

# Percentage of patients who had their first appointment with surgeon within a target time following a referral

## Alternate Name\*

Percentage of patients who had their first surgical appointment within a target time following a referral

## INDICATOR DESCRIPTION

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### Description\*

This time represents the percentage of patients whose appointment was completed within the access target for the surgical service area being reported. In this case, the higher the percentage completed, the better. Priority levels and access targets are the recommended maximum wait times for wait time to see a surgeon and wait time to surgery.

Priority levels and access targets were created by a Provincial Clinical Expert Panel (Physicians, Clinicians and Healthcare Administrators) based on clinical evidence and are designed to help guide decision making; and, prioritize, manage and improve patient access to services.

The percentage of patients who had their appointment with the surgeon within the provincial target time represents the ability of the health system to provide patients with the care they need in a timely way.

### Indicator Status\*

Active

### HQO Reporting tool/product

Public reporting

### Dimension\*

Timely

### Type\*

Process

## DEFINITION AND SOURCE INFORMATION

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### Unit of Measurement\*

Percentage

### Calculation Methods\*

Numerator divided by the denominator times 100

### Numerator including inclusion/exclusion\*

Percentage of patients who had their first appointment with surgeon within a target time following a referral

<http://indicatorlibrary.hqontario.ca/Indicator/Detailed/percentage-within-target-surgical-wait-time-1/EN>

Number of patients in the denominator who had the first surgical appointment within a target time and met the inclusion/exclusion criteria.

### Denominator including inclusion/exclusion\*

Total number of patients who had the first surgical appointment following a referral and met the inclusion/exclusion criteria below.

#### *Inclusions:*

1. All closed wait list entries with procedure dates within the reporting period.
2. For adult surgical procedures, patients that are 18 years and older on the day the procedure was completed.
3. For paediatric surgical procedures, patients that are younger than 23 years on the day the procedure was completed.
4. Treatment Cancer procedures only.
5. Patients who were referred for consult as new referrals and re-referrals with referral dates and consult dates
6. Patients assigned as Priority Level 2 - 4 for specialist consult (Wait 1)

#### *Exclusions:*

1. Diagnostic, Palliative and Reconstructive cancer procedures.
2. Procedures on Skin - Carcinoma, Skin-Melanoma, and Lymphomas.
3. Procedures no longer required cases
4. Patients assigned as Priority Level 1 for specialist consult (Wait 1)
5. Wait list entries identified by hospitals as data entry errors.

### Adjustment (risk, age/sex standardization)- detailed

None

### Data Source

Wait Time Information System (WTIS)

### Data provided to HQO by

Cancer Care Ontario (CCO)

### Reported Levels of comparability /stratifications (defined)

Corporation

Province

Priority level

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Time

## RESULT UPDATES

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### Indicator Results

[Click here to view Health Quality Ontario results for this indicator](#)

## OTHER RELEVANT INFORMATION

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### Caveats and Limitations

1. This indicator is only collected for patients who have completed their surgery. That is, for patients who do not proceed to surgery or for those who have not yet completed their surgery, this indicator is not available. 2. This indicator is reported not at the surgeon level but rather at the level of the facility where the procedure took place. 3. Ninety among 114 surgical facilities in Ontario report surgical wait times to the WTIS; the remaining 24 facilities do not receive wait time funding for reporting and so do not report wait times. 4. Hospitals with small volumes will be more severely impacted by extreme waits. For example, an unusually long or short wait time for a single patient in a reporting period for hospitals that do not treat a lot of patients (e.g., a small hospital performing cataract surgery) will have a greater impact on the percentage of patients who were seen within target time. 5. Since Wait Time data is reported at the hospital corporation or facility level, facilities with multiple sites will be reported together even though data is collected at each site. Wait Times may also vary by surgeon which will not be apparent in this data as it is reported at the institution level rather than individual surgeon. 6. There are other factors that affect wait times for a surgical procedure or diagnostic exam that do not relate to a hospital's efficiency, to a particular doctor or the availability of resources. They include: a. Patient Choice – a patient with a non-life-threatening condition may choose a non-surgical treatment or may decide to delay treatment for personal or family reasons to a more convenient time. b. Patient Condition – a patient's condition may need to improve before the surgery or exam takes place. c. Follow-up Care – a patient who has an existing condition may be pre-booked for a follow-up treatment or exam a long time in advance. d. Treatment Complexity – a patient with special requirements may need specific equipment or a certain kind of facility and there is a delay until these can be scheduled.

### Comments Detailed

If patient unavailable dates fall outside the referral date up until the date of the appointment, the patient unavailable dates are not deducted from the patient's wait days. These are considered data entry errors.

## TAGS

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### TAGS\*

Acute Care/Hospital

Process

Wait Times

Timely

Wait Time Information System (WTIS)

## PUBLISH

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### PUBLISH DATETIME\*

20/11/2018 15:37:00