

Measuring waiting times for elective surgery in public hospitals

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Received 6 October 2014, accepted 19 October 2014, published online 4 December 2014

The article by Walters *et al.*¹ raised some very important points related to the problem of long elective surgery waiting lists in Australian public hospitals, including those related to the reporting of waiting lists being a poor indicator of quality for a health service. The number of people on a waiting list does not actually give any indication as to whether patients are being seen within clinically appropriate times, and only represents part of the patient's journey.² Measuring the actual length of time that patients wait for elective treatment may be a more important and relevant indicator of how well a health service is functioning.³

Current reporting processes only capture the length of time a patient has waited for surgery once placed on a waiting list, and does not include the waiting time to see the surgeon.² Most of my patients are shocked when I have to tell them that they are likely to face up to a 2-year wait just to have an initial appointment with a specialist.

A review of elective surgery waiting list management in 2012 recommended the expansion of waiting list reporting to cover the patient journey from initial consultation and referral through to specialist outpatient or elective surgical care.² The National Safety and Quality Health Service Standards lists 'Partnering with Consumers' as one of the measures of the quality of a healthcare service where consumers are expected to receive information on the performance of a health service organisation.⁴ In my view, this includes the provision of accurate information to consumers about the expected waiting times for elective surgery from the beginning of their patient journey.

Although improvement in the transparency and accuracy of waiting list reporting may not reduce waiting times,⁵ it may be an important first step in allowing patients to make an informed

choice about their surgery. It will also give patients the opportunity to pursue other avenues for surgery if made aware of the 'true' waiting times at each health service.

The paper by Walters *et al.*¹ outlined several barriers to the delivery of timely elective surgery and called for targeted 'whole-system' reforms to improve the efficiency in the delivery of this service. However, the true effect of these reforms on the quality of the service being provided cannot be adequately measured unless consistent and transparent capturing of clinically relevant waiting list data is introduced.

References

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