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Citizen's Advisory Panel

***Challenges and Opportunities in the Ontario
Health Care System***

Saturday, October 24, 2009

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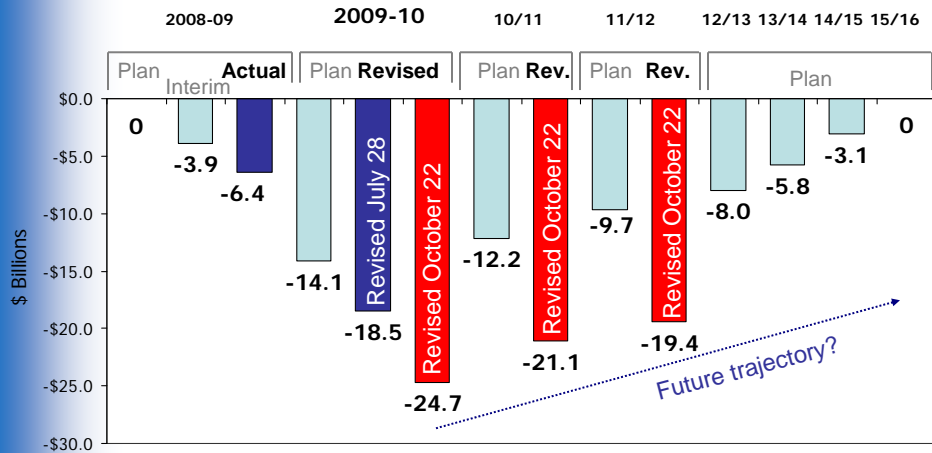
**Challenges in the Ontario
Health Care System**



- Funding
- Capacity
- Health Human Resources

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Ontario Government Budget Plan: Run Deficits until at 2015-16 (or longer)



Sources: "Plan and Interim" figures from 2009 Ontario Budget, p. 48 & 49. Released on March 26, 2009.
 *2008/09 Actual" figure from 2008/09 Public Accounts released on Sept. 25, 2009.
 *2009/10 Revised" figures from 2009/10 Quarterly Finances released on July 28, 2009.
 2009/10 to 1011/12 revised figures 2009 Ontario Economic Outlook and Fiscal Review released October 22, 2009.

Efficiency of Ontario Hospitals

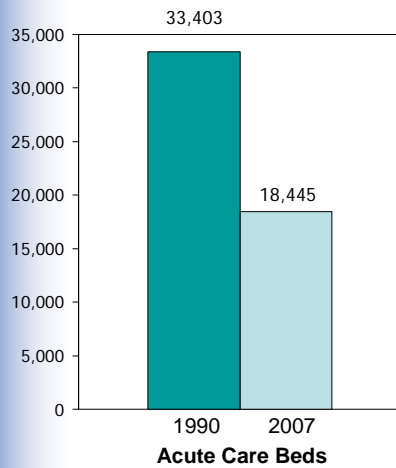


- In 2008, the Ontario Government funded hospitals at almost 10 percent less per capita than other provinces.
- The \$1.6 billion "Hospital Efficiency Dividend".

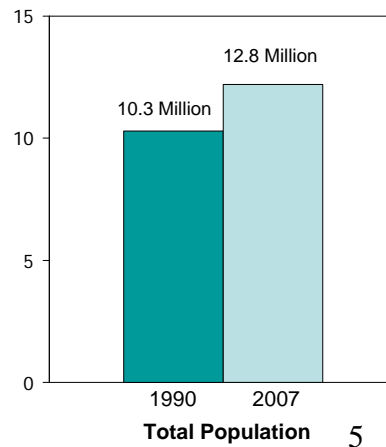
Changing Hospital Capacity



45% Decrease in Hospital Beds



25% Increase in Population



Ontario Alternate Level of Care (ALC)



- In 2005, only 1,600 patients in acute care beds were waiting for an alternate level of care.
- By October 2008, the number had doubled to 3,000 people, occupying 19% of acute beds.
- There are over 5,000 ALC patients in acute care, complex continuing care, rehab and mental health beds which represents 18% of beds.
- Does Ontario have the right mix of capacities of services?

Health Human Resources



- Availability of Health Human Resources is a major challenge facing the Ontario Health Care system.
- Survey conducted by the Canadian Institute of Health Information in 2007 comparing Ontario to other provinces shows fewer health care staff per capita.
- Does Ontario use its Human Resources well?

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Roles of Ontario Local Health Integration Networks (LHINs)



- Planning services
- Funding providers
- Integrating services among providers

Some Opportunities for Improvement

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Implementation of Leading Practices in Targeted Areas

- Provision of Continuing Care in the Most Appropriate Location
 - Reduce reliance on hospital care and free up hospital capacity including emergency room capacity, with targeted investments elsewhere in the system
 - Improve quality of care and satisfaction levels for those who receive it

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Implementation of Leading Practices in Targeted Areas



- Adoption of Leading Practices for Palliative Care
 - Reduce reliance on hospital care for instances in which it is not desired by patients and families
 - Enhance choice and improve quality of care and satisfaction

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Implementation of Leading Practices in Targeted Areas



- Adoption of Leading Practices for Wound Care
 - Disseminate and apply expert knowledge to reduce occurrence of, and speed the healing of, chronic wounds that are extremely costly to treat, both in hospital and in the community

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Implementation of Leading Practices in Targeted Areas



- Management of Mental Health and Addiction Issues in the Community
 - Reduce the need for crisis intervention in the emergency room through 24/7 access to community services of an equivalently high standard as offered in hospitals

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Implementation of Leading Practices in Targeted Areas



- Implementation of Error Reduction Strategies
 - Reduce costs and harmful adverse events through identification and implementation of leading practices in targeted areas

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Implementation of Leading Practices in Targeted Areas



- Expansion of Leading Practices for Supply Chain Management
 - Reduce direct costs, significantly free up time of clinical staff, streamline processes through standardization and application of proven practices

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Closing



Questions

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