The Transformation of Healthcare in Ontario

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A presentation to Scarborough Community Council by

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Agenda

1. Background
2. Ontario’s Action Plan for Health Care
3. What it means for patients and hospitals
4. Implications
5. Next steps
   - Rouge Valley Health System
   - The Scarborough Hospital
   - Both hospitals
6. Questions/Discussion
Rising costs of healthcare are unsustainable

- Health spending consumes **42 cents** of every tax dollar spent on provincial programs
- Without significant transformation, that cost could rise to **70 cents** of every tax dollar within 12 years

**What’s different now?**
- Global/provincial economic crisis
- Government’s Action Plan for Health Care
It states that Ontarians should have:

• Support to become healthier

• Faster access and a stronger link to family healthcare

• The right care, at the right time, in the right place
Demographic & Fiscal Challenges:

• Our population is aging—the number of seniors living in Ontario will double during the next 20 years

• Diabetes, which has a higher than average prevalence in Scarborough, costs Ontario $4.9 billion each year

• Obesity, a key contributor to diabetes, affects more than 50% of adults and 20% of youths
What it means for patients & hospitals

Good quality costs less – Higher quality care is better for patients and is less expensive

The 4 Principles of the government’s Excellent Care for All Strategy:
What it means for patients & hospitals

- Hospital budgets are changing from mostly fixed (97%+) to mostly variable (70%) performance or quality based in 3 years
- Approx. 30 targeted Quality-Based Procedure groups will be phased in over three years transition
- The concept being that competition is good for patient care and will lower costs
Implications

To improve quality and lower costs, services will need to be consolidated

- Not all hospitals will do all things
- Hospitals will stop doing some things based on quality and cost

Hospitals’ financial sustainability will depend on our ability to estimate future funding changes

- Allocations for Quality-Based Procedures and volumes remain unclear
Some services will be moved to other settings

- Examples include non-complex surgical procedures, diabetes education
- Could include community settings or surgical centres, private clinics or day surgery centres within hospitals

Staff, physicians and services will move

- Community relations is a necessity
  - Both of our hospitals are being proactive about engagement
Next steps for TSH

Refreshing our Strategic Plan

• Provide clarity to our Clinical Action Plan and re-evaluate the scope and sizing of our programs and services

• Determine which services should expand, remain fixed or decrease in order to meet the acute care hospital needs of our community

• Continue aligning programs with the Action Plan for Health Care: satellite dialysis is an excellent model that has been successful for us
Next steps for RVHS

Our experience at RVHS is a plus in these times
• Success implementing changes (Deficit Elimination Plan / Lean / Quality Focus) positions us well for provincial transformation

Collaborative Care
• Collaborative Care is one of the strategic ways Rouge Valley is preparing for changes during the next three years
• Collaborative Care makes the best use of people’s skills for patients

Continue informing & listening to our communities
• Communicating on this: since February at Board; April with politicians; municipalities since the spring, blog and media in June ….
Next steps for both hospitals

Communication & Consultation

• Continue informing and educating stakeholders about impact of health system transformation and the need for change

• Consult with stakeholders about changes to acute care here in Scarborough and Durham; engage, listen and explore options and possibilities together

• Start making the necessary changes

Your questions/comments/advice are welcome

• Thank you