

Wait Times Email Statement  
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To address long wait times for orthopaedic surgeries, prior to COVID-19, in addition to investing in additional hip and knee replacement surgeries, Ontario has also focused efforts on improving the referral pathway for patients with conditions that have long waits for specialist consultation and surgery. Rapid Access Clinics (RACs) are operational across the province to help patients with hip and knee osteoarthritis and low back pain access the right treatment faster, including addressing long wait times to see an orthopaedic surgeon.

With the implementation of RACs, Primary Care Providers, including family doctors, now have one point of contact to refer patients who will be triaged to receive a timely assessment from an Advance Practice Provider (APP), which is typically a physiotherapist, chiropractor or nurse practitioner with advanced skills and training.

In March 2020, the government announced Ontario's Action Plan: Responding to COVID 19, which will provide \$3.3 billion in additional health care resources in 2020-21, including \$2.1 billion in new measures to support the COVID 19 response and an additional \$1.2 billion to meet demand for services in the health and long-term care sector. This investment includes \$7.7 million for 909 more hip and knee replacement surgeries to help address the demands of a growing and aging population.

Ontario is also investing \$283.7 million to assist the health system's ongoing efforts to reduce surgery backlogs by supporting extend hours for additional priority surgeries and diagnostic imaging. These extra operating hours will help hospitals meet the needs of patients whose surgeries or procedures were delayed due to the COVID-19 ramp down in the spring.

Safety is a top priority, so hospitals must continue to adhere to the guidelines for the plan to resume scheduled surgeries and procedures that the government announced on May 7, 2020. Hospitals must make sure certain criteria are met before surgeries and procedures can resume. For instance, hospitals and their region must have a stable number of COVID-19 cases, a stable supply of medications and personal protective equipment, adequate capacity of inpatient and intensive care beds, and post-acute care support to ensure patients have support after release from the hospital.

Since May 26, when Directive #2 was amended to give clearance to the gradual resumption of non-emergent and scheduled services provided by Regulated Health Professionals within current public safety requirements, rescheduled surgeries and procedures have been prioritized using criteria set out within the framework. Considerations include the patient's condition, type of procedure and other treatment options, and associated risks with delaying the procedure.

For more information, visit <https://news.ontario.ca/opo/en/2020/05/ontario-releases-plan-to-resume-scheduled-surgeries-and-procedures.html>