

\*Selected, quality filtered, not subject to external review

<u>Issue</u>: The VA National Director for Surgery asked the VA Technology Assessment Program (VATAP) to obtain international benchmarks on wait times for primary hip and knee replacement to supplement a response to an inquiry from the VA Office of the Inspector General (OIG). VA may consider implementing relevant performance measures in an effort to improve access to and quality of care.

<u>Methods</u>: To meet the immediate information needs of their client, VATAP queried members of the International Network of Agencies for Health Technology Assessment electronically via listserv (INAHTA; <u>www.inahta.org</u>) on February 16, 2006 for specific health system standards or benchmarks for wait times for primary hip and knee replacement. Formal literature searches would be undertaken, pending the responses from INAHTA members.

**Results**: Thirteen responses were received. Since recent, high quality evidence reviews were included in the responses, VATAP did not undertake a formal literature search or analysis.

Several INAHTA members reported substantial activity on the part of their health systems to address the length and variability in wait times for specialized surgical procedures. Responses consisted of explicit benchmarks for their health system (see Table 1), Internet resources of recently completed evidence reviews and ongoing monitoring of wait times for specialized surgical procedures including joint arthroplasty, and funded research in progress (see bibliography; evidence reviews highlighted in **BOLD**).

Among the most comprehensive evidence reviews provided on the subject is a report by Noteworthy (2005) on behalf of the Western Canada Waiting List Project, in which the author summarized evidence from published literature, grey literature and interviews with Canadian provinces and countries of interest on wait time benchmarks used for joint replacement and the processes used to derive these measures<sup>1</sup>. Key findings are as follows:

- Consistent benchmarks of not greater than 6 months from special assessment to surgery are most prevalent.
  - o The majority of wait time benchmarks developed internationally applies to all surgical procedures, including joint replacement surgery; benchmarks range from 3-12 months.
- International benchmarks are based primarily on clinical input and experience from other jurisdictions.
  - In the UK and Sweden, where benchmarks have been established for some time, evaluation of their own wait time benchmarks was used to inform standards for their jurisdictions.
  - Limited evidence on the impact of waiting or information from patients or general public exists to inform such decisions. Only Sweden used the information in their process of formulating benchmarks.
  - o In Canada, proposed benchmarks have been based more on literature reviews and international experiences, but still with a fair amount of clinical input.

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<sup>&</sup>lt;sup>1</sup> Towards Establishing Evidence-Based Benchmarks for Acceptable Waiting Times for Joint Replacement Surgery – Report #2 October 2005. <a href="http://www.wcwl.ca/media/pdf/library/cihr\_synthesis\_reports.2.pdf">http://www.wcwl.ca/media/pdf/library/cihr\_synthesis\_reports.2.pdf</a> accessed March 3, 2006.



 The processes used to derive waiting time benchmarks internationally are generally not well described. Information to date suggests that consensus involving a range of stakeholders has been used in most cases.

Table 1. Specific benchmarks for elective hip and knee replacement reported by INAHTA members

Jurisdiction	Benchmark	Information source
Canadian provinces and territories	26 weeks for each procedure	Health Council of Canada <sup>2</sup>
Denmark	In Denmark since 2003 elective admissions are guaranteed within 2 months, to be shortened to 1 month in 2006. If public hospitals cannot admit a given patient within the guarantee period, the public health services shall pay for service in a private clinic / hospital. A public website allows citizens and caregivers to check waiting times in all hospitals.	Danish Centre for Evaluation and HTA (DACEHTA)
Israel	Hip replacement within 2-3 days Knee replacement within a few days	Israel Center for Technology Assessment in Health Care (ICTAHC)
Norway	Between one and 40 weeks for hip replacement Between one and 56 weeks for knee replacement	Norwegian Knowledge Centre for the Health Services (NOKC)
Scotland	6 months, to be reduced to 18 weeks by the end of 2007	NHS Quality Improvement Scotland (NHSQIS)
Spain	Maximum waiting times across Spanish autonomous communities range from 30-180 days (180 days in most) In Catalonia only: Hip replacement = 180 days Knee replacement = 360 days in 2006 to be reduced to 180 days in 2007	Catalan Agency for HTA (CAHTA)
Spain (Basque province only)	Maximum 6 months for procedures Waiting lists are continuously analyzed in order to optimize them, and they have indicators and standards for hospital stays, complication rates, second replacement, etc.	Basque Office for HTA (OSTEBA)
Sweden	90 days for each procedure	Swedish Council on Technology Assessment in Health Care (SBU)
Switzerland	None (wait times not an issue yet)	Medical Technology Unit, Swiss Federal Office of Public Health (MTU/SFOPH)

<sup>&</sup>lt;sup>2</sup> Health Council of Canada Annual Report 2006. <u>http://www.healthcouncilcanada.ca/en/index.php?option=com\_content&task=view&id=70&Itemid=72</u> See Table 7. accessed March 3, 2006.



<u>Conclusions:</u> The results from the international community, including those of INAHTA members, can best be summed up by the following passage from a report by the Canadian Wait Time Alliance for Timely Access to Health Care (August 2005)<sup>3</sup>:

"Several countries have adopted generalized benchmarks and targets that cut across treatment areas. Australia, Denmark, the Netherlands, New Zealand, Spain, Sweden and the United Kingdom have taken this approach, which, by definition, is more arbitrary than the evidence-based, procedure-specific benchmarking approach that Canada is adopting. Some countries, including Italy, New Zealand and the United Kingdom, have also established procedure-specific benchmarks and targets. The enforceability of benchmarks and targets varies from one country to another, with some providing an outright guarantee of service with recourse for patients if the guaranteed wait time is not achieved, while others take a more flexible approach aimed at improving system performance through changes in incentives and system design."

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<sup>&</sup>lt;sup>3</sup> Achieving benchmarks and best practices in wait time management. Canadian Wait Time Alliance. December 2005. <a href="http://www.cma.ca/multimedia/CMA/Content Images/Inside cma/Media Release/pdf/2005/wta-final.pdf">http://www.cma.ca/multimedia/CMA/Content Images/Inside cma/Media Release/pdf/2005/wta-final.pdf</a> accessed March 3, 2006.



## BIBLIOGRAPHY AND OTHER RELEVANT INFORMATION ON EVALUATION OF WAIT **TIMES**

Note: bolded references contain evidence-based reviews and international comparisons.

### **CANADA**

Canadian Institute of Health Research report. Priority Criteria for Hip and Knee Replacement: Addressing Health Service Wait Times July 2005.

http://www.plexia.ca/masri/Waiting%20Report%20I%20July%2021 Final .pdf

The Taming of the Queue: Wait Time Measurement, Monitoring and Management - Colloquium Report Canadian Policy Research Networks; 2005. http://www.cprn.org/en/doc.cfm?doc=588

The Taming of the Queue II: Wait Times Measurement, Monitoring and Management - Colloquium Report Canadian Policy Research Networks; 2005. http://www.cprn.org/en/doc.cfm?doc=1274

Health Council of Canada 2006 Annual Report.

http://www.healthcouncilcanada.ca/en/index.php?option=com\_content&task=view&id=70& Itemid=72 See Table 7.

10 steps to a common framework for reporting wait times (November 2005): http://healthcouncilcanada.ca/docs/papers/2005/WaitTimesEn.pdf

#### Background material:

http://healthcouncilcanada.ca.c9.previewyoursite.com/docs/papers/2005/BkgrdWaitTimesENG.pd

http://healthcouncilcanada.ca.c9.previewyoursite.com/docs/papers/2005/BenchmarksPrimer E.p. df

http://healthcouncilcanada.ca/docs/papers/2005/WaitTimesEn.pdf

http://healthcouncilcanada.ca/docs/rpts/2005/Accelerating Change HCC 2005.pdf

### Canadian Institute of Health Information (CIHI):

Waiting for Health Care in Canada: What We Know and What We Don't Know. (March 2006): http://secure.cihi.ca/cihiweb/dispPage.jsp?cw\_page=media\_07mar2006\_e

Wait time data for hip replacement 2002/3:

http://secure.cihi.ca/cihiweb/en/pub login prtwg OI 18b-OI e.html

Wait time data for knee replacement 2002/3:

http://secure.cihi.ca/cihiweb/en/pub login prtwg OI 19b-OI e.html

Canadian Wait Time Alliance (Canadian Medical Association & other specialty associations):

Interim report: No More Time to Wait:

http://www.cma.ca/multimedia/CMA/Content\_Images/Inside\_cma/Media\_Release/pdf/2005/no\_m ore\_wait.pdf

Further info: http://www.newswire.ca/en/releases/archive/December2005/12/c5919.html

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Final report: It's about time! Achieving benchmarks and best practices in wait time management. <a href="http://www.cma.ca/multimedia/CMA/Content\_Images/Inside\_cma/Media\_Release/pdf/2005/wta-final.pdf">http://www.cma.ca/multimedia/CMA/Content\_Images/Inside\_cma/Media\_Release/pdf/2005/wta-final.pdf</a>

Western Canada Waiting List Project; 2005. Available:

http://www.wcwl.org/media/pdf/news/moving\_forward/report.pdf

http://www.wcwl.ca/library/cihr synthesis reports/

Towards Establishing Evidence-Based Benchmarks for Acceptable Waiting Times for Joint Replacement Surgery – Report #1 July 2005

http://www.wcwl.ca/media/pdf/library/cihr\_synthesis\_reports.1.pdf

Towards Establishing Evidence-Based Benchmarks for Acceptable Waiting Times for Joint Replacement Surgery – Report #2 October 2005

http://www.wcwl.ca/media/pdf/library/cihr\_synthesis\_reports.2.pdf

Ontario Wait Times Reduction Strategy:

http://www.health.gov.on.ca/transformation/wait\_times/wt\_strategy.html

Report of the Total Hip & Knee Joint Replacement Expert Advisory Panel (2005). Available at: <a href="http://www.health.gov.on.ca/transformation/wait\_times/wt\_reports/hip\_knee\_ep\_report\_0905.pdf">http://www.health.gov.on.ca/transformation/wait\_times/wt\_reports/hip\_knee\_ep\_report\_0905.pdf</a>

Other Canadian provinces have posted their waiting lists on public web sites, for example:

http://www.healthservices.gov.bc.ca/waitlist/

http://www.sasksurgery.ca/wait-list-info.htm

http://www.sasksurgery.ca/specialty/orthopaedic/orthopaedic-6.htm#table

http://www.ahw.gov.ab.ca/waitlist/WaitListPublicHome.jsp

#### General material:

Health Canada has appointed a Federal Advisor on Wait Times (Dr. Brian Postl): <a href="http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/2005/2005\_81bk1\_e.html">http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/2005/2005\_81bk1\_e.html</a>

"Wait watchers".weighing in on wait times initiatives across ACAHO members. Association of Canadian Academic Healthcare Organizations; 2005. Available: http://www.acaho.org/docs/pdf\_weight\_watchers\_final.pdf

IHSPR Research Spotlight health care wait times: <a href="www.cihr-irsc.gc.ca/ihspr.html">www.cihr-irsc.gc.ca/ihspr.html</a>.

#### **SCOTLAND**

Waiting times for treatment in the NHS in Scotland:

http://www.isdscotland.org/isd/info3.jsp?pContentID=3454&p applic=CCC&p service=Content.show&

### **NORWAY**

Public information is available for waiting times for a series of treatments and procedures, including total primary hip and knee replacement at the web site "hospital choice": <a href="https://www.sykehusvalg.no">www.sykehusvalg.no</a>

#### **SPAIN**

Ongoing research in Catalonia:

 Waiting lists management for surgical procedures in the National Health System Multicenter primary research project



Start date: January 2005

Objectives: To know the current situation on both the implicit and explicit criteria used for waiting lists management within the whole National Health System (NHS) is a required step before proposing a prioritisation system that ensures the equitable access to the delivery of health care. This project is financed by the CAHTA and the Health Care Research Fund (FIS, file number: PI04/90191).

Expected completion date: December 2005

CAHTA contact: Mireia Espallargues (<a href="mailto:mespallargues@aatrm.catsalut.net">mespallargues@aatrm.catsalut.net</a>)

2. Assessment of a waiting list patient prioritisation system for elective cataract and hip/knee arthroplasty surgery: utility and viability in clinical practice

Multicenter primary research project

Start date: July 2001 (Catalonia), January 2004 (Andalusia, Aragon, Canary Islands) Objectives: To assess the validity, reliability, feasibility and utilisation (effectiveness)of two linear point systems for the prioritisation of waiting lists in elective surgery (cataract and hip/knee arthroplasty) in primary care (waiting lists management).

Funded by: AATRM, FIS (file number PI03/1426), Canary Islands Foundation for Research and Health -FUNCIS- (file number 46/2003).

Expected completion date: December 2006

CAHTA contact: Mireia Espallargues (mespallargues@aatrm.catsalut.net)

3. Register of arthroplasties in Catalonia

Primary research project Start date: April 2004

Objective: To design and implement an arthroplasty register for the whole Catalonia. A future objective will be to collaborate with other Autonomous Communities in the development of their own arthroplasty registers. This will enable the creation of a common arthroplasty register. Funded by: CAHTA and CatSalut.

Requested by la Catalan Society of Orthopaedic Surgery and Traumatology and the CatSalut-Catalan Health Service.

Expected completion date: This is a research project for the implementation of a surveillance system, and therefore it will be a long-term work.

CAHTA contact: Mireia Espallargues (mespallargues@aatrm.catsalut.net)



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