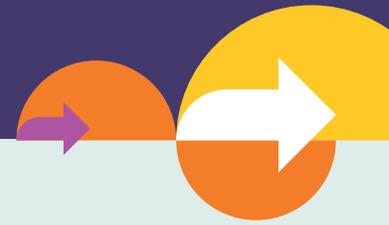


# The Continued Toll of COVID-19 on Ontario's Hospitals



## The Anchor of Ontario's COVID-19 Response

- COVID-19 has been incredibly taxing on the hospital sector and its health care workers and has exposed the significant challenges of operating a health care system with longstanding gaps in the system.
- While hope is on the horizon, challenges undoubtedly remain with new fast-moving variants, ongoing pressure on critical care capacity, and the need to address a growing backlog of essential surgeries.
- Hospitals will continue to be the anchor of the COVID-19 response, but the assumption of this critical role will have lasting effects.

## Unparalleled Pressure on Hospitals

- While hospitals operated under relatively stable circumstances during the first wave, the number of new cases grew quite rapidly over the winter. It reached a “dangerous” point at the peak of the second wave.
- In early January, prior to the provincial lockdown, the number of new COVID-19 cases

was growing 3 to 5 per cent each day, there were more than 400 COVID-19 patients in intensive care units, and mortality rates in long-term care were on pace to tragically exceed those seen in the first wave.

- By mid-January, of the 74 hospital corporations offering critical care, there were 409 patients in intensive care with COVID-related conditions on a total census of 1,790 patients.
- This means that almost one quarter (23%) all patients in critical care had COVID-19.
- In early February, there were approximately 5,200 ALC patients waiting in hospitals.
- As a result of these unanticipated pressures, hospitals have had to postpone thousands of scheduled surgeries and procedures, which will take more than one year for hospitals to reschedule.<sup>1</sup>
- The pandemic has also caused many unintended health consequences and patients arriving to hospitals with significant mental health concerns, rehabilitation needs, and advanced cancers, as a result of deferring medical care.



<sup>1</sup> CMAJ 2020 November 2;192:E1347-56. doi: 10.1503/cmaj.201521; early-released September 1, 2020 <https://www.cmaj.ca/content/192/44/E1347>



## COVID-19 Expenses and Lost Revenue

- COVID-19 has resulted in a number of unexpected expenses. Expenses fall into the broad categories of staffing, equipment and supplies.
- According to the OHA, the combined hospital sector net deficit for April to November 2020 is \$521 million, inclusive of expenses, lost revenue, and balanced budget plans not implemented due to COVID-19.
- In the year ahead, costs for the hospital sector are expected to increase more than 4% annually, as a result of inflation, growth, new volumes and labour increases.

## Support for Hospitals Now and Post-Pandemic

- To remain financially whole, Ontario hospitals require:
  1. Reimbursement for all COVID-19 expenses and lost revenue.
  2. Funding to help manage the provincial backlog of surgeries.
  3. An increase to base funding of 4.3% or \$860 million to account for labour costs, growth, and additional volumes.
- One of the key learnings that's come from the global pandemic is the need to fundamentally strengthen the health research sector in Ontario. In the year ahead, Ontario must continue to invest in this vital research. Sustained investment in the Ontario Research Fund will support local discovery, efficiency and the highest quality of patient care.
- When the pandemic is behind us, it will be time for an immediate national discussion on how to strengthen our health care system, including an overhaul of Canada's system of transfer payments to strengthen the ability of our nation to fund health services into the future.

