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Executive Summary: Cardiac Patient Survey Report

The study was designed and executed to explore the opinions of cardiac patients who are classified on the Cardiac Care Network of Ontario registry/wait list as active, semi-urgent or elective and waiting to undergo an angiogram, angioplasty or cardiac surgery. The survey explores opinions on wait time issues and reasons why patients would be discouraged or encouraged from going to a hospital further from home to have their procedure done sooner.

The self-administered survey was mailed to 2,306 cardiac patients with 426 returned surveys processed and in-sample. The return was weighted to reflect the CCN wait list by age and gender within CCN geographic planning regions. Field work was undertaken June 15, 2005 - July 14, 2005.

### OVERALL

Just over half of cardiac patients consider the wait time for their procedure is reasonable. 29% do not consider their wait time reasonable and 14% of patients are uncertain if their wait time is reasonable or not.

21% of patients say if they had been given the option, they would have considered having their cardiac procedure done sooner at a hospital further from home. Patients who feel their wait time is not reasonable are more likely to say they would have considered the option. Those under 55 are more likely than older patients to say they would have considered going to another hospital.

The main reasons patients would be discouraged from going to a hospital further from home to have their procedure done are:
- thinking they do not need to have the procedure done sooner
- not wanting to be in hospital without family or friends close by
- not wanting to drive a long distance from home

The single most important reason patients would be encouraged to go to a hospital further from home is if the cardiac doctor said it was in their best interest to have the procedure done sooner.
Key Findings

ABOUT YOUR CARDIAC PROCEDURE
- 54% of cardiac patients consider their wait time reasonable. Angioplasty patients are more likely than angiogram or surgical patients to feel their wait time is reasonable.

ABOUT THE CARDIAC CARE NETWORK OF ONTARIO
- 69% of patients say they recall a Regional Cardiac Care Coordinator (RCCC) or a hospital staff person contacting them.
  
- Of those patients who recall contact with a RCCC or a hospital staff person, 20% say they were given the choice to have their procedure done sooner by going to a hospital with a shorter wait list.

TALKING TO YOUR DOCTORS AND NURSES
- 83% of patients do not recall talking to a doctor or nurse about the option of going to another hospital to have the procedure done sooner.

CONSIDERING ANOTHER HOSPITAL FOR YOUR PROCEDURE
- 21% of patients say if they had been given the option, they would have considered having their cardiac procedure done sooner at a hospital further from home.
  
- Patients who feel their wait time is not reasonable are more likely to say they would have considered having their procedure done sooner. Those under 55 are more likely than older patients to consider the option of going to another hospital.

- The reasons patients would be discouraged or stopped from going to a hospital further from home to have their cardiac procedure done sooner are:
  
  - Thinking they do not need to have the procedure done sooner (43%)
  - Not wanting to be in a hospital without family or friends close by (43%)
  - Not wanting to drive a long distance from home (39%)
  - Not wanting to fly to another city/town (37%)
  - The expense, e.g. travel and meal costs (35%)
  - Concerns their cardiac doctor may not be available for follow-up care (33%)

- 14% of patients say nothing would stop me or discourage me from going to a hospital further from home to have my procedure done sooner. Those under 65 are more likely to say this than older patients.
The reasons patients would be encouraged to go to a hospital further from home to have their cardiac procedure done sooner are:

- If their cardiac doctor said it was in their best interest to have the procedure done sooner (79%)
- The hospital was within driving distance of their home (46%)
- Their cardiac doctor said s/he would be responsible for co-ordinating follow-up care (36%)
- Their cardiac doctor said s/he had confidence in the care provided at the other hospital (35%)
- They can reduce the stress by knowing that they could have the procedure done sooner (35%)
- A family member / friend was available to travel with them (35%)
- There was no need to return to the other hospital (34%)
Physician Survey Report
Executive Summary: Physician Survey Report

This study was undertaken to explore the opinions of Ontario cardiologists, cardiac surgeons and internists (cardiology specialty) regarding referral patterns and wait lists for angiography, angioplasty and cardiac surgery. A self-administered survey was mailed to 421 physicians with 113 returned, usable surveys in-sample. Field work was undertaken May 24, 2005 - June 21, 2005.

OVERALL
Physicians refer the greatest number of their patients to a specific centre for angiography, angioplasty or cardiac surgery because they are on staff at the centre. The majority of physicians feel that wait times are ideal or almost ideal at the centre where they send the greatest number of their patients.

Physicians think that about 22% of their non-urgent cardiac patients would be willing and able to go to another centre to have their procedure done sooner.

Physicians do not agree on the single greatest barrier to referring patients to a centre that is not their usual one: equal numbers identified the distance patients would have to travel and communication with personnel of another centre as the greatest barriers.

Key Findings

ABOUT REFERRALS FOR ANGIOGRAPHY / ANGIOPLASTY / CARDIAC SURGERY

- Physicians refer the greatest number of their cardiac patients to a specific centre because they are on staff at the centre.
- 4% or less of physicians identify any aspect of wait time as the number one reason for referring to a specific centre.

ABOUT REFERRING TO OTHER CENTRES

- Over half of physicians do not have an alternate centre for referrals - even if the wait list is too long at their usual referral centre.
- 7 out of 10 physicians in the past 12 months have not talked to any of their cardiac patients about having their procedure done sooner at a centre further from home.
Executive Summary Physician Survey Report

Key Findings cont'd

ABOUT REFERRING TO OTHER CENTRES cont'd

- On average, physicians feel that about 22% of their non-urgent angiography, angioplasty or cardiac surgery patients would be willing and able to go to another centre for their procedure.

  NOTE: The cardiac patient survey reports that 21% of non-urgent cardiac patients say if they had been given the option to have their cardiac procedure done sooner at a hospital further from home, they would have considered it. (See Cardiac Care Patient Survey Report, Cardiac Care Network of Ontario, August 2005.)

- Physicians do not agree on the single greatest barrier to referring patients to a centre that is not their usual one: equal numbers identified distance patient would have to travel and communication with personnel of other centre.

- About half of physicians feel that a centre’s ability to schedule patients for same-sitting procedures, and greater standardization of processes, would have an important influence on a physician’s decision to refer to a cardiac centre they may not be as familiar with.

ABOUT WAIT TIME

- On average, 67% of physicians feel that wait times are ideal or almost ideal at the centre they send the greatest number of their patients for angiography, angioplasty, or cardiac surgery.

- 45% of physicians / office staff, contact a Regional Cardiac Care Coordinator weekly or more often to discuss patient wait times for angiography, angioplasty or surgery. Note: this does not necessarily mean the information is being used to make referral decisions.

- 34% of physicians say they do not usually source wait time data.

ABOUT THE CARDIAC CARE NETWORK OF ONTARIO

- 28% of physicians disagree completely / almost completely with the goal of the Cardiac Care Network of Ontario which is to ensure that all cardiac patients are informed about potential options, risks and benefits associated with having their procedure done at the first available cardiac centre.
Executive Summary: Ontario Household Survey Report

This study was designed and executed to explore the opinions of Ontarians on accessing acute cardiac care. The self-administered survey was mailed to 854 select households of Karom Group's Dialogue Canada household panel. The sendout sample closely reflected the profile of non-urgent cardiac care patients (by age and gender within specific geographic planning areas as identified by the Cardiac Care Network of Ontario) who are on a wait list to undergo a cardiac procedure. For the return to closely parallel the sendout, weighting was applied by age and gender within geographic planning areas. The weighted sample for this study is 455. Field work was conducted June 13, 2005 - July 11, 2005.

OVERALL

Six in ten respondents say if they needed to have a cardiac procedure they would consider the option of having the procedure done sooner at a hospital further from home.

The number one reason prospective patients would be discouraged from having a cardiac procedure done sooner at a hospital further from home would be if their doctor advised against it. Other important reasons respondents would be discouraged are:

- Thinking they do not need to have the procedure done sooner
- Concerns their cardiac doctor may not be available for follow-up care
- Not wanting to be in a hospital without family or friends close by

Virtually everyone would be encouraged to have their procedure done sooner at a hospital further from home if the doctor said it was in their best interest. Other important reasons that would encourage respondents are:

- They were able to reduce the stress by knowing they could have the procedure done sooner
- Their cardiac doctor said s/he had confidence in the care provided at the other hospital
- Their cardiac doctor said s/he would be responsible for co-ordinating follow-up care
Key Findings

OPTION OF HAVING A CARDIAC PROCEDURE DONE SOONER

- 62% of respondents say they would consider the option of having a cardiac procedure done sooner at a hospital further from home; 28% don't know or are not sure; 9% say they would not consider it.

- Those under 55 are more likely to consider the option of having their procedure done sooner than those 75+.

WHAT WOULD DISCOURAGE OR STOP RESPONDENTS

- The #1 reason why prospective patients would be discouraged from going to a hospital further away from home is if their doctor advised against it: 29% of respondents list this among their #1 reason, with 58% listing it as their 1st, 2nd or 3rd most important reasons for not considering a hospital further from home.

- Three reasons emerged as essentially equally important in terms of discouraging prospective patients from considering a hospital further away from home. Three in ten members of the general population gave each of these reasons among their top three reasons:
  - If I didn't think I needed to have the procedure done sooner
  - I do not want to be in a hospital without my family or friends close by
  - My cardiac doctor may not be available for my follow-up care

- Those who say they would not consider the option of going to a hospital further from home are more likely than others to say they are discouraged/stopped because:
  - My cardiac doctor may not be available for my follow-up care
  - I do not want to be in hospital without my family or friends close by

- 20% say nothing would stop me or discourage me from going to a hospital further from home to have a cardiac procedure done sooner.
Key Findings cont’d

WHAT WOULD ENCOURAGE RESPONDENTS

• The #1 reason why prospective patients would be encouraged to go to a hospital further from home is if their cardiac doctor said it was in their best interest to have the procedure done sooner: 81% of respondents list this as their #1 reason.

• Three reasons emerged as essentially equally important in terms of encouraging respondents to go to a hospital further from home. Three in ten prospective patients gave each of these reasons among their top three reasons:
  - I was able to reduce the stress by knowing that I could have the procedure done sooner
  - My cardiac doctor said s/he had confidence in the care provided at the other hospital
  - My cardiac doctor said s/he would be responsible for co-ordinating my follow-up care
Highlights
Similarities and Differences in Findings
In reviewing the cardiac care patient survey report, physician survey report and the Ontario household survey, following are highlights of similarities and differences in findings:

1. **The option of going to a hospital further from home to have a cardiac procedure done sooner**

   Physicians think that about 22% of their non-urgent cardiac patients would be willing and able to go to another centre to have their procedure done sooner.

   21% of non-urgent cardiac wait list patients say they would have considered having their cardiac procedure done sooner at a hospital further from home if they had been given the option.

   62% of Ontario household respondents say they would consider the option of having a cardiac procedure done sooner at a hospital further from home.

2. **Opinion on wait times**

   At least 64% of physicians feel the wait times are ideal or almost ideal at the centre they send the majority of their patients for angiography, angioplasty or cardiac surgery.

   About half of non-urgent cardiac wait list patients consider their wait time reasonable; 29% do not consider their wait time reasonable.

3. **Referring to an alternate centre / going to a hospital further from home**

   Physicians say that one of the greatest barriers they face in referring patients to a centre that is not their usual one is the distance patients would have to travel.

   Although travelling distances are of concern to patients, there are other discouraging factors that are likely to deter cardiac patients from going to a hospital further from home: feeling there is no need to have the procedure done sooner; concerns their cardiac doctor may not be available for follow-up care and being in hospital without family or friends close by.

   Regardless of these deterrents, there are still 14% of wait list patients who say nothing would discourage or stop them from going to a hospital further from home to have their procedure done sooner.