



# 2019-2020 ANNUAL WAIT TIME REPORT

April 2019 – March 2020

*"Being cared for in a timely manner"*

(Patient Declaration of Values - Accessibility and Responsiveness)

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# INTRODUCTION

Many factors influence the ability to deliver timely healthcare, such as an increased need due to an ageing population, the number of available surgeons and anesthetists, and available resources such as operating room time and post-operative rooms. Reducing wait times continues to be both a priority and a challenge for Prairie Mountain Health. This report highlights improvements made during the 2019-2020 fiscal year to reduce wait times, challenges encountered and actions taken.

In December 2019, a new coronavirus (COVID-19) was confirmed in Wuhan, China. It quickly spread across several countries, and by the end of January, the first cases of COVID-19 were confirmed in Canada. Within a couple of months, the effects of the pandemic were apparent across the world and took centre-stage on all news updates. Beginning March 23rd, elective (non-urgent) surgical procedures, and non-essential and routine diagnostic testing (including laboratory, imaging and non-invasive cardiac services), were temporarily postponed in Manitoba. This was done in an effort to ensure that staff, beds, equipment and supplies remained available and flexible for the COVID-19 response and to protect patients should they become ill during recovery from surgery. Although this does not significantly affect the results shown in this report, it will have a significant influence in the months thereafter.

## Definitions

There are two terms frequently used throughout this report:

- Average: the sum of a list of numbers, divided by how many numbers are in the list
- Median: the middle value of a list of numbers, when listed in numerical order from smallest to largest. If there are two middle numbers, you average them.

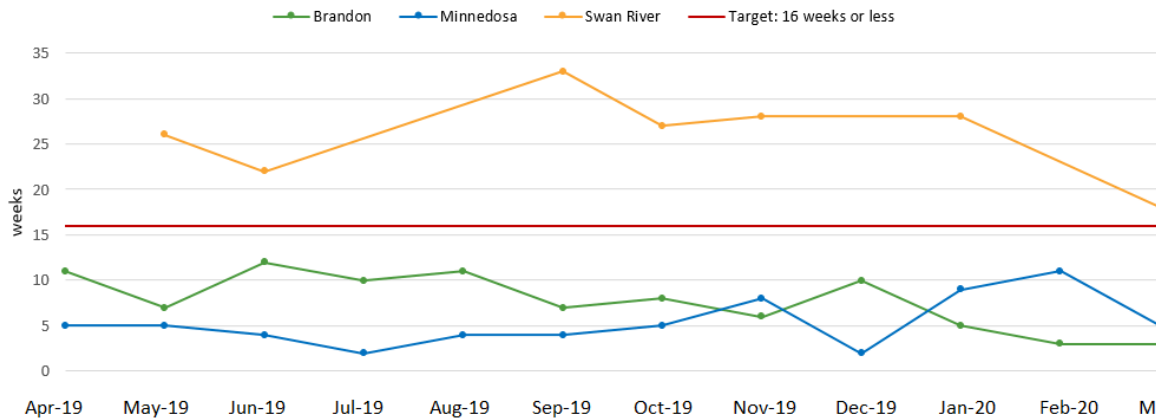
# SURGICAL

Surgical wait times are calculated as the surgery date minus the date the surgical booking form is received in the PreOp Assessment Clinic/Booking Office. Results are inclusive of elective and urgent surgical bookings received from the surgeon's office. Results exclude wait times of patients admitted through the emergency department or who delay surgery due to medical reasons or personal choice, as this would skew the results.

## Cataract

- The cataract wait time target is 16 weeks or less (as per Manitoba Health, Seniors and Active Living), with a benchmark target to complete 90% of cases within sixteen weeks (as per Canadian Institute for Health Information and 2016-2021 Strategic Plan Indicator).

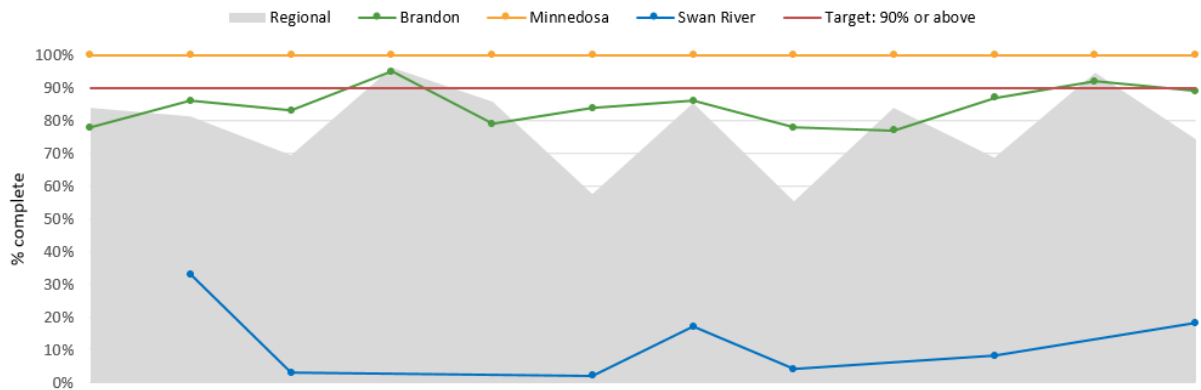
### CATARACT MEDIAN WAIT



	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	11	7	12	10	11	7	8	6	10	5	3	3
Minnedosa	5	5	4	2	4	4	5	8	2	9	11	5
Swan River	No Svce	26	22	No Svce	No Svce	33	27	28	No Svce	28	No Svce	18

	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	<p>Below (met) median wait target every month this year.</p> <p>Shortest to longest median monthly wait: Feb &amp; Mar (3 weeks) - Jun (12 weeks)</p>	<p>Shortest to longest median monthly wait:</p> <p>2015/16 = 3 - 11 weeks 2016/17 = 3 - 9 weeks 2017/18 = 5 - 13 weeks 2018/19 = 6 - 17 weeks</p>
<b>MINNEDOSA</b>	<p>Below (met) median wait target every month for the 4th year in a row. Shortest to longest median monthly wait: Jul &amp; Dec (2 weeks) - Feb (11 weeks)</p>	<p>Shortest to longest median monthly wait:</p> <p>2015/16 = 10 - 18 weeks 2016/17 = 1 - 16 weeks 2017/18 = 2 - 13 weeks 2018/19 = 3 - 14 weeks</p>
<b>SWAN RIVER</b>	<p>Failed to meet target during the seven months when service was offered. Shortest to longest median monthly wait: Mar (18 weeks) - Sep (33 weeks)</p>	<p>Shortest to longest median monthly wait:</p> <p>2015/16 = 7 - 17 weeks 2016/17 = 14 - 29 weeks 2017/18 = 14 - 36 weeks 2018/19 = 18 - 31 weeks</p>

## CATARACT % COMPLETE WITHIN 16 WEEK BENCHMARK



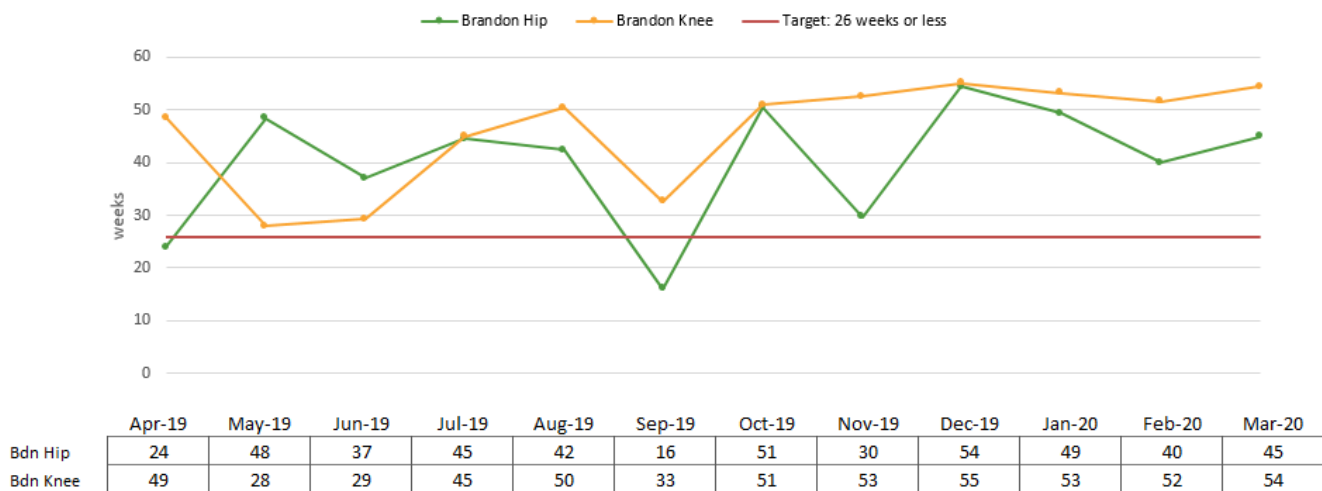
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	78%	86%	83%	95%	79%	84%	86%	78%	77%	87%	92%	89%
Minnedosa	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Swan River	No Svce	33%	3%	No Svce	No Svce	2%	17%	4%	No Svce	8%	No Svce	18%
Regional	84%	81%	69%	96%	86%	58%	85%	55%	84%	69%	95%	74%

	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Above (met) percentage within benchmark for two out of twelve months. Highest to lowest percentages: Jul (95%) - Dec (77%)	Highest to lowest percentages: 2015/16 = 100 - 52% 2016/17 = 100 - 78% 2017/18 = 98 - 54% 2018/19 = 93 - 39%
<b>MINNEDOSA</b>	Above (met) percentage within benchmark every month this year. Highest to lowest percentages: Every month (100%)	Highest to lowest percentages: 2015/16 = 86 - 42% 2016/17 = 100 - 53% 2017/18 = 100 - 90% 2018/19 = 100 - 72%
<b>SWAN RIVER</b>	Below (failed to meet) percentage within benchmark during all seven months service was offered. Highest to lowest percentages: May (33%) - Sep (2%)	Highest to lowest percentages: 2015/16 = 88 - 50% 2016/17 = 75 - 0% 2017/18 = 76% - 0% 2018/19 = 43 - 2%
<b>REGIONAL</b>	Above (met) percentage within benchmark for two out of twelve months. Highest to lowest percentages: Jul (96%) - Nov (55%)	Highest to lowest percentages: 2015/16 = 94 - 61% 2016/17 = 98 - 66% 2017/18 = 98 - 43% 2018/19 = 90 - 47%

## Hip and Knee Replacement

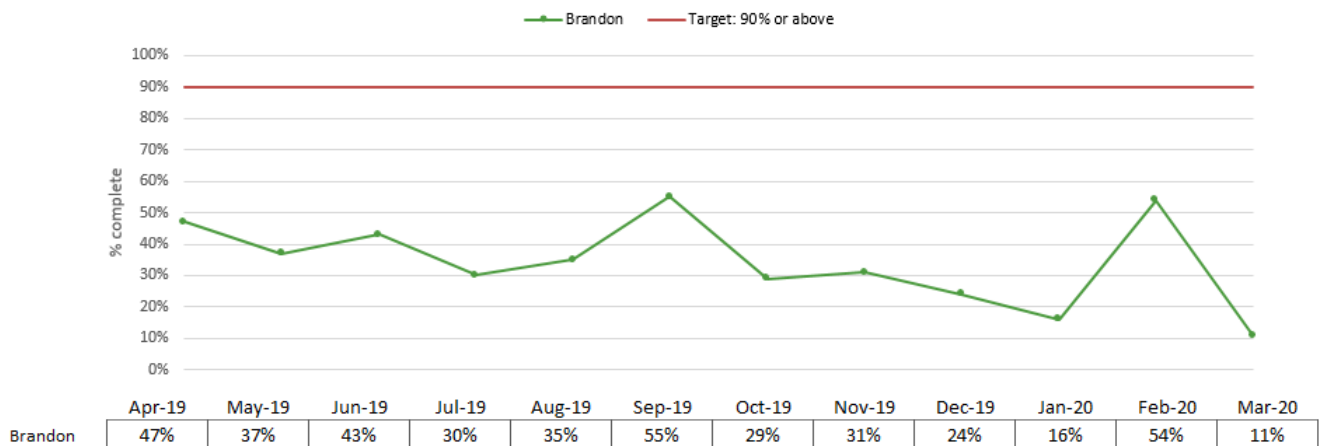
- The hip and knee replacement wait time target is 26 weeks or less (as per Manitoba Health, Seniors and Active Living), with a benchmark target to complete 90% of cases within 26 weeks (as per Canadian Institute for Health Information and 2016-2021 Strategic Plan Indicator).
- Knee replacement results are inclusive of primary and revision surgeries.
- Hip replacement results are inclusive of primary and revision surgeries. Results exclude partial hip replacements, including Moores and modular hip, as they are considered an emergency and are therefore not slated.

### HIP AND KNEE MEDIAN WAIT



	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON HIP</b>	Below (met) median wait target for two months out of twelve. Shortest to longest median monthly wait: Sep (16 weeks) - Dec (54 weeks)	Shortest to longest median monthly wait: 2015/16 = 5 - 22 weeks 2016/17 = 5 - 17 weeks 2017/18 = 15 - 42 weeks 2018/19 = 26 - 56 weeks
<b>BRANDON KNEE</b>	Failed to meet target for all twelve months. Shortest to longest median monthly wait: May (28 weeks) - Dec (55 weeks)	Shortest to longest median monthly wait: 2015/16 = 9 - 23 weeks 2016/17 = 10 - 31 weeks 2017/18 = 10 - 40 weeks 2018/19 = 37 - 57 weeks

## HIP & KNEE % COMPLETE WITHIN 26 WEEK BENCHMARK



	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON HIP &amp; KNEE COMBINED</b>	Below (failed to meet) percentage within benchmark for the past three years. Highest to lowest percentages: Sep (55%) - Mar (11%)	Highest to lowest percentages: 2015/16 = 100 - 70% 2016/17 = 100 - 51% 2017/18 = 78 - 18% 2018/19 = 33 - 11%

## Surgical Comments

- The surgeon performing cataracts at Swan River offers itinerant service. Patients are given the option to have their surgery performed at other locations, but some choose to wait longer due to location or surgeon preference. For this reason, wait times are longer than at other locations. Cataract surgery was offered in Swan River for seven months in 2019/20. This compares to eight months in 2018/19, seven months in 2017/18 and nine months in 2016/17.
- In 2019-20, 49% of Manitobans received a hip or knee replacement within the recommended wait time target of 6 months (26 weeks). This was statistically below the Canadian average of 72%. Source: Canadian Institute for Health Information.



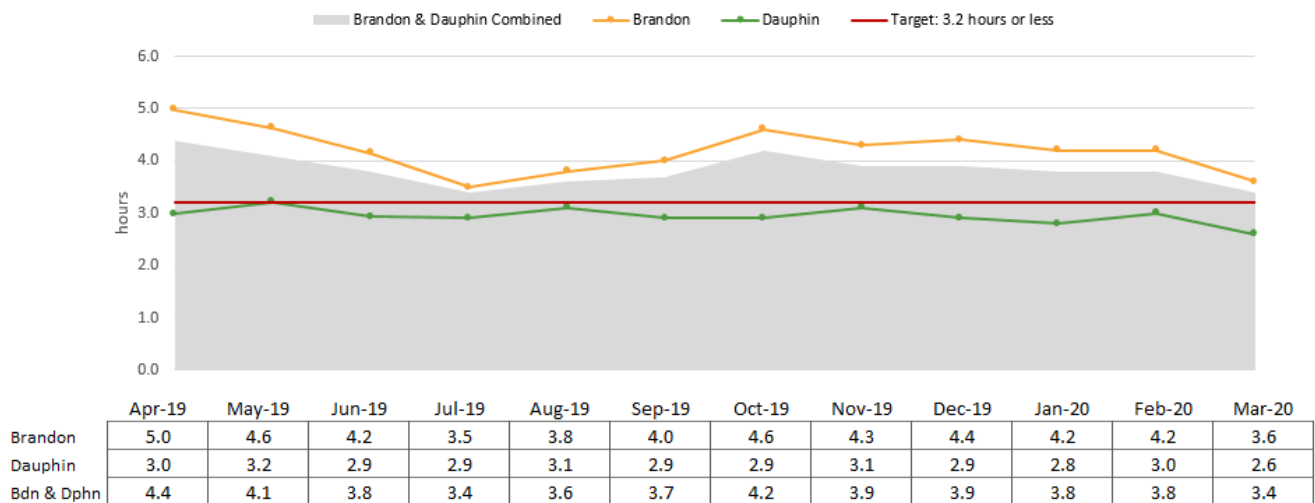
# EMERGENCY DEPARTMENT

Brandon and Dauphin Regional Health Centres collect data through an electronic program called EDIS (Emergency Department Information System).

## 90<sup>TH</sup> Percentile Wait to be Seen

- 90<sup>th</sup> Percentile Wait to be Seen is the time in which 90% of patients wait, between the earlier of registration or triage, to the beginning of treatment by a physician, physician assistant or nurse practitioner.

### 90<sup>TH</sup> PERCENTILE WAIT TO BE SEEN

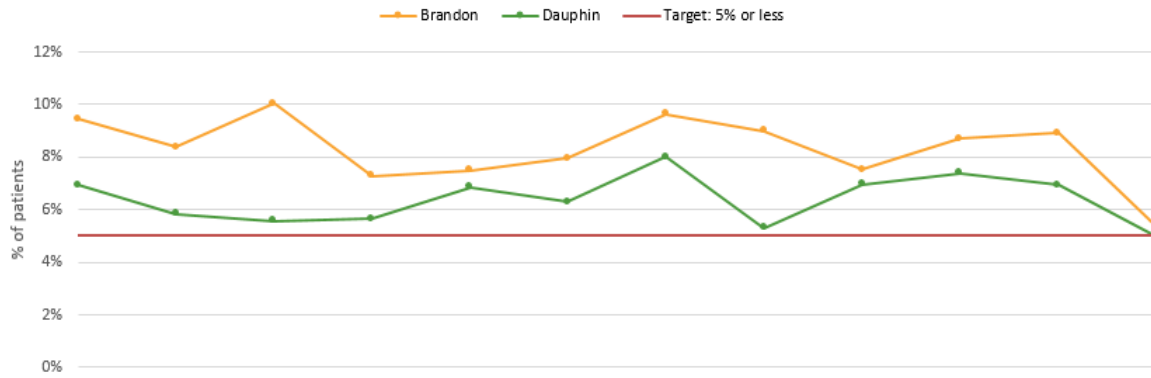


	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Above (failed to meet) target for all twelve months. Shortest to longest 90th percentile monthly wait: Jul (3.5 hours) - Apr (5.0 hours)	Not applicable - this is the first year of reporting this metric.
<b>DAUPHIN</b>	Below (met) target for all twelve months. Shortest to longest 90th percentile monthly wait: Mar (2.6 hours) - May (3.2 hours)	Not applicable - this is the first year of reporting this metric.
<b>Bdn &amp; Dphn Combined</b>	Above (failed to meet) target for all twelve months. Shortest to longest 90th percentile monthly wait: Jul & Mar (3.4 hours) - Apr (4.4 hours)	Not applicable - this is the first year of reporting this metric.

## Left Without Being Seen

- The proportion of emergency department visits that left without being seen by a physician. This indicator is calculated as the total number of visits divided by number of visits that left without being seen.

### LEFT WITHOUT BEING SEEN



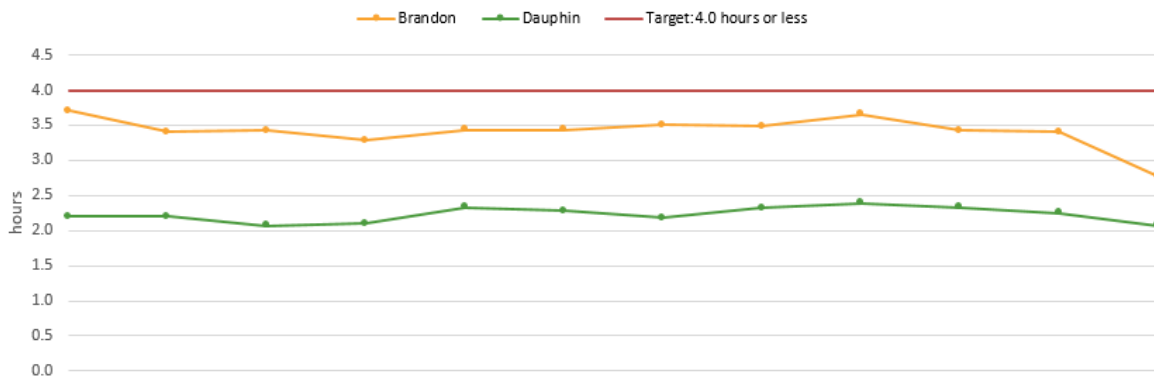
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	9%	8%	10%	7%	8%	8%	10%	9%	8%	9%	9%	5%
Dauphin	7%	6%	6%	6%	7%	6%	8%	5%	7%	7%	7%	5%

	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	<p>Below (met) target for one out of twelve months.</p> <p>Lowest to highest percentages: Mar (5%) - Jun &amp; Oct (10%)</p>	<p>Lowest to highest percentages:</p> <p>2015/16 = 7 - 13%</p> <p>2016/17 = 8 - 13%</p> <p>2017/18 = 8 - 14%</p> <p>2018/19 = 6 - 12%</p>
<b>DAUPHIN</b>	<p>Below (met) target for two out of twelve months.</p> <p>Lowest to highest percentages: Nov &amp; Mar (5%) - Oct (8%)</p>	<p>Lowest to highest percentages:</p> <p>Previous years unavailable</p> <p>2018/19 = 2 - 7%</p>

## Length of Stay (LOS)

- The median length of time (in hours and minutes) spent in the Emergency Department, from patient registration and triage:
  - to the time the main service provider (physician) decides to discharge the patient (LOS Non-Admit)
  - or to the time the main service provider (physician) decides to admit the patient and the patient is admitted to an inpatient bed (LOS Admit)

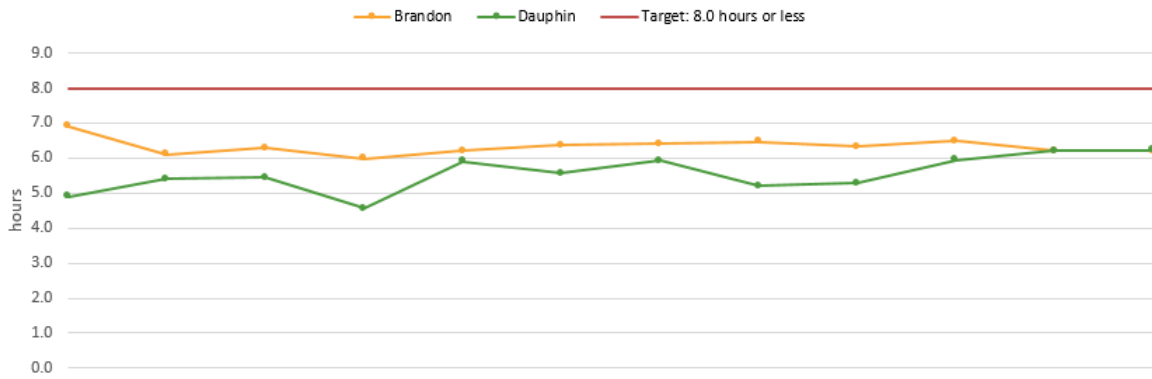
### MEDIAN NON-ADMIT LENGTH OF STAY (LOS)



	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	3.7	3.4	3.4	3.3	3.4	3.4	3.5	3.5	3.7	3.4	3.4	2.8
Dauphin	2.2	2.2	2.1	2.1	2.3	2.3	2.2	2.3	2.4	2.3	2.3	2.1

	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Below (met) target every month for the fifth year in a row. Shortest to longest median monthly non-admit LOS: Mar (2.8 hours) - Apr & Dec (3.7 hours)	Shortest to longest median monthly LOS: 2015/16 = 2.7 - 3.3 hours 2016/17 = 2.9 - 3.6 hours 2017/18 = 3.1 - 4.0 hours 2018/19 = 3.1 - 3.7 hours
<b>DAUPHIN</b>	Below (met) target every month for the second year in a row. Shortest to longest median monthly non-admit LOS: Jun, Jul & Mar (2.1 hours) - Dec (2.4 hours)	Shortest to longest median monthly LOS: Previous years not available 2018/19 = 1.8 - 2.2 hours

### MEDIAN ADMIT LENGTH OF STAY (LOS)



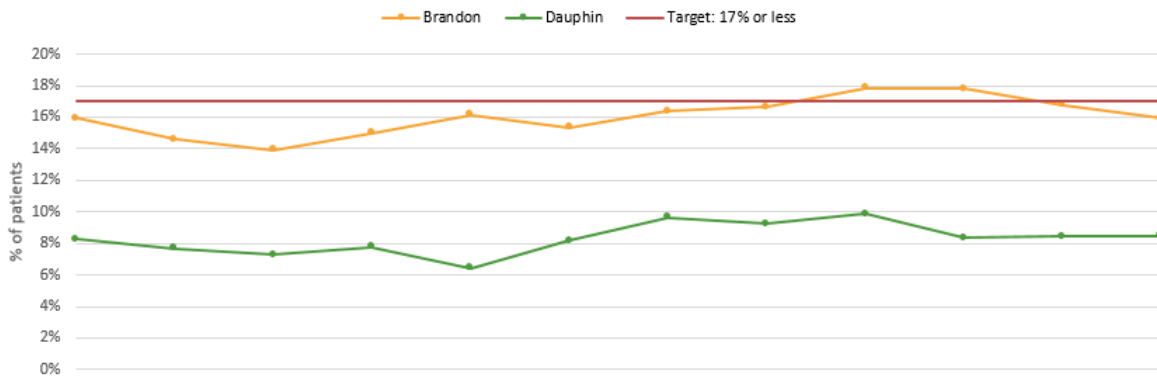
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	6.9	6.1	6.3	6.0	6.2	6.4	6.4	6.5	6.3	6.5	6.2	6.2
Dauphin	4.9	5.4	5.5	4.6	5.9	5.6	5.9	5.2	5.3	6.0	6.2	6.2

What happened in the last 12 months?		What happened in previous years?
<b>BRANDON</b>	<p>Below (met) target every month for the fifth year in a row.</p> <p>Shortest to longest median monthly admit LOS: Jul (6.0 hours) - Apr (6.9 hours)</p>	<p>Shortest to longest median monthly LOS:</p> <p>2015/16 = 5.1 - 6.3 hours</p> <p>2016/17 = 5.2 - 6.6 hours</p> <p>2017/18 = 5.8 - 6.9 hours</p> <p>2018/19 = 5.4 - 6.8 hours</p>
<b>DAUPHIN</b>	<p>Below (met) target every month for the second year in a row. Shortest to longest median monthly admit LOS: Jul (4.6 hours) - Feb &amp; Mar (6.2 hours)</p>	<p>Shortest to longest median monthly LOS:</p> <p>Previous years not available</p> <p>2018/19 = 3.9 - 5.6 hours</p>

## Admission Rate

- The proportion of emergency department visits that resulted in an admission (calculated as the total number of visits to the emergency department divided by the number of emergency department visits admitted to hospital).

### ADMISSION RATE



	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	16%	15%	14%	15%	16%	15%	16%	17%	18%	18%	17%	16%
Dauphin	8%	8%	7%	8%	6%	8%	10%	9%	10%	8%	8%	8%

What happened in the last 12 months?		What happened in previous years?
<b>BRANDON</b>	Below (met) target for ten out of twelve months. Lowest to highest percentages: Jun (14%) - Dec & Jan (18%)	Lowest to highest percentages: 2015/16 = 15 - 18% 2016/17 = 16 - 19% 2017/18 = 16 - 19% 2018/19 = 13 - 17%
<b>DAUPHIN</b>	Below (met) target every month for the second year in a row. Lowest to highest percentages: Aug (6%) - Oct & Dec (10%)	Lowest to highest percentages: Previous years not available 2018/19 = 7 - 10%

## Emergency Department Comments

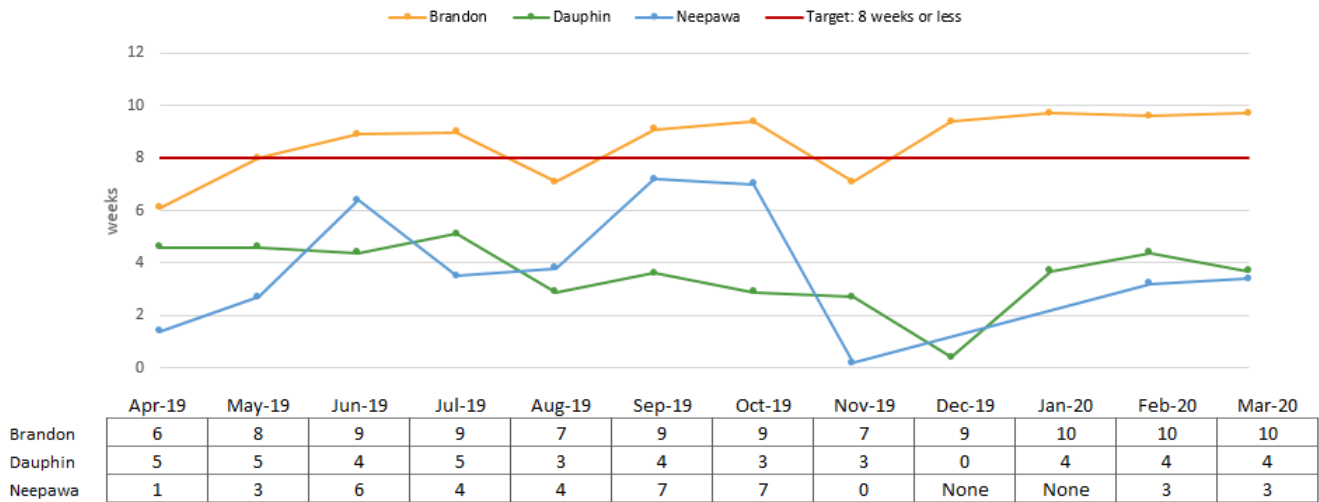
- In April 2019, we discontinued the reporting of Average Wait to be Seen and replaced this metric with 90th Percentile Wait to be Seen, with a target of 3.2 hours or less. This better aligns with goals set at a provincial level.
- The 90th Percentile Wait to be Seen and Left Without Being Seen metrics are somewhat dependent on the number of patients waiting to be seen, as well as the acuity levels and length of stay of the other patients being cared for in the Emergency Department.
- There was a decrease in wait times and those who left without being seen in March 2020. Fewer patients visited the Emergency Department during the provincial Covid-19 measures requesting that people stay home.
- Brandon developed a multidisciplinary team to work on strategies to improve the flow of and decrease the wait time for clients.
- Brandon's admission rate is likely higher than the target we have set as it is a referral site for the region and many patients are sent to be seen by our consultants. The admission rate includes those from the surrounding community, as well as those seen by consultants who require admission. The admission rate at Brandon Regional Health Centre has been consistent over the past five years.

# ENDOSCOPY

Endoscopy wait time results are inclusive of single scopes and are calculated from the date the procedure referral form is received to the procedure date. Double scopes are excluded from the calculation. Wait times are broken down into urgent and elective cases and only include patients that are fit and ready for procedures. Internal targets were set at eight weeks for urgent cases and 24 weeks for elective cases.

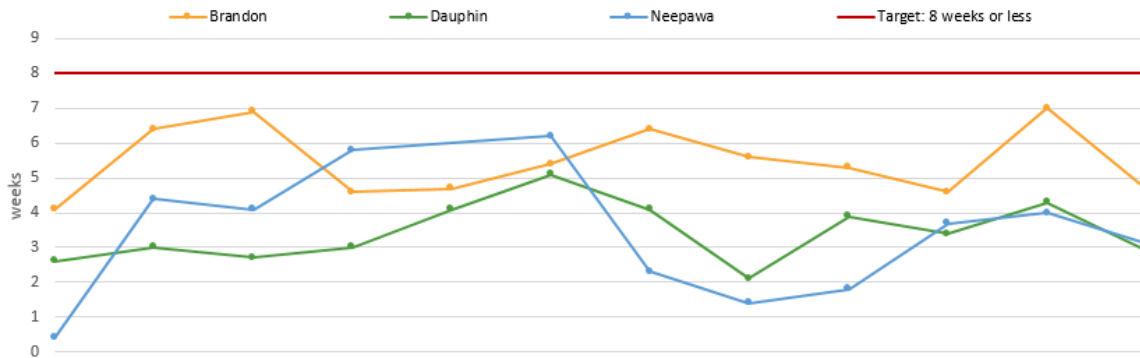
## Urgent Endoscopy

URGENT COLONOSCOPY AVERAGE WAIT



	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Below (met) target for four out of twelve months. Shortest to longest average monthly wait: Apr (6 weeks) - Jan, Feb & Mar (10 weeks)	Shortest to longest average monthly wait: 2015/16 = 10 - 17 weeks 2016/17 = 9 - 16 weeks 2017/18 = 7 - 21 weeks 2018/19 = 7 - 11 weeks
<b>DAUPHIN</b>	Below (met) target for all twelve months. Shortest to longest average monthly wait: Dec (<1 week) - Apr, May & Jul (5 weeks)	Shortest to longest average monthly wait: Previous years not available 2018/19 = 4 - 8 weeks
<b>NEEPAWA</b>	Below (met) target every month for the second year in a row. There were no urgent colonoscopies in Dec or Jan. Shortest to longest average monthly wait: Nov (<1 week) - Sep & Oct (7 weeks)	Shortest to longest average monthly wait: Previous years not available 2017/18 = 1 - 6 weeks 2018/19 = 2 - 4 weeks

### URGENT GASTROSCOPY AVERAGE WAIT



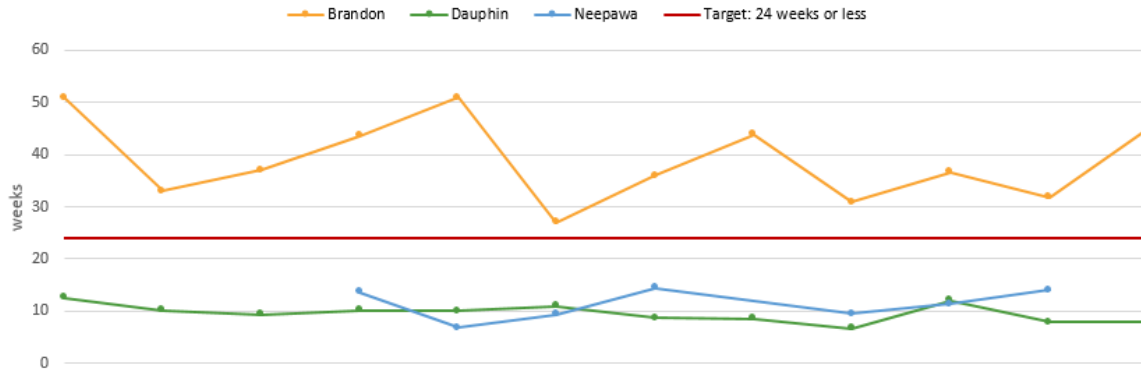
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	4	6	7	5	5	5	6	6	5	5	7	5
Dauphin	3	3	3	3	4	5	4	2	4	3	4	3
Neepawa	0	4	4	6	None	6	2	1	2	4	4	3

	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Below (met) target every month for the second year in a row. Shortest to longest average monthly wait: Apr (4 weeks) - Jun & Feb (7 weeks)	Shortest to longest average monthly wait: 2015/16 = 5 - 9 weeks 2016/17 = 2 - 13 weeks 2017/18 = 4 - 12 weeks 2018/19 = 4 - 8 weeks
<b>DAUPHIN</b>	Below (met) target every month for the second year in a row. Shortest to longest average monthly wait: Nov (2 weeks) - Sep (5 weeks)	Shortest to longest average monthly wait: Previous years not available 2018/19 = 1 - 5 weeks
<b>NEEPAWA</b>	Below (met) target for the 11 months when urgent gastroscopies occurred and for the third year in a row. Shortest to longest average monthly wait: Apr (<1 week) - Jul & Sep (6 weeks)	Shortest to longest average monthly wait: Previous years not available 2017/18 = 2 - 5 weeks 2018/19 = 1 - 4 weeks



# Elective Endoscopy

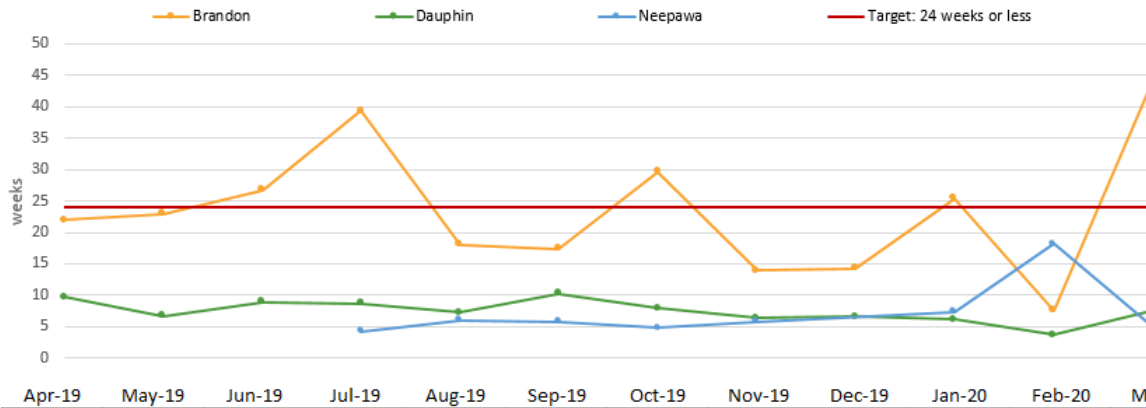
## ELECTIVE COLONOSCOPY AVERAGE WAIT



	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Brandon	51	33	37	44	51	27	36	44	31	37	32	45
Dauphin	13	10	9	10	10	11	9	9	7	12	8	8
Neepawa	None	None	None	14	7	9	14	None	10	11	14	None

What happened in the last 12 months?		What happened in previous years?
<b>BRANDON</b>	Above (failed to meet) target every month for the fifth year in a row. Shortest to longest average monthly wait: Sep (27 weeks) - Apr & Aug (51 weeks)	Shortest to longest average monthly wait: 2015/16 = 27 - 42 weeks 2016/17 = 37 - 61 weeks 2017/18 = 39 - 79 weeks 2018/19 = 32 - 69 weeks
<b>DAUPHIN</b>	Below (met) target every month for the second year in a row. Shortest to longest average monthly wait: Dec (7 weeks) - Apr (13 weeks)	Shortest to longest average monthly wait: Previous years not available 2018/19 = 11 - 14 weeks
<b>NEEPAWA</b>	Below (met) target for the seven months when elective colonoscopies occurred and for the third year in a row. Shortest to longest average monthly wait: Aug (7 weeks) - Jul, Oct & Feb (14 weeks)	Shortest to longest average monthly wait: Previous years not available 2017/18 = 2 - 23 weeks 2018/19 = 3 - 16 weeks

### ELECTIVE GASTROSCOPY AVERAGE WAIT



Brandon	22	23	27	39	18	17	30	14	14	25	8	44
Dauphin	10	7	9	9	7	10	8	6	7	6	4	8
Neepawa	None	None	None	4	6	6	5	6	None	7	18	5

	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Below (met) target for seven out of twelve months. Shortest to longest average monthly wait: Feb (8 weeks) - Mar (44 weeks)	Shortest to longest average monthly wait: 2015/16 = 12 - 23 weeks 2016/17 = 13 - 44 weeks 2017/18 = 14 - 48 weeks 2018/19 = 10 - 44 weeks
<b>DAUPHIN</b>	Below (met) target every month for two years in a row. Shortest to longest average monthly wait: Feb (4 weeks) - Apr & Sep (10 weeks)	Shortest to longest average monthly wait: Previous years not available 2018/19 = 7 - 11 weeks
<b>NEEPAWA</b>	Below (met) target for eight months when elective gastroscopies occurred and for the third year in a row. Shortest to longest average monthly wait: Jul (4 weeks) - Feb (18 weeks)	Shortest to longest average monthly wait: Previous years not available 2017/18 = 3 - 7 weeks 2018/19 = 5 - 11 weeks

### Endoscopy Comments

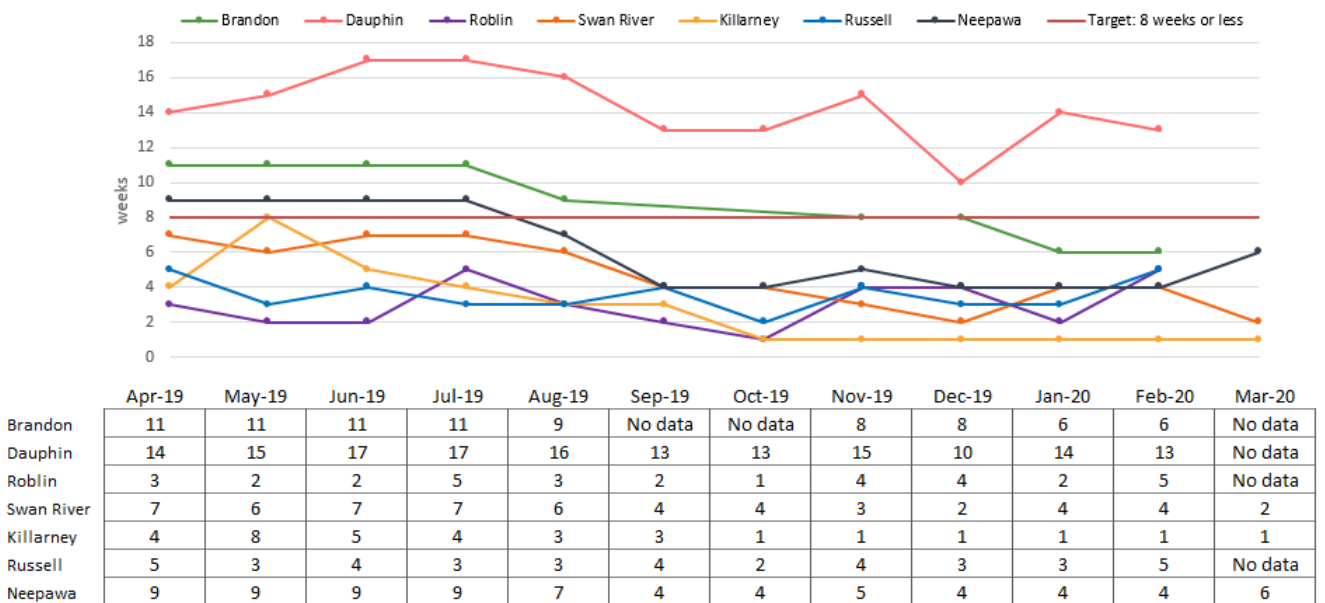
- The large volume of endoscopy referrals to Brandon and the variety of procedures that the facilities' Endoscopists perform influences our ability to meet timeline targets. In addition to colonoscopies and gastroscopies, one of our Endoscopists performs endoscopic retrograde cholangiopancreatography, and all of the Endoscopists perform dilations.
- Endoscopy wait times in Neepawa is provided by one general practitioner and one visiting specialist and are easily influenced by physician availability. One of the endoscopists was on maternity leave for a portion of 2019, while the other performed endoscopies based on their availability.

# DIAGNOSTIC IMAGING

Diagnostic imaging includes wait time results of all primary care referrals. Results exclude the following: follow-ups, physician requested exams, patients who have rebooked by their choice, in-patients (diagnostic services have designated spots for them every day), in-patients from other facilities (looked at before any other routine appointment) and emergent requests (they go directly to the radiologist from the physician, and together they determine when the exam will be done).

## Ultrasound

ULTRASOUND AVERAGE WAIT



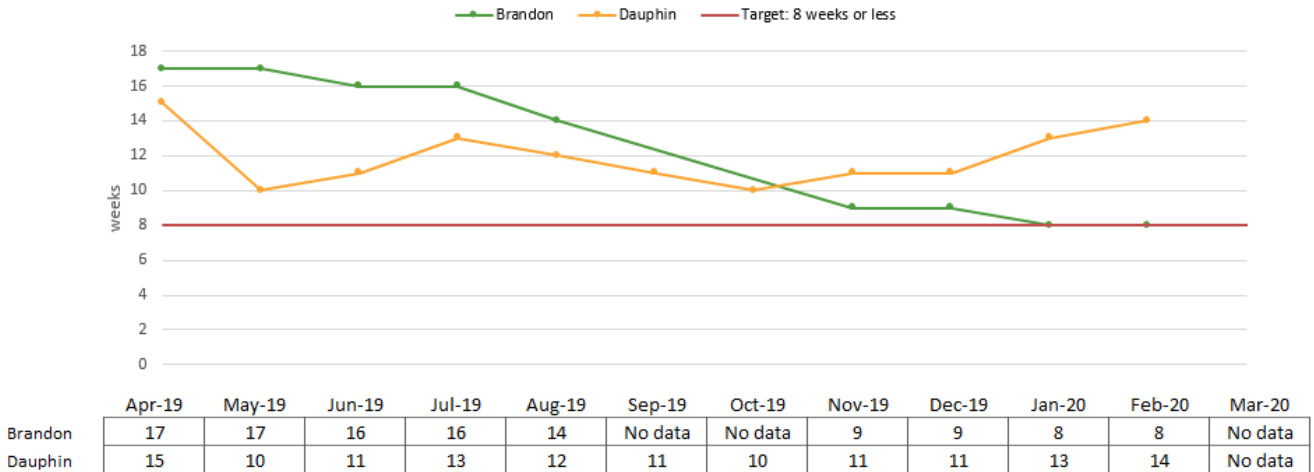
	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	<p>Below (met target) for four out of nine months. No data available for three months.</p> <p>Shortest to longest average monthly wait: Jan &amp; Feb (6 weeks) - Apr, May, Jun &amp; Jul (11 weeks)</p>	<p>Shortest to longest average monthly wait:</p> <p>2015/16 = 6 - 14 weeks 2016/17 = 9 - 18 weeks 2017/18 = 9 - 13 weeks 2018/19 = 8 - 14 weeks</p>
<b>DAUPHIN</b>	<p>Above (failed to meet) target for eleven months where data were available. Shortest to longest average monthly wait:</p> <p>Dec (10 weeks) - Jun &amp; Jul (17 weeks)</p>	<p>Shortest to longest average monthly wait:</p> <p>2015/16 = 3 - 5 weeks 2016/17 = 3 - 16 weeks 2017/18 = 7 - 13 weeks 2018/19 = 8 - 27 weeks</p>

KILLARNEY	<p>Below (met) target every month for the fourth year in a row. Shortest to longest average monthly wait: Oct thru Mar (1 week) - May (8 weeks)</p>	<p>Shortest to longest average monthly wait: 2015/16 = 4 - 9 weeks 2016/17 = 1 - 8 weeks 2017/18 = 2 - 7 weeks 2018/19 = 2 - 5 weeks</p>
NEEPAWA	<p>Below (met) target for eight out of twelve months. Shortest to longest average monthly wait: Sep, Oct, Dec thru Feb (4 weeks) - Apr thru Jul (9 weeks)</p>	<p>Shortest to longest average monthly wait: 2015/16 = 3 - 4 weeks 2016/17 = 3 - 9 weeks 2017/18 = 3 - 6 weeks 2018/19 = 3 - 11 weeks</p>
ROBLIN	<p>Below (met) target every month for the fourth year in a row. Data were not available for Mar. Shortest to longest average monthly wait: Oct (1 week) - Jul &amp; Feb (5 weeks)</p>	<p>Shortest to longest average monthly wait: 2015/16 = 1 - 12 weeks 2016/17 = 1 - 6 weeks 2017/18 = 5 - 8 weeks 2018/19 = 2 - 6 weeks</p>
RUSSELL	<p>Below (met) target for every month for the second year in a row. Data were not available for Mar. Shortest to longest average monthly wait: Oct (2 weeks) - Apr &amp; Feb (5 weeks)</p>	<p>Shortest to longest average monthly wait: 2015/16 = 1 - 6 weeks 2016/17 = 5 - 10 weeks 2017/18 = 4 - 13 weeks 2018/19 = 2 - 7 weeks</p>
SWAN RIVER	<p>Below (met) target every month for the fifth year in a row. Shortest to longest average monthly wait: Dec &amp; Mar (2 weeks) - Apr, Jun &amp; Jul (7 weeks)</p>	<p>Shortest to longest average monthly wait: 2015/16 = 1 - 2 weeks 2016/17 = 1 - 4 weeks 2017/18 = 3 - 7 weeks 2018/19 = 3 - 6 weeks</p>

## Magnetic Resonance Imaging (MRI)

- Our goal is to have MRIs completed within eight weeks of the time the referral is received to the appointment time

**MRI AVERAGE WAIT**

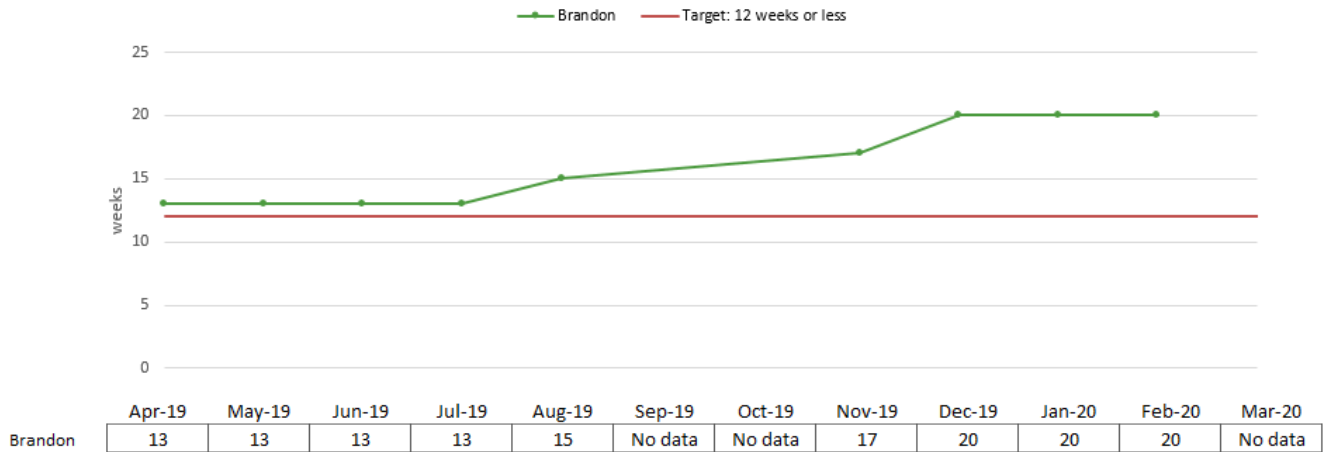


	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Below (met) target for two out of nine months where data were available. Shortest to longest average monthly wait: Jan & Feb (8 weeks) - Apr & May (17 weeks)	Shortest to longest average monthly wait: 2015/16 = 11 - 19 weeks 2016/17 = 11 - 13 weeks 2017/18 = 16 - 21 weeks 2018/19 = 17 - 21 weeks
<b>DAUPHIN</b>	Above (failed to meet) target for eleven months where data were available. Shortest to longest average monthly wait: May & Oct (10 weeks) - Apr (15 weeks)	Shortest to longest average monthly wait: Not available - first year of reporting.

## Echocardiography

- Our goal is to have echocardiography exams completed within 12 weeks from the time the referral is received to the appointment date.

### ECHOCARDIOGRAPHY MEDIAN WAIT

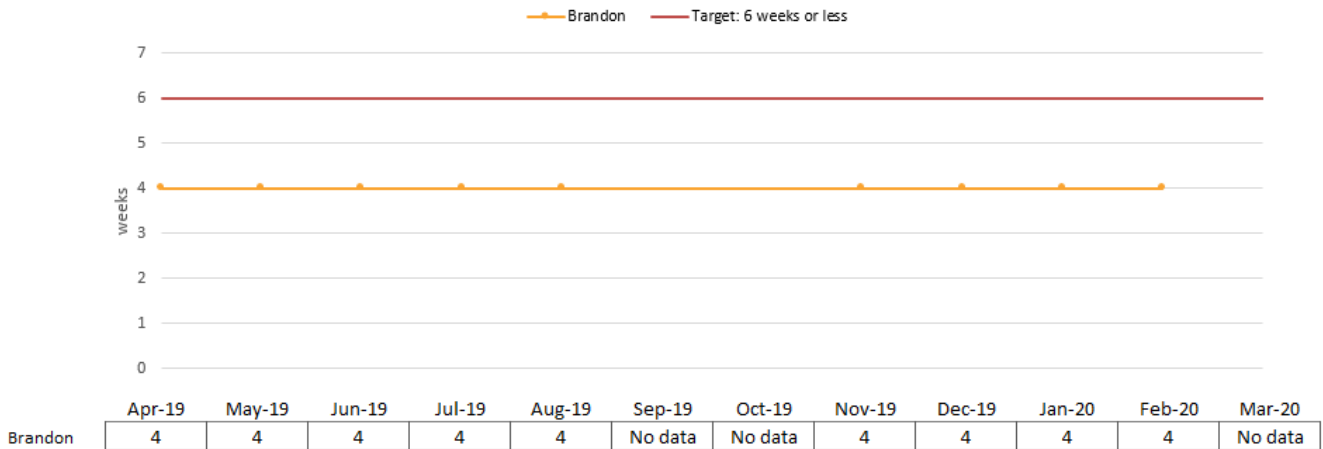


	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	<p>Above (failed to meet) target for nine months where data were available.</p> <p>Shortest to longest median monthly wait: Apr thru Jul (13 weeks) - Dec thru Feb (20 weeks)</p>	<p>Shortest to longest median monthly wait:</p> <p>2015/16 = 2 - 7 weeks 2016/17 = 7 - 12 weeks 2017/18 = 9 - 13 weeks 2018/19 = 7 - 13 weeks</p>

## Bone Density

- Our goal is to have Bone Density tests completed within six weeks of the time referral is received to the appointment date. Brandon Regional Health Centre has one bone density machine that operates Monday through Friday from 07:00 to 16:15.

### BONE DENSITY AVERAGE WAIT

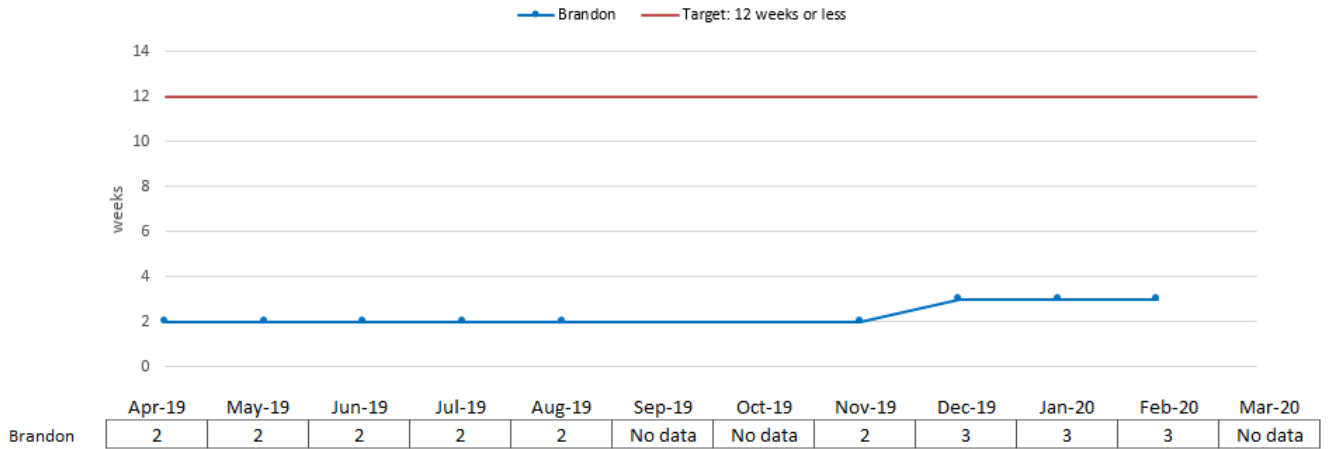


	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	<p>Below (met) target every month for the fifth year in a row.</p> <p>Data were not available for three months.</p> <p>Shortest to longest average monthly wait: Apr thru Aug, Nov thru Feb (4 weeks)</p>	<p>Shortest to longest average monthly wait:</p> <p>2015/16 = 2 - 5 weeks</p> <p>2016/17 = 3 - 6 weeks</p> <p>2017/18 = 2 - 5 weeks</p> <p>2018/19 = 2 - 4 weeks</p>

## Myocardial Perfusion (MIBI)

- Our goal is to have a MIBI exam completed within 12 weeks of the time that the referral is received to the appointment date.

### MYOCARDIAL PERFUSION AVERAGE WAIT



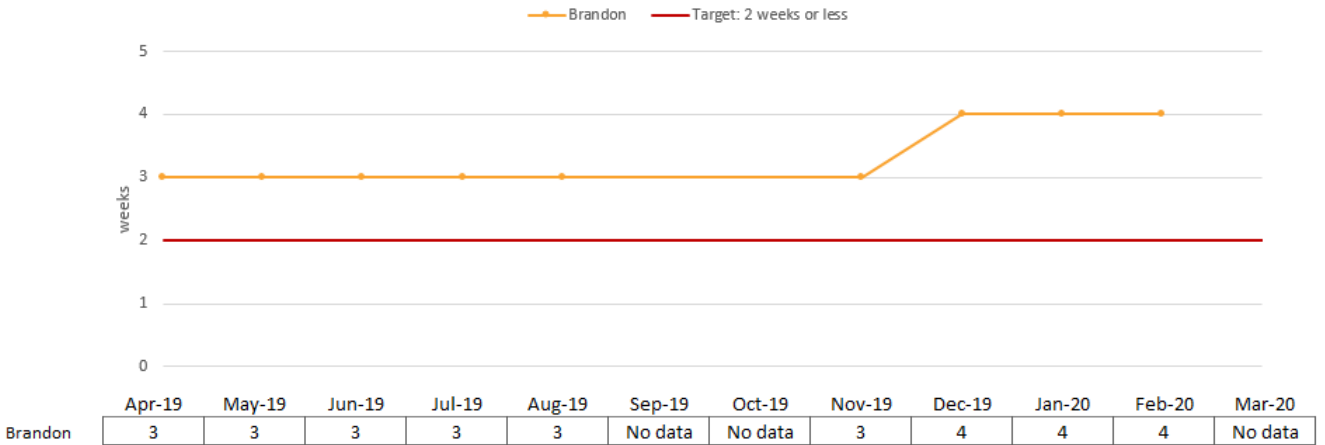
	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	<p>Below (met) target every month for the fifth year in a row.</p> <p>Data were not available for three months.</p> <p>Shortest to longest average monthly wait: Apr thru Aug &amp; Nov (2 weeks) - Dec, Jan &amp; Feb (3 weeks)</p>	<p>Shortest to longest average monthly wait:</p> <p>2015/16 = 2 - 5 weeks</p> <p>2016/17 = 3 - 5 weeks</p> <p>2017/18 = 2 - 6 weeks</p> <p>2018/19 = 2 - 3 weeks</p>



## Mammography

- Our goal is to have a mammography exam completed within two weeks of the time that the referral is received to the appointment date.

### MAMMOGRAPHY AVERAGE WAIT

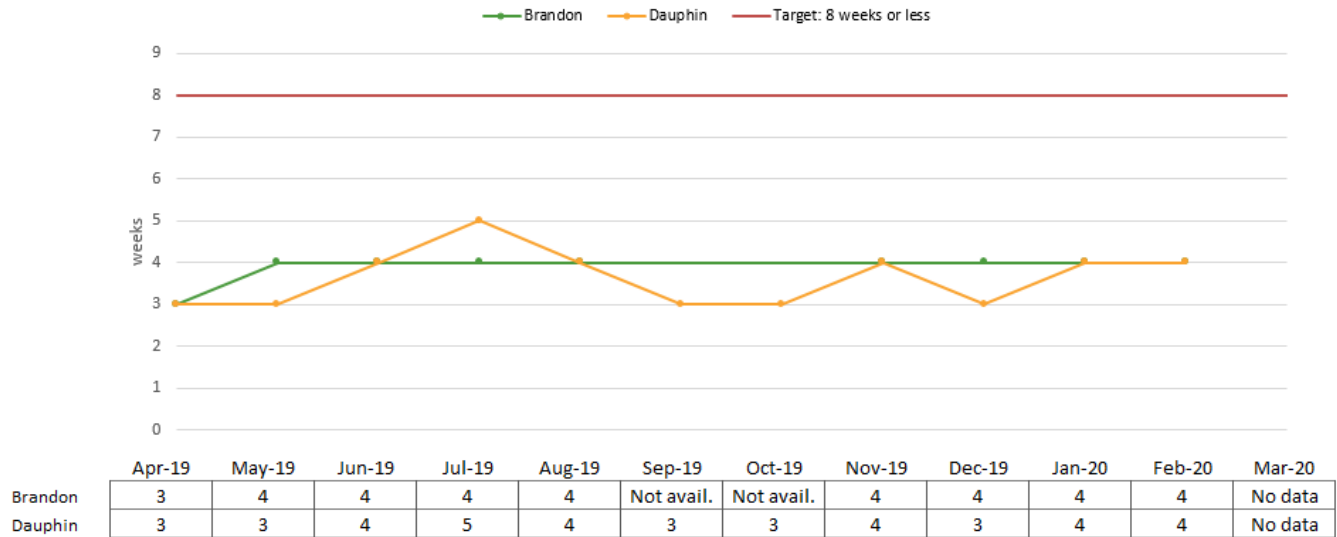


	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	Above (failed to meet) target for nine months when data were available. Shortest to longest average monthly wait: Apr thru Aug & Nov (3 weeks) - Dec, Jan & Feb (4 weeks)	Shortest to longest average monthly wait: 2015/16 = 2 - 4 weeks 2016/17 = 1 - 4 weeks 2017/18 = 3 - 3 weeks 2018/19 = 2 - 4 weeks

## CT Scan

- Our goal is to have a CT scan completed within eight weeks of the time that the referral is received to the appointment date.

### CT SCAN AVERAGE WAIT



	What happened in the last 12 months?	What happened in previous years?
<b>BRANDON</b>	<p>Below (met) target every month for the fifth year in a row.</p> <p>Data were not available for three months.</p> <p>Shortest to longest average monthly wait: Apr (3 weeks) - May thru Aug &amp; Nov thru Feb (4 weeks)</p>	<p>Shortest to longest average monthly wait:</p> <p>2015/16 = 3 - 7 weeks</p> <p>2016/17 = 2 - 5 weeks</p> <p>2017/18 = 3 - 4 weeks</p> <p>2018/19 = 3 - 4 weeks</p>
<b>DAUPHIN</b>	<p>Below (met) target every month for the fifth year in a row.</p> <p>Data were not available for one month.</p> <p>Shortest to longest average monthly wait: Apr, May, Sep, Oct &amp; Dec (3 weeks) - Jul (5 weeks)</p>	<p>Shortest to longest average monthly wait:</p> <p>2015/16 = 1 - 3 weeks</p> <p>2016/17 = 2 - 5 weeks</p> <p>2017/18 = 1 - 3 weeks</p> <p>2018/19 = 3 - 4 weeks</p>

## Diagnostic Imaging Comments

- September and October diagnostic wait times for Brandon were not calculated due to a regional network outage. Several March diagnostic wait times are listed as “No data” due to the Covid-19 pandemic, as some services were suspended and it was not a requirement to report results.
- Implementation of a provincial central intake process for MRIs affected wait times.
- Dauphin’s first MRI scanner began operation just prior to the 2019-2020 fiscal year. It has increased access and reduced travel times for residents from the northern area who require this diagnostic service. The new MRI machine performed 2,830 scans this year and reduced the number of inter-facility transfers required for patients who would previously been transferred to another site. A reduction in MRI wait times occurred at Brandon Regional Health Centre, which could be in part due to the operation of the Dauphin MRI.