



## Submission to the House of Commons Standing Committee on Health's Study on Canada's Health Workforce\*

*\*This submission elaborates on the testimony given by CAR President, Dr. Gilles Soulez, to the Standing Committee on Health on Wednesday, February 16, 2022.*

### Summary:

The COVID-19 pandemic has had a dire effect on wait times for medical imaging procedures across the country. Canadians who may have postponed diagnostic and necessary follow-up imaging early in the pandemic are now in more urgent need of care. This has created a massive influx of patients attempting to reschedule their appointments, not to mention the additional treatment that will be required for those undiagnosed or with worsening conditions. If we do not take action, the increased pressure on imaging to catch up after by the pandemic, the growing baseline demand for imaging, and the existing capacity limitations in radiology departments will combine to cripple our healthcare system.

Excessive and lengthening wait times in medical imaging are reducing efficiency across our healthcare system and leading to burnout in our healthcare workforce. Investments must be made quickly to enhance the recruitment and retention of health human resources in imaging, as well as in more up-to-date modern imaging equipment and information technologies.

### Overview:

Our health workforce is burnt out. Excessive wait times have led to a situation where radiologists, medical radiation technologists (MRTs) and sonographers are working overtime to try to keep up with the demand. Many of these front-line workers are stressed, burnt out, and getting sick – including contracting COVID-19 – and exacerbating an already dire situation for patients. The human cost of 24 months of frequent overtime as well as significant increases in workload for COVID safety protocols has had a pervasive impact on these front-line health care workers.

Prior to the pandemic, patients were waiting on average 50 days for diagnostic CT scans and from 69 to 89 days for MRI scans – which far exceeds the 30-day accepted standard. At the height of the pandemic, there was a 50% to 70% decrease in radiology services across the country, as a result of pandemic-related closures of healthcare services. Decreased access to radiology services only added to the pre-existing backlog of patients left waiting for necessary care. Even a year and a half later, our radiologists are not able to catch up. Our current healthcare system capacity is not equipped to handle this influx of patients who need to be diagnosed and treated.

This situation is especially concerning for individuals needing breast and colorectal cancer screening, patients undergoing cancer treatment, or those who may need imaging but have delayed seeking care due to fears or other factors associated with the pandemic. Without immediate investment, this backlog

will most certainly mean some tests will come too late, and that some patients will never recover from otherwise treatable conditions.

A recent survey of CAR members found that 70% of radiologists see radiology staff shortages as the most significant barrier to addressing wait times. Health human resources are also hindered by aging and often insufficient equipment and a glaring lag in the integration of information technologies. Those technologies help optimize the organizational process and the workflow with fewer repetitive actions. They also help ensure the relevance of examinations and ensure that patients are getting the right test at the right time.

For example, the operating hours for existing equipment could be extended if more MRTs were available to staff the departments. However, as CT and MRI examinations across the country are in high demand, most of our scanners are already operating at maximum staff capacity with extended hours.<sup>1</sup> Having a new supply of imaging equipment would extend these services and operate more efficiently allowing for more patients to be scanned overall.

### **Recommendations:**

In order to better support Canada's healthcare workforce, including radiologists, MRTs and Sonographers, the Canadian Association of Radiologists recommends that:

1. The Government implement a strategy for increasing health human resources in medical imaging by hiring more staff, implementing new training programs, and expanding on existing programs.
2. The Government make a federal investment of \$1.5B over five years in medical imaging equipment, information technology and health human resources to support the increased capacity. Newer imaging equipment can help reduce examination times by providing better diagnostic performance and less radiation exposure for patients.

### **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. We represent 2,900 radiologists who provide vital medical imaging for millions of patients. We provide further recommendations for restoring timely access for patients post-pandemic in our [2022 Federal Budget Submission](#).

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<sup>1</sup> <https://journals.sagepub.com/doi/full/10.1177/08465371221075617>