

## **Waiting Your Turn**

Wait Times for Health Care in Canada, 2020 Report



**Bacchus Barua and Mackenzie Moir** 

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by Bacchus Barua and Mackenzie Moir

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## **Executive summary**

Waiting for treatment has become a defining characteristic of Canadian health care. In order to document the queues for visits to specialists and for diagnostic and surgical procedures in the country, the Fraser Institute has—for over two decades—surveyed specialist physicians across 12 specialties and 10 provinces.

This edition of *Waiting Your Turn* indicates that, overall, waiting times for medically necessary treatment have increased since last year. Specialist physicians surveyed report a median waiting time of 22.6 weeks between referral from a general practitioner and receipt of treatment—longer than the wait of 20.9 weeks reported in 2019. This year's wait time is the longest wait time recorded in this survey's history and is 143% longer than in 1993, when it was just 9.3 weeks.

There is a great deal of variation in the total waiting time faced by patients across the provinces. Ontario reports the shortest total wait—17.4 weeks—while Prince Edward Island reports the longest—46.5 weeks. There is also a great deal of variation among specialties. Patients wait longest between a GP referral and ophthalmic procedures (34.1 weeks), while those waiting for medical oncology begin treatment in 4.2 weeks.

The total wait time that patients face can be examined in two consecutive segments.

- 1 From referral by a general practitioner to consultation with a specialist. The waiting time in this segment increased from 10.1 weeks in 2019 to 10.5 weeks in 2020. This wait time is 184% longer than in 1993, when it was 3.7 weeks. The shortest waits for specialist consultations are in Quebec (7.9 weeks) while the longest occur in Prince Edward Island (27.2 weeks).
- 2 From the consultation with a specialist to the point at which the patient receives treatment. The waiting time in this segment increased from 10.8 weeks in 2019 to 12.1 weeks this year. This wait time is 116% longer than in 1993 when it was 5.6 weeks, and 4.3 weeks longer than what physicians consider to be clinically "reasonable" (7.8 weeks). The shortest specialist-to-treatment waits are found in Ontario (8.7 weeks), while the longest are in Nova Scotia (30.1 weeks).

It is estimated that, across the 10 provinces, the total number of procedures for which people are waiting in 2020 is 1,224,198. This means that, assuming that each person waits for only one procedure, 3.2% of Canadians are waiting for treatment in 2020. The proportion of the population waiting for treatment varies from a low of 1.97% in Quebec to a high of 9.97% in Nova Scotia. It is important to note that physicians report that only about 12.39% of their patients are on a waiting list because they requested a delay or postponement.

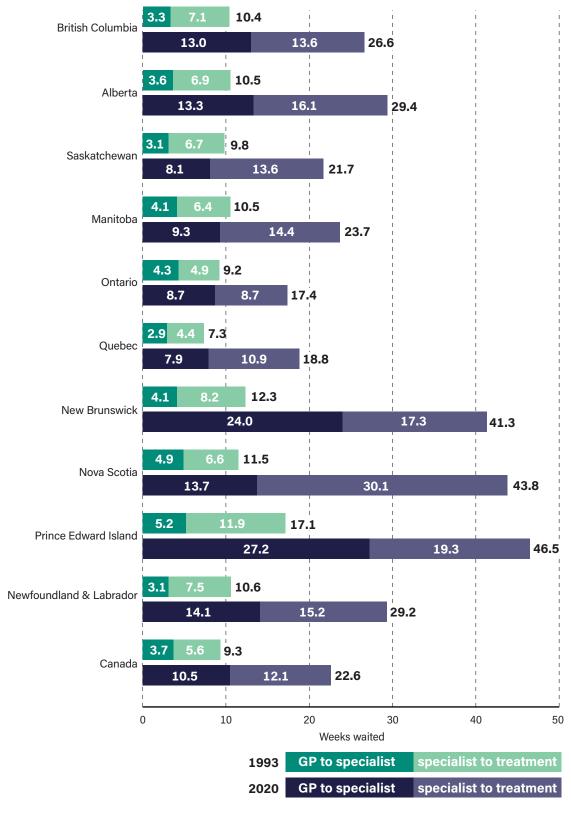
Patients also experience significant waiting times for various diagnostic technologies across the provinces. This year, Canadians could expect to wait 5.4 weeks for a computed tomography (CT) scan, 11.1 weeks for a magnetic resonance imaging (MRI) scan, and 3.5 weeks for an ultrasound.

Because of the difficulties in collecting data associated with the COVID-19 outbreak, the survey-collection window was extended in this edition of the report. Data were collected between January 7, 2020 and October 1, 2020. Despite this extension, this year's response rate was 11%, lower than in previous years. As a result, the findings in this report should be interpreted with caution.

Research has repeatedly indicated that wait times for medically necessary treatment are not benign inconveniences. Wait times can, and do, have serious consequences such as increased pain, suffering, and mental anguish. In certain instances, they can also result in poorer medical outcomes—transforming potentially reversible illnesses or injuries into chronic, irreversible conditions, or even permanent disabilities. In many instances, patients may also have to forgo their wages while they wait for treatment, resulting in an economic cost to the individuals themselves and the economy in general.

The results of this year's survey indicate that despite provincial strategies to reduce wait times and high levels of health expenditure, it is clear that patients in Canada continue to wait too long to receive medically necessary treatment.

#### Median wait from referral by GP to treatment, by province, 1993 and 2020



This publication has four series of illustrations and tabular material.

- Charts, which may be graphs or tables, will be found in the main text, pp. 1–18.
- Graphs will be found in "Selected graphs", pp. 19–32.
- Tables will be found in "Selected tables", pp. 33–57.
- "Appendix B: Psychiatry Waiting List Survey, 2020 Report", pp. 59–66, has tables and a graph labeled
   "B1" and so on.

## **Findings**

#### **Total wait times**

The Fraser Institute's twenty-ninth annual waiting list survey finds that wait times [1] for surgical and other therapeutic treatments increased in 2020 (table 2; chart 1). The total waiting time between referral from a general practitioner and delivery of medically necessary

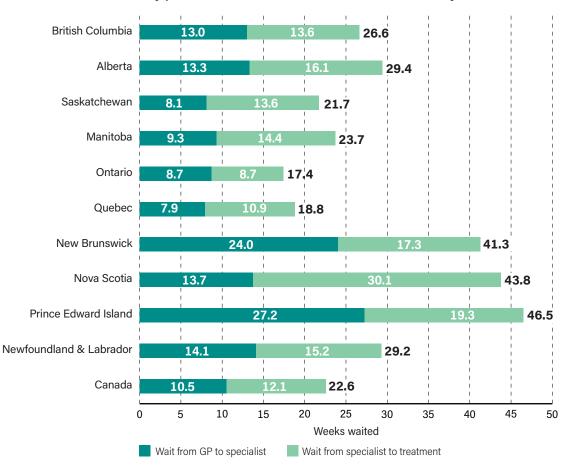


Chart 1: Median wait by province in 2020—weeks waited from referral by GP to treatment

Note: Totals may not equal the sum of subtotals due to rounding. Source: The Fraser Institute's national waiting list survey, 2020.

<sup>1.</sup> For an explanation of how Waiting Your Turn measures wait times, see the "Method" section.

elective treatment by a specialist, averaged across all 12 specialties and 10 provinces surveyed, has risen from 20.9 weeks in 2019 to 22.6 in 2020. This year's wait time is 143% longer than in 1993, when it was just 9.3 weeks.

Ontario reports the shortest total wait in 2020 (17.4 weeks), followed by Quebec (18.8 weeks) and Saskatchewan (21.7 weeks). Prince Edward Island has the longest total wait at 46.5 weeks, followed by Nova Scotia (43.8 weeks) and New Brunswick (41.3 weeks).

#### Wait time by segment

Total wait time can be examined in two consecutive segments:

- 1 from referral by a general practitioner to consultation with a specialist;
- 2 from the consultation with a specialist to point at which patient receives treatment.

The increase in total waiting time from 2019 to 2020 is the result of an increase in both segments. The waiting time in the first segment—from referral by a general practitioner to consultation with a specialist—has risen from 10.1 weeks in 2019 to 10.5 weeks in 2020. This wait time is 184% longer than in 1993, when it was 3.7 weeks (graph 1; graph 2). The waiting time to see a specialist increased in six provinces since 2019, but decreased in Saskatchewan, Manitoba, Nova Scotia, and Prince Edward Island (chart 2). The shortest waits for specialist consultations are in Quebec (7.9 weeks), Saskatchewan (8.1), and Ontario (8.7 weeks). The longest waits for specialist consultations are found in Prince Edward Island (27.2 weeks), New Brunswick (24.0), and Newfoundland & Labrador (14.1 weeks) (table 3).

The waiting time in the second segment—from consultation with a specialist to the point at which the patient receives treatment—has increased from 10.8 weeks in 2019 to 12.1 weeks in 2020 (chart 3). This portion of waiting is 116% longer than in 1993 when it was 5.6 weeks (graph 3; graph 4). Waiting times from specialist consultation to treatment have increased in six provinces but have decreased in Saskatchewan, Manitoba, New Brunswick, and Prince Edward Island. The shortest specialist-to-treatment waits are found in Ontario (8.7 weeks), Quebec (10.9 weeks), and British Columbia (13.6 weeks), while the longest are in Nova Scotia (30.1 weeks), Prince Edward Island (19.3 weeks), and New Brunswick (17.3 weeks) (table 4).

12.7 British Columbia 13.0 12.0 Alberta 13.3 12.3 Saskatchewan 8.1 13.3 Manitoba 9.3 8.0 Ontario 8.7 7.2 Quebec 7.9 21.2 New Brunswick 24.0 16.2 Nova Scotia 28.8 Prince Edward Island 27.2 11.0 Newfoundland & Labrador 14.1 10.1 Canada 10.5 5 0 10 15 20 25 30 Weeks waited 2019 2020

Chart 2: Wait by province in 2019 and 2020—weeks waited from referral by GP to appointment with specialist

Source: The Fraser Institute's national waiting list survey, 2019, 2020.

11.3 British Columbia 13.6 16.0 Alberta 16.1 13.7 Saskatchewan 13.6 19.2 Manitoba 14.4 8.0 Ontario 8.7 9.1 Quebec 10.9 18.5 **New Brunswick** 17.3 17.1 Nova Scotia 30.1 20.5 Prince Edward Island 19.3 12.4 Newfoundland & Labrador 15.2 10.8 Canada 12.1 0 5 25 35 10 15 20 30 Weeks waited 2019 2020

Chart 3: Wait by province in 2019 and 2020—weeks waited from appointment with specialist to treatment

Source: The Fraser Institute's national waiting list survey, 2019, 2020.

#### Waiting by specialty

Among the various specialties, the shortest total waits exist for medical oncology (4.2 weeks), radiation oncology (4.6 weeks), and elective cardiovascular surgery (13.9 weeks). Conversely, patients wait longest between a referral by a GP and ophthalmological surgery (34.1 weeks), orthopaedic surgery (34.1 weeks), and plastic surgery (34.1 weeks), and (table 2; chart 4). The largest increases in waits between 2019 and 2020 have been for neurosurgery (+7.7 weeks), ophthalmological surgery (+5.7 weeks), and plastic surgery (+5.4 weeks). Such increases are partially offset by decreases in wait times for patients receiving treatment in fields like orthopedics (-5.0 weeks), and medical oncology (-0.1 week).

Plastic Surgery 14.4 19.6 34.1 Gynaecology 12.5 23.9 Ophthalmology 14.9 19.2 34.1 Otolaryngology 15.4 29.1 General Surgery 15.7 Neurosurgery 21.0 33.2 Orthopaedic Surgery 13.2 20.9 34.1 Cardiovascular (Elec.) 13.9 Urology 10.4 18.2 Internal Medicine 6.0 16.3 Radiation Oncology 2.0 2.7 4.6 Medical Oncology 2.0 2.2 4.2 Weighted Median 22.6 10.5 5 20 25 10 15 30 40 Weeks waited Wait from GP to specialist Wait from specialist to treatment Note: Totals may not equal the sum of subtotals because of rounding.

Source: The Fraser Institute's national waiting list survey, 2020.

Chart 4: Median wait by specialty in 2020—weeks waited from referral by GP to treatment

Breaking waiting time down into its two components, there is also variation among specialties. The shortest waits from referral by a general practitioner to consultation with a specialist are in radiation oncology (2.0 weeks), medical oncology (2.0 weeks), and internal medicine (6.0 weeks). The longest waits are for neurosurgery (21.0 weeks), otolaryngology (15.4 weeks), and ophthalmology (14.9 weeks) (table 3).

For the second segment—from consultation with a specialist to the point at which the patient receives treatment—patients wait the shortest intervals for urgent cardiovascular surgery (1.6 weeks), medical oncology (2.2 weeks), and radiation oncology (2.7 weeks). They wait longest for orthopaedic surgery (20.9 weeks), plastic surgery (19.6 weeks) and ophthalmological surgery (19.2 weeks) (table 4; chart 5). Median wait times for specific procedures within a specialty, by province, are shown in tables 5A-5L.

#### Comparison between clinically "reasonable" and actual waiting times

Specialists are also surveyed as to what they regard as clinically "reasonable" waiting times in the second segment covering the time spent from specialist consultation to delivery of treatment. Out of the 106 categories (some comparisons were precluded by missing data), actual waiting time (table 4) exceeds reasonable waiting time (table 8) in 77% of the comparisons. Averaged across all specialties, Quebec and Ontario have come closest to meeting the standard of "reasonable" wait times. However, their actual second-segment waits exceed the corresponding "reasonable" values by substantial percentages, 26% and 27%, respectively (table 10). The greatest difference between these two values across all provinces for a specialty is in orthopaedic surgery, where the actual waiting time is 8.7 weeks longer than what is considered to be "reasonable" by specialists (chart 6). [2] Median reasonable wait times for specific procedures within a specialty, by province, are shown in tables 9A–9L.

#### Waiting for diagnostic and therapeutic technology

Patients also experience significant waiting times for various diagnostic technologies across the provinces. The wait for a computed tomography (CT) scan has increased to 5.4 weeks in 2020 from 4.8 weeks in 2019. Newfoundland & Labrador had the shortest wait for a CT scan (3.0 weeks), while the longest waits occur in Alberta (14.0 weeks). The wait

<sup>2.</sup> The greatest proportional difference for a specialty is in Internal Medicine, where the actual waiting time exceeds the corresponding reasonable value by 128%.

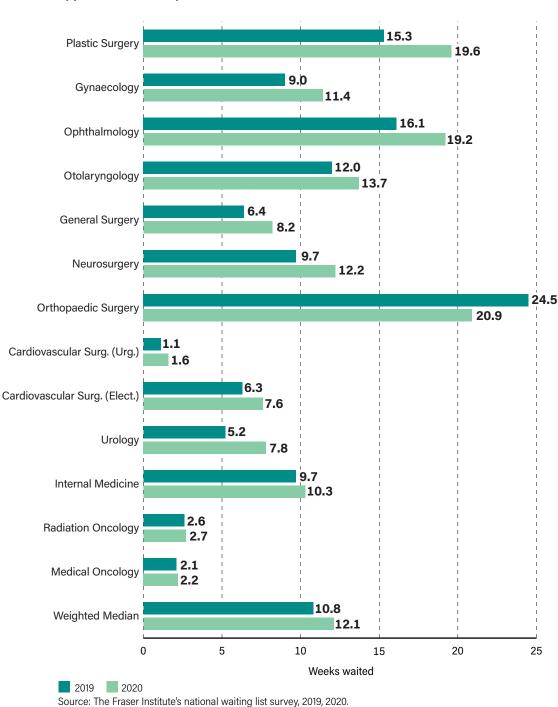
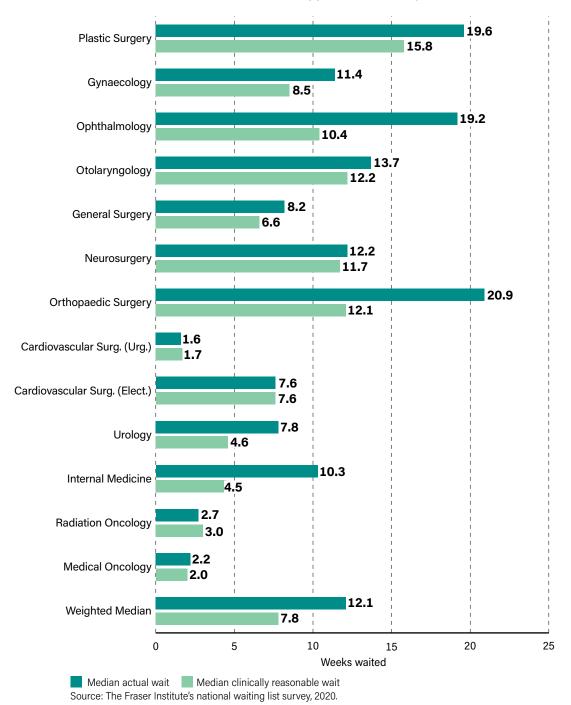


Chart 5: Wait by specialty in 2019 and 2020—weeks waited from appointment with specialist to treatment

Chart 6: Median actual wait compared to median clinically reasonable wait, by specialty, in Canada in 2020—weeks waited from appointment with specialist to treatment



for a magnetic resonance imaging (MRI) scan has increased to 11.1 weeks in 2020 from 9.3 weeks in 2019. Patients in Newfoundland & Labrador faced the shortest wait for an MRI (4.5 weeks), while residents of Alberta wait longest (26.0 weeks). Finally, the wait for an ultrasound increased in 2020 to 3.5 weeks from 3.4 weeks in 2019. Saskatchewan and Ontario have the shortest wait for an ultrasound (2.0 weeks), while Prince Edward Island has the longest: 17.0 weeks (chart 7).

Chart 7: Waiting for technology—weeks waited to receive selected diagnostic tests in 2020, 2019, and 2018

	_ (	CT-Scar	
	2020	2019	2018
British Columbia	6.0	6.5	6.0
Alberta	14.0	7.0	6.0
Saskatchewan	4.0	2.5	2.8
Manitoba	4.0	4.5	5.0
Ontario	4.0	4.0	3.5
Quebec	4.0	4.0	4.0
New Brunswick	4.5	6.0	6.0
Nova Scotia	4.0	5.0	4.0
Prince Edward Island	4.0	5.0	3.0
Newfoundland & Labrador	3.0	4.0	5.0
Canada	5.4	4.8	4.3

Source: The Fraser Institute's national waiting list survey, 2020.

Note: Links to wait times data published by provincial government agencies can be found in Appendix A.

#### Numbers of procedures for which people are waiting

This study estimates that, across the 10 provinces, the total number of procedures for which people are waiting in 2020 is 1,224,198 (table 12; table 14 presents the numbers for the provinces on a population-adjusted basis), an increase of 15% from the estimated 1,064,286 procedures in 2019. The estimated number of procedures for which people are waiting decreased in only one province, Manitoba. Assuming that each person waits for only one procedure, 3.2% of Canadians are waiting for treatment in 2020, which varies from a low of 1.97% of the population in Quebec to a high of 9.97% in Nova Scotia. [3] Tables 13A–13L (pp. 55–60) show the number of procedures for which people are waiting within a specialty, by province.

<sup>3.</sup> These numbers should be interpreted with caution, especially for Saskatchewan. As a result of discussions with provincial authorities in 2002, counts of "the number of patients waiting for surgery" have been replaced with the "number of procedures for which patients are waiting". There do not, however, appear to be significant systematic differences between the numbers of "procedures for which people are waiting" estimated in this edition of *Waiting Your Turn* and counts of "patients waiting" reported by provincial ministries.

## **Method**

The data for this issue of *Waiting Your Turn* were collected between January 7 and October 1, 2020. Survey questionnaires [4] were sent to practitioners in 12 medical specialties: plastic surgery, gynaecology, ophthalmology, otolaryngology, general surgery, neurosurgery, orthopaedic surgery, cardiovascular surgery, urology, internal medicine, radiation oncology, and medical oncology. This year, the overall response rate was 11% (table 1). The major findings from the survey responses are summarized in table 2 to table 15.

This study replicates methods used in previous editions but, like the surveys of 2015 to 2019, this year's survey contains fewer questions than in previous years (2014 and earlier). Both versions of the survey are included for comparison (Appendixes C, D). Because data from the eliminated questions were treated independently of calculated medians, there is no reason to believe that their removal will have a material impact on the results contained in this edition of the report.

As with previous editions, this study is designed to estimate the wait for medically necessary elective treatment. [5] Waiting time is calculated as the median of physician responses. The median is calculated by ranking specialists' responses in either ascending or descending order, and determining the middle value. [6]

The provincial weighted medians, for each specialty, reported in the last line of tables 5A-5L, are calculated by multiplying the median wait for each procedure (for

- 4. Deloitte Touche Tohmatsu Limited provided mailing lists, drawn from the Canadian Medical Association's membership rolls. Unlike lists of past years, this year's list included doctors with multiple specialties, many of which are outside the purview of the 12 specialties the *Waiting Your Turn* questionnaire is designed for. In order to stay consistent with earlier surveys, we include only doctors associated exclusively with the 12 specialties for which the *Waiting Your Turn* questionnaire is designed. For instances where doctors in this year's list were associated with more than one of the 12 specialties included in our survey design, the unique specialty they were associated with previously was used. Specialists were offered a chance to gain a \$2,000 cash prize (to be randomly awarded) as an inducement to respond. Physicians were contacted via letter-mail, facsimile, and telephone.
- 5. Emergent, urgent, and elective wait times are measured for cardiovascular surgery. The specialties of internal medicine, medical oncology, neurosurgery, and radiation oncology also include non-elective wait times.
- 6. For an even-numbered group of respondents, the median is the average of the two middle values.

example,q mammoplasty or neurolysis for plastic surgery) by a weight—the fraction of all surgeries within that specialty constituted by that procedure. The sum of these multiplied terms forms the weighted median for that province and specialty (an analogous method is used for tables 9A-9L).

To obtain the provincial medians (displayed in the last row of tables 2, 3, 4, and 8), the 12 specialty medians are each weighted by a ratio—the number of procedures done in that specialty in the province, divided by the total number of procedures done by specialists of all types in the province. To obtain the national medians (displayed in the last column of tables 2, 3, 4, and 8) we use a similar ratio—the number of procedures done in that specialty in the province, divided by the total number of procedures done by specialists in that specialty across all provinces.

To estimate the number of procedures for which people are waiting, the total annual number of procedures is divided by 52 (weeks per year) and then multiplied by the Fraser Institute's estimate of the actual provincial average number of weeks waited. This means that a waiting period of one month implies that, on average, patients are waiting one-twelfth of a year for surgery. Therefore, the next person added to the list would find one-twelfth of a year's patients ahead of him or her in the queue. The main assumption underlying this estimate is that the number of surgeries performed will neither increase nor decrease within the year in response to waiting lists.

The number of non-emergency procedures for which people are waiting that were not included in the survey is also calculated, and is listed in table 12 as the "residual" number of procedures for which people are waiting. To estimate this residual number, the number of non-emergency operations not contained in the survey that are done in each province annually must be used. This residual number of operations (compiled from the Canadian Institute for Health Information's data) is then divided by 52 (weeks) and multiplied by each province's weighted median waiting time for all specialties.

This study's weighting of medians and the estimation of the number of procedures for which patients are waiting are based on data from the Canadian Cancer Society's Advisory Committee on Cancer Statistics (2019) as well as, for 2018/19, from the Discharge Abstract Database (DAD) (CIHI, 2020a), the National Ambulatory Care Reporting System (NACRS) (CIHI, 2020b), and the Hospital Morbidity Database (HMDB) (CIHI, 2020c) published by the Canadian Institute for Health Information (CIHI). There are a number of minor problems in matching the CIHI's categories of operations to those

reported in the Fraser Institute's survey. In a few instances, an operation such as rhinoplasty is listed under more than one specialty in *Waiting Your Turn*. In these cases, we divide the number of patients annually undergoing this type of operation among specialties according to the proportion of specialists in each of the overlapping specialties: for example, if plastic surgeons constitute 75% of the group of specialists performing rhinoplasties, then the number of rhinoplasties counted under plastic surgery is the total multiplied by 0.75. A second problem is that, in some cases, an operation listed in the *Waiting Your Turn* questionnaire has no direct match in the CIHI tabulation. An example is ophthalmological surgery for glaucoma, which is not categorized separately in the CIHI discharge abstract data. In these cases, we make no estimate of the number of patients waiting for these operations.

The Fraser Institute's cardiovascular surgery questionnaire, following the traditional classification by which patients are prioritized, has distinguished among emergent, urgent, and elective patients. However, in discussing the situation with physicians and hospital administrators, it became clear that these classifications are not standardized across provinces. Decisions as to how to group patients were thus left to responding physicians and heart centres. Direct comparisons among provinces using these categories should, therefore, be made tentatively.

Finally, there are a number of reasons for readers to exercise caution while interpreting the results of this year's survey. The COVID-19 crisis led many provinces to take drastic measures both to limit the spread of the virus and to ensure scarce medical resources were available in the event of a surge in cases. One of these measures was the cancellation of thousands of elective surgeries across a number of provinces. For example, Ontario began "ramping down elective surgeries" on March 15, 2020, British Columbia announced the postponement of all non-urgent scheduled surgery on March 16, and Alberta temporarily postponed all non-urgent scheduled and elective surgeries on March 17 (*Global News*, 2020; Hunter, 2020; Shah, 2020).

These measures were announced a little more than half way through the initially intended survey period and had an obvious impact on survey responses. Specifically, by design the measures will likely lead to longer expected wait times than otherwise. In addition, the uncertainty regarding the length of these measures at the time led to a significant reduction in the response rates, either because physicians could not be reached since clinics were closed, physicians' offices were not taking new patients, or respondents were unsure how long the provincial measures would remain in effect.

As a result, the authors made the following adjustments to the survey methodology:

- 1 The survey-collection window for this version of *Waiting Your Turn* was longer than that used in previous years. In 2019, for example, data were collected between January 9 and April 26. By contrast, this year's survey period was extended to October 1, 2020. Though no active efforts were made to solicit responses during the provincial halts of treatment, surveys that were mailed or faxed in were still accepted. Active efforts to contact physicians resumed mid-August, once provinces had broadly restarted their programs of elective surgery.
- 2 Surveys collected after March 16, 2020 (when provinces began postponing elective surgeries) were tracked (*n* = 596) to separate them from surveys returned earlier. A follow-up study comparing wait-times estimates using the two datasets (before and after March 16, 2020) will be published in 2021. The current analysis includes all survey data collected between January 7, 2020 and October 1, 2020.

Despite the extended survey period, this year's response rate (11%) is lower than it has been in previous years, and thus should be interpreted with caution. More generally, when interpreting median wait-time data for procedures, specialties, and provinces, it is always important to take note of the number of responses upon which estimates are based. This information is contained in tables 1a-c. For example, the number of survey responses in parts of Atlantic Canada are notably lower than in other provinces, which may result in reported median wait times being higher or lower than those actually experienced. The authors recommend particular caution this year when interpreting the wait times for treatment in Quebec.

# **Comparisons of Data from Other Sources**

#### Estimates of wait times measured by provincial governments

A list of links to wait-times data published by provincial government agencies can be found in Appendix A.

While it is encouraging that provincial governments have gradually come to recognize the value of measuring and reporting wait times for medically necessary procedures and treatments, there are a number of reasons that their estimates should be interpreted with caution.

- 1 Many provinces still do not measure the wait time between the date a patient receives a referral from a general practitioner and the consultation with a specialist. Although there are some notable exceptions, many provinces focus only on the time between the date on which a treatment was scheduled (or booked) and the date of the treatment. The Fraser Institute intends to assist those seeking treatment, and those evaluating waiting times, by providing comprehensive data on the entire wait a person seeking treatment can expect. Accordingly, the Institute measures the time between the decision of the specialist that treatment is required and treatment being received as well as the time between a referral by a general practitioner and the consultation with a specialist.
- 2 Even when examining only the waiting time between seeing a specialist and receiving treatment, many provinces only start their wait-time clocks when the operating room booking information for a case is received by the hospital. Using this definition may understate the patient's actual waiting time between seeing a specialist and receiving treatment because it will not include any delays between the decision to treat the patient and the formal booking and recording for that patient. In addition, because some hospitals may only book a few months ahead, this method of measuring waiting lists likely omits a substantial fraction of patients with waits beyond the booking period (Ramsay, 1998).
- 3 In years past, wait-times data from certain provinces have been found to be remarkably low when compared to the number of procedures they report to have been actually

completed and the number of patients reported to be waiting for treatment. Previous reports by the Fraser Institute (for example, *Waiting Your Turn*, 2009) have consistently demonstrated how, in those provinces, either there had to have been fewer people waiting or significantly more surgeries being completed, or the government's reported wait time must have been incorrect.

4 Because of differences in the number of specialties and procedures included, as well as different definitions of how wait times are measured, estimates from provincial governments are usually not comparable among provinces or across time (usually only going back a few years). The Fraser Institute measures wait times for the same set of specialties across all provinces, employs a consistent methodology, and has published annual estimates for over two decades.

Comprehensive comparisons of wait time estimates from provincial governments with data from the Fraser Institute can be found in previous versions of *Waiting Your Turn*.

## Verification and comparison of earlier data with independent sources

The waiting list data can be verified by comparison with independently computed estimates, primarily those found in academic journals. A previous analysis examined 95 independent waiting-time estimates comparable with the Fraser Institute's figures. In 59 of the 95 cases, the Fraser Institute's figures lay below the comparison values. In only 31 instances did the Institute value exceed the comparison value, and in five cases they were identical. This evidence strongly suggests that the Fraser Institute's measurements are not biased upward but, if anything, may be biased downward, understating actual waiting times. (For further explanation, see *Waiting Your Turn*, 2009).

#### Pan-Canadian benchmarks

Canada's provincial, territorial, and federal governments agreed to a set of common benchmarks for medically necessary treatment on December 12, 2005 (Ontario Ministry of Health and Long Term Care, 2005). Chart 8 compares those benchmarks for which a similar comparator exists in *Waiting Your Turn*. Two observations arise from this comparison. First, Canada's physicians tend to have a lower threshold for reasonable wait times than do Canada's provincial, territorial, and federal governments. Second, median wait times for radiation therapy, hip and knee replacements, and cardiac bypass surgery in

many provinces are already within the benchmarks set by governments in Canada, which means that according to these benchmarks, more than 50% of patients in these provinces are already being treated in a time frame that provincial governments consider "reasonable". [7] This year, however, the median wait time for cataract surgery exceeds the pan-Canadian Benchmark wait time.

Chart 8: Pan-Canadian benchmark wait times and Waiting Your Turn 2020

Procedure (Pan-Canadian Benchmark/ Waiting Your Turn)	Pan-Canadian Benchmark wait time	National Median Wait Time [1] (range of provincial median wait times) in weeks	National Median Reasonable Wait Time (range of provincial reasonable median wait times) in weeks
Radiation therapy/ radiation oncology	within 4 weeks of patients being ready to treat	2.7 (1.6-4.9)	3.1 (2.9-4.9)
Hip replacements	within 26 weeks	22.3 (5.0-52.0)	12.9 (12.0-24.0)
Knee replacements	within 26 weeks	22.3 (5.0–52.0)	12.9 (12.0-24.0)
Cataract surgery	within 16 weeks for patients who are at high risk	20.6 (12.0-64.0)	11.4 (9.0–16.0)
Cardiac bypass surgery	Level I within 2 weeks/ Level II within 6 weeks/ Level III within 26 weeks	Emergent: 1.1 (0.0-3.3)/ Urgent: 1.8 (0.5-16.0)/ Elective: 9.0 (1.5-30.0)	Emergent: 0.7 (0.0-3.5)/ Urgent: 1.8 (1.0-4.0)/ Elective: 6.1 (4.0-14.0)

Note 1: These wait times for individual procedures were produced using the same methodology used to produce national median wait times for medical specialties, described above under "Method".

Sources: Ontario Ministry of Health and Long Term Care, 2005; and The Fraser Institute's National Waiting List Survey, 2020.

<sup>7.</sup> Note that, although the median wait time is less than the benchmark wait time, this does not mean that provinces have already met their targets. The pan-Canadian benchmark wait times apply to all patient cases, while the median wait time is the time by which 50% of patients have been treated and 50% of patients are still waiting for treatment.

## **Conclusion**

The 2020 *Waiting Your Turn* survey indicates that, at 22.6 weeks, the total waiting time for elective, medically necessary, treatment across the provinces is higher than last year's 20.9-week wait time. This year marks the highest overall wait time in the survey's history. Even if one debates the reliability of waiting-list data, this survey also reveals that wait times in Canada are longer than what physicians consider to be clinically reasonable.

From the standpoint of the Canadian economy, a study by Stokes and Somerville (2008) found that the cumulative total lost economic output that represents the cost of waiting longer than medically recommended for treatment for total joint replacement surgery, cataract surgery, coronary artery bypass graft surgery, and MRI scans in 2007 was an estimated \$14.8 billion. More recently, Moir and Barua (2020) estimated the cost of waiting per patient in Canada to be approximately \$1,963 in 2019 if only hours during the normal working week were considered "lost", and as much as \$5,972 if all hours of the week (excluding eight hours of sleep per night) were considered "lost".

Further, there is a significant body of medical literature identifying adverse medical consequences from prolonged waiting (Waiting Your Turn, 2009; Day, 2013).

This year's survey of specialists also found that an estimated 1.18% of patients received elective treatment in another country during 2019/20. Physicians also report that only about 12.4% of their patients are on a waiting list because they requested a delay or post-ponement, and that 41.8% would agree to have their procedure performed within a week [8] if an opening arose.

Thus, despite provincial strategies to reduce wait times and high levels of expenditure on health care, it is clear that patients in Canada are waiting too long to receive treatment.

<sup>8.</sup> The survey asks physicians what percentage of their patients currently waiting for treatment would agree to begin treatment tomorrow if an opening were to arise. However, comments by respondents of previous surveys indicate that at least some respondents answer the question as if it were "a few days".

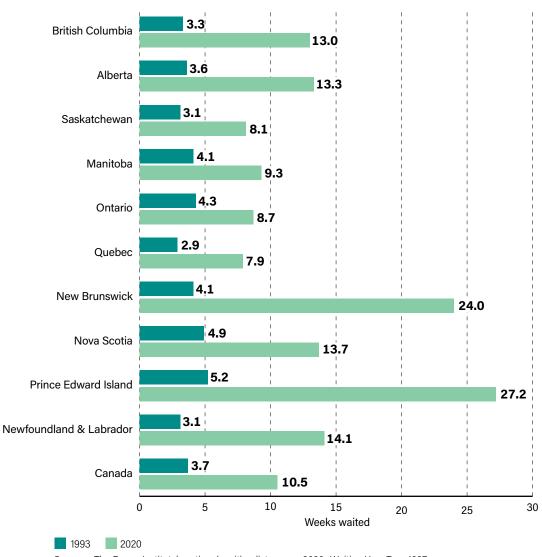
## **Selected graphs**

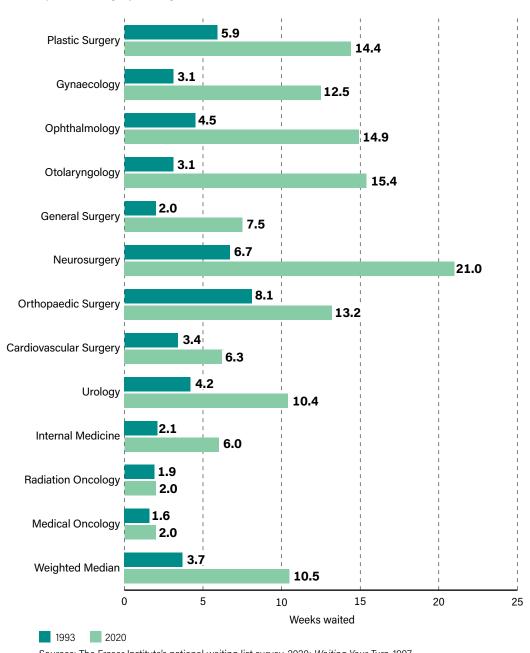
Graphs 1-6: Median actual waiting times, 1993 and 2020

Graphs 7-8: Median reasonable waiting times, 1994 and 2020

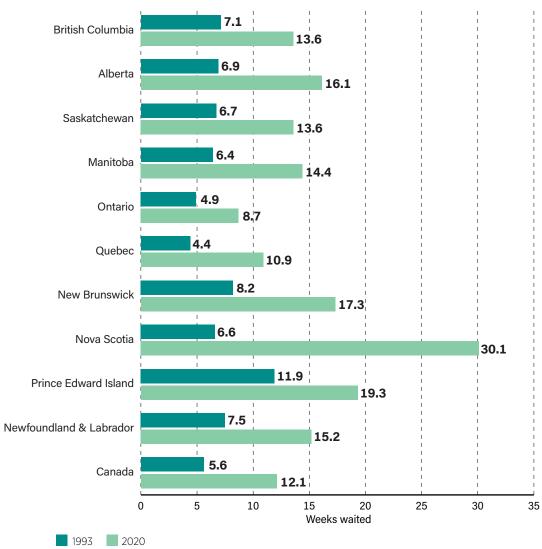
Graphs 9-19: Actual compared to reasonable waiting times, 1994 to 2020, by province

Graph 1: Median wait between referral by GP and appointment with specialist, by province, 1993 and 2020

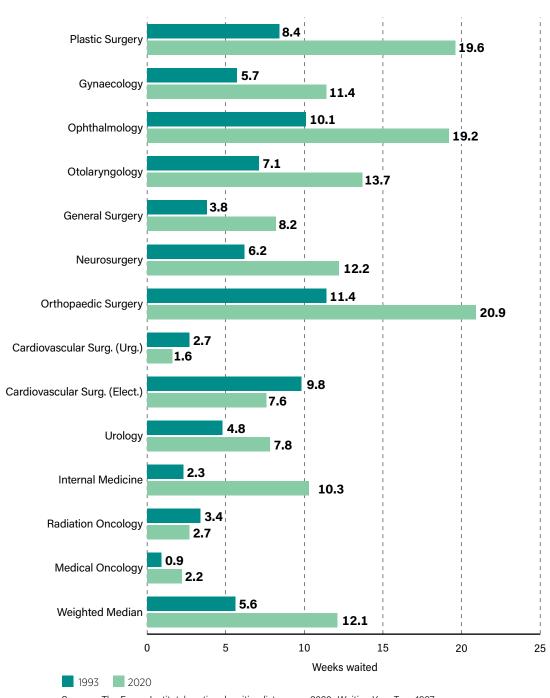




Graph 2: Median wait between referral by GP and appointment with specialist, by specialty, 1993 and 2020



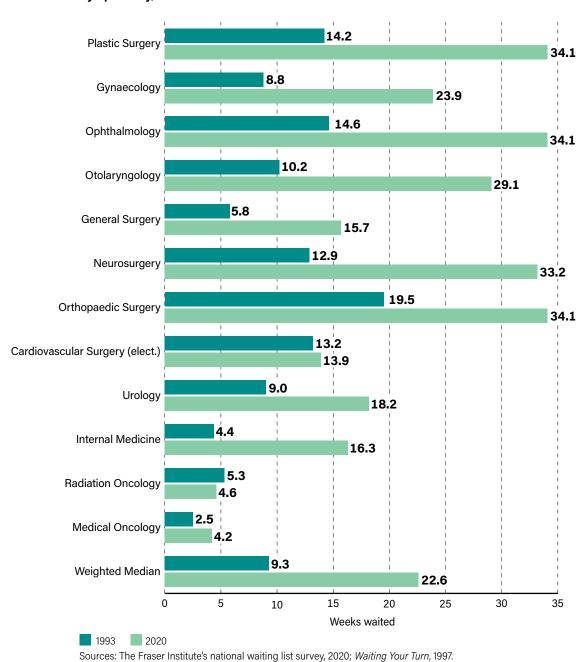
Graph 3: Median wait between appointment with specialist and treatment, by province, 1993 and 2020



Graph 4: Median wait between appointment with specialist and treatment, by specialty, 1993 and 2020

10.4 British Columbia 26.6 10.5 Alberta 29.4 9.8 Saskatchewan 21.7 10.5 Manitoba 23.7 9.1 Ontario 17.4 7.3 Quebec 18.8 12.3 **New Brunswick** 41.3 11.5 Nova Scotia 43.8 17.1 Prince Edward Island 46.5 10.6 Newfoundland & Labrador 29.2 9.3 Canada 22.6 0 10 20 30 40 50 Weeks waited 1993 2020

Graph 5: Median wait between referral by GP and treatment, by province, 1993 and 2020



Graph 6: Median wait between referral by GP and treatment, by specialty, 1993 and 2020

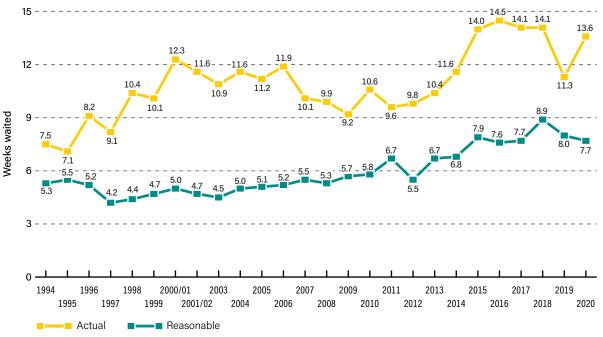
5.3 British Columbia 7.7 5.0 Alberta 9.6 6.2 Saskatchewan 8.3 5.6 Manitoba 8.2 5.0 Ontario 6.9 5.2 Quebec 8.6 5.8 **New Brunswick** 10.8 5.2 Nova Scotia 8.5 5.9 Prince Edward Island 6.0 4.3 Newfoundland & Labrador 4.7 5.2 Canada 7.8 0 3 12 Weeks waited

Graph 7: Median reasonable wait between appointment with specialist and treatment, by province, 1994 and 2020

6.3 Plastic Surgery 15.8 4.5 Gynaecology 8.5 5.4 Ophthalmology 10.4 5.2 Otolaryngology 12.2 3.2 **General Surgery** 6.6 3.4 Neurosurgery 11.7 7.3 Orthopaedic Surgery 12.1 6.0 Cardiovascular Surg. (Urg.) 1.7 24.0 Cardiovascular Surg. (Elect.) 7.6 3.3 Urology 4.6 1.9 Internal Medicine 4.5 2.0 **Radiation Oncology** 3.0 **Medical Oncology** 5.2 Weighted Median 7.8 0 5 10 15 20 25 Weeks waited 2020

Graph 8: Median reasonable wait between appointment with specialist and treatment, by specialty, 1994 and 2020

Graph 9: British Columbia—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020



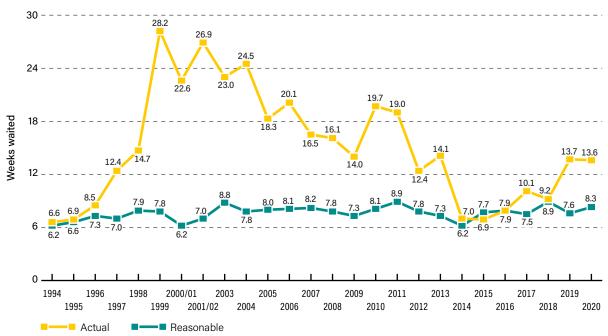
Source: The Fraser Institute's national waiting list surveys, 1995–2020.

Graph 10: Alberta—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020



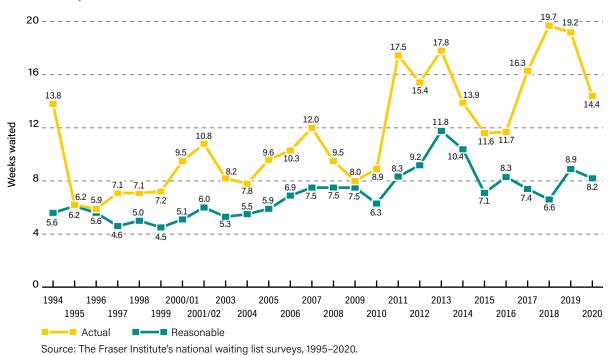
Source: The Fraser Institute's national waiting list surveys, 1995-2020.

Graph 11: Saskatchewan—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020



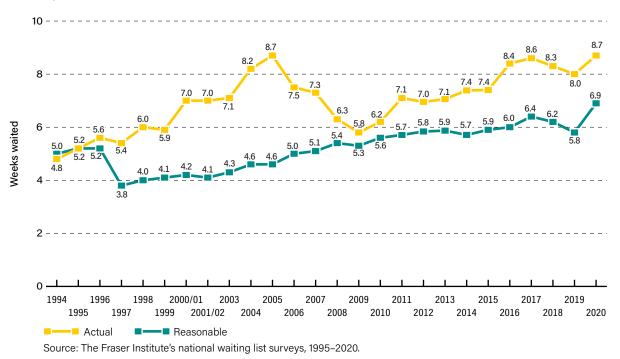
Source: The Fraser Institute's national waiting list surveys, 1995-2020.

Graph 12: Manitoba—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020

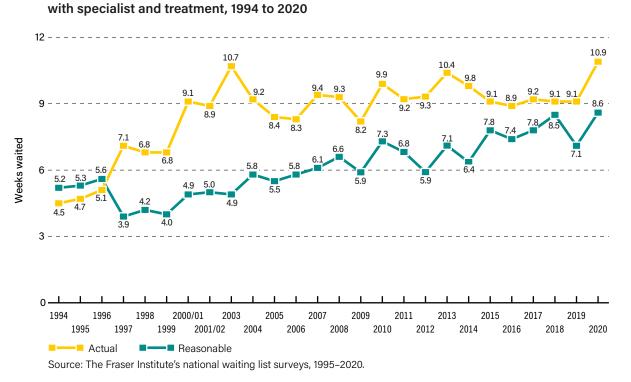


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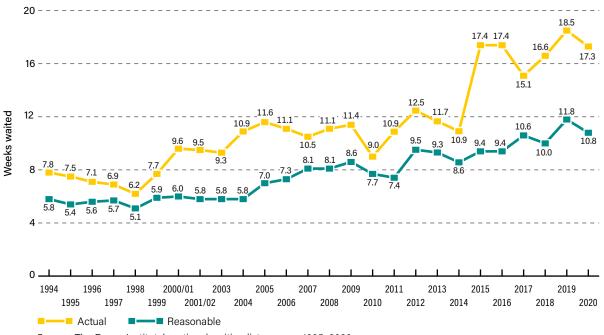
Graph 13: Ontario—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020



Graph 14: Quebec—actual compared to reasonable waits between appointment

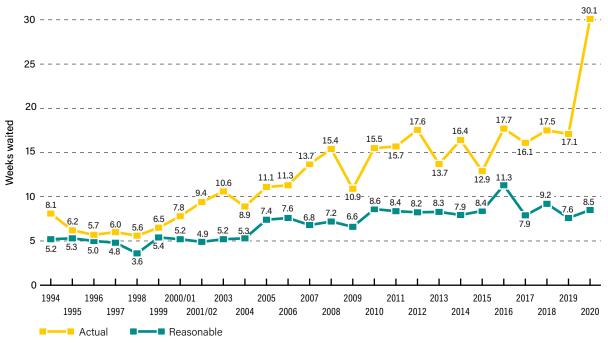


Graph 15: New Brunswick—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020

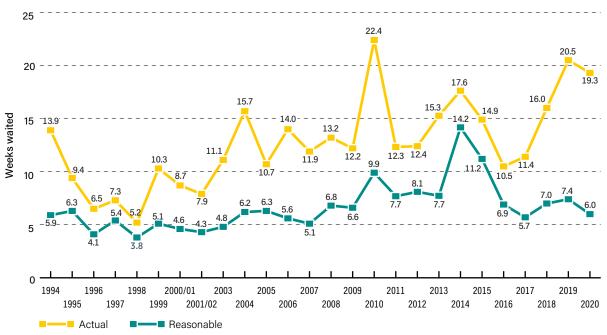


Source: The Fraser Institute's national waiting list surveys, 1995-2020.

Graph 16: Nova Scotia—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020

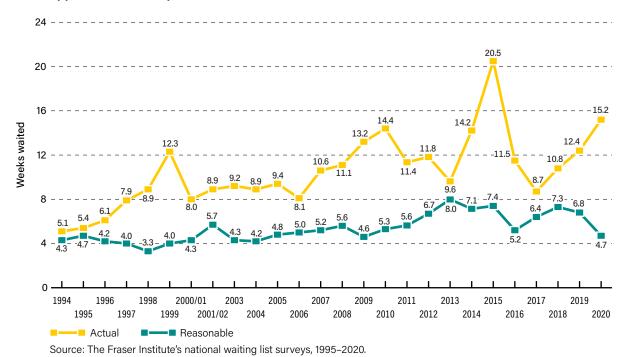


Graph 17: Prince Edward Island—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020



Source: The Fraser Institute's national waiting list surveys, 1995-2020.

Graph 18: Newfoundland & Labrador—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020



12.1 10.6 10.9 11.0 10.8 Weeks waited 2000/01 2001/02 ---- Actual ■**■**■ Reasonable

Graph 19: Canada—actual compared to reasonable waits between appointment with specialist and treatment, 1994 to 2020

Source: The Fraser Institute's national waiting list surveys, 1995–2020.

# Selected tables

- Tables 1A-1C: Summary of responses, 2020
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- Table 3: Median patient wait to see a specialist after referral from a GP, by specialty, 2020 (in weeks)
- Table 4: Median patient wait for treatment after appointment with specialist, by specialty, 2019 (in weeks)
- Tables 5A-5L: Median patient wait for treatment after appointment with specialist (in weeks), by specialty, 2020
- Table 6: Comparison of median weeks waited to receive treatment after appointment with specialist, by selected specialties, 2020 and 2019
- Table 7: Frequency distribution of waiting times (specialist to treatment) by province, 2020—proportion of survey waiting times that fall within given ranges
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- Table 11: Average percentage of patients receiving treatment outside Canada, 2020
- Table 12: Estimated number of procedures for which patients are waiting after appointment with specialist, by specialty, 2020
- Table 13A-13L: Estimated number of procedures for which patients are waiting after appointment with specialist, 2020
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- Table 15: Comparison of estimated number of procedures for which patients are waiting after appointment with specialist, by selected specialities, 2020 and 2019
- Table 16a: Acute inpatient procedures, 2018–2019
- Table 16b: Same day procedures, 2018–2019

Table 1A: Summary of responses, 2020—response rates (percentages), by specialty

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	28%	18%	17%	21%	6%	1%	20%	33%	0%	0%	11%
Gynaecology	26%	28%	25%	30%	16%	5%	15%	18%	100%	12%	16%
Ophthalmology	15%	14%	27%	33%	8%	6%	14%	21%	20%	30%	11%
Otolaryngology	33%	24%	22%	22%	14%	6%	31%	33%	100%	9%	16%
General Surgery	18%	11%	13%	22%	5%	2%	19%	9%	33%	14%	8%
Neurosurgery	30%	13%	15%	17%	8%	7%	11%	20%	_	0%	12%
Orthopaedic Surgery	23%	12%	10%	17%	12%	5%	24%	15%	_	22%	12%
Cardiovascular Surgery	23%	12%	47%	30%	10%	4%	38%	7%	_	60%	14%
Urology	26%	17%	17%	27%	11%	4%	53%	16%	0%	13%	13%
Internal Medicine	22%	21%	11%	17%	7%	3%	14%	13%	25%	15%	10%
Radiation Oncology	4%	0%	0%	6%	5%	8%	14%	7%	0%	9%	5%
Medical Oncology	7%	3%	20%	0%	4%	7%	22%	7%	100%	0%	5%
Total	21%	17%	17%	21%	9%	4%	21%	16%	36%	15%	11%

Table 1B: Summary of responses, 2020—number of responses, by specialty

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	21	9	2	3	11	1	3	4	0	0	54
Gynaecology	46	42	13	18	100	22	5	7	3	3	259
Ophthalmology	25	14	6	8	30	18	3	7	1	3	115
Otolaryngology	24	11	2	4	31	10	4	6	1	1	94
General Surgery	36	14	8	11	27	11	6	4	1	3	121
Neurosurgery	10	4	2	1	7	6	1	2	_	0	33
Orthopaedic Surgery	48	16	4	7	58	18	8	6	_	4	169
Cardiovascular Surgery	15	4	7	3	12	4	3	1	_	3	52
Urology	21	8	2	4	25	6	8	3	0	1	78
Internal Medicine	69	50	7	12	62	16	5	6	3	3	233
Radiation Oncology	3	0	0	1	10	10	1	1	0	1	27
Medical Oncology	6	2	1	0	8	2	2	1	1	0	23
Total	324	174	54	72	381	124	49	48	10	22	1,258

Table 1C: Summary of responses, 2020—number of questionnaires mailed out, by specialty

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	76	50	12	14	185	114	15	12	1	4	483
Gynaecology	179	150	52	60	615	477	33	40	3	25	1,634
Ophthalmology	162	97	22	24	376	293	22	34	5	10	1,045
Otolaryngology	73	46	9	18	226	166	13	18	1	11	581
General Surgery	200	127	60	50	540	459	31	43	3	21	1,534
Neurosurgery	33	32	13	6	85	84	9	10	_	2	274
Orthopaedic Surgery	213	135	39	42	492	345	33	41	_	18	1,358
Cardiovascular Surgery	64	34	15	10	126	93	8	14	_	5	369
Urology	80	47	12	15	221	167	15	19	1	8	585
Internal Medicine	315	233	65	70	905	607	35	48	12	20	2,310
Radiation Oncology	82	45	11	16	192	124	7	14	1	11	503
Medical Oncology	86	58	5	18	201	30	9	14	1	9	431
Total	1,563	1,054	315	343	4,164	2,959	230	307	28	144	11,107

Table 2: Median total expected waiting time from referral by GP to treatment, by specialty, 2020 (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	68.4	30.6	40.4	29.3	27.6	16.2	61.2	42.1	_	_	34.1
Gynaecology	30.6	28.1	9.9	14.9	19.6	22.3	54.4	29.1	15.2	36.6	23.9
Ophthalmology	40.6	29.6	33.5	51.6	32.4	24.1	49.9	37.5	116.0	107.0	34.1
Otolaryngology	34.3	60.2	40.9	13.1	25.2	17.3	82.4	38.6	44.2	14.1	29.1
General Surgery	19.8	19.2	10.2	10.5	12.4	8.6	16.5	52.3	12.6	8.2	15.7
Neurosurgery	53.3	38.1	28.8	35.5	26.9	21.7	38.1	70.7	_	_	33.2
Orthopaedic Surgery	34.4	52.9	26.3	51.3	26.2	31.8	53.6	57.6	_	27.8	34.1
Cardiovascular Surgery (Elective)	12.0	31.9	4.0	16.9	8.9	12.2	34.6	_	_	31.5	13.9
Urology	22.0	28.2	41.0	9.8	11.4	21.1	37.1	39.1	_	26.2	18.2
Internal Medicine	17.3	27.0	7.7	16.5	10.9	9.1	25.8	32.8	51.9	23.8	16.3
Radiation Oncology	13.9	_	_	5.0	4.2	4.1	5.6	3.0	_	3.1	4.6
Medical Oncology	9.8	5.1	4.5	_	3.8	2.3	2.8	10.0	6.0	_	4.2
Weighted Median	26.6	29.4	21.7	23.7	17.4	18.8	41.3	43.8	46.5	29.2	22.6

 $<sup>\</sup>ensuremath{^{*}}$  Totals may not equal the sum of subtotals as a result of rounding.

Table 3: Median patient wait to see a specialist after referral from a GP, by specialty, 2020 (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	34.0	8.0	14.0	12.0	12.0	5.0	36.0	11.0	_	_	14.4
Gynaecology	16.0	14.0	2.5	7.0	10.0	12.0	40.0	24.0	6.0	12.0	12.5
Ophthalmology	16.0	9.0	6.0	20.0	16.0	12.0	26.0	16.5	52.0	51.0	14.9
Otolaryngology	16.0	32.0	5.5	4.0	16.0	7.0	68.0	19.0	30.0	4.0	15.4
General Surgery	12.0	10.0	3.0	3.0	7.0	2.5	6.5	9.0	2.0	4.0	7.5
Neurosurgery	32.0	24.0	10.0	24.0	20.0	8.0	30.0	58.3	_	_	21.0
Orthopaedic Surgery	12.0	29.0	20.0	20.0	8.0	12.0	25.0	14.0	_	11.0	13.2
Cardiovascular Surgery	7.0	14.0	2.5	15.0	5.0	4.0	12.0	10.0	_	2.0	6.3
Urology	16.0	14.0	23.0	5.0	7.0	5.0	24.0	21.0	_	18.0	10.4
Internal Medicine	5.9	8.5	1.5	7.2	4.0	4.0	14.0	7.0	48.0	12.0	6.0
Radiation Oncology	6.0	_	_	2.5	2.0	1.0	2.0	1.0	_	1.5	2.0
Medical Oncology	5.5	1.3	2.5	_	1.8	1.1	1.8	5.0	3.0	_	2.0
Weighted Median	13.0	13.3	8.1	9.3	8.7	7.9	24.0	13.7	27.2	14.1	10.5

Table 4: Median patient wait for treatment after appointment with specialist, by specialty, 2020 (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	34.4	22.6	26.4	17.3	15.6	11.2	25.2	31.1	_	_	19.6
Gynaecology	14.6	14.1	7.4	7.9	9.6	10.3	14.4	5.1	9.2	24.6	11.4
Ophthalmology	24.6	20.6	27.5	31.6	16.4	12.1	23.9	21.0	64.0	56.0	19.2
Otolaryngology	18.3	28.2	35.4	9.2	9.2	10.3	14.4	19.6	14.2	10.1	13.7
General Surgery	7.8	9.2	7.2	7.5	5.4	6.1	10.0	43.3	10.6	4.2	8.2
Neurosurgery	21.3	14.1	18.8	11.5	6.9	13.7	8.1	12.4	_	_	12.2
Orthopaedic Surgery	22.4	23.9	6.3	31.3	18.2	19.8	28.6	43.6	_	16.8	20.9
Cardiovascular Surgery (Urgent)	1.7	1.9	0.5	0.7	1.1	1.5	8.1	_	_	2.9	1.6
Cardiovascular Surgery (Elective)	5.0	17.9	1.5	1.9	3.9	8.2	22.6	_	_	29.5	7.6
Urology	6.0	14.2	18.0	4.8	4.4	16.1	13.1	18.1	_	8.2	7.8
Internal Medicine	11.4	18.5	6.2	9.3	6.9	5.1	11.8	25.8	3.9	11.8	10.3
Radiation Oncology	7.9	_	_	2.5	2.2	3.1	3.6	2.0	_	1.6	2.7
Medical Oncology	4.3	3.8	2.0	_	2.0	1.2	1.0	5.0	3.0	_	2.2
Weighted Median	13.6	16.1	13.6	14.4	8.7	10.9	17.3	30.1	19.3	15.2	12.1

Table 5A: Plastic surgery (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Mammoplasty	52.0	42.0	_	20.0	23.0	12.0	30.0	_	_	_
Neurolysis	12.0	14.0	_	13.0	8.0	12.0	14.0	10.0	_	_
Blepharoplasty	21.0	12.0	_	11.5	4.0	_	18.0	10.0	_	_
Rhinoplasty	30.0	8.5	_	15.0	4.0	_	40.0	78.0	_	_
Scar Revision	25.5	12.0	38.0	20.0	10.0	_	30.0	48.0	_	_
Hand Surgery	20.0	8.0	16.0	12.0	22.0	8.0	16.0	5.0	_	_
Craniofacial Procedures	10.0	13.0	_	13.0	6.0	_	_	_	_	_
Skin Cancers and other Tumors	7.8	2.0	11.0	4.0	3.0	1.0	5.0	2.5	_	_
Weighted Median	34.4	22.6	26.4	17.3	15.6	11.2	25.2	31.1	_	_

Note: Weighted median does not include craniofacial procedures or skin cancers and other tumors.

Table 5B: Gynaecology (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Dilation & Curettage	12.0	14.0	4.0	7.5	8.0	2.0	12.0	4.0	8.0	24.0
Tubal Ligation	18.0	15.0	8.0	8.0	12.0	13.5	30.0	4.0	8.0	30.0
Hysterectomy (Vaginal/Abdominal)	18.0	14.0	10.0	8.0	10.0	13.5	9.0	7.0	12.0	24.0
Vaginal Repair	19.5	14.0	12.0	8.0	12.0	15.5	21.0	3.0	12.0	30.0
Tuboplasty	26.0	10.0	12.0	16.0	13.0	24.0	24.0	3.0	10.0	_
Laparoscopic Procedures	17.0	14.0	6.0	8.0	10.5	12.0	20.0	4.5	8.0	24.0
Hysteroscopic Procedures	12.0	14.0	6.3	8.0	9.5	8.0	12.0	4.5	8.0	24.0
Weighted Median	14.6	14.1	7.4	7.9	9.6	10.3	14.4	5.1	9.2	24.6

Table 5C: Ophthalmology (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Cataract Removal	28.0	24.0	32.0	40.0	17.0	12.0	24.0	20.0	64.0	60.0
Cornea Transplant	38.0	_	_	42.0	21.0	16.0	-	52.0	_	_
Cornea - Pterygium	25.0	7.0	40.0	12.0	18.0	12.0	22.0	56.0	_	78.0
Iris, Ciliary Body, Sclera, Anterior Chamber	12.0	5.3	_	_	14.0	10.0	_	_	_	78.0
Retina, Choroid, Vitreous	8.0	18.0	6.0	3.0	12.0	-	6.0	_	_	14.0
Lacrimal Duct	20.0	17.0	27.0	_	16.0	18.0	12.0	24.0	_	91.0
Strabismus	28.0	18.0	30.0	_	24.0	21.0	_	26.0	40.0	_
Operations on Eyelids	12.0	8.0	12.0	_	16.0	8.0	36.0	30.0	_	_
Glaucoma	12.0	8.0	16.0	4.0	11.0	3.0	6.0	_	_	_
Weighted Median	24.6	20.6	27.5	31.6	16.4	12.1	23.9	21.0	64.0	56.0

Note: Weighted median does not include treatment for glaucoma.

Table 5D: Otolaryngology (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Myringotomy	12.0	12.0	8.0	8.5	6.0	6.0	12.0	3.5	8.0	7.0
Tympanoplasty	16.0	24.0	52.0	9.0	12.0	14.0	14.0	22.0	18.0	14.0
Thyroid, Parathyroid, and Other Endocrine Glands	10.0	18.5	6.0	4.0	9.0	10.0	10.0	27.5	_	14.0
Tonsillectomy and/or Adenoidectomy	17.0	44.0	52.0	12.0	8.0	11.0	14.0	34.0	18.0	7.0
Rhinoplasty and/or Septal Surgery	26.0	35.0	52.0	9.0	12.0	22.0	27.0	25.0	18.0	14.0
Operations on Nasal Sinuses	26.0	25.8	52.0	9.0	14.0	18.0	27.0	20.0	18.0	14.0
Weighted Median	18.3	28.2	35.4	9.2	9.2	10.3	14.4	19.6	14.2	10.1

Table 5E: General surgery (2020)—median patient wait for treatment after appointment with specialist (in weeks)

	-					• •			•	•
Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Hernia/Hydrocele	13.0	15.0	12.0	4.5	6.0	8.0	18.5	58.5	3.5	6.0
Cholecystectomy	12.0	15.0	12.0	14.0	6.0	7.0	11.0	78.0	3.5	6.0
Colonoscopy	10.0	7.0	6.0	10.0	8.0	6.0	12.0	28.0	40.0	4.0
Intestinal Operations	5.0	7.5	6.0	5.5	4.5	4.0	5.0	45.0	3.5	4.0
Haemorrhoidectomy	21.0	8.0	10.0	9.0	8.0	12.0	12.0	130.0	3.5	4.0
Breast Biopsy	3.0	2.0	4.0	2.5	3.5	2.8	4.0	2.5	_	4.0
Mastectomy	3.5	2.0	3.0	4.0	3.0	3.0	3.0	3.3	3.5	4.0
Bronchus and Lung	_	_	-	4.0	1.5	-	_	6.0	_	4.0
Aneurysm Surgery	_	_	1.0	4.0	_	_	_	5.0	_	4.0
Varicose Veins	25.5	60.0	6.0	17.0	12.0	15.0	_	12.0	_	5.5
Weighted Median	7.8	9.2	7.2	7.5	5.4	6.1	10.0	43.3	10.6	4.2

Table 5F: Neurosurgery (2020)—median patient wait for treatment after appointment with specialist (in weeks)

• , ,	•					•		•	•	
Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Neurolysis	27.0	8.0	24.0	_	2.5	24.0	_	5.0	-	_
Disc Surgery/ Laminectomy	32.0	28.0	32.0	_	7.0	6.0	12.0	8.3	_	_
Elective Cranial Bone Flap	9.0	8.0	12.0	12.0	7.0	13.0	6.0	16.5	_	_
Aneurysm Surgery	6.0	_	_	16.0	22.5	18.0	_	_	_	_
Carotid endarterectomy	12.0	_	3.0	2.0	20.0	_	2.0	8.0	_	_
Weighted Median	21.3	14.1	18.8	11.5	6.9	13.7	8.1	12.4	_	_

Table 5G: Orthopaedic surgery (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Meniscectomy/Arthroscopy	12.0	14.0	13.8	26.0	10.0	12.0	10.0	24.0	_	9.0
Removal of Pins	18.0	16.0	3.8	25.0	12.0	16.0	11.0	25.5	_	11.0
Arthroplasty (Hip, Knee, Ankle, Shoulder)	20.0	24.0	5.0	32.5	20.0	23.5	33.5	52.0	_	20.0
Arthroplasty (Interphalangeal, Metatarsophalangeal)	36.0	20.0	7.8	29.0	18.0	16.0	1.0	32.0	_	10.0
Hallux Valgus/Hammer Toe	36.0	20.0	7.8	29.5	16.0	24.0	13.0	27.0	_	13.0
Digit Neuroma	36.0	25.0	3.8	25.0	4.0	12.5	7.0	27.0	_	11.0
Rotator Cuff Repair	11.0	31.0	14.5	33.0	12.0	13.0	26.0	30.0	_	20.0
Ostectomy (All Types)	20.0	26.0	14.0	26.0	16.0	10.5	26.0	50.0	_	11.0
Routine Spinal Instability	78.0	40.0	_	42.0	40.0	38.0	52.0	12.0	_	_
Weighted Median	22.4	23.9	6.3	31.3	18.2	19.8	28.6	43.6	_	16.8

Table 5H: Cardiovascular surgery (2020)—median patient wait for treatment after appointment with specialist (in weeks)

	Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
	Coronary Artery Bypass	3.3	0.6	0.1	_	0.3	0.4	0.5	_	_	0.0
ŧ	Valves & Septa of the Heart	0.5	0.7	0.1	_	0.1	0.4	0.5	_	_	0.0
ger	Aneurysm Surgery	1.0	0.6	0.1	_	0.1	0.5	0.1	_	_	0.1
Emergent	Carotid Endarterectomy	3.0	0.5	0.1	_	0.5	0.5	0.3	_	_	0.4
ш	Pacemaker Operations	_	0.5	_	_	0.0	0.6	0.1	_	_	_
	Weighted Median	1.9	0.6	0.1		0.1	0.5	0.3	_		0.0
	Coronary Artery Bypass	1.8	1.5	0.5	_	1.0	1.8	16.0	_	_	3.0
	Valves & Septa of the Heart	1.5	2.0	0.5	_	1.3	1.8	16.0	_	_	3.0
Urgent	Aneurysm Surgery	2.5	2.0	8.0	0.2	0.4	1.0	6.0	_	_	2.0
Urg	Carotid Endarterectomy	2.8	2.0	0.8	8.0	0.5	1.0	3.0	_	_	1.0
	Pacemaker Operations	_	2.0	_	_	1.0	1.3	2.0	_	_	_
	Weighted Median	1.7	1.9	0.5	0.7	1.1	1.5	8.1	_		2.9
	Coronary Artery Bypass	11.0	13.0	1.5	_	3.5	12.5	30.0	_	_	26.0
	Valves & Septa of the Heart	6.0	15.0	1.5	_	4.0	10.5	30.0	_	_	36.0
Elective	Aneurysm Surgery	5.0	11.0	3.0	1.5	5.0	5.0	30.0	_	_	4.5
Elec	Carotid Endarterectomy	3.0	8.0	2.0	2.0	6.0	7.0	30.0	_	_	_
_	Pacemaker Operations	2.0	24.0	_	_	4.0	4.5	16.0	_	_	_
	Weighted Median	5.0	17.9	1.5	1.9	3.9	8.2	22.6	_		29.5

Table 5I: Urology (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Non-radical Prostatectomy	10.0	12.0	12.0	14.0	5.0	9.0	16.0	_	_	_
Radical Prostatectomy	7.5	8.0	6.0	12.0	4.0	9.0	7.0	8.0	_	10.0
Transurethral Resection—Bladder	4.0	8.0	3.5	2.8	4.0	4.0	8.0	10.0	_	8.0
Radical Cystectomy	4.0	10.0	_	6.0	6.0	4.0	5.0	12.0	_	_
Cystoscopy	4.0	15.0	21.0	3.0	4.0	7.0	10.0	17.0	_	8.0
Hernia/Hydrocele	21.0	19.0	24.0	6.0	8.0	51.0	31.0	38.0	_	12.0
Bladder Fulguration	6.0	12.0	6.0	4.0	4.5	4.0	12.0	18.0	_	_
Ureteral Reimplantation for Reflux	10.0	14.0	36.0	4.0	12.0	52.0	_	14.0	_	16.0
Weighted Median	6.0	14.2	18.0	4.8	4.4	16.1	13.1	18.1	_	8.2

Table 5J: Internal medicine (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Colonoscopy	12.5	20.0	6.0	11.0	8.0	9.0	24.0	30.0	4.0	12.0
Angiography/ Angioplasty	8.0	9.0	6.5	3.3	4.0	4.0	6.0	6.0	3.0	12.0
Bronchoscopy	5.5	12.0	6.0	6.5	5.0	3.5	12.0	20.0	1.3	10.0
Gastroscopy	12.0	24.0	8.0	6.0	7.0	9.5	16.0	25.5	2.0	12.0
Weighted Median	11.4	18.5	6.2	9.3	6.9	5.1	11.8	25.8	3.9	11.8

Table 5K: Radiation oncology (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cancer of The Larynx	3.0	_	_	2.0	2.0	2.0	3.0	2.0	_	1.0
Cancer of The Cervix	3.5	_	_	2.0	2.0	2.0	3.0	_	_	1.0
Lung Cancer	4.0	_	_	1.0	2.0	2.0	3.0	_	_	1.0
Prostate Cancer	10.0	_	_	5.0	2.5	4.0	4.0	_	_	2.0
Breast Cancer	10.0	_	_	2.0	2.0	4.0	4.0	_	_	2.0
Early Side Effects from Treatment	0.5	_	_	_	1.5	0.8	2.0	1.0	_	1.0
Late Side Effects from Treatment	6.0	_	_	3.0	2.0	2.0	4.0	0.5	_	2.0
Weighted Median	7.9			2.5	2.2	3.1	3.6	2.0	_	1.6

Note: Weighted median does not include early or late side effects from treatment.

Table 5L: Medical oncology (2020)—median patient wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Cancer of the Larynx	4.5	2.0	2.0	_	2.0	_	1.0	_	3.0	_
Cancer of the Cervix	2.8	4.0	2.0	_	2.0	_	1.0	_	3.0	_
Lung Cancer	4.0	2.5	2.0	_	2.0	_	1.0	_	3.0	_
Breast Cancer	4.8	5.0	2.0	_	2.0	1.2	1.0	5.0	3.0	_
Side Effects from Treatment	1.5	1.0	0.5	_	0.4	0.5	0.5	0.0	0.2	_
Weighted Median	4.3	3.8	2.0	_	2.0	1.2	1.0	5.0	3.0	_

Note: Weighted median does not include side effects from treatment.

Table 6: Comparison of median weeks waited to receive treatment after appointment with specialist, by selected specialties, 2020 and 2019

Procedure	Brit	ish Colur	nbia		Alberta		Sas	skatchev	van		Manitob	a		Ontario	
	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg
Plastic Surgery	34.4	32.9	5%	22.6	26.1	-13%	26.39	15.3	72%	17.3	17.8	-3%	15.6	8.3	87%
Gynaecology	14.6	11.1	32%	14.1	12.7	11%	7.42	6.6	12%	7.9	7.5	5%	9.6	7.1	36%
Ophthalmology	24.6	19.6	26%	20.6	17.2	20%	27.48	31.3	-12%	31.6	46.1	-32%	16.4	13.0	26%
Otolaryngology	18.3	14.8	24%	28.2	20.8	35%	35.36	15.2	133%	9.2	14.7	-38%	9.2	9.1	2%
General Surgery	7.8	7.1	9%	9.2	10.0	-9%	7.19	4.4	62%	7.5	9.3	-19%	5.4	4.7	14%
Neurosurgery	21.3	10.2	109%	14.1	20.7	-32%	18.76	10.2	84%	11.5	12.0	-4%	6.9	7.6	-10%
Orthopaedic Surgery	22.4	18.9	19%	23.9	32.5	-26%	6.33	22.2	-72%	31.3	31.7	-1%	18.2	22.3	-18%
Cardiovascular Surg. (Urgent)	1.7	1.4	23%	1.9	1.0	89%	0.51	_	_	0.7	2.0	-66%	1.1	0.8	37%
Cardiovascular Surg. (Elective)	5.0	5.1	-3%	17.9	12.0	49%	1.54	_	_	1.9	7.3	-74%	3.9	3.9	0%
Urology	6.0	6.1	-1%	14.2	6.0	134%	17.99	_	_	4.8	6.8	-29%	4.4	4.0	8%
Internal Medicine	11.4	10.2	12%	18.5	20.1	-8%	6.20	8.3	-25%	9.3	13.8	-33%	6.9	5.9	16%
Radiation Oncology	7.9	4.9	62%	_	2.8	_	_	2.5	_	2.5	2.0	24%	2.2	2.0	8%
Medical Oncology	4.3	3.9	12%	3.8	1.5	155%	2.00	1.5	33%	_	_	_	2.0	2.0	0%
Weighted Median	13.6	11.3	20%	16.1	16.0	1%	13.64	13.7	0%	14.4	19.2		8.7	8.0	9%

Procedure		Quebec		Nev	w Brunsv	vick	N	lova Scot	ia	Prince	Edward	Island	Newfour	ndland &	Labrador
	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg
Plastic Surgery	11.2	8.8	27%	25.2	20.9	21%	31.1	14.0	122%	_	_	_	_	10.3	_
Gynaecology	10.3	8.8	17%	14.4	17.4	-17%	5.1	10.1	-49%	9.2	_	_	24.6	5.0	392%
Ophthalmology	12.1	9.5	27%	23.9	17.1	39%	21.0	20.0	5%	64.0	40.9	57%	56.0	40.7	38%
Otolaryngology	10.3	10.4	-1%	14.4	17.3	-17%	19.6	19.8	-1%	14.2	8.9	59%	10.1	9.8	4%
General Surgery	6.1	5.0	23%	10.0	10.6	-6%	43.3	11.4	280%	10.6	_	_	4.2	5.7	-26%
Neurosurgery	13.7	5.2	163%	8.1	32.9	-75%	12.4	6.0	107%	_	_	_	_	_	_
Orthopaedic Surgery	19.8	21.6	-8%	28.6	43.8	-35%	43.6	44.4	-2%	_	_	_	16.8	19.2	-12%
Cardiovascular Surg. (Urgent)	1.5	1.2	31%	8.1	1.0	710%	_	1.4	-	_	_	_	2.9	4.2	-31%
Cardiovascular Surg. (Elective)	8.2	7.2	14%	22.6	24.0	-6%	_	5.7	_	_	_	_	29.5	27.2	8%
Urology	16.1	6.7	141%	13.1	9.3	41%	18.1	8.9	103%	_	_	_	8.2	2.0	310%
Internal Medicine	5.1	4.3	19%	11.8	10.8	9%	25.8	18.8	37%	3.9	7.0	-43%	11.8	7.7	55%
Radiation Oncology	3.1	3.8	-18%	3.6	_	_	2.0	4.9	-59%	_	2.5	_	1.6	1.6	-1%
Medical Oncology	1.2	2.0	-40%	1.0	1.0	0%	5.0	1.5	237%	3.0	5.0	-40%	_	1.3	_
Weighted Median	10.9	9.1	19%	17.3	18.5	<del>-6</del> %	30.1	17.1	76%	19.3	20.5	 -5%	15.2	12.4	23%

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

Table 7: Frequency distribution of waiting times (specialist to treatment) by province, 2020—proportion of survey waiting times that fall within given ranges (percentage)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
0-3.99 Weeks	11.5%	10.5%	33.5%	16.8%	19.9%	25.6%	11.8%	16.8%	33.3%	24.5%
4-7.99 Weeks	15.9%	16.9%	22.7%	22.3%	27.6%	17.8%	22.4%	14.8%	16.7%	20.8%
8-12.99 Weeks	20.7%	23.5%	22.7%	24.8%	25.0%	25.3%	24.5%	12.8%	26.2%	25.5%
13-25.99 Weeks	24.4%	29.7%	12.0%	18.9%	19.3%	21.8%	15.9%	24.2%	16.7%	15.1%
26-51.99 Weeks	19.3%	12.6%	5.4%	15.1%	5.4%	7.0%	18.0%	16.1%	4.8%	10.4%
1 year plus	8.2%	6.8%	3.7%	2.1%	2.8%	2.6%	7.3%	15.4%	2.4%	3.8%

Note: Columns do not necessarily sum to 100 as a result of rounding.

Table 8: Median reasonable patient wait for treatment after appointment with specialist, 2020 (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	18.9	15.4	_	8.0	8.8	34.5	11.0	_	_	_	15.8
Gynaecology	12.8	10.8	6.6	6.6	6.7	10.3	13.3	6.4	6.6	_	8.5
Ophthalmology	10.8	9.9	13.3	13.0	11.1	8.1	12.0	12.2	16.0	9.5	10.4
Otolaryngology	15.9	21.4	18.0	7.8	11.0	10.2	11.2	10.7	10.5	_	12.2
General Surgery	5.2	8.5	6.0	6.7	6.4	8.6	9.2	8.2	_	3.3	6.6
Neurosurgery	13.7	10.2	11.2	11.4	10.0	15.5	10.8	3.7	_	_	11.7
Orthopaedic Surgery	11.9	12.1	14.9	14.2	11.5	10.9	17.6	18.4	_	12.4	12.1
Cardiovascular Surgery (Urgent)	1.7	1.7	1.4	_	1.8	1.5	3.8	_	_	1.0	1.7
Cardiovascular Surgery (Elective)	12.4	15.9	4.3	_	6.4	5.1	11.7	_	_	6.0	7.6
Urology	5.0	6.2	4.9	3.2	4.1	5.7	8.5	_	_	5.1	4.6
Internal Medicine	4.7	7.9	2.6	5.4	2.8	4.5	5.4	7.6	5.9	4.9	4.5
Radiation Oncology	4.9	_	_	3.0	2.9	3.1	3.1	_	_	3.2	3.0
Medical Oncology	2.0	2.7	2.0	_	1.9	2.0	2.0	3.0	3.0	_	2.0
Weighted Median	7.7	9.6	8.3	8.2	6.9	8.6	10.8	8.5	6.0	4.7	7.8

Table 9A: Plastic surgery (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Mammoplasty	26.0	24.0	-	12.0	10.0	52.0	12.0	_	_	_
Neurolysis	6.0	6.0	_	4.0	6.0	12.0	8.0	_	_	_
Blepharoplasty	24.0	12.0	_	4.0	4.0	_	12.0	_	_	_
Rhinoplasty	18.0	6.0	_	4.0	9.0	_	12.0	_	_	_
Scar Revision	16.5	12.0	_	8.0	12.0	_	12.0	_	_	_
Hand Surgery	12.0	12.0	_	4.0	8.0	20.0	10.0	_	_	_
Craniofacial Procedures	12.0	6.0	_	4.0	5.0	_	_	_	_	_
Skin Cancers and other Tumors	6.0	3.5	_	1.0	4.0	1.0	6.0	_	_	_
Weighted Median	18.9	15.4	_	8.0	8.8	34.5	11.0	_	_	_

Note: Weighted median does not include craniofacial procedures or skin cancers and other tumors.

Table 9B: Gynaecology (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Durandona	DO.	AD	CI/	MD	ON	00	ND	NC	DE	MI
Procedure	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Dilation & Curettage	6.0	8.0	4.0	5.0	4.5	3.5	8.0	6.0	6.0	_
Tubal Ligation	20.0	14.0	11.0	6.3	8.0	14.5	31.0	10.0	6.0	_
Hysterectomy (Vaginal/Abdominal)	18.3	12.0	8.0	9.0	8.5	12.0	11.0	6.0	8.0	_
Vaginal Repair	26.0	12.0	8.0	8.0	10.0	13.5	19.0	6.0	8.0	_
Tuboplasty	20.0	16.0	39.0	6.0	10.8	24.0	36.0	_	10.0	_
Laparoscopic Procedures	12.0	9.0	6.0	6.0	8.0	12.0	11.0	6.0	6.0	_
Hysteroscopic Procedures	11.5	11.0	4.0	6.0	6.0	9.0	10.0	6.0	6.0	_
Weighted Median	12.8	10.8	6.6	6.6	6.7	10.3	13.3	6.4	6.6	_

Table 9C: Ophthalmology (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cataract Removal	12.0	12.0	14.0	16.0	12.0	9.0	12.0	12.0	16.0	10.0
Cornea Transplant	18.0	11.5	_	9.0	16.0	16.0	_	_	_	_
Cornea - Pterygium	12.0	6.0	24.0	9.0	16.0	7.0	18.0	12.0	_	_
Iris, Ciliary Body, Sclera, Anterior Chamber	8.0	4.0	_	_	12.0	9.0	_	_	_	_
Retina, Choroid, Vitreous	4.0	5.0	6.0	3.0	5.0	0.5	6.0	_	_	6.0
Lacrimal Duct	12.0	12.5	24.0	_	12.0	12.0	12.0	24.0	_	_
Strabismus	10.0	6.0	24.0	_	12.0	12.0	_	_	16.0	_
Operations on Eyelids	8.0	7.5	14.0	_	9.8	10.0	12.0	13.5	_	_
Glaucoma	3.0	4.0	12.0	2.0	6.0	5.0	6.0	_	_	_
Weighted Median	10.8	9.9	13.3	13.0	11.1	8.1	12.0	12.2	16.0	9.5

Note: Weighted median does not include treatment for glaucoma.

Table 9D: Otolaryngology (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Myringotomy	8.0	_	4.0	6.5	8.0	7.0	7.0	2.8	8.0	_
Tympanoplasty	12.0	26.0	26.0	8.5	12.0	14.0	10.0	12.5	12.0	_
Thyroid, Parathyroid, and Other Endocrine Glands	10.0	12.0	6.0	6.0	11.0	9.0	7.0	10.0	_	_
Tonsillectomy and/or Adenoidectomy	12.0	25.0	26.0	8.5	12.0	12.0	14.0	20.0	12.0	_
Rhinoplasty and/or Septal Surgery	26.0	38.0	26.0	8.5	14.0	22.0	20.0	17.5	12.0	_
Operations on Nasal Sinuses	25.0	18.0	26.0	8.5	12.0	12.0	20.0	10.0	12.0	_
Weighted Median	15.9	21.4	18.0	7.8	11.0	10.2	11.2	10.7	10.5	

Table 9E: General surgery (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MD	ON	00	NB	MC	DE	NL
Procedure	ВС	AB	3N	MB	OIN	QC	NB	NS	PE	NL
Hernia/Hydrocele	9.0	14.0	10.0	6.5	12.0	12.0	12.0	10.0	_	5.0
Cholecystectomy	8.0	12.0	11.0	8.0	8.0	12.0	12.0	8.0	_	3.5
Colonoscopy	7.5	12.0	6.0	6.0	8.0	4.0	6.0	12.0	_	2.5
Intestinal Operations	3.0	5.0	4.0	6.0	4.0	4.0	6.0	6.0	_	3.5
Haemorrhoidectomy	12.0	14.0	10.0	16.5	12.0	18.0	12.0	12.0	_	7.0
Breast Biopsy	3.0	2.5	3.0	2.5	2.0	2.3	5.0	4.0	_	1.8
Mastectomy	2.5	2.3	3.0	_	3.5	4.0	5.0	6.0	_	2.5
Bronchus and Lung	_	_	_	_	_	_	19.0	_	_	_
Aneurysm Surgery	_	_	_	_	_	_	11.0	_	_	_
Varicose Veins	12.0	8.0	6.0	6.0	45.5	24.0	21.0	_	_	6.0
Weighted Median	5.2	8.5	6.0	6.7	6.4	8.6	9.2	8.2	_	3.3

Table 9F: Neurosurgery (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

										,
Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Peripheral Nerve	19.0	12.0	10.0	_	_	24.0	-	2.0	-	-
Disc Surgery/ Laminectomy	13.0	6.0	10.0	_	16.0	9.0	16.0	2.0	_	_
Elective Cranial Bone Flap	13.0	12.0	12.0	12.0	8.0	15.0	8.0	5.0	_	_
Aneurysm Surgery	6.0	_	_	8.0	4.0	_	_	_	_	_
Carotid endarterectomy	21.0	_	_	2.0	2.0	_	2.0	3.0	_	-
Weighted Median	13.7	10.2	11.2	11.4	10.0	15.5	10.8	3.7	_	_

Table 9G: Orthopaedic surgery (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Meniscectomy/Arthroscopy	11.5	9.0	7.0	10.5	6.0	6.0	7.5	5.5	_	10.0
Removal of Pins	12.0	12.0	14.0	10.5	12.0	12.0	8.0	9.0	_	12.0
Arthroplasty (Hip, Knee, Ankle, Shoulder)	12.0	12.0	15.0	15.0	12.0	12.0	22.0	24.0	_	13.0
Arthroplasty (Interphalangeal, Metatarsophalangeal)	12.0	12.0	12.0	12.5	12.0	18.0	1.0	6.0	_	11.0
Hallux Valgus/Hammer Toe	12.0	12.0	24.0	16.0	11.0	12.0	13.0	15.0	_	14.0
Digit Neuroma	12.0	14.0	24.0	9.0	11.0	9.0	7.0	15.0	_	11.0
Rotator Cuff Repair	11.0	12.0	14.0	14.0	8.0	8.0	17.0	7.5	_	14.0
Ostectomy (All Types)	12.0	14.0	8.0	16.0	12.0	9.0	16.0	7.5	_	11.0
Routine Spinal Instability	12.0	12.0	_	16.0	12.0	12.5	10.5	16.0	_	12.0
Weighted Median	11.9	12.1	14.9	14.2	11.5	10.9	17.6	18.4	_	12.4

Table 9H: Cardiovascular surgery (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

	Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
	Coronary Artery Bypass	3.5	0.5	_	_	0.0	0.5	0.5	_	_	0.0
±	Valves & Septa of the Heart	1.0	0.5	_	_	0.0	0.5	0.5	_	_	0.0
ger	Aneurysm Surgery	2.5	0.3	0.5	_	0.0	0.1	0.3	_	_	0.0
Emergent	Carotid Endarterectomy	2.1	0.3	0.5	_	0.0	0.1	0.0	_	_	_
ш	Pacemaker Operations	_	0.5	_	_	0.0	1.0	_	_	_	_
	Weighted Median	2.2	0.5	0.5	_	0.0	0.7	0.5	_		0.0
	Coronary Artery Bypass	1.8	1.0	_	_	2.0	1.5	4.0	_	_	1.0
	Valves & Septa of the Heart	1.5	2.0	_	_	2.0	1.5	4.0	_	_	1.0
Urgent	Aneurysm Surgery	1.8	1.0	1.0	_	1.0	1.0	4.0	_	_	1.0
Urg	Carotid Endarterectomy	2.0	1.3	1.5	_	0.5	1.0	2.0	_	_	_
	Pacemaker Operations	_	2.0	_	_	1.5	1.5	_	_	_	_
	Weighted Median	1.7	1.7	1.4	_	1.8	1.5	3.8	_		1.0
	Coronary Artery Bypass	14.0	6.0	_	_	4.0	5.0	12.0	_	_	6.0
4)	Valves & Septa of the Heart	12.0	14.0	_	_	4.0	8.0	12.0	_	_	6.0
Elective	Aneurysm Surgery	4.0	7.0	6.0	_	6.0	6.0	10.0	_	_	6.0
Elec	Carotid Endarterectomy	8.0	7.0	4.0	_	7.0	4.0	8.0	_	_	_
_	Pacemaker Operations	_	24.0	_	_	10.0	3.5	_	_	_	_
	Weighted Median	12.4	15.9	4.3	_	6.4	5.1	11.7	_	_	6.0

Table 91: Urology (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Non-radical Prostatectomy	8.0	12.0	12.0	4.0	6.0	4.0	8.0	_	_	-
Radical Prostatectomy	6.0	8.0	6.0	6.0	4.0	5.0	8.0	_	_	12.0
Transurethral Resection - Bladder	3.0	6.0	3.0	3.0	4.0	3.5	4.0	_	_	6.0
Radical Cystectomy	3.0	7.0	_	4.0	4.0	4.0	6.0	_	_	_
Cystoscopy	4.0	4.0	4.0	2.0	3.5	5.0	6.0	_	_	4.0
Hernia/Hydrocele	13.0	16.0	14.0	6.0	9.0	12.0	20.0	_	_	24.0
Bladder Fulguration	4.0	4.0	3.5	3.0	4.0	2.5	12.0	_	_	-
Ureteral Reimplantation for Reflux	3.0	8.0	_	8.0	6.0	6.0	_	_	_	24.0
Weighted Median	5.0	6.2	4.9	3.2	4.1	5.7	8.5	_	_	5.1

Table 9J: Internal medicine (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Colonoscopy	5.0	8.5	3.0	6.5	3.0	7.0	12.0	8.0	6.0	5.0
Angiography/ Angioplasty	4.0	4.0	1.8	2.0	2.0	4.0	2.0	6.0	5.0	5.0
Bronchoscopy	4.0	6.0	2.0	2.0	2.5	3.0	3.0	6.5	2.0	4.0
Gastroscopy	4.0	10.5	3.0	3.5	3.8	6.0	12.0	8.0	3.0	4.0
Weighted Median	4.7	7.9	2.6	5.4	2.8	4.5	5.4	7.6	5.9	4.9

Table 9K: Radiation oncology (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cancer of the Larynx	2.0	_	_	3.0	2.0	2.0	2.0	_	_	2.0
Cancer of the Cervix	3.0	_	_	3.0	2.0	2.0	2.0	_	_	2.0
Lung Cancer	3.0	_	_	3.0	2.0	2.0	2.0	_	_	2.0
Prostate Cancer	7.0	_	_	3.0	4.0	4.0	4.0	_	_	4.0
Breast Cancer	5.0	_	_	3.0	3.0	4.0	4.0	_	_	4.0
Early Side Effects from Treatment	0.5	_	_	1.0	1.0	1.0	2.0	_	_	2.0
Late Side Effects from Treatment	4.0	_	_	2.0	2.0	2.0	4.0	_	_	4.0
Weighted Median	4.9	_	_	3.0	2.9	3.1	3.1	_	_	3.2

Note: Weighted median does not include early or late side effects from treatment.

Table 9L: Medical oncology (2020)—median reasonable wait for treatment after appointment with specialist (in weeks)

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cancer of the Larynx	2.0	2.0	2.0	_	2.0	-	2.0	_	3.0	_
Cancer of the Cervix	2.0	2.5	2.0	_	2.0	_	2.0	_	3.0	_
Lung Cancer	2.0	2.5	2.0	_	2.0	_	2.0	_	3.0	_
Breast Cancer	2.0	3.0	2.0	_	1.8	2.0	2.0	3.0	3.0	_
Side Effects from Treatment	1.0	0.5	0.5	_	0.5	0.5	0.5	0.0	0.2	_
Weighted Median	2.0	2.7	2.0	_	1.9	2.0	2.0	3.0	3.0	_

Note: Weighted median does not include side effects from treatment.

Table 10: Comparison between median actual weeks waited and median reasonable number of weeks to wait for treatment after appointment with specialist, by selected specialties, 2020

Procedure	Bri	tish Colum	ıbia	Alberta			Sa	skatchew	an e	Manitoba				Ontario		
	Actual	Reasonable	Diff.	Actual	Reasonable	Diff.	Actual	Reasonable	Diff.	Actual	Reasonable	Diff.	Actual	Reasonable	Diff.	
Plastic Surgery	34.4	18.9	82%	22.6	15.4	47%	26.4	_	_	17.3	8.0	116%	15.6	8.8	78%	
Gynaecology	14.6	12.8	15%	14.1	10.8	31%	7.4	6.6	12%	7.9	6.6	20%	9.6	6.7	43%	
Ophthalmology	24.6	10.8	128%	20.6	9.9	108%	27.5	13.3	107%	31.6	13.0	143%	16.4	11.1	48%	
Otolaryngology	18.3	15.9	15%	28.2	21.4	32%	35.4	18.0	97%	9.2	7.8	17%	9.2	11.0	-16%	
General Surgery	7.8	5.2	50%	9.2	8.5	7%	7.2	6.0	20%	7.5	6.7	13%	5.4	6.4	-16%	
Neurosurgery	21.3	13.7	56%	14.1	10.2	39%	18.8	11.2	68%	11.5	11.4	1%	6.9	10.0	-31%	
Orthopaedic Surgery	22.4	11.9	88%	23.9	12.1	97%	6.3	14.9	-57%	31.3	14.2	121%	18.2	11.5	58%	
Cardiovascular Surg. (Urg.)	1.7	1.7	4%	1.9	1.7	8%	0.5	1.4	-64%	0.7	_	_	1.1	1.8	-40%	
Cardiovascular Surg. (Elect.)	5.0	12.4	-60%	17.9	15.9	13%	1.5	4.3	-64%	1.9	_	_	3.9	6.4	-39%	
Urology	6.0	5.0	21%	14.2	6.2	128%	18.0	4.9	271%	4.8	3.2	50%	4.4	4.1	7%	
Internal Medicine	11.4	4.7	140%	18.5	7.9	132%	6.2	2.6	136%	9.3	5.4	70%	6.9	2.8	144%	
Radiation Oncology	7.9	4.9	61%	_	_	_	_	_	_	2.5	3.0	-17%	2.2	2.9	-27%	
Medical Oncology	4.3	2.0	117%	3.8	2.7	39%	2.0	2.0	0%	_	_	_	2.0	1.9	6%	
Weighted Median	13.6	7.7	77%	16.1	9.6	68%	13.6	8.3	65%	14.4	8.2	76%	8.7	6.9	26%	

Procedure		Quebec		Ne	w Brunsw	ick		Nova Scoti	a	Princ	e Edward I	sland	Newfoundland & Labrador			
	Actual	Reasonable	Diff.	Actual	Reasonable	Diff.										
Plastic Surgery	11.2	34.5	-67%	25.2	11.0	130%	31.1	_	_	_	_	_	_	_	_	
Gynaecology	10.3	10.3	0%	14.4	13.3	9%	5.1	6.4	-21%	9.2	6.6	39%	24.6	_	_	
Ophthalmology	12.1	8.1	49%	23.9	12.0	100%	21.0	12.2	73%	64.0	16.0	300%	56.0	9.5	487%	
Otolaryngology	10.3	10.2	1%	14.4	11.2	29%	19.6	10.7	82%	14.2	10.5	36%	10.1	_	_	
General Surgery	6.1	8.6	-30%	10.0	9.2	8%	43.3	8.2	428%	10.6	_	_	4.2	3.3	29%	
Neurosurgery	13.7	15.5	-11%	8.1	10.8	-25%	12.4	3.7	234%	_	_	_	_	_	_	
Orthopaedic Surgery	19.8	10.9	81%	28.6	17.6	63%	43.6	18.4	136%	_	_	_	16.8	12.4	36%	
Cardiovascular Surg. (Urg.)	1.5	1.5	1%	8.1	3.8	111%	_	_	_	_	_	_	2.9	1.0	189%	
Cardiovascular Surg. (Elect.)	8.2	5.1	62%	22.6	11.7	94%	_	_	_	_	_	_	29.5	6.0	391%	
Urology	16.1	5.7	184%	13.1	8.5	55%	18.1	_	_	_	_	_	8.2	5.1	60%	
Internal Medicine	5.1	4.5	14%	11.8	5.4	118%	25.8	7.6	239%	3.9	5.9	-33%	11.8	4.9	142%	
Radiation Oncology	3.1	3.1	0%	3.6	3.1	14%	2.0	_	_	_	_	_	1.6	3.2	-50%	
Medical Oncology	1.2	2.0	-40%	1.0	2.0	-50%	5.0	3.0	67%	3.0	3.0	0%	_	_	_	
Weighted Median	10.9	8.6	27%	17.3	10.8	61%	30.1	8.3	255%	19.3	1.7	1,011%	15.2	4.5	233%	

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

Table 11: Average percentage of patients receiving treatment outside Canada, 2020

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	2.3%	0.7%	0.0%	0.7%	0.1%	5.0%	2.0%	0.0%	-	_	1.4%
Gynaecology	0.5%	1.0%	1.6%	0.7%	0.8%	0.9%	0.0%	0.0%	0.0%	0.5%	0.8%
Ophthalmology	0.8%	1.7%	1.7%	0.8%	0.9%	0.7%	0.0%	0.3%	1.0%	0.3%	0.9%
Otolaryngology	0.2%	7.0%	0.0%	4.0%	1.5%	0.4%	0.0%	0.3%	0.0%	0.5%	1.4%
General Surgery	1.3%	3.4%	1.8%	0.0%	0.8%	0.0%	2.0%	0.7%	0.0%	0.0%	1.2%
Neurosurgery	2.0%	1.0%	0.3%	0.0%	0.8%	0.0%	0.0%	0.0%	_	_	0.6%
Orthopaedic Surgery	1.7%	3.7%	5.0%	0.6%	1.6%	1.1%	0.5%	3.3%	_	0.1%	1.7%
Cardiovascular Surgery	0.1%	0.3%	5.0%	0.0%	0.0%	0.4%	0.0%	_	_	0.0%	0.4%
Urology	2.2%	5.1%	0.5%	0.3%	1.6%	0.6%	0.8%	0.0%	_	0.5%	1.7%
Internal Medicine	1.5%	1.1%	0.0%	6.2%	1.3%	0.3%	0.6%	0.0%	0.7%	0.0%	1.3%
Radiation Oncology	2.3%	_	_	1.0%	1.0%	2.2%	0.0%	0.0%	_	0.0%	1.6%
Medical Oncology	0.9%	0.0%	0.0%	_	1.3%	0.0%	1.0%	1.0%	1.0%	_	0.9%
All Specialties	1.3%	2.3%	1.6%	1.3%	1.1%	0.8%	0.6%	0.6%	0.4%	0.2%	1.2%

Table 12: Estimated number of procedures for which patients are waiting after appointment with specialist, by specialty, 2020

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Procedure	БС	AD	3N	WID	UN	ųс	ND	NS	FE	INL
Plastic Surgery	5,820	3,631	295	578	6,969	2,134	862	610	_	_
Gynaecology	5,269	5,804	821	1,033	10,834	4,954	1,156	431	164	2,895
Ophthalmology	40,146	24,512	10,278	9,320	58,003	28,044	5,893	5,961	2,740	8,401
Otolaryngology	4,582	6,790	3,806	846	9,303	7,049	899	1,318	144	576
General Surgery	22,064	15,620	4,423	5,019	32,172	8,706	1,807	26,316	832	1,907
Neurosurgery	3,321	1,406	630	222	2,614	2,681	163	328	_	_
Orthopaedic Surgery	19,243	15,942	1,407	7,219	44,488	24,037	4,377	8,311	_	1,449
Cardiovascular Surgery	203	262	10	1	608	643	323	0	_	41
Urology	6,625	9,461	5,011	631	17,690	11,023	1,923	4,362	_	1,819
Internal Medicine	17,592	18,351	1,697	3,103	17,831	2,860	1,047	6,174	247	2,188
Radiation Oncology	125	_	_	7	465	176	43	13	_	7
Medical Oncology	372	243	39	_	1,456	194	17	122	5	_
Residual	81,967	80,094	23,242	22,884	183,774	76,508	14,350	43,723	3,001	20,068
Total	207,329	182,118	51,657	50,863	386,207	169,010	32,860	97,670	7,132	39,351
Proportion of Population	4.03%	4.12%	4.38%	3.69%	2.62%	1.97%	4.20%	9.97%	4.47%	7.54%

Canada: Total number of procedures for which patients are waiting in 2018  $\,-\,$  1,224,198

Percentage of Population  $\,-\,$  3.2%

Notes: Totals may not match sums of numbers for individual procedures as a result of rounding. • All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

Table 13A: Plastic surgery (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Mammoplasty	3,752	2,491	_	276	4,266	1,194	503	_	_	_
Neurolysis	315	198	_	49	779	643	83	43	_	_
Blepharoplasty	142	153	_	4	73	_	14	6	_	_
Rhinoplasty	602	122	_	74	165	_	78	214	_	_
Scar Revision	610	561	201	119	493	_	93	321	_	_
Hand Surgery	400	106	94	57	1,193	297	90	26	_	_
Total	5,820	3,631	295	578	6,969	2,134	862	610	_	_

Table 13B: Gynaecology (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Dilation & Curettage	1,451	1,844	95	311	2,840	183	223	67	39	1,014
Tubal Ligation	190	874	127	145	1,655	971	330	35	14	259
Hysterectomy (Vaginal/Abdominal)	1,808	1,534	331	253	2,987	2,217	198	194	59	373
Vaginal Repair	415	375	61	57	592	424	101	14	6	103
Tuboplasty	99	17	6	4	31	24	2	1	1	_
Laparoscopic Procedures	240	143	31	36	713	396	48	12	4	62
Hysteroscopic Procedures	1,066	1,019	169	226	2,016	739	253	109	41	1,084
Total	5,269	5,804	821	1,033	10,834	4,954	1,156	431	164	2,895

Note: Totals may not match sums of individual procedures as a result of rounding.

Table 13C: Ophthalmology (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cataract Removal	35,746	18,460	9,387	9,005	45,449	24,437	5,636	5,221	2,740	7,576
Cornea Transplant	460	_	_	107	467	257	_	188	_	_
Cornea - Pterygium	270	97	74	6	366	266	21	73	_	38
Iris, Ciliary Body, Sclera, Anterior Chamber	487	221	_	_	2,124	817	_	_	_	402
Retina, Choroid, Vitreous	1,650	4,025	300	201	5,314	_	17	_	_	231
Lacrimal Duct	283	481	126	_	730	557	39	69	_	154
Strabismus	731	584	166	_	2,141	1,001	_	218	0	_
Operations on Eyelids	519	644	225	_	1,412	709	180	192	_	_
Total	40,146	24,512	10,278	9,320	58,003	28,044	5,893	5,961	2,740	8,401

Note: Totals may not match sums of individual procedures as a result of rounding. • The procedure data reported generally includes only those procedures performed in public facilities. A large number of ophthalmological surgeries are performed in private facilities. The distribution of surgeries between public and private facilities varies significantly among provinces. There are also differences among provinces regarding payment or reimbursement for ophthalmological surgery at a private facility.

Table 13D: Otolaryngology (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Myringotomy	434	520	234	135	1,432	1,607	271	77	31	134
Tympanoplasty	207	371	238	47	556	400	37	118	9	71
Thyroid, Parathyroid, and Other Endocrine Glands	413	837	66	49	1,477	924	72	265	_	100
Tonsillectomy and/or Adenoidectomy	1,164	3,431	2,041	338	2,474	2,080	308	562	60	86
Rhinoplasty and/or Septal Surgery	501	462	233	57	603	688	46	103	2	37
Operations on Nasal Sinuses	1,864	1,169	994	220	2,759	1,350	166	193	43	148
Total	4,582	6,790	3,806	846	9,303	7,049	899	1,318	144	576

Table 13E: General surgery (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	BC	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Hernia/Hydrocele	2,772	2,896	732	305	4,070	3,316	711	2,574	23	156
Cholecystectomy	2,043	2,635	682	901	3,247	2,288	471	4,211	25	164
Colonoscopy	7,334	3,020	1,011	1,806	7,940	478	255	4,532	610	482
Intestinal Operations	7,647	5,896	1,651	1,570	14,080	1,425	285	13,454	161	932
Haemorrhoidectomy	1,376	214	239	230	1,312	262	27	1,373	2	30
Breast Biopsy	8	2	1	2	73	12	3	13	_	71
Mastectomy	396	159	68	106	865	618	55	68	12	52
Bronchus and Lung	_	_	_	37	135	_	_	55	_	13
Aneurysm Surgery	_	_	1	6	_	_	_	3	_	2
Varicose Veins	489	798	38	56	450	308	_	34	_	5
Total	22,064	15,620	4,423	5,019	32,172	8,706	1,807	26,316	832	1,907

Note: Totals may not match sums of individual procedures as a result of rounding.

Table 13F: Neurosurgery (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Peripheral Nerve	308	73	93	_	112	947	_	18	_	_
Disc Surgery/ Laminectomy	2,360	851	300	_	634	256	99	58	_	_
Elective Cranial Bone Flap	589	482	234	217	1,631	1,452	61	244	_	_
Aneurysm Surgery	4	_	_	3	45	26	_	_	_	_
Carotid endarterectomy	61	_	2	2	193	_	3	8	_	_
Total	3,321	1,406	630	222	2,614	2,681	163	328	_	_

Note: Totals may not match sums of individual procedures as a result of rounding.

Table 13G: Orthopaedic surgery (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Meniscectomy/Arthroscopy	418	409	179	218	883	1,496	61	151	-	43
Removal of Pins	1,410	1,117	67	327	1,944	1,927	100	326	_	64
Arthroplasty (Hip, Knee, Ankle, Shoulder)	10,835	9,135	699	4,862	32,428	14,789	3,252	6,000	_	1,014
Arthroplasty (Interphalangeal, Metatarsophalangeal)	1,350	527	70	217	1,249	500	4	188	_	32
Hallux Valgus/Hammer Toe	264	120	15	74	329	349	16	53	_	5
Digit Neuroma	2,019	892	72	356	577	1,405	87	486	_	122
Rotator Cuff Repair	437	1,561	188	379	1,458	782	179	408	_	129
Ostectomy (All Types)	802	1,115	116	345	1,956	680	187	652	_	41
Routine Spinal Instability	1,709	1,066	-	443	3,664	2,110	492	46	_	-
Total	19,243	15,942	1,407	7,219	44,488	24,037	4,377	8,311	_	1,449

Table 13H: Cardiovascular surgery (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Coronary Artery Bypass	90	48	6	_	163	199	173	_	_	25
Valves & Septa of the Heart	83	98	4	_	213	192	103	_	_	15
Aneurysm Surgery	3	2	0	0	1	2	1	_	_	0
Carotid Endarterectomy	27	6	1	1	7	10	4	_	_	1
Pacemaker Operations	_	109	_	_	223	239	42	_	_	_
Total	203	262	10	1	608	643	323	0	_	41

Note: Totals may not match sums of individual procedures as a result of rounding.

Table 13I: Urology (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Non-radical Prostatectomy	911	643	208	157	974	840	212	-	_	_
Radical Prostatectomy	166	112	19	50	201	280	22	27	_	24
Transurethral Resection — Bladder	368	454	58	46	1,115	658	137	181	_	106
Radical Cystectomy	17	32	_	4	62	29	4	13	_	_
Cystoscopy	2,921	6,170	4,256	180	11,053	909	763	2,899	_	1,567
Hernia/Hydrocele	1,791	1,358	293	122	2,221	7,692	576	739	_	119
Bladder Fulguration	430	660	156	70	2,014	416	210	496	_	_
Ureteral Reimplantation for Reflux	20	33	21	1	51	200	_	6	_	2
Total	6,625	9,461	5,011	631	17,690	11,023	1,923	4,362	_	1,819

Note: Totals may not match sums of individual procedures as a result of rounding.

Table 13J: Internal medicine (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Colonoscopy	14,438	15,830	1,095	2,782	13,306	948	576	5,420	244	1,378
Angiography /Angioplasty	2,594	839	482	205	2,086	1,340	330	200	0	625
Bronchoscopy	167	939	48	58	1,115	304	46	330	1	139
Gastroscopy	393	744	72	59	1,324	268	94	224	1	46
Total	17,592	18,351	1,697	3,103	17,831	2,860	1,047	6,174	247	2,188

Table 13K: Radiation oncology (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

	Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Radiotherapy		125	_	_	7	465	176	43	13	_	7

Note: All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

Table 13L: Medical oncology (2020)—estimated number of procedures for which patients are waiting after appointment with specialist

Procedure	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL
Chemotherapy	372	243	39	_	1,456	194	17	122	5	_

Note: All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies and, therefore, the oncology data must be regarded as incomplete.

Table 14: Estimated number of procedures for which patients are waiting after appointment with specialist (2020)—procedures per 100,000 population

Procedure	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Plastic Surgery	113	82	25	42	47	25	110	62	_	_
Gynaecology	102	131	70	75	74	58	148	55	102	555
Ophthalmology	780	554	872	676	394	327	754	763	1,716	1,609
Otolaryngology	89	154	323	61	63	82	115	169	90	110
General Surgery	429	353	375	364	218	102	231	3,367	521	365
Neurosurgery	65	32	53	16	18	31	21	42	_	_
Orthopaedic Surgery	374	361	119	523	302	280	560	1,063	_	278
Cardiovascular Surgery	4	6	1	0	4	7	41	0	_	8
Jrology	129	214	425	46	120	129	246	558	_	348
nternal Medicine	342	415	144	225	121	33	134	790	154	419
Radiation Oncology	2	_	_	0	3	2	5	2	_	1
Medical Oncology	7	5	3	_	10	2	2	16	3	_

Note: All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies and, therefore, the oncology data must be regarded as incomplete.

Table 15: Comparison of estimated number of procedures for which patients are waiting after appointment with specialist, by selected specialties, 2020 and 2019

Procedure	British Columbia			Alberta			skatchew	an		Manitoba			Ontario		
	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg
Plastic Surgery	5,820	5,409	8%	3,631	4,041	-10%	295	452	-35%	578	627	-8%	6,969	3,669	90%
Gynaecology	5,269	3,993	32%	5,804	5,505	5%	821	747	10%	1,033	975	6%	10,834	8,004	35%
Ophthalmology	40,146	30,362	32%	24,512	19,883	23%	10,278	10,826	-5%	9,320	14,042	-34%	58,003	43,862	32%
Otolaryngology	4,582	3,781	21%	6,790	5,305	28%	3,806	1,791	112%	846	1,265	-33%	9,303	9,376	-1%
General Surgery	22,064	18,862	17%	15,620	15,721	-1%	4,423	2,791	58%	5,019	5,448	-8%	32,172	27,392	17%
Neurosurgery	3,321	1,547	115%	1,406	2,070	-32%	630	330	91%	222	231	-4%	2,614	3,031	-14%
Orthopaedic Surgery	19,243	14,824	30%	15,942	21,518	-26%	1,407	5,266	-73%	7,219	7,332	-2%	44,488	53,834	-17%
Cardiovascular Surgery	y 203	330	-38%	262	56	366%	10	_	_	1	3	-60%	608	434	40%
Urology	6,625	6,664	-1%	9,461	3,902	142%	5,011	_	_	631	968	-35%	17,690	16,279	9%
Internal Medicine	17,592	14,002	26%	18,351	18,662	-2%	1,697	2,183	-22%	3,103	3,830	-19%	17,831	15,743	13%
Radiation Oncology	125	69	80%	_	33	_	_	4	_	7	3	155%	465	430	8%
Medical Oncology	372	301	23%	243	79	207%	39	32	22%	_	_	_	1,456	1,291	13%
Residual	81,967	66,051	24%	80,094	77,752	3%	23,242	22,151	5%	22,884	30,286	-24%	183,774	163,522	12%
Total	207,329	166,195	25%	182,118	174,529	4%	51,657	46,573	11%	50,863	65,008	-22%	386,207	346,867	11%

Procedure	Quebec		Ne	w Brunsw	rick	N	lova Scoti	ia	Prince	e Edward	Island	Newfour	ndland &	Labrador	
	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg	2020	2019	% chg
Plastic Surgery	2,134	2,318	-8%	862	688	25%	610	369	65%	_	_	_	_	186	_
Gynaecology	4,954	4,232	17%	1,156	1,411	-18%	431	852	-49%	164	_	_	2,895	584	396%
Ophthalmology	28,044	24,265	16%	5,893	2,964	99%	5,961	6,838	-13%	2,740	1,520	80%	8,401	6,503	29%
Otolaryngology	7,049	7,605	-7%	899	1,083	-17%	1,318	1,335	-1%	144	97	48%	576	528	9%
General Surgery	8,706	7,061	23%	1,807	1,809	0%	26,316	6,599	299%	832	_	_	1,907	2,605	-27%
Neurosurgery	2,681	1,015	164%	163	718	-77%	328	56	491%	_	_	_	_	_	_
Orthopaedic Surgery	24,037	25,887	-7%	4,377	6,767	-35%	8,311	8,398	-1%	_	_	_	1,449	1,552	-7%
Cardiovascular Surgery	y 643	485	32%	323	39	739%	0	2	-100%	_	_	_	41	55	-26%
Urology	11,023	4,374	152%	1,923	1,292	49%	4,362	2,376	84%	_	_	_	1,819	16	11,052%
Internal Medicine	2,860	2,356	21%	1,047	722	45%	6,174	4,879	27%	247	304	-19%	2,188	1,422	54%
Radiation Oncology	176	249	-29%	43	_	_	13	45	-71%	_	3	_	7	8	-13%
Medical Oncology	194	309	-37%	17	16	2%	122	32	286%	5	7	-27%	_	14	_
Residual	76,508	62,459	22%	14,350	14,478	-1%	43,723	24,342	80%	3,001	3,255	-8%	20,068	15,727	28%
Total	169,010	142,616	19%	32,860	31,987	3%	97,670	56,123	74%	7,132	5,186	38%	39,351	29,201	35%

Notes: Percentage changes are calculated from exact weighted medians, which have been rounded for inclusion in the table. • All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies and, therefore, the oncology data must be regarded as incomplete.

Table 16A: Acute inpatient procedures, 2018-2019

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Arthroplasty (Hip, Knee, Ankle, Shoulder)	22,664	14,268	5,131	5,322	59,947	26,394	3,751	4,786	704	2,377
Arthroplasty (Interphalangeal/Metatarsophalangeal)	423	574	141	87	511	339	43	55	21	41
Hallux Valgus/Hammer Toe	41	68	16	9	40	44	5	2	4	2
Meniscectomy/Arthroscopy	156	174	55	79	467	357	25	52	3	21
Ostectomy	1,022	1,148	199	317	2,854	1,777	148	302	24	86
Removal of Pins	1,130	1,014	257	280	2,743	1,633	158	214	38	105
Rotator Cuff Repair	741	999	254	217	2,413	1,204	91	198	11	81
Routine Spinal Instability	1,115	1,379	887	535	4,674	2,858	490	200	0	217
Bladder Fulguration	1,494	1,152	390	216	5,226	3,086	316	484	43	302
Cystoscopy	4,416	4,242	725	222	10,722	5,222	839	1,328	154	735
Non-radical Prostatectomy	3,690	2,515	675	194	6,964	3,856	436	573	104	388
Radical Cystectomy	215	168	40	34	538	377	38	56	0	32
Radical Prostatectomy	1,153	729	161	215	2,607	1,616	164	178	2	125
Transurethral Resection—Bladder	1,297	1,619	302	279	4,671	2,083	216	204	55	396
Ureteral Reimplantation for Reflux	69	47	14	11	178	139	10	18	0	4
Cataract Removal	48	225	47	53	94	206	14	34	2	6
Cornea Transplant	18	73	47	3	21	133	0	20	0	0
Cornea—Pterygium	2	14	3	2	5	16	0	1	0	0
Iris, Ciliary Body, Sclera, Anterior Chamber	57	123	34	25	139	165	5	54	0	5
Lacrimal Duct Surgery	38	51	4	13	55	89	0	10	0	0
Operations on Eyelids	92	258	26	31	277	281	20	68	2	7
Retina, Choroid, Vitreous	234	2,170	386	327	700	555	4	167	0	1
Strabismus Surgery	31	10	0	4	33	32	1	4	0	1
Myringotomy	223	232	40	84	896	1,392	40	85	12	59
Operations on Nasal Sinuses	761	223	47	172	1,040	784	34	151	3	66
Thyroid, Parathyroid, and other Endocrine Glands	1,568	1,858	524	487	6,939	4,220	285	467	11	368
Tonsillectomy and/or Adenoidectomy	1,010	737	289	280	3,152	2,565	177	197	110	322
Tympanoplasty	99	57	5	8	252	151	19	90	1	10
Radiotherapy	404	571	8	59	10,959	2,646	395	345	68	220
Chemotherapy	4,134	2,997	887	628	30,473	7,644	850	1,029	59	520
Breast Biopsy	96	38	13	13	250	170	23	12	0	13
Bronchus and Lung	1,415	1,214	214	466	4,528	4,050	279	456	1	160
Cholecystectomy	3,794	4,697	1,308	1,777	9,505	7,305	1,000	1,412	157	450
Haemorrhoidectomy	71	85	52	40	204	139	8	11	2	17

Table 16A, continued

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Intestinal Operations	9,058	6,973	2,503	2,309	25,518	17,182	1,720	2,398	242	1,422
Mastectomy	1,654	1,040	489	266	2,784	2,273	186	343	64	262
Varicose Veins	25	7	9	18	31	31	2	3	0	5
Disk Surgery/Laminectomy	1,680	1,265	355	148	3,622	1,786	345	286	0	374
Elective Cranial Bone Flap	3,345	3,086	993	924	11,915	5,687	528	759	1	434
Blepharoplasty	5	9	3	3	21	16	0	3	0	0
Mammoplasty	359	1,022	85	143	1,134	645	151	118	20	96
Scar Revision	733	1,807	172	206	1,577	1,223	92	224	15	64
Coronary Artery Bypass	2,667	1,652	573	498	8,473	5,921	562	527	0	433
Pacemaker Operations	2,877	2,017	707	641	7,419	9,161	803	627	91	313
Valves & Septa of the Heart	2,808	2,535	389	559	8,856	5,708	334	563	0	258
Angiography/Angioplasty	5,749	3,829	2,103	839	25,334	17,313	1,575	1,566	1	989
Bronchoscopy	851	1,460	187	272	7,647	4,278	174	402	7	280
Gastroscopy	571	703	130	114	3,082	1,322	246	172	4	91
Dilation and Curettage	272	188	33	57	445	222	18	20	5	35
Hysterectomy	5,033	5,512	1,247	1,479	13,279	8,041	1,140	1,436	257	803
Hysteroscopic Procedures	203	138	51	19	259	130	9	29	3	30
Laparoscopic Procedures	285	231	98	75	1,630	992	53	50	8	32
Tubal Ligation	300	1,917	481	566	4,054	1,767	251	201	46	210
Tuboplasty	25	32	11	7	65	30	1	2	2	1
Vaginal Repair	761	1,171	193	307	1,751	1,095	213	181	19	122
Rhinoplasty and/or Septal Surgery	389	247	30	80	573	450	17	72	0	28
Hernia/Hydrocele	4,024	3,981	1,206	1,376	19,174	6,898	909	1,185	142	573
Carotid Endarterectomy	771	328	89	147	1,243	1,033	164	129	0	52
Hand Surgery/Digit Neuroma	286	384	120	76	683	645	36	65	11	19
Neurolysis/Peripheral Nerve	285	450	81	59	1,911	2,479	104	219	11	12
Colonoscopy	3,177	2,961	1,259	858	10,261	8,019	641	709	54	495
Aneurysm Surgery	318	222	54	97	919	574	58	54	0	38
Residual	122,001	124,266	31,813	30,997	384,095	217,462	23,015	29,525	2,275	16,284
Total	224,233	215,162	58,645	55,629	721,832	405,911	43,231	55,131	4,869	30,892

Sources: Canadian Institute for Health Information, All Procedures Performed, by Province and CCI code, 2018-19, and Fiscal 2009/10 CCI to CCP Conversion Tables; and the 2015 ICD-10-CA and CCI Evolution Tables.

Table 16B: Same day procedures, 2018-2019

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Arthroplasty (Hip, Knee, Ankle, Shoulder)	5,507	5,525	2,136	2,457	24,367	6,331	1,297	1,214	212	259
Arthroplasty (Interphalangeal/Metatarsophalangeal)	1,527	796	330	302	3,098	1,285	146	250	62	124
Hallux Valgus/Hammer Toe	340	245	86	121	1,029	712	59	101	43	18
Meniscectomy/Arthroscopy	1,655	1,346	623	356	4,123	6,126	294	275	36	225
Ostectomy	1,064	1,082	231	372	3,502	1,589	225	376	58	108
Removal of Pins	2,942	2,615	677	400	5,682	4,630	317	451	107	199
Rotator Cuff Repair	1,326	1,619	421	380	3,905	1,925	266	510	57	255
Routine Spinal Instability	24	7	7	13	89	29	2	1	0	0
Bladder Fulguration	2,233	1,706	961	699	18,043	2,328	592	950	177	939
Cystoscopy	33,562	17,146	9,814	2,906	132,967	1,532	3,126	7,541	1,337	9,452
Non-radical Prostatectomy	1,049	270	225	390	3,165	995	252	116	0	20
Radical Cystectomy	0	0	0	0	1	1	0	0	0	0
Radical Prostatectomy	0	0	0	0	1	0	0	0	0	1
Transurethral Resection—Bladder	3,492	1,332	564	600	9,820	6,470	677	738	59	294
Ureteral Reimplantation for Reflux	34	74	17	3	44	61	1	3	0	4
Cataract Removal	66,337	39,772	15,207	11,654	138,925	105,686	12,197	13,541	2,224	6,560
Cornea Transplant	612	352	1	130	1,136	701	0	168	0	0
Cornea—Pterygium	559	706	93	22	1,053	1,136	50	67	22	25
Iris, Ciliary Body, Sclera, Anterior Chamber	2,053	2,070	458	466	7,749	4,083	425	937	0	263
Lacrimal Duct Surgery	697	1,420	239	113	2,319	1,521	170	139	4	88
Operations on Eyelids	2,159	3,931	948	102	4,313	4,328	240	264	34	325
Retina, Choroid, Vitreous	10,491	9,457	2,210	3,163	22,327	16,775	141	3,367	8	857
Strabismus Surgery	1,327	1,676	288	402	4,605	2,447	217	432	0	131
Myringotomy	1,657	2,023	1,478	743	11,518	12,536	1,136	1,061	187	940
Operations on Nasal Sinuses	2,966	2,137	947	1,099	9,209	3,116	285	352	121	484
Thyroid, Parathyroid, and Other Endocrine Glands	580	494	48	148	1,595	583	88	35	1	3
Tonsillectomy and/or Adenoidectomy	2,550	3,318	1,752	1,183	12,930	7,266	966	662	62	314
Tympanoplasty	574	747	233	266	2,159	1,335	117	189	24	254
Radiotherapy	419	17	90	85	265	336	233	1	0	12
Chemotherapy	314	306	121	15	7,381	714	18	238	33	16
Breast Biopsy	50	14	2	19	840	62	11	257	2	904
Bronchus and Lung	55	73	10	11	148	78	1	17	0	7
Cholecystectomy	5,057	4,438	1,647	1,570	18,633	9,688	1,227	1,395	211	972
Haemorrhoidectomy	3,335	1,303	1,193	1,290	8,325	995	109	538	26	379

Table 16B, continued

Procedure	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
Intestinal Operations	70,469	33,903	11,807	12,538	137,189	1,338	1,245	13,149	2,147	10,697
Mastectomy	4,228	3,104	683	1,110	12,217	8,446	765	740	115	408
Varicose Veins	972	685	322	152	1,918	1,036	198	146	3	40
Disk Surgery/Laminectomy	2,155	316	133	42	1,084	434	83	81	0	3
Elective Cranial Bone Flap	56	50	22	17	203	119	4	10	0	5
Blepharoplasty	347	652	166	13	929	769	41	28	1	27
Mammoplasty	3,393	2,062	592	575	8,511	4,529	721	284	12	330
Scar Revision	510	625	103	103	987	1,049	69	124	28	26
Coronary Artery Bypass	0	0	0	0	0	0	0	0	0	0
Pacemaker Operations	3,182	824	518	639	4,194	801	290	369	46	513
Valves & Septa of the Heart	79	1	18	0	1	1	0	0	0	0
Angiography/Angioplasty	11,111	1,019	1,755	2,440	1,781	108	1,287	168	4	1,721
Bronchoscopy	729	2,609	226	190	3,949	245	25	457	34	443
Gastroscopy	1,131	908	337	396	6,754	143	61	284	33	107
Dilation and Curettage	6,015	6,661	1,202	2,100	18,018	4,537	948	853	246	2,163
Hysterectomy	190	186	472	168	2,253	500	6	3	0	5
Hysteroscopic Procedures	4,417	3,645	1,359	1,447	10,776	4,673	1,087	1,228	261	2,319
Laparoscopic Procedures	450	299	174	160	1,903	722	73	87	17	102
Tubal Ligation	249	1,112	347	379	3,118	1,974	321	260	45	239
Tuboplasty	173	55	13	7	57	22	4	7	2	4
Vaginal Repair	345	220	72	62	814	326	36	54	9	56
Rhinoplasty and/or Septal Surgery	1,656	1,185	514	508	4,181	2,294	173	284	14	160
Hernia/Hydrocele	11,500	9,776	2,600	3,213	30,536	22,499	2,056	2,114	304	1,290
Carotid Endarterectomy	0	0	0	0	0	0	0	0	0	0
Hand Surgery/Digit Neuroma	3,670	2,159	1,185	911	9,635	7,129	901	1,145	107	684
Neurolysis/Peripheral Nerve	1,672	759	305	219	5,480	2,360	391	190	10	371
Colonoscopy	95,022	60,629	16,991	21,686	127,835	1,602	1,712	17,103	3,909	11,745
Aneurysm Surgery	1	2	0	0	0	1	0	0	0	1
Residual	188,415	134,580	56,064	51,426	702,275	143,953	20,577	45,982	5,796	53,271
Total	568,684	376,043	141,037	131,981	1,561,864	419,010	57,959	121,336	18,250	111,162

Sources: Canadian Institute for Health Information, All Procedures Performed, by Province and CCI code, 2018-19; Fiscal 2009/10 CCI to CCP Conversion Tables; and the 2015 ICD-10-CA and CCI Evolution Tables.

# Appendix A: Links to Wait Times Data Published by Provincial Government Agencies

British Columbia British Columbia Ministry of Health, <a href="https://swt.hlth.gov.bc.ca/">https://swt.hlth.gov.bc.ca/</a>

Saskatchewan Surgical Care Network, <a href="http://www.sasksurgery.ca/">http://www.sasksurgery.ca/</a>

Saskatchewan Specialist Directory, <a href="http://specialists.health.gov.sk.ca/">http://specialists.health.gov.sk.ca/</a>

Saskatchewan Cancer Agency, <www.saskcancer.ca>

Manitoba Ministry of Health, <a href="http://www.gov.mb.ca/health/waittime/">http://www.gov.mb.ca/health/waittime/</a>

Ontario Ontario Ministry of Health and Long-Term Care,

<a href="http://www.health.gov.on.ca/en/public/programs/waittimes/">http://www.health.gov.on.ca/en/public/programs/waittimes/>

Quebec Quebec Ministry of Health and Social Services,

<a href="https://g74web.pub.msss.rtss.qc.ca/default.asp">https://g74web.pub.msss.rtss.qc.ca/default.asp</a>

New Brunswick New Brunswick Department of Health,

<a href="http://www1.gnb.ca/0217/surgicalwaittimes/index-e.aspx">http://www1.gnb.ca/0217/surgicalwaittimes/index-e.aspx</a>

Nova Scotia Nova Scotia Department of Health, <a href="https://waittimes.novascotia.ca/">https://waittimes.novascotia.ca/</a>

Prince Edward Island Prince Edward Island Department of Health, <a href="http://www.healthpei.ca/waittimes">http://www.healthpei.ca/waittimes</a>

Newfoundland & Labrador Department of Health and Community

Services, <a href="http://www.health.gov.nl.ca/health/wait\_times/data.html">http://www.health.gov.nl.ca/health/wait\_times/data.html</a>

# **Appendix B: Psychiatry Waiting List Survey, 2020 Report**

The psychiatry waiting list survey was conducted between January 7 and October 1, 2019. Surveys were sent to all specialists in the psychiatry category of the Canadian Medical Association's membership rolls who have allowed their names to be provided by Deloitte LLP. This year, 150 psychiatrists responded to the survey for an overall response rate of 3.5% (table B1). As a result of the low response rate, results should be interpreted with caution.

Table B1: Psychiatry (2020)—summary of responses, 2020

	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL	CAN
Mailed	641	393	78	168	1730	1091	57	119	13	55	4345
Number of Responses	31	17	4	4	66	16	3	5	0	4	150
Response Rates	4.8%	4.3%	5.1%	2.4%	3.8%	1.5%	5.3%	4.2%	0.0%	7.3%	3.5%

The treatments identified in the following tables represent a cross-section of common treatments carried out by psychiatrists. The list of treatments was developed in consultation with the Canadian Psychiatric Association, who also assisted in making adjustments to the standard survey form to reflect differences between psychiatric practices and practices in the other specialties presented in this document.

Unlike other specialties discussed in *Waiting Your Turn*, in which the waiting times are weighted by the total number of such procedures that have been done by all physicians, the overall median for psychiatry is presented as an unweighted measure (see the section, "Method" (pp. 11–14), for a clear description of the Fraser Institute's weighting procedures). All of the median measures that make up the final specialty median are given equal weight. This alteration to the standard methodology results from a lack of data counting the number of patients treated by psychiatrists, separated by treatment. We hope, in the coming years, to develop a weighting system for psychiatric treatments to allow a weighted average for this specialty to be calculated. In the current estimates, national medians are developed through a weighting system that bases the weight of each provincial median on the number of specialists contacted in that province.

## **Findings**

#### Total wait times

Across the provinces, the total wait time (between referral by a general practitioner and the time that the required elective treatment begins) for psychiatry has decreased from 24.4 weeks in 2019 to 22.4 weeks in 2020 (graph B1). The shortest waiting times are in Saskatchewan (14.4 weeks), Manitoba (18.4 weeks), and Quebec (19.3 weeks). The longest total waits are in Newfoundland & Labrador (43.2 weeks) and Nova Scotia (41.9 weeks)

British Columbia 10.0 Alberta 9.0 27.0 Saskatchewan Manitoba 12.9 Ontario 8.0 22.1 8.0 Quebec 11.3 19.3 **New Brunswick** 20.0 11.7 31.7 Nova Scotia 8.0 33.9 41.9 Prince Edward Island Newfoundland & Labrador 32.5 43.2 Canada 22.4 50 0 30 40 20 10 Weeks waited Wait from GP to specialist (elective) Wait from specialist to treatment Note: Totals may not equal the sum of subtotals as a result of rounding.

Source: The Fraser Institute's national waiting list survey, 2020.

Graph B1: Psychiatry—weeks waited from referral by GP to treatment, by province, 2020

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### Wait time by segment and specialty

Total wait time for psychiatric treatment can be examined in two consecutive segments:

- 1 from referral by a general practitioner to consultation with a psychiatrist;
- **2** from the consultation with a psychiatrist to the point at which treatment begins.

Table B2 indicates the number of weeks that patients wait for initial appointments with psychiatrists after referral from their general practitioners or from other specialists. The waiting time to see a psychiatrist on an urgent basis across the provinces is 2.2 weeks, ranging from 1.3 weeks in Newfoundland & Labrador to 4.5 weeks in Saskatchewan. The waiting time for referrals on an elective basis across the provinces is 8.7 weeks. The provinces with the longest wait times for elective referrals are Newfoundland & Labrador (32.5 weeks) and New Brunswick (20.0). On the other hand, Manitoba (5.5 weeks) and Saskatchewan (6.0 weeks) have the shortest wait times for elective referrals.

Table B2: Psychiatry (2020)—median patient wait to see a specialist after referral from a GP

	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL	CAN
Urgent	2.0	3.0	4.5	2.5	2.0	2.0	2.0	2.5	_	1.3	2.2
Elective	10.0	9.0	6.0	5.5	8.0	8.0	20.0	8.0	_	32.5	8.7

Table B3 summarizes the waiting time for certain elective psychiatric treatments after an appointment with a specialist. The longest waiting times for this second segment of the total waiting time are in Nova Scotia (33.9 weeks), Alberta (18.0 weeks), and Ontario (14.1 weeks). The shortest waits are in Saskatchewan (8.4 weeks), Newfoundland & Labrador (10.7 weeks), and Quebec (11.3 weeks). Among the treatments, patients wait longest for access to a housing program (31.6 weeks) and for access to a sleep-disorders program (20.5 weeks), while wait times are shortest for pharmacotherapy (4.3 weeks) and for a day program (8.5 weeks).

Table B4 presents a frequency distribution of the survey responses by province. The wait (after an appointment with a specialist) for the majority of treatments is less than 13 weeks in all provinces. Waits of 26 weeks or more are least frequent in Manitoba (9.5%), and most frequent in Alberta (30.3%).

Table B3: Psychiatry (2020)—median patient wait for treatment after appointment with specialist

	ВС	AB	SK	МВ	ON	QC	NB	NS	PE	NL	CAN
Initiate a course of brief psychotherapy	10.0	12.0	14.8	4.0	8.0	12.0	13.0	18.0	-	5.5	9.9
Initiate a course of long—term psychotherapy	16.0	24.0	22.0	8.0	16.0	24.0	13.0	18.0	-	5.5	18.4
Initiate a course of pharmacotherapy	8.0	3.5	0.8	2.0	4.0	3.5	10.0	4.0	_	1.0	4.3
Initiate a course of couple/marital therapy	12.0	12.0	3.0	4.0	9.0	6.0	10.0	8.0	_	8.0	8.6
Initiate cognitive behaviour therapy	8.0	12.0	6.0	4.0	12.0	12.0	13.0	9.0	_	7.0	10.9
Access a day program	10.0	8.0	4.8	12.0	8.0	6.0	10.0	24.0	_	19.5	8.5
Access an eating disorders program	12.0	24.0	3.5	26.0	16.0	16.0	10.0	6.0	_	12.0	15.9
Access a housing program	26.0	32.0	-	2.0	48.0	7.3	19.0	94.0	_	29.5	31.6
Access an evening program	3.5	26.0	-	4.0	11.0	9.0	10.0	_	_	4.0	10.3
Access a sleep disorders program	12.0	40.0	20.0	52.0	5.0	24.0	10.0	156.0	_	_	20.5
Access assertive community treatment or similar program	8.0	4.0	1.0	24.0	18.0	4.0	11.0	2.0	_	14.5	11.1
Unweighted Median	11.4	18.0	8.4	12.9	14.1	11.3	11.7	33.9	_	10.7	13.7

Table B4: Psychiatry (2020)—frequency distribution of survey waiting times (specialist to treatment), by province

	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL
0-3.99 weeks	21%	17%	39%	29%	17%	21%	6%	13%	_	30%
4-7.99 weeks	16%	19%	18%	29%	16%	22%	0%	25%	_	37%
8-12.99 weeks	29%	22%	11%	24%	26%	27%	67%	17%	_	7%
13-25.99 weeks	18%	11%	14%	10%	22%	14%	17%	17%	-	11%
26-51.99 weeks	9%	11%	4%	5%	9%	13%	6%	8%	-	7%
1 year plus	6%	19%	14%	5%	9%	2%	6%	21%	_	7%

Note: Columns do not necessarily sum to 100 due to rounding.

Table B5 compares the 2020 and 2019 waiting times for treatment (after an appointment with a specialist). This year's study indicates an overall decrease in the waiting time between consultation with a specialist and elective treatment in six provinces. However, three provinces experienced an increase: Alberta (49%), Ontario (11%), Saskatchewan (45%), and Ontario (3%).

Table B5: Psychiatry—comparison of median weeks waited to receive treatment after appointment with specialist, by province, 2020 and 2019

	2020	2019	% change
British Columbia	11.4	14.4	-21%
Alberta	18.0	12.0	49%
Saskatchewan	8.4	5.8	45%
Manitoba	12.9	13.0	-1%
Ontario	14.1	13.7	3%
Quebec	11.3	12.2	-8%
New Brunswick	11.7	21.9	-46%
Nova Scotia	33.9	36.6	-7%
Prince Edward Island	_	-	-
Newfoundland & Labrador	10.7	19.0	-44%

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

## Comparison between clinically reasonable and actual wait times

Physicians responding to the survey are also asked to provide a clinically reasonable waiting time for the various treatments. Specialists generally indicate a period of time substantially shorter than the median number of weeks patients actually wait for treatment (see tables B6 and B7). Table B6 summarizes the reasonable waiting times for psychiatric treatments and is based on the same methodology used to create table B3. Table B7 summarizes the differences between the median reasonable and actual waiting times across the provinces for treatment after an appointment with a specialist and shows that, in 100% of cases where comparisons are possible, the actual waiting time for treatment (table B3) is greater than the clinically reasonable median waiting time (table B6). The difference in greatest in Nova Scotia where the wait time for treatment (after an appointment with

Table B6: Psychiatry (2020)—median reasonable patient wait for treatment after appointment with specialist

	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Initiate a course of brief psychotherapy	4.0	4.0	3.5	4.0	4.0	4.5	5.0	6.0	-	2.3	4.2
Initiate a course of long-term psychotherapy	6.0	8.0	3.8	6.0	8.0	8.0	5.0	8.0	_	2.8	7.4
Initiate a course of pharmacotherapy	2.0	2.0	8.0	2.0	2.0	2.0	4.0	4.0	_	1.0	2.0
Initiate a course of couple/ marital therapy	4.0	4.0	3.0	4.0	4.0	4.0	5.0	12.0	-	2.0	4.2
Initiate cognitive behaviour therapy	4.0	4.0	4.0	5.0	4.0	6.5	5.0	5.0	-	2.5	4.7
Access a day program	4.0	4.0	1.5	8.0	3.5	3.0	5.0	5.0	-	2.0	3.7
Access an eating disorders program	4.0	4.5	2.0	4.0	4.0	4.0	5.0	3.0	-	2.0	4.0
Access a housing program	5.0	6.5	5.0	4.0	6.0	3.5	5.0	2.0	-	2.5	5.0
Access an evening program	4.0	6.5	3.0	4.0	4.0	4.0	5.0	4.0	-	2.0	4.2
Access a sleep disorders program	4.0	4.5	3.0	4.0	4.0	6.0	5.0	2.0	_	2.0	4.5
Access assertive community treatment or similar program	2.5	2.0	1.0	4.0	4.0	2.0	5.0	2.5	-	4.0	3.0
Unweighted Median	4.0	4.5	2.8	4.5	4.3	4.3	4.9	4.9	_	2.3	4.3

a specialist) is 697% longer than the median considered reasonable. The actual overall median specialist-to-treatment waits in New Brunswick exceeds the corresponding "reasonable" value by 239%, a smaller gap than in the other provinces.

Finally, patients also prefer earlier treatment. On average, only 5.0% of patients are on waiting lists because they have requested a delay or postponement of their treatment. Conversely, the proportion of patients who would have begun their treatment within the week, [1] if it were available, is 72.5%.

<sup>1</sup> The survey asks psychiatrists what percentage of their patients currently waiting for treatment would agree to begin treatment tomorrow if an opening were to arise. However, comments by respondents of previous surveys indicate that at least some respondents answer the question as if it were "a few days".

Table B7: Psychiatry (2020)—difference between actual and reasonable patient waits for treatment after appointment with specialist

	ВС	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Initiate a course of brief psychotherapy	250%	300%	421%	100%	200%	267%	260%	300%	-	244%	239%
Initiate a course of long-term psychotherapy	267%	300%	587%	133%	200%	300%	260%	225%	-	200%	247%
Initiate a course of pharmacotherapy	400%	175%	100%	100%	200%	175%	250%	100%	-	100%	211%
Initiate a course of couple/marital therapy	300%	300%	100%	100%	225%	150%	200%	67%	-	400%	206%
Initiate cognitive behaviour therapy	200%	300%	150%	80%	300%	185%	260%	180%	_	280%	231%
Access a day program	250%	200%	317%	150%	229%	200%	200%	480%	_	975%	231%
Access an eating disorders program	300%	533%	175%	650%	400%	400%	200%	200%	_	600%	400%
Access a housing program	520%	492%	-	50%	800%	207%	380%	4700%	_	1180%	631%
Access an evening program	88%	400%	-	100%	275%	225%	200%	_	_	200%	246%
Access a sleep disorders program	300%	889%	667%	1300%	125%	400%	200%	7800%	-	_	459%
Access assertive community treatment or similar program	320%	200%	100%	600%	450%	200%	220%	80%	-	363%	368%
Unweighted Median	289%	395%	304%	290%	326%	261%	239%	697%	_	469%	320%

#### Waiting for diagnostic and therapeutic technology

Table B8 displays the median number of weeks patients must wait for access to a computed tomography (CT) or magnetic resonance imaging (MRI) scanner, or an electroencephalogram (EEG). Compared to 2019, the national waiting times for CT scans have increased in 2020. The median wait for a CT scan across the provinces is 5.7 weeks, ranging from a high of 17.0 weeks (Newfoundland & Labrador) to a low of 2.5 weeks (Manitoba). In 2020, the median wait for an MRI across the provinces is 13.8 weeks, longer than it was in 2019 (10.7 weeks). Patients in Alberta wait the longest (23.0 weeks), while patients in Nova Scotia wait the least amount of time (6.75 weeks). Finally, the median wait for an EEG across the provinces has decreased from 5.2 weeks in 2019 to 4.8 weeks this year. Residents of New Brunswick face the shortest waits for an EEG (3.0 weeks), while residents of Manitoba wait longest (9.0 weeks). [2]

<sup>2.</sup> For comparison, the overall Canadian median waiting time for CT scans was 5.4 weeks in the traditional 12 specialties and 5.7 weeks in the psychiatry survey, with a mean absolute difference (the average of absolute differences between the two measures in each province) of 2.8 weeks across nine provinces. The overall Canadian median waiting time for MRIs was 11.1 weeks in the traditional 12 specialties and 13.8 weeks in the psychiatry survey. The mean absolute difference in this case was 5.3 weeks.

Table B8: Psychiatry (2020)—waiting for technology: weeks waited to receive selected diagnostic tests in 2020, 2019, and 2018

	CT-Scan				MRI		EEG		
	2020	2019	2018	2020	2019	2018	2020	2019	2018
British Columbia	8.0	7.0	6.0	17.0	16.0	20.0	4.0	6.0	3.5
Alberta	12.0	6.0	12.0	23.0	12.0	20.0	4.0	8.0	8.0
Saskatchewan	3.0	4.5	2.0	13.5	9.5	9.0	4.0	10.0	2.5
Manitoba	2.5	6.0	7.0	13.0	12.0	10.0	9.0	12.0	2.0
Ontario	4.0	4.0	5.0	12.0	8.0	12.0	4.0	4.0	4.0
Quebec	5.0	5.0	4.0	12.0	11.0	11.0	6.5	4.0	4.0
New Brunswick	17.0	12.0	10.5	17.0	20.0	8.5	3.0	12.0	8.0
Nova Scotia	4.25	2.5	3.3	6.75	9.0	48.0	3.75	2.0	12.0
Prince Edward Island	_	_	_	_	_	_	_	_	_
Newfoundland & Labrador	8.0	14.0	4.0	17.0	19.0	11.0	4.0	16.0	12.0
Canada	5.7	5.1	5.5	13.8	10.7	14.4	4.8	5.2	4.5

#### Conclusion

The information documented here suggests that patients seeking mental health treatment are likely to be disappointed with their access. With a waiting time of 22.4 weeks from referral by a general practitioner to elective treatment, and with wait times from meeting with a specialist to elective treatment that are 320% longer than specialists feel is appropriate, it is clear that many patients in need of psychiatric attention are facing the effects of rationing in our health-care system.

# **Appendix C: The Fraser Institute National Waiting List Survey questionnaire (2014)**

Gene	eral	Surg	Ci y											
Please	circ	le the	provi	nce in	whic	h you	r offic	e is loc	ated:					
AB I	3C	MB	NB	NL	NS	NT	NU	ON	PE	QC	SK	YT		
consu	ltatio	on wit	h you	?		7	week(s	s)						e office Do you
accept  Ye	t refe	errals	only a					_		,				J
3. Ove		-				-	Ū		_	cal pro	cedu	res yo	ou perfo	ormed
4. Fro	m to	odav, ł	10w 1c	(:						_		c	the fell	in a
types ically		ective	surge	ery or	diagn	ostic p	proced	lures?	What	would	l you	consi		owing oe a clin-
		ective	surge waiti	ery or	diagn	ostic p	proced	lures?	What gery a	would	l you	consi res?		pe a clin-
		ective	surge waiti	ery or on the standard control of the standard control	diagn	ostic p	proced	lures?	What gery a	would nd pro	l you	consi res?	der to l	pe a clin-

6. If the length of your waiting lists has changed, what are the major reasons for the
change? (Check all which may be applicable.)
Availability of O/R nurses
Availability of other technical staff
Availability of beds
Availability of O/R time
Change in patient load
Availability of ancillary investigations or consultations (i.e. MRI, CT scans) Other
Other
7. What percentage of your patients currently waiting for surgery are on a waiting list pri-
marily because they requested a delay or postponement? %
O What managers of your mations are appropriately writing for grange and a you shigh would appropriate
8. What percentage of your patients currently waiting for surgery do you think would agree to having their procedure performed tomorrow if an opening arose? %
to having their procedure performed tomorrow it an opening arose:
9. To the best of your knowledge, what percentage of your patients that are listed on
hospital waiting lists might also be listed by other physicians for the same procedure?
10. Do you use the following types of diagnostic tests? If so, how long (in weeks) would a
new patient have to wait for these tests?
Do you use the diagnostic test? Yes No Infrequently Number of weeks patients wait
11. Approximately what percentage of your patients inquired in the past 12 months about
the availability of medical services:
In another province? % Outside of Canada? %
12. Approximately what percentage of your patients received non-emergency medical
treatment in the past 12 months:
In another province? % Outside of Canada? %
Thank you very much for your assistance.

# **Appendix D: The Fraser Institute Annual Study of Wait Times for Health Care in Canada (2020)**

General Surgery In which prov	ince is your office is l	located?
1. From today, how long (in weeks) would a n	ew patient have to w	rait for a routine office
consultation with you? week(s)		
——————————————————————————————————————	,	
2. From today, how long (in weeks) would a n	new nationt have to w	wit for the following
•	-	· ·
types of elective surgery or diagnostic procedu	•	
ically reasonable waiting time for these types of	of surgery and procee	dures?
Surgery or	Number of weeks	Reasonable number
procedure	to wait	of weeks to wait
Hernia repair (all types) / hydrocele		
Cholecystectomy		
Colonoscopy (diagnosis)		
Incision, excision, anastomosis of intestine and other operations on intestine		
Hemorrhoidectomy / other anal surgery		
Breast biopsy		
Mastectomy / segmental resection		
Operations on bronchus and lung		
Incidentally discovered and unruptured aneurysms		
Varicose vein surgery		
3. What percentage of your patients currently	waiting for surgery	are on a waiting list pri
marily because they requested a delay or postp	onement?	%
4. What percentage of your patients currently w	vaiting for surgery do	you think would agree
to having their procedure performed tomorrow	if an opening arose?	%
5. How long (in weeks) would a new patient h	nave to wait for these	tests?
CT scan weeks MRI weel		
6. Approximately what percentage of your part	tients received non-e	emergency medical
treatment in the past 12 months: In another past 12 months:	iovince: % Ou	uside Canada: %
m 1 1 C :		
Thank you very much for your assistance.		

# References

Moir, Mackenzie, and Bacchus Barua (2020). *The Private Cost of Public Queues for Medically Necessary Care*, 2020. Fraser Research Bulletin. <a href="https://www.fraserinstitute.org/studies/private-cost-of-public-queues-for-medically-necessary-care-2020">https://www.fraserinstitute.org/studies/private-cost-of-public-queues-for-medically-necessary-care-2020</a>, as of November 30, 2020.

Canadian Cancer Society (2020). Canadian Cancer Statistics. Supplementary Table 3 - Projected New Cases for Selected Cancers, by Sex and Province, 2020.

Canadian Institute for Health Information [CIHI] (2010). 2009/2010 Conversion Tables: ICD-10-CA/CCI to ICD-9/CCP. Canadian Institute for Health Information.

Canadian Institute for Health Information [CIHI] (2014). *The 2015 ICD-10-CA and CCI Evolution Tables*. Canadian Institute for Health Information.

Canadian Institute for Health Information [CIHI] (2020a). *Discharge Abstract Database*, 2017–2018. Canadian Institute for Health Information.

Canadian Institute for Health Information [CIHI] (2020b). *National Ambulatory Care Reporting System*, 2017–2018. Canadian Institute for Health Information.

Canadian Institute for Health Information [CIHI] (2020c). *Hospital Morbidity Database* 2017–2018. Canadian Institute for Health Information.

Day, Brian (2013). The Consequences of Waiting. In Steven Globerman, ed., *Reducing Wait Times for Health Care: What Canada Can Learn from Theory and International Experience* (Fraser Institute): 43–75.

Hunter, Justine (2020). B.C. Halts Elective Surgeries to Prepare for Surge in Critical COVID-19 Cases. *Globe and Mail* (March 16).<a href="https://www.theglobeandmail.com/canada/british-columbia/article-bc-halts-elective-surgeries-to-prepare-for-surge-in-critical-covid/">https://www.theglobeandmail.com/canada/british-columbia/article-bc-halts-elective-surgeries-to-prepare-for-surge-in-critical-covid/</a>, as of December 4, 2020.

Global News (2020). All Non-Urgent Scheduled and Elective Surgeries in Alberta Will Be Postponed: Dr Deena Hinshaw. Global News (March 17). <a href="https://globalnews.ca/video/6692305/all-non-urgent-scheduled-and-elective-surgeries-in-alberta-will-be-postponed-dr-deena-hinshaw/">https://globalnews.ca/video/6692305/all-non-urgent-scheduled-and-elective-surgeries-in-alberta-will-be-postponed-dr-deena-hinshaw/</a>, as of December 4, 2020.

Ontario Ministry of Health and Long Term Care (2005). *First Ever Common Benchmarks Will Allow Canadians to Measure Progress in Reducing Wait Times*. News release (December 12). <a href="http://news.ontario.ca/archive/en/2005/12/12/First-ever-common-benchmarks-will-allow-Canadians-to-measure-progress-in-reducin.html">http://news.ontario.ca/archive/en/2005/12/12/First-ever-common-benchmarks-will-allow-Canadians-to-measure-progress-in-reducin.html</a>, as of November 20, 2018.

Ramsay, Cynthia (1998). How to Ruin a Good Idea—Lessons from the British Columbia Ministry of Health. *Fraser Forum* (February): 7–11.

Shah, Maryam (2020). Ontario Asking Hospitals to Ramp Down Elective surgeries in Preparation for COVID-19. *Global News* (March 15; updated October 2). <a href="https://globalnews.ca/news/6680786/ontario-hospitals-coronavirus-elective-surgeries/">https://globalnews.ca/news/6680786/ontario-hospitals-coronavirus-elective-surgeries/</a>, as of December 4, 2020.

Statistics Canada (2020). Table: 17-10-0005-01. *Estimates of Population, by Age Group and Sex for July 1, Canada, Provinces and Territories Annual (Persons unless Otherwise Noted)*. <a href="https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1710000501">https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1710000501</a>>, as of November 28, 2020.

Stokes, Ernie, and Robin Somerville (2008). *The Economic Costs of Wait Times in Canada*. A study commissioned by the British Columbia Medical Association (BCMA) and the Canadian Median Association. Centre for Spatial Economics.

Waiting Your Turn: Hospital Waiting Lists in Canada (1990–2019, various authors; various editions). Fraser Institute. <a href="https://www.fraserinstitute.org/archive/categories/166/health-care-wait-times">https://www.fraserinstitute.org/archive/categories/166/health-care-wait-times</a>, as of December 3, 2020.

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