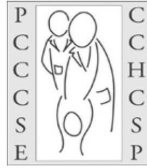


National Child and Youth Health Coalition



Council of Canadian
Child Health Research
(CCCHR)



Paediatric
Chairs of
Canada



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“Children Wait Too”

National Paediatric Surgical Wait Times Strategy

Executive Summary

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National Paediatric Surgical Wait Times Strategy

Executive Summary

Call to Action on Paediatric Surgical Wait Times

In 2004, Statistics Canada reported that 29% of Canadians who accessed specialized care reported they had to wait too long to receive service. In response to public expectations of shorter wait times and better access to health care, the Federal and provincial governments signed the First Ministers Health Accord in September 2004 and established a \$5.5 billion Wait Time Reduction Fund. The primary objective of the agreement was to reduce wait times in five priority areas – cancer, cardiac procedures, joint replacement, sight restoration and diagnostic imaging – by December 2007.

The newly elected Federal government further committed to working with the provinces to implement a ‘Patient Wait Times Guarantee’ whereby all Canadians would receive essential medical treatment within clinically acceptable wait times either within or outside their jurisdiction as required by the Supreme Court of Canada’s *Chaoulli* decision and the Canadian Charter of Rights and Freedoms.

While not excluded from this “critical to care” proposal the Accord was silent on the specific and unique needs of children: Children’s wait list problems are not addressed by the five *adult oriented* priorities outlined in the Accord.

The Impact of Wait Times

The impact of lengthy waits for medical procedures for any patient can result in unnecessary and deleterious effects on health and quality of life. Prolonged pain, disability, emotional distress, health complications, personal economic hardship, and increased health costs are all affected by the lack of timely access to health care.

For children, failure to provide timely service can have even more serious outcomes. Many surgical procedures must be performed during critical developmental periods to avoid long-term irreversible outcomes. For example, some eye procedures must be performed at specific times to ensure the child’s optimal brain development. In such instances, provision of surgery within that developmental “window of opportunity” is critical to both the child’s ability to function and his/her ultimate quality of life.

Learning, behavior and social development can be significantly impacted if a child does not receive timely access to surgery. The impact of a delay extends beyond the young patient, creating undue stress and hardship on families.

Addressing the Unique Surgical Wait Time Needs of Canada's Children

In November 2005, Dr. Brian Postl, Special Adviser on Wait Times to the Prime Minister, encouraged the National Child and Youth Coalition (NCYHC) to lead the development of a national paediatric surgical wait times strategy.

The National Child and Youth Health Coalition, a collaboration of four organizations representing all children's hospitals within the paediatric academic health sciences centres (PAHSCs) across Canada, all paediatric research institutes across Canada, all Departments of Paediatrics and the Canadian Child Health Clinician Scientist Program, joined with the Paediatric Surgical Chiefs of Canada to develop a national strategy.

On February 24th, 2006, surgical chiefs and senior administrators from all the PAHSCs in Canada attended a Consensus Building Workshop in Ottawa to develop a National Paediatric Surgical Wait Times Strategy for Canada's children and youth. The need for a national strategy was enthusiastically endorsed by all, with unanimous consensus on all the key components of the strategy.

Key Components of the the NCYHC Paediatric Surgical Wait Times Strategy

The NCYHC Paediatric Surgical Wait Times Strategy builds on the collective work of provincial groups across Canada and is fashioned after the model developed by the Ontario Children's Health Network (OCHN).

The key components of the Strategy are:

- The development of national access targets for ten paediatric subspecialties
- The determination of the current wait time "burden" i.e. the number of children across Canada who are not receiving care within the established access targets
- The development of strategies to optimally manage wait times
- The assessment of the system's capacity to provide timely care and
- The development of resource allocation recommendations

A number of guiding principles were put forward by the group:

- *The Children's Strategy* aims at making system – wide changes for the betterment of surgical services for children and their families
- *The Children's Strategy* will be designed to complement and leverage the adult wait time strategy
- *The Paediatric Surgical Wait Times Strategy* will serve as a model for evaluating and addressing wait times in non-surgical specialties for Canada's children and youth

To these ends:

- *The Children's Strategy* must be recognized as part of *The National Wait Times Strategy* in its April 2006 announcement and in all federal-provincial-territorial work going forward
- Provincial and territorial governments must be engaged to ensure successful adoption and implementation of *The Children's Strategy*

- Funds must be obtained to support the initiative
- A communication strategy is essential to keep stakeholders (governments, professional organizations, partner organizations – (e.g. Canadian Institute for Health Information, Canadian Council on Health Service Accreditation) apprised of *The Children's Strategy*, its development and outcomes
- IT solutions need to be pursued for data collection, management and wait list optimization
- A system approach to evaluating the intended and unintended outcomes of *The Children's Strategy* needs to be adopted

The National Paediatric Surgical Wait Times Strategy will Make a Difference

The Canadian populace would be surprised to learn that the children and youth of Canada, like their adult counterparts, encounter significant barriers to timely health care. There is a common myth that the needs of children are always first and always met. But the reality of the situation is different and we must act now on the behalf of Canada's children and youth.

The Federal government has recognized the unique needs of young Canadians by inviting the National Child and Youth Health Coalition to develop a National Paediatric Surgical Wait Times Strategy. The Coalition and its partners have responded with enthusiasm and a deep commitment to make a difference for the health of our children.