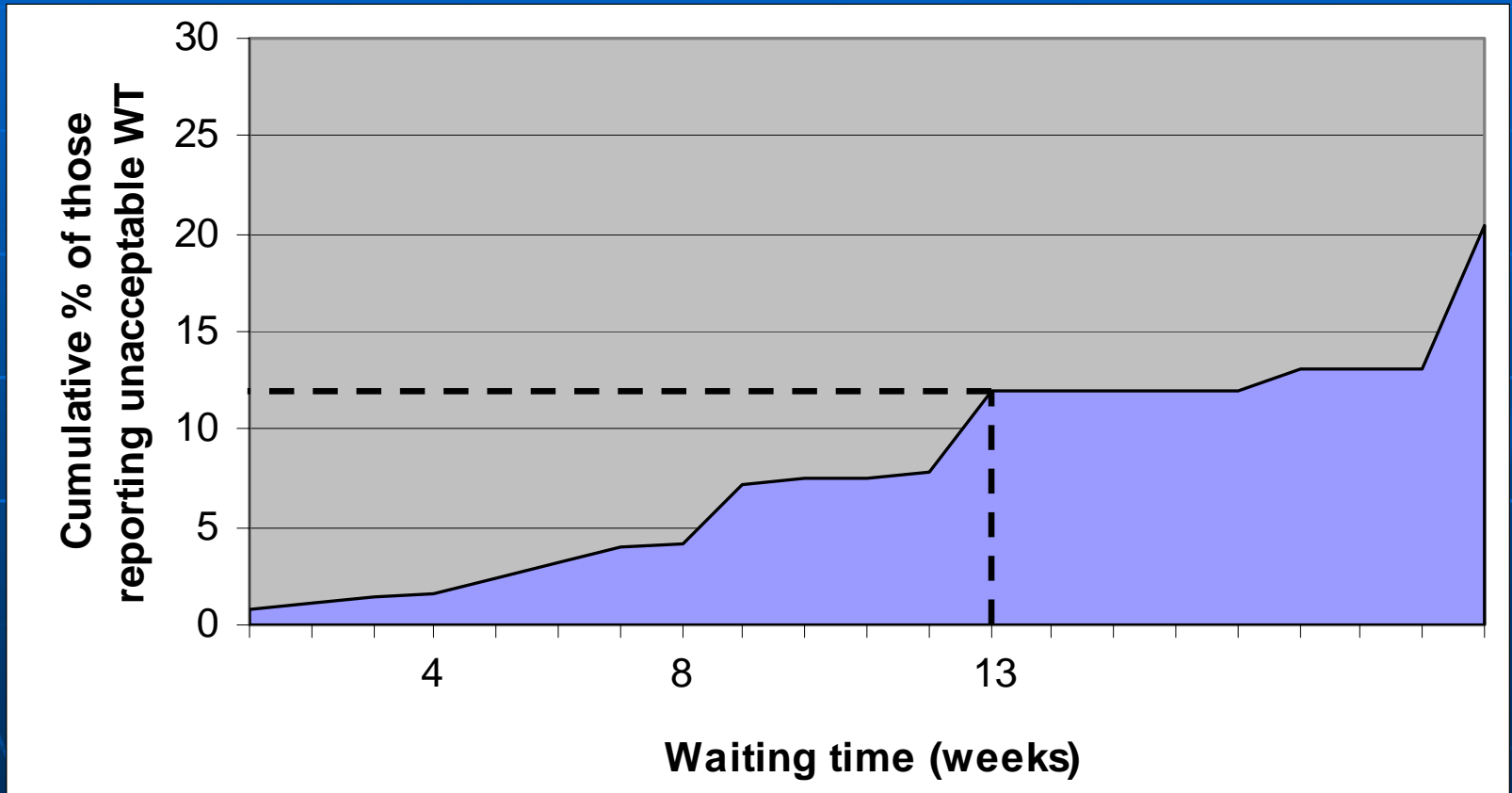
Unacceptable waits at all times but the thresholds differ: 18% with unacceptable waits at 3 months for diagnostic tests.....



Diagnostic tests



....compared to 11% with unacceptable waits at 3 months for non-emergency surgery



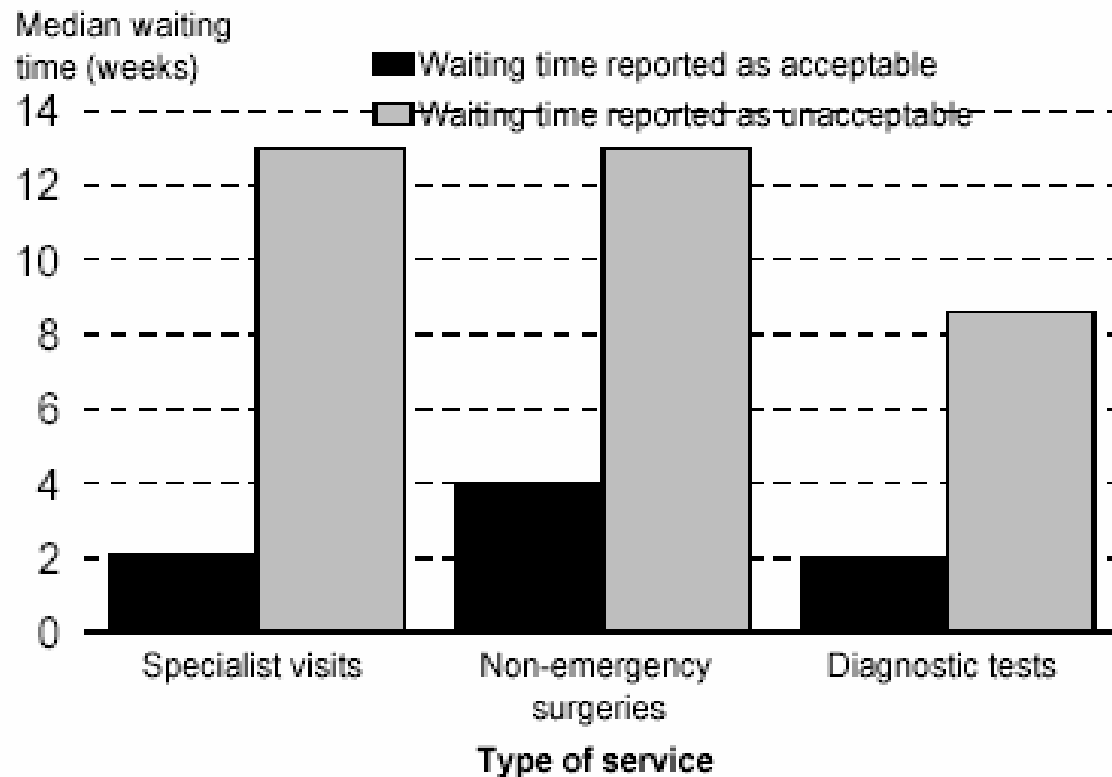
Non-emergency surgery



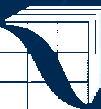
Those reporting “unacceptable” waiting times waited between three and six times longer

Chart 10

Median waiting times for specialized services† by reported acceptability, Canada, 2001



Data source: Statistics Canada, Health Services Access Survey 2001



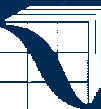
Burden of waiting for care

- Less than 20% of individuals who waited for specialized services reported that waiting for care affected their lives:
 - Worry, anxiety and stress
 - Pain
 - Diminished health status



Burden of waiting for care

- Individuals with unacceptable waiting times were more likely to indicate that waiting affected their lives:
 - Unacceptable waits: >50% indicated waiting affected their life
 - Acceptable waits: 5% indicated waiting affected their life

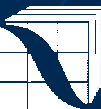


What are the significant
determinants of
unacceptable waits for
care?

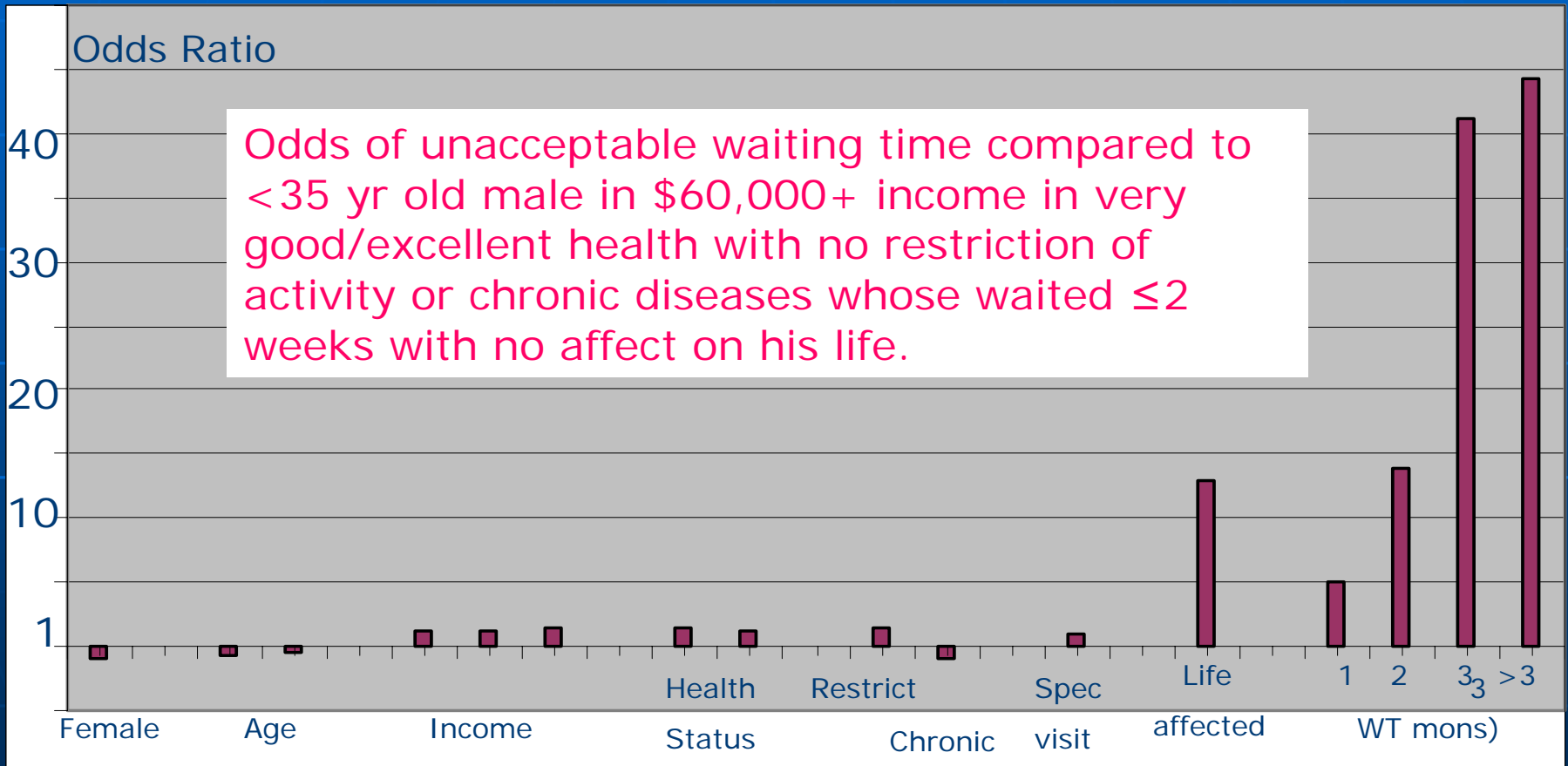


Determinants of Unacceptable Waits

- **Demographic characteristics:**
 - Age
 - Gender
 - Income
- **Socio-economic:**
 - Socio-economic
 - "Expectations"
- **Health status:**
 - Self-reported health status
 - Restriction of activity
 - Chronic conditions
- **Health system experiences:**
 - Specialist visits over past 12 months
- **Waiting time experiences:**
 - Length of waiting time
 - Waiting for care affected individuals life



Determinants of Unacceptable Waits: Specialist Visits

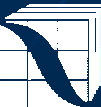
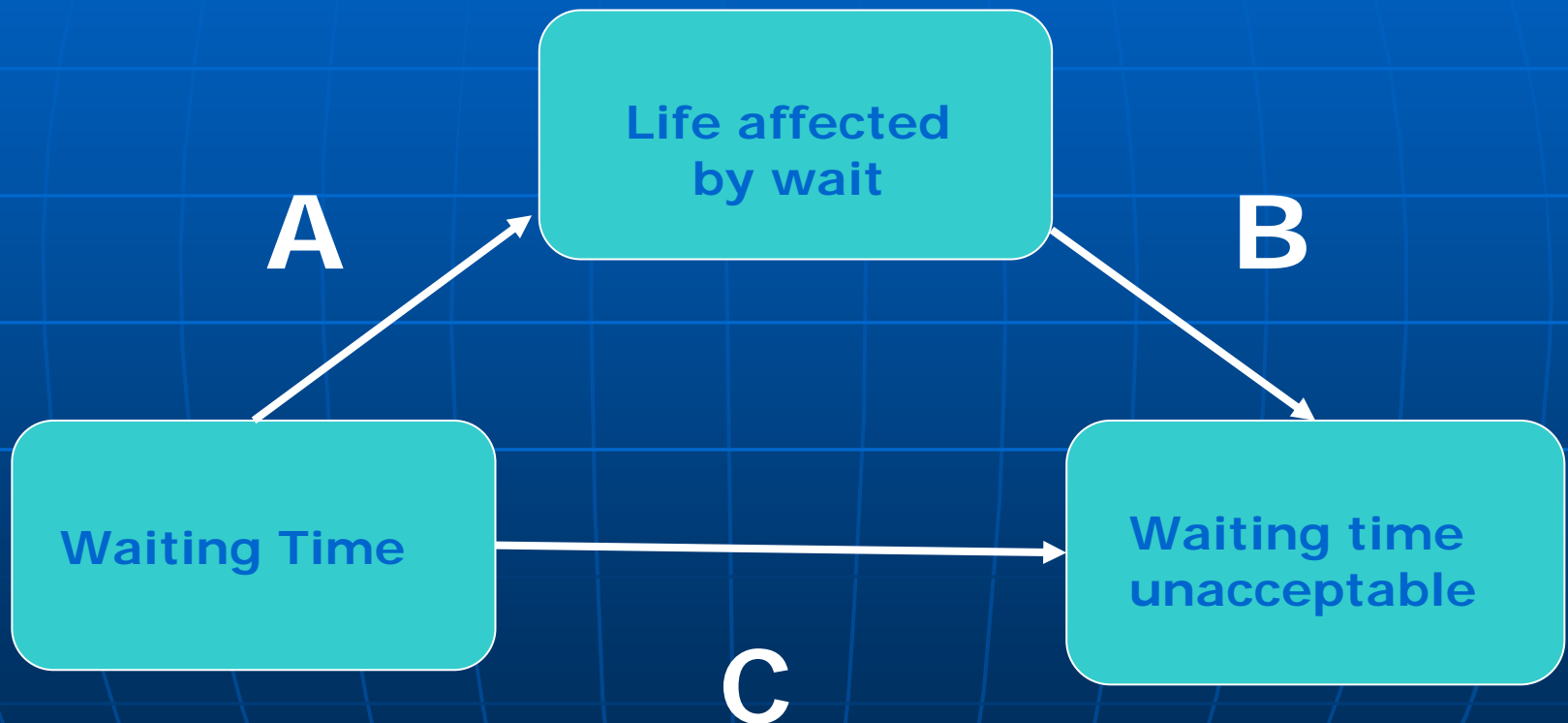


Determinants of Unacceptable Waits

- For all three specialized services:
 - Longer waiting times are associated with higher odds of reporting unacceptable waits
 - Life affected by waiting associated with higher odds of reporting unacceptable waits
 - Patient characteristics such as socio-economic status and health status did not significantly affect individuals' perception of the acceptability of their waits.

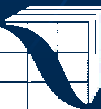


How do these determinants affected wait time acceptability



Results of SEM analysis

- For all three procedure groups:
 - There is both a significant direct and indirect effect of waiting on the acceptability of waiting times
 - Experiencing adverse effects due to waiting (Path B) had a greater impact on wait acceptability compared with the effects of waiting times (Path C and A) for all three procedure groups



Policy directions

- Unacceptable waits represent a level of burden of waiting for care
 - Management of waiting lists to minimize adverse effects
 - Patient prioritization (Western Canada Wait List Project)
 - Patient monitoring (Cardiac Care Network)
- Unacceptable waits represent unmet expectations
 - Address the issue of patient expectations
 - Provincial initiatives to establish standards for maximum acceptable waiting times



Benefits of the HSAS

- Standard and comparable measures of waiting times
- Sense of the magnitude of the “problem” of waiting for care relative to other potential barriers
- Patients’ views and experiences regarding waiting for care
 - Acceptability
 - Burden of waiting



Health Services Access Survey II

- Collected as part of the Canadian Community Health Survey (CCHS) 2.1
 - Sample size approximately 30,000
- Collection completed
- Release date:
 - CCHS: Mid June 2004
 - HSAS II: End of June 2004



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