

Protecting Surgical Facilities in Strange Times

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To support evolving healthcare needs, some Canadian provinces are planning to increase their use of private facilities. Most recently, the Alberta Surgical Initiative announced in December 2020 that the provincial government would fund 80,000 additional procedures by 2022-23 and move lower-risk procedures out of hospitals.

(1) Early this year, Alberta Health Services issued a call to determine how many companies were interested in providing surgical services for a list of procedures that included hernia repair and mastectomies.

For nearly a decade, private-owned but publicly funded surgical facilities have been supported by a number of provincial governments as a strategy to off-load wait times in standard acute care facilities. Non-hospital, same-day surgery centres perform minor surgical procedures that allow patients to recover at home rather than remain at a hospital for overnight observation. Non-hospital surgical facilities are typically focused on:

- Ophthalmology (laser eye facilities)
- Orthopaedic (arthroscopy)
- Weight-loss
- Cosmetic
- Dermatological
- Dental

Smaller Facilities, Greater Perceived Risk

Perhaps ironically, the risks are perceived to be greater for non-hospital surgical facilities compared to hospital surgical facilities, even though more complex cases are typically done in hospitals. Private surgical facilities are perceived to be riskier because of their restricted or limited contingency plans for intraoperative emergencies and post-op care. If something goes wrong with a patient in the post-op stage, the patient is essentially on their own. To further add to perceived risk, surgical centres do not have the same staffing and equipment requirements as the hospitals. This is probably why some of the top types of surgery performed in private facilities comprise cosmetic surgeries rather than potentially life-saving operations.

Surgical facilities are increasingly being overseen by one of their primary governing bodies, the College of Physicians and Surgeons of Ontario (CPSO). Also, the CPSO and the Canadian Association for Accreditation of Ambulatory Surgical Facilities serve as another governing body that accredits surgical facilities. Routine inspection and stricter regulation of private surgical clinics will help build public trust and

comfort with this healthcare option as the healthcare system continues to evolve in uncertain times.

Other Exposures for Non-Hospital Surgical Facilities

Non-hospital surgical centres risks because of multiple factors, including patient and staff liability, property, and equipment damage.

Surgical facilities tend to be relatively limited in terms of both staff and equipment, and this means surgical facilities need coverage for poor patient outcomes such as injury or infection connected to overworked staff and equipment shortages or breakdown. There is also a risk of other equipment deficiencies, including malfunctioning equipment, breakage of surgical instruments, detachment of equipment, and lack of optimal equipment, which could result in serious injury or poor patient outcomes.

This sector is evolving while regulations are just catching up. Poor patient outcomes can result from the surgeon's failure to comply with regulatory requirements as per the CPSO (College of Physicians and Surgeons in each province), or from a viral infection outbreak caused by the facility's failure to comply with infection prevention, mitigation, and control measures.

Finally, as multi-professional clinics with many stakeholders, there is a risk of communication breakdown leading to poor outcomes. Some examples include should the healthcare facility fail to follow the equipment manufacturer's recommendations for maintenance, cleaning, calibration, and replacement; not report equipment malfunction to the appropriate personnel for follow-up and testing; receive or relay incorrect training information; or receive or relay inadequate communication of manufacturer equipment recalls.

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Sources:

1. <https://www.cbc.ca/news/canada/edmonton/alberta-delays-moving-medical-procedures-to-private-clinics-1.5584484>