



Speaking Remarks for Pre-Budget Consultation
January 17, 2020
9 a.m. to 9:15 a.m.
(7-minute presentation and 8 minutes allocated for Q+A)

Altaf Stationwala

Introduction

Good afternoon, everyone.

My name is Altaf Stationwala. I am the President and CEO of Mackenzie Health as well as the Chair of the Board of Directors of the Ontario Hospital Association.

I am joined today by Anthony Dale, President and CEO of the OHA.

We would like to thank you for this opportunity to present on behalf of the province's 141 publicly-funded hospitals.

Hospital Efficiency

Since 1995, successive governments have called on Ontario hospitals to provide leadership and deliver results – regardless of the circumstances.

From restructuring, which reduced the number of hospital corporations from 225 to 141 today to improving accountability and transparency, and building a focus around quality ... Hospitals have always shown tremendous leadership while improving patient care and operational performance.

We hope that the Government of Ontario is proud that Ontario hospitals are without question the most efficient in Canada.

In late December, the OHA released a report on hospital efficiency with several important findings:

- If Ontario was to fund hospitals at the average rate per capita for all other provinces, it would cost the province an additional 4-billion-dollars.
- Ontario has the lowest hospitalization rate; the shortest average hospital stay; and the lowest cost per inpatient stay in Canada.
- Ontario has fewer acute care beds than any other province, tying Mexico for the lowest number of beds among countries tracked by the O-E-C-D.

These findings can be looked at in two different ways.

On one hand, it shows that hospitals have harvested huge amounts of savings, freeing up resources for other equally-important priorities.

On the other hand, with many hospitals now in a semi-permanent state of over-capacity, it also suggests that it simply isn't realistic to expect further major efficiencies to be found while simultaneously trying to end hallway health care.

We believe that Ontario's hospitals are at a threshold. If we cross it, in our view, **access to and quality of care** at many organizations will be at risk.

Mackenzie Health Example

Mackenzie Health, for example, consistently has one of the **busiest emergency departments** in the province. And we continue to experience **unprecedented volumes**.

Across the province, emergency wait times are growing too. There is now a daily average of **670 patients** waiting in emergency departments for an inpatient bed province-wide. **Ten per cent** of these patients will wait **33 hours or more** to be admitted.

For the first six months of 2019, Mackenzie Richmond Hill Hospital was over capacity more than any other hospital in the province. In fact, within a **181-day period**, there were only **two days** where we were not over capacity.

In December, we had approximately **400 urgent and emergent patient visits each day** with more than **500 on peak days**. When we're not in surge, we see about **300** visits per day.

These volumes result in increased hospital stays for patients and increased stress, pressure and burnout for staff and physicians.

It's also costly. Mackenzie Health is now operating at a **15-million-dollar in-year deficit** as a result of needing to open and staff unfunded beds.

These conditions are simply not sustainable – not for patients and not for those working in hospitals.

Anthony Dale

Provincial Context

For years, the OHA has been concerned that this day would come.

For years, we have been warning successive governments about the risk of flatlining hospital budgets without a significant expansion of capacity in other health services.

This is not a challenge that's unique to Ontario.

In the United Kingdom, policy experts are describing a "collapse" of emergency department performance. Royal College of Emergency Medicine President Katherine Henderson said recently, "the National Health System is struggling to escape a spiral of decline."

On behalf of Ontario hospitals, we call on the members of this Legislature, the government of Ontario and all the members of Cabinet to ask themselves – are you prepared to risk a similar assessment about Ontario hospital emergency departments in the not-too-distant future?

The reality is that there are no short-term, lasting solutions to ending hallway health care.

Over the long-term, the only way out is to build a very significant amount of new service capacity outside of the hospital setting, leveraging new technology to do so.

There are far too many patients waiting in hospital beds for the care they should be receiving in other more appropriate places.

The total number of ALC patients under hospital care reached **5,300** this fall. An all-time high.

While the government has made announcements about its intention to expand access to long-term care, home and community care, mental health and addiction services, and sponsored new models of care through Ontario Health Teams... the reality is that it will take years for these initiatives to take hold.

That is why, to our regret, the OHA must continue to recommend a bridge strategy for Ontario hospitals as they deal with unprecedented and extraordinary conditions.

There is no other choice but to invest in hospitals and maintain access to the services that exist today.

Recommendations

As outlined in our pre-budget submission, the OHA is recommending an investment of **922-million-dollars** for the hospital sector, representing a **4.85% increase**.

This investment is to address underlying inflationary pressure, and the need to increase service volume and create capacity at the local level to ease hospital overcrowding.

Backs are against the wall. Without this investment in Ontario's next Budget, you will see many hospitals facing some very difficult decisions.

This is a decision that no hospital or government wants to face.

This is an inherited problem. We deeply appreciate recent investments from this government and its clear unequivocal commitment to ending hallway healthcare. And no matter what, hospitals will always work with the government and their health care provider colleagues toward maintaining access and quality of care.

But the truth is... in the absence of a significant investment, the amount of risk next year within many Ontario's hospitals will be high.

Thank you. We are happy to answer any questions that you may have.