



































September 22, 2022

Re: The Right Care in the Right Place

As the CEOs and Chiefs of Staff of some of the largest hospitals in Ontario, we are committed to caring for you and your loved ones. Recently, there has been some concern and worry over Bill 7 – the More Beds, Better Care Act, 2022 – and what it will mean for patients, families and caregivers. We understand these concerns and hope to provide clarity and comfort in this letter.

We all want a health care system that is there for us when we need it, with all partners working together to provide seamless, high-quality care and an exceptional experience. Our health care system has been under a tremendous amount of stress, particularly during the pandemic, and now more than ever it is essential that we look for ways to alleviate some of that pressure and get the system working better for all patients and their loved ones.

Hospitals across the province, especially those in high growth communities across the Greater Toronto Area, are working hard to keep up with demand. Part of the challenge is that on any given day, there are a large number of patients who have been designated as *Alternate Level of Care (ALC)* and no longer require hospital care. On average these patients occupy 16% of the beds across Ontario. These patients require care and services that acute hospitals do not provide. This in turn creates a situation where patients who *do* need us are admitted and find themselves waiting hours and sometimes even days in the emergency department, or in unconventional spaces like a hallway, until a bed becomes available. This is not something that any of us want for our patients, ourselves, our friends, or family.

Hospitals are specialized care environments for acute care patients who are in need of things like medical stabilization, diagnostics, and pre- or post-operative attention, to name a few. When a patient is well enough, we begin to plan their journey home, exploring all resources and home care supports that they may require for their recovery and day-to-day needs like walking, eating, dressing changes, tube feeds or injections.

Should home not be the best option, doctors, discharge planners, and home and community care partners work together alongside the patient and their family to develop an individualized care plan that is right for them, which may include transferring into a retirement home, transitional bed, or a long-term care home. There are many factors that go into these discussions and decisions such as specific needs, financial situation and proximity to home or family.

When it comes to long-term care, we encourage patients and their loved ones to make informed choices on which homes they wish to go to. We also encourage patients to maximize the potential of transitioning to a place where they feel most comfortable by selecting several options. Long-term care is a much more appropriate and comfortable environment to live when certain patients no longer require hospital care, but

cannot return home, because it is designed and operated specifically to meet their care needs. LTC homes also offer services that hospitals are not equipped for, such as social engagement, recreational activities, and more. Simply put, a hospital is not a place to live and is not an appropriate or ideal environment for a patient once they no longer need the specialized services that only hospitals can provide.

We know that changes to a person's routine or care system are never easy, but we also know that patients waiting for an LTC placement are not best cared for in an acute care bed, just as patients requiring admission to hospital are not best cared for in a stretcher, the emergency room, or a hallway. All of these issues are tightly interwoven and lead to cracks in the larger foundation of health care. There is not an overnight fix, and these are larger issues which we all hold a part in solving. Currently across Ontario, new long-term care spaces are being built, acute care beds are being added and we are building better community supports and connections through partnerships with our local Ontario Health Teams. We are looking to the future, but we also need immediate solutions to ease the strain and improve health care right now.

It is understandable that there are questions about Bill 7 and how it is going to work. As these changes are put into place, all decisions we make around its implementation will be done with compassion, collaboration, ethical and equitable considerations and the patient's best interests at heart.

We pledge to work together with our partners across health care towards a stronger, more connected system that works better for patients and their loved ones. We are committed to sharing more information as it becomes available and encourage all those with concerns or questions to speak with your care teams directly.

Thank you for your ongoing patience, support, and understanding.

Centre

Sincerely,

Scott Ovenden, President and CEO, Baycrest Hospital and Long-Term Care Home	Dr. Gary Naglie VP Medical Services & Chief of Staff, Baycrest Hospital and Long-Term Care Home	Sarah Downey, President and CEO, Centre for Addiction and Mental Health	Dr. Sanjeev Sockalingam, Physician in Chief, Centre for Addiction and Mental Health
Barb Collins, President and CEO, Humber River Hospital	Dr. S. Zaki Ahmed, Chief of Staff, Humber River Hospital	Cynthia Davis, President and CEO, Lakeridge Health	Dr. Tony Stone, Chief of Staff, Lakeridge Health
Altaf Stationwala, President and CEO, Mackenzie Health	Dr. Steven Jackson, VP, Medical Planning & Chief of Staff, Mackenzie Health	Wolf Klassen, President and CEO (Interim) Michael Garron Hospital	Dr. Sheila Laredo, Chief of Staff, Michael Garron Hospital
Karyn Popovich, President and CEO, North York General Hospital	Dr. Donna McRitchie, VP Medical and Academic Affairs North York General Hospital	Jo-anne Marr, President and CEO, Oak Valley Health	Dr. Caroline Geenen, Chief of Staff, Oak Valley Health
David Graham, CEO (Interim), Scarborough Health Network	Dr. Elaine Yeung, Chief of Staff Scarborough Health Network	Dr. Ronald D. Cohn President & CEO, The Hospital for Sick Children	Dr. Lennox Huang, Chief Medical Officer Vice President Education, Medical & Academic Affairs The Hospital for Sick Children
Dr. Gary Newton, President and CEO, Sinai Health	Dr. Maureen Shandling Executive Vice President, Academic and Medical Affairs Sinai Health	Arden Krystal, President and CEO, Southlake Regional Health Centre	Dr. Charmaine van Schaik, Chief of Staff, Southlake Regional Health Centre
Andy Smith, President and CEO, Sunnybrook Health Sciences Centre	Dan Cass, Executive Vice President and Chief Medical Executive, Sunnybrook Health Sciences	Karli Farrow, President and CEO, Trillium Health Partners	Dr. Dante Morra, Chief of Staff Trillium Health Partners

Dr. Kevin Smith, President & CEO, University Health Network

Dr. Frank Martino, President and CEO, William Osler Health System Dr. Brian Hodges, Chief Medical Officer, University Health Network

Dr. Brian Klar, Interim Chief of Staff, William Osler Health System Dr. Tim Rutledge, President and CEO Unity Health Toronto

Heather McPherson, President & CEO, Women's College Hospital Dr. Thomas Parker, Executive Vice President of Clinical Programs and Chief Medical Officer Unity Health Toronto

Dr. Cynthia Maxwell, VP Medical Affairs & System Transformation & Lead Medical Executive, Women's College Hospital