

Putting Patients First: Eliminating the Surgical Backlog is the name of the Government of Saskatchewan's four-year effort to improve the entire continuum of surgical services for Saskatchewan residents.

Initiated by Saskatchewan Health, this partnership with health regions, specialists, physicians, therapists, nurses, and other care providers, will seek not only to eliminate the backlog of people awaiting surgery, but to improve surgical care and the patient experience at each of four phases:

Phase	Initiatives to be considered	Purpose
1. Health Promotion and Primary Health Services – working with patients before they require surgery	Pediatric dental programs	To reduce need for dental surgery among children and youth
	Expanded bariatric assessment and/or lifestyle intervention programs	Address obesity before individuals require bariatric surgery
	Enhanced management of chronic conditions	Enable individuals with chronic conditions to avoid or delay need for surgery
	Expand scope of practice for nurses, therapists, and other disciplines	Free up physicians' time to provide more primary health services
	Programs that enhance education and shared decision-making for patients	Ensure patients are educated about medical options other than surgery
2. Pre-Surgical Interventions	Multi-disciplinary assessment centres	Coordinated and timely assessments and referrals, improved communication with patients and families
	Pooled referrals	A group of surgeons “share” a waiting list of patients to even out wait times. (Patients have the option of declining a particular surgeon.)
	Promote/expand Physician Referral Guide website	Provide physicians and patients with up-to-date specialist wait-time information with the option to select ones with the shortest wait times, closest to family support etc.
	Increased diagnostic and laboratory capacity	Shorten waits for diagnostic and lab tests
	Redesign of clinical practices, including incentives for faster access	Encourage specialists to adopt improved processes

3. Surgical Patient Flow	New, more efficient processes for pre-admission clinics	Improved efficiency and patient flow
	Interdisciplinary care plans	Better patient education and pain management, consistent patient guidance
	Changes in anaesthesiology practices	Optimize operating-room time
	Standardized prosthetics and instrument sets	Ensures adequate supplies when surgery needed
	Group surgical nursing rotations for high volume procedures	Nurses attending at surgeries are experienced with particular procedures
	Increase numbers of long-term care beds or amend placement procedures	Free up hospital beds for surgical inpatients; long-term care patients are in appropriate care environments
	Updated acute-care admission and discharge protocols	Ensure most appropriate use of hospital beds
	Revise OR time-allotment principles	Reward surgeons who maintain shorter wait lists
	Incentive program for surgeons providing itinerant services in smaller communities	Reduce need to travel for residents of rural, remote communities
	Develop and implement surgery-specific clinical pathways	Introduce and standardize proven best practices so that service improves and waits are shortened
	More efficient use of operating rooms by allocating OR time using historical surgeon specific information on each procedure	Enhance capacity for improved patient flow because surgeons who are faster at procedures can accomplish an increased number of surgeries within their time block
	Make use of private diagnostic and outpatient surgery providers	Increase capacity of publicly-funded diagnostic and surgical care
	Add OR time in off hours (evenings and weekends)	Maximize existing infrastructure and generate higher volumes of procedures
	Provide coverage for out-of-province surgery when necessary	Ensure timely surgical care
	Specialist clinics in rural and remote communities	Enhance access and timeliness for residents of rural and remote communities
4. Post-Operative Care	Enhance home care and rehabilitation capacity in surgical patients' home health regions	Free up surgical beds in larger centres and provide care in the most appropriate setting
	Use telehealth to link rehab services in larger centres with those in smaller health regions	Enable surgical patients to access wider range of rehabilitative services closer to home