

Parliamentary Outreach Program Toolkit 2021-2022



Canadian Association of Radiologists
L'Association canadienne des radiologistes

Priorities

As practicing radiologists in the community, you are the ideal spokespeople for medical imaging in Canada. In joining the Parliamentary Outreach Program (POP) you can convey firsthand the impact that insufficient medical imaging equipment and health human resources is having on the healthcare system. You can also reinforce the need for standardized Canadian referral process for imaging and the value that innovative technologies can have on expediting care for patients. In line with our 2022 Pre-Budget Submission to the Federal government, the CAR has three main priorities or “asks,” which we can reduce wait times for diagnostic imaging, improve patient outcomes and build resiliency in radiology across the country:

1

A federal investment of \$1.5 billion over five years in medical imaging equipment and health human resources to support the increased capacity.

2

Support the implementation of a national e-referrals program (Clinical Decision Support) to provide referring health professionals with better access to medical imaging guidelines, ensuring that patients receive the right test at the right time.

3

The creation of a National Data Science Institute to harness AI for the strategic prioritization of health human resources, technology, and infrastructure for medical imaging in the wake of the pandemic and beyond.

These priorities guide our advocacy efforts with Parliamentarians and government officials, and over the years we have received very positive responses to these requests. The CAR and its Board Members frequently engage with Parliamentarians, but Members of Parliament (MP) always prefer to meet with residents from their ridings, who can speak to local realities and help them to better understand the challenges facing their constituencies.



Your Role as a POP Representative

As members of the POP, you will be our champions, boots on the ground, advocating in your regions. This will help to amplify the work that is being conducted at the national level and will build support from local MPs. The first step is to reach out to your MP. Included with this toolkit is a template letter to request a meeting. We have also created a PowerPoint template for you to use should you have the opportunity to meet virtually. To find out who your MP is, you can [click here](#) and enter your postal code.

Once you have successfully secured a meeting with your MP, create a list of examples of how deficiencies in imaging equipment, health human resources and the absence of new technologies is impacting patients in your practice. You will want to tell a story of how these three elements work together. An investment in medical imaging equipment will help ensure better access. If you factor in advancements in AI in helping to triage patients so that more complex cases are seen sooner or specific diseases can be ruled out, this can help to manage the queue. Lastly, improving the appropriateness of referrals for diagnostic imaging can have a significant impact by minimizing the number of unnecessary tests. If the Federal government were to lead a Clinical Decision Support initiative at the national level, Canada could develop a system to empower referring physicians with evidence-based guidelines to ensure that patients receive the right test at the right time, potentially contributing to a favourable effect on wait times for imaging. Each of these discrete projects or “asks” also fit together as part of a big picture solution to improve the healthcare system for Canadian patients while minimizing burnout for radiologists.

If any specific follow-up is required after your meetings and you need our assistance, the CAR is happy to assist. Additionally, if an MP asks you a question that you don’t have the answer to on hand, it is appropriate to tell them that either you or the CAR will follow-up with them after the meeting.

Sample Meeting Agenda

A typical meeting is 20-25 minutes. Be sure to begin the meeting by asking how much time your MP has.

1. **Introduction** – who you are and where you work (2 mins)
2. **Overview of priorities** – investment in a national medical imaging equipment fund, HHR, CDS and how this would benefit Canadians and patients in your community – (5 mins)
3. **Questions?** (5 mins)
4. **Ask** – What can I do for you? (2 mins)
5. **Request** a photo for social media (2 mins)
6. **Wrap-up** by summarizing the discussion, action items and commit to follow-up (2 mins)

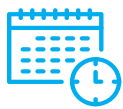
Speaking Points

Included below are some speaking points, sample questions and tips for reaching out to your local Member of Parliament. We encourage you to connect with you MP and educate them on the value of radiology and medical imaging in Canada. While we ask that you familiarize yourself with the points below, there is no need to memorize – at the end of the day, MPs will most want to hear about your personal stories and anecdotes.

Current Impact with Status Quo



Canadian imaging equipment is undersupplied – investment in medical imaging is at a 20-year low.



Excessive wait times impact millions of Canadians in terms of quality of life and health outcomes, including in the riding of X.



Patients suffer financially because of wait times due to the fact that they cannot work.



In 2018, thousands of Canadians (380,000) were forced temporarily out of work while waiting for treatment.



CT and MRI services are needed by millions of Canadians, however, are constrained by health system limits.



The pandemic has only worsened the situation by exacerbating already lengthy wait times.

Summary

Based on current growth trends for CT and MRI, imaging equipment will be significantly undersupplied to address increased demand for medical imaging diagnostics. By 2040, CT and MRI machines will be undersupplied by 13% and 24%, respectively, relative to projected patient demand.

Patients waiting longer than recommended for necessary test and treatments may be unable to continue working, thereby disrupting their contributions their regional economies. The wait times are currently 50-82 days for CT and up to 89 days for MRI; this results in patients waiting 20-52 days longer than recommended.

The situation has been exacerbated by the pandemic, and the realities of an aging population. Patients were already waiting well beyond the standard 30 day wait time for imaging. Imaging departments were disrupted by up to 50% in the first phase of the pandemic, and most jurisdictions are only now seeing 80% of their pre-pandemic patient volumes. Wait times continue to increase; **we need to act now.**

COVID-19 Affect / Wait Times

- COVID-19 related measures postponed medical imaging for hundreds of thousands of Canadians (March – June 2020) resulting in a 50% reduction in medical imaging services across the country -non-urgent cancer screening was suspended “**cancer does not wait for COVID**”
- This has created a real sense of urgency causing an overwhelming backlog in medical imaging services with already extensive wait lists
- Prior to the pandemic patients were waiting an average of 50–82 days for CT scans and up to 89 days for MRI; **waiting 20–52 days longer than recommended.** These wait lists for essential services are now much longer, putting the health of Canadians in dire straits. This is especially concerning for cancer patients who are awaiting a lifesaving treatment that is dependent on medical imaging.
- 27% of equipment is more than 11 years old – radiology resilience report
- **Give an example of wait times in your province – an impactful story**

Economic Impact of Waiting

- According to the CMA's recent report *Clearing the Backlog: The Cost to Return Wait Times to Pre-Pandemic Levels* (October 26, 2020), wait time delays due to the first wave of COVID-19 and additional costs to clear the backlog for
 - **MRI scan: 52.0 days; \$377 million**
 - **CT scan: 33.1 days; \$377 million**
- According to Deloitte, the procedures that have the highest funding requirements include MRI scans and CT scans. This result is not surprising given the **MRI and CT scans make up 78% of all procedures across Canada**
- The state of medical imaging equipment continues to be an issue in Canada. The Conference Board of Canada published the Value of Radiology, Part II report in June 2019. The report indicated that Canada is behind the international standard for the age and supply of medical imaging equipment and that an investment of **\$1.5 billion over five years**, pre-COVID-19, was required to bring wait lists to an acceptable standard. With the pandemic the situation is even more urgent, and we are in crucial need of not only refreshed equipment but also health human resources and infrastructure to support this investment.
- There are many patients who were already waiting months for imaging procedures that continue to be unable to work, **costing the economy an estimated \$5 billion in 2020.**



Radiology Community's Response to COVID-19 and Backlog

- Radiology touches on all aspects of healthcare. It is imperative for the diagnosis of illness, injury, and chronic disease, but imaging is also used to treat many conditions including cancer, stroke, and muscular/skeletal conditions.
- The radiology community has adapted well and responded strongly in resuming medical imaging services in a pandemic environment, considering the limited resources and additional safety protocols. It will, however, take months to address the backlog in medical imaging.
- Medical imaging cannot be sidelined in the event of another pandemic or similarly large-scale disruption to the healthcare system. In the immediate aftermath of COVID-19, radiology departments and hospitals will have adapted to the challenge of providing services safely and efficiently. Things are working, however, the strain on equipment and human resources is less than optimal.
- There are many technological advancements in medical imaging that can enhance the work of radiologists and enable the health system to care for patients more efficiently. Expedited approval for these technologies (such as portable imaging x-ray units) will help accelerate imaging and enable patients to be seen in prioritized manner.

The Asks

- The CAR is asking for **\$1.5 billion investment** in medical imaging equipment over **5 years** to support Canadians and ensure there is the capacity to integrate technology such as AI to help the health system run more efficiently and effectively to deal with the growing wait lists and now an influx of imaging in the healthcare system due to COVID-19. This will bring wait times to within **30 days** for non-emergent cases, an agreed upon standard.
- We are also asking for an investment in health human resources to support the influx of patients and imaging procedures as well as the government to take a leadership position in the implementation of a national electronic referrals (Clinical Decision Support) system so that patients access the right test the first time.
- These asks are elaborated on in our 2022 Pre-Budget Submission, which I would be happy to share with you.

Summary – Concluding Points

- Our healthcare system was already not equipped to deal with the demand. We lack sufficient medical imaging equipment and do not have the appropriate health human resources in place to support the number of patients waiting. The current status quo is not sustainable.
- We need to thoughtfully introduce/adopt new technologies such as AI applications that can augment the scope of radiology services and enhance patient care in a more efficient way. This combined with a national clinical decision support program, will ensure that patients have access to the right test, the first time.
- The CAR is asking for your support to help champion our priorities within the House of Commons. This would be a tremendous benefit to patients across Canada.
- The result will be improving quality of care for patients, saving lives, and helping the government to enhance value and saving the economy billions.

About the Canadian Association of Radiologists

The Canadian Association of Radiologists (CAR) is the national voice for radiologists in Canada, dedicated to imaging excellence and advocating for the highest standard of patient care across the country. Representing over 2,800 members who provide vital medical imaging for millions of patients across the country, the CAR is recognized leader in education, research and innovation in radiology. Our members are dedicated to maintaining the highest standards of care and patient safety in Canada.

Reports

CAR's Radiology Resilience Now and Beyond Report Recommendations

The radiology community responded rapidly to the pandemic, working efficiently, and putting the necessary safety protocols in place to serve patients. Under the leadership of the Canadian Association of Radiologists, a team of radiologists across the country assembled a Task Force to look at how to better care for patients now in a pandemic environment, while building resilience in radiology for the future. The report offers a series of recommendations. The CAR is committed to working with the government to implement a short and long-term plan for medical imaging so that patients can access the lifesaving care they need in a timely manner.

1. Adopt standardized imaging prioritization categories and benchmarks across all provinces and territories. We cannot improve what we do not measure, and we cannot properly assess the situation without consistent metrics.
2. Invest in human resources, to hire more technologists, sonographers, and clerical staff, to use existing equipment and capital resources more efficiently and for longer hours.
3. Invest in medical imaging equipment so that everyone has equitable access to a national standard of imaging care.
4. Develop a national system for referring physicians to book exams while accessing wait time data. This would help to triage patients and ensure the proper care when they need it.
5. Focus on new technologies such as AI, that augment the scope and services of radiologist and help with streaming lining patients.
6. Develop a pandemic preparedness plan to ensure that there is less of an impact on service delivery in the event of another outbreak; prioritize maintaining operations and human resources at the maximum possible level rather than ramping down service in fear of a surge.

Key Statistics – Conference Board of Canada, Value of Radiology Report 2019

- Excessive wait times for CT and MRI diagnostics cost the economy \$3.54 billion in 2017.
- Approximately 5 per cent of patients, or 380,000 people a year (1 in 20), are forced to exit the workforce temporarily while they wait longer than the recommended maximum wait time.
- Having workers off the job while waiting for diagnostics hurts the ability of firms to produce goods and services. This, in turn, hurts GDP, reducing government revenues by \$430 million a year.
- The cost of excessive wait times will likely increase. Growth in demand for CT and MRI services is expected to outpace the growth in supply over the long term.
- Currently, 151 new CT machines and 91 new MRI machines are required to modernize Canada's stock of medical imaging equipment, at a cost of \$469 million.

Canadians Support a Federal Investment in Radiology

A public opinion poll conducted by *Nanos Research in 2018* demonstrates Canadians support a greater investment in radiology. The results revealed:

- **The majority of Canadians** have received a health care treatment that included a radiologist or have a family member who has received a healthcare treatment that included a radiologist.
- **Over two in three Canadians** believe that Canada should spend tax dollars to have more current medical imaging equipment.
- **83% of Canadians** would support research in the use of AI in radiology in Canada. A modest investment from the government in this type of research would improve patient outcomes and make medical imaging more accessible.



Answers to FAQ from Members of Parliament

1. Why are diagnostic imaging equipment investments needed now?

Canadian imaging equipment is undersupplied. Moreover, Canada appears below approximately half of the countries with data collected by the OECD in terms of number of CT and MRI units per million people. This figure is exacerbated by unequal distribution of units across the country, and by ageing units that are no longer as safe and effective. We are currently at a 20-year low for investment in imaging equipment. The average Canadian waits between 50-82 days for CT and up to 89 days for MRI. This is 20-52 days longer than recommended by Canadian Wait Time Alliance. Wait times are only going to get worse with the aging population and increased number of patients who will require imaging procedures. ***Give a personal example in your practice.***

2. Are doctors driving up the demand for diagnostic imaging? Why is it rising so fast?

The demand is rising. The median age of the population is increasing, which corresponds to a growing need for medical imaging procedures. Also, investment in medical imaging equipment is at a 20-year low, which is impacting the inventory of viable equipment. According to the report published by CADTH in 2017, it has been estimated that between 27% of medical imaging equipment is more than 10 years old. This is significantly below the Golden Rule referenced by the Conference Board, which recommends that 60% of medical imaging equipment should be less than 5 years old.

The Golden Rule developed by COCIR (European Coordination Committee of the Radiological, Electromedical and Healthcare IT Industry) in 2003 is used as a guide for optimal medical equipment distribution around the world to guide optimal diagnostic imaging investment. The CAR recognizes appropriateness of testing as a factor in impacting the number of and is working with physician organizations (CFPC, CAEP) to ensure frontline physicians have better access to guidelines for referrals so that they can ensure patients have the proper testing and are informed.

3. Isn't this a provincial jurisdiction?

Healthcare is a provincial jurisdiction: however, medical imaging is a national problem that needs to be addressed, and due to the capital-intensive nature of it, requires federal support. There are inequalities across Canada in terms of resources and capital. This should be an opportunity for the federal government to take a leadership role and make this a priority. This would ensure that all Canadians have equal access to these lifesaving procedures.

There is also a precedent: in 2004, the federal government set-up a diagnostic imaging equipment investment fund to ensure enough distribution of medical imaging equipment across the country so that patients could have improved access to necessary medical imaging testing.

4. How do you know when wait times are excessive?

The Conference Board did an analysis of the international standards for inventory of medical imaging equipment and cross referenced it with wait times. Waiting 89 days for an MRI is excessive. The Wait Time Alliance, supported by the CAR National Maximum Wait Times Access Targets for Medical Imaging report recommends no more than 30 days for priority 3 emergent conditions, 7 days for priority 2 urgent cases and 24 hours for priority 1 emergent cases. The long-term impacts of waiting on Canadians can be detrimental. With earlier testing we can diagnose disease and provide treatment sooner resulting in improved patient outcomes. Also, many people waiting for testing are off work. This not only affects their quality of life but also negatively impacts the economy. In 2018 excessive wait times for CT and MRI diagnostics cost the economy \$3.54 billion, according to the Conference Board model.

5. Is there an example of a successful CDS system somewhere in Canada or internationally?

There is no single national system that is being utilized for referral guidelines. The Royal College in the UK has done some significant work in this area and have a system in place that is being implemented nationally. Also, in Alberta the government recently rolled out a system that physicians have started to use for referrals. The success has yet to be measured: however, this could be a best practice example if the data is favourable. The CAR is working on a referrals project to develop Canadian medical imaging referral guidelines. The intention is for these to be made available to all referring medical professionals electronically so that patients can receive the right test at the right time.

6. Where are we with AI in helping to triage patients?

It varies. AI in radiology is being implemented so quickly that there is no set standard in how this is being utilized. We need to set national rules for implementation so that we can track the progress and implement this solution in an ethical way. Imagia and the Terry Fox Research Institute were awarded a \$49 million grant through the Strategic Innovation Fund. These organizations are part of a broader Canadian consortium that has invested an additional \$100 million, that the CAR is a part of. We are looking for leadership from the Federal government to set up ethical frameworks for implementation of AI in radiology.



Sources

2021 Pre-Budget Submission, Canadian Association of Radiologists (2020)

Radiology Resilience Now and Beyond, Canadian Association of Radiologists (2020)

Resumption of Radiology Services Report, Canadian Association of Radiologists (2020)

Clearing the Backlog; The Cost to Return Wait Times to Pre-Pandemic Levels

Canadian Wait Time Alliance

CADTH Medical Imaging Inventory 2017

Conference Board of Canada – Value of Radiology 2.0 – published June 25, 2019

Nanos Poll – July 2018

Resources

Find your Member of Parliament (MP)

<https://www.ourcommons.ca/members/en>

Template Letter to MP

[Download the MS Word letter template](#)

**Sometimes offices ask for your postal code so that they confirm that you are a constituent. This is because requests from constituents take priority over all other requests.*

PowerPoint Presentation

[Download the PowerPoint presentation](#)

Social Media – get involved and share with the online community

Help to amplify your message through social media. Let your colleagues know by tagging **@CARadiologists** on [Facebook](#) and [Twitter](#). Follow us on the links below and retweet to your peers and followers. If you took a photo with the MP during your meeting, make sure to follow them and tag them on Twitter as well – you can find most of them by googling their names.



Hashtags

Hashtags is an effective tool that can help you stand out from the crowd and others who are interested in similar topics connect with you. Listed below is a list of hashtags frequently used by the CAR. Be sure to incorporate these in your social media posts when possible.

#iamyourradiologist

#radiology

#patientcare

#cndpoli

Want More Information?

Contact Natalie St-Pierre at nst-pierre@car.ca if you require additional support.

Visit [car.ca](https://www.car.ca)