

Keep The Dying Out of Hospital Save \$200M/Year with Right & Excellent Care

Let's Preserve Hospital Capacity by Supporting An Ontario Success Story – Hospice Palliative Care

Key Issues Facing Ontario

- **The demand for hospice palliative care is ballooning. Without the right care in the right place, more people will needlessly overcrowd hospitals, and there will be unnecessary suffering, increased costs, and a pandemic of complex grief.**
 - People don't want to go to hospital, nor do they always need to go when they are nearing the end of life, but without sufficient hospice care, hospitals will be where people have to go to die.
 - The aging population means an inevitably growing number are heading toward the end of life and facing grief and bereavement as we lose those we love.
- **Costs are ballooning for hospices, as everywhere. But government funding has shrunk to around 35% of operating costs for hospice residences, with no annualized increase since 2016.**
 - Hospice palliative care is a unique partnership between the Government and Grassroots Donors. But Government funding is falling way behind the escalation in costs, and community donors are struggling to keep up.
 - Last year (fiscal 2021), the government prevented financial crises by providing one-time relief of \$23.6 Million to Ontario hospice residences.

It is critical that the one-time funding from 2021 be doubled and annualized if Ontario hospices are to survive and continue to keep thousands of people out of hospital ERs and ALC beds and meet the inevitably growing need for this care

- **Death is the one thing that impacts every single one of us. We will all need hospice palliative care as we face our own mortality or the loss of a loved one.**
 - Hospice palliative care is wholistic health and social care focussed on individual quality of life through terminal illness or frailty and supports the well-being of families during a difficult time.
 - Hospices are the largest providers of grief and bereavement care in Ontario.
- **This is the best story in health and social care, and community and government partnership. Let's keep it that way.**
 - Ontario has been considered a leader in community hospice palliative care and it is highly valued and generously supported by communities. But donations can't keep up with the demand and hospices need Government at their side with adequate funding that sustains hospice care.

Keep The Dying Out of Hospital and Save \$200M/Year with the Right & Excellent Care

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➤ **Preserving our Hospital Capacity**

- The hospice sector is already preserving hospital capacity and can do more. With adequate funding from the Government, hospices can continue to ensure that every year, over 10,000 people avoid dying in more expensive hospital settings and this frees up 143,000 hospital bed days.
- Community-based hospice palliative care is more desirable, more appropriate, and far more cost-effective than in hospital. A hospice bed is one-third the cost of a hospital bed.
- Hospice residences are small home-like settings supported by strict quality standards and accreditation and have the highest quality care ratings of any care setting in Ontario.
- At-home hospice services use skilled volunteers to enhance home care as end-of-life approaches. Data shows that at-home volunteers avert unnecessary trips to more expensive hospital settings.
- People don't want to go to the hospital, especially at end of life. Most palliative patients do not need hospital level care and can receive the right level of care at home, in hospice residence, or in Long Term Care if that is their home.
- Hospices can build more quickly and less expensively than hospital or LTC.

➤ **Providing the Right Care in the Right Place**

- The demand for hospice palliative care is ballooning. Without the right care in the right place, more people will needlessly overcrowd hospitals, and there will be unnecessary suffering, increased costs, and a pandemic of complex grief.
- People don't want to go to hospital, nor do they always need to go when they are nearing the end of life, but without sufficient hospice care, hospitals will be where people have to go to die.
- The aging population means an inevitably growing number are heading toward the end of life and facing grief and bereavement as we lose those we love.

➤ **Further Reducing Surgical Waitlists**

- Each year, hospices accept almost 4,000 patients directly from acute care settings.
- This frees up 57,000 beds day in hospital for surgical admissions.

➤ **Easing Pressure on our Emergency Departments**

- Each year, about 6,000 patients who can no longer be cared for at home, are admitted directly to a hospice, avoiding hospitalization, typically to the Emergency Department.
- The direct-to-hospice admissions preserve 86,000 hospital bed days.
- To be clear, without hospice beds, these patients would end up in the Emergency Department and become ALC hospital patients.

➤ **Further Expanding Ontario's Health Workforce**

- Hospices need access to the same retention bonuses and compensation incentives as hospitals to ensure they have the staff to continue to keep patients out of hospice to begin with and to continue to accept transfers from hospitals.
- Hospices care for 10,000 patients each year, freeing up over 143,000 bed days in hospital.
- Hospice patients are not suitable for long-term care, can't remain at home, and should not be in hospital but hospital is where they will go if hospice beds are not there for them.