

Written Submission for Pre-Budget Consultations in Advance of
the Upcoming 2023 Federal Budget

By: Canadian Orthopaedic Association



THE CANADIAN
ORTHOPAEDIC ASSOCIATION

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Recommendation 1: That the government provide funding in the amount of \$25 million over 5 years for an Orthopaedic Care Collaborative program.

Recommendation 2: That the government work closely with provinces and healthcare teams to design and implement pan-Canadian licensure to improve access to care, and access to practice amid the current health human resource crisis.

Recommendation 3: That the government provides funding in the amount of \$50 million over a five-year period to develop a national long-term outcome registry for all medical devices and implants.

Recommendation 4: That the government launch a three-year sustainability pilot project studying orthopaedic operating room waste and recycling measures in Canada.

Overview

The Canadian Orthopaedic Association (COA) was established in 1945 as an organization for Canadian orthopaedic surgeons. Our mission is to unite the national orthopaedic community through advocacy, education, research and practice standards.

Our recommendations for the federal government include increased collaboration with provinces, national licensing, outcome registries for common orthopaedic procedures, as well as sustainability initiatives surrounding operating room waste.

Orthopaedic surgeons and decision-makers have faced and continue to face ongoing challenges in prioritizing care for patients across Canada; a situation that has only been made worse by the COVID-19 pandemic.

Wait times have resulted in immeasurable pain and suffering for patients who are awaiting quality of life-changing surgery and treatments that have been deferred and heavily delayed.

Key Statistics

Orthopaedic surgery in Canada has a wait time of 46.1 weeks¹ from referral by a Family Physician to surgery performed. Patients wait 15.9 weeks for a consultation and another 30.2 weeks for their procedure, the longest wait of all procedures in Canada. This wait time is up from 20.9 weeks in 2020 and is longer than what is considered reasonable by experts.

1. Over 180,000² patients are waiting for surgery across the country.
2. 28%³ of Orthopaedic surgeon recent graduates are seeking full-time employment.
3. Orthopaedic surgery in Canada has a wait time of 16.9 weeks⁴ longer than what is considered reasonable by experts.

Additional Considerations

- Address the backlog of surgery and adjacent issues, such as orthopaedic surgeon shortages, allied health shortages, limited access to imaging and lack of flexibility in working part-time or practice-sharing.
- Acknowledge the mental health, burnout rates and strained capacities of surgeons and allied health professionals.
- Recognize that Canadian-trained surgeons are leaving Canada due to a lack of employment.

¹ Fraser Institute, Waiting Your Turn: 2021 Report • Moir and Barua, Page 14

² 180,000 patients stat – Fraser Institute, Waiting Your Turn: 2021 Report • Moir and Barua, Page 56, Table 12: Estimated number of procedures for which patients are waiting after an appointment with a specialist, by specialty, 2021

³ 28% seeking full-time employment <https://coa-aco.org/unemployment-and-underemployment-of-orthopaedic-surgeons/>

⁴ Fraser Institute, Waiting Your Turn: 2021 Report • Moir and Barua, Page 14

Recommendation 1:

The Orthopaedic Care Collaborative is a partnership with representatives of the orthopaedic care team, including all subspecialty surgeons, allied health professionals and lived experience perspectives. The Canadian Orthopaedic Association (COA) deems to execute a national needs assessment study to report on what capacity is required in order to attend to demand for all subspecialties in all hospitals that offer care for orthopaedic surgery.

A five-year prospective study on hospital infrastructure, operating room and health human resources requirements to build a sustainable orthopaedic model of care will be harnessed within the Collaborative's mandate.

This will also include health economic factors and consensus-driven recommendations surrounding the breadth of orthopaedic surgical backlog in Canada.

Recommendation 2:

National licensure for surgeons to practice outside of their provincial jurisdiction would be one way to combat the health human resource crisis and protect patients belonging to equity-deserving populations and remote communities.

Other jurisdictions, such as Australia, have implemented a national registration for providers to work anywhere in the country, leading to patient care improvement.

In 2019, a study conducted by the Canadian Medical Association reported that 91% of physicians supported national licensure and believed it would improve care for patients⁵. Not only would it help colleagues in need, a national licensure would also respond to the orthopaedic surgical backlog in health systems that are deeply affected by it and create a dialogue for better practice transitions and part-time practice implementation.

Recommendation 3:

Expanding the Canadian Joint Replacement Registry⁶ to include all surgery especially those with surgically inserted devices and implants could improve quality of care, ethical standards and allow implant performance surveillance for Canadians.

A national registry of common procedures and implantable orthopaedic medical devices to include manufacturers, importers and distributors would create a long-term outcome reporting measure and improvement on knowledge exchange for clinicians and their patients. A registry would also help identify the best cost savings potential and eliminate single-use-only devices when unnecessary.

⁵ Canadian Medical Association, *Policy base website*, Dr. Gabe Woollam, President of the Society of Rural Physicians of Canada, Letter to Parliament, accessed 27 September 2022 <policybase.cma.ca>.

⁶ Canadian Institute for Health Information, *CIHI website*, Canadian Joint Replacement Registry, accessed 27 September 2022 <<https://www.cihi.ca/en/canadian-joint-replacement-registry-metadata>>

Recommendation 4:

A recent study pointed to data surrounding waste that is not efficiently recycled in the operating room⁷. Orthopaedic surgery is a source of substantial waste, averaging almost 7 kg⁸ per operation. The COA proposes a three-year sustainability pilot program to improve reporting, knowledge translation to surgeons and practice changes in the operating room. Canada's Zero Plastic Waste initiative inspired this recommendation to reduce waste and recycle efficiently at an operating room level.

⁷ Kooner, Sahil & Hewison, Christopher & Sridharan, Sarup & Lui, Justin & Matthewson, Graeme & Johal, Herman & Clark, Marcia. (2020). Waste and recycling among orthopedic subspecialties. *Canadian Journal of Surgery*. 63. E278-E283. 10.1503/cjs.018018.

⁸ Kooner, Sahil & Hewison, Christopher & Sridharan, Sarup & Lui, Justin & Matthewson, Graeme & Johal, Herman & Clark, Marcia. (2020). Waste and recycling among orthopedic subspecialties. *Canadian Journal of Surgery*. 63. E278-E283. 10.1503/cjs.018018.