

## N.B. 'short-sighted' to overlook hospice in four-year plan

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*Sandy Johnson, executive director of Hospice Greater Saint John, in a hospice bedroom. She is disappointed Health Minister Mike Murphy's four-year plan did not make any mention of the facility. She is optimistic about a meeting with Social Development Minister Mary Schryer.*

SAINT JOHN - A group working to ensure the opening of a residential hospice on the city's west side is hoping that a meeting with Social Development Minister Mary Schryer later this month will bring about an innovative partnership.

Sandy Johnson, executive director of Hospice of Greater Saint John, is disappointed that there was no mention of the 10-bed residential facility in Health Minister Mike Murphy's four-year plan released on Tuesday but she's optimistic that Schryer is ready to hop on board given that her long-term strategy announced recently talks about public-private partnerships and palliative care.

"I think it's very short-sighted on Health's part," said Johnson. "To us, it was a new, innovative new thing the government could use as a model to reduce wait times."

The hospice board has been adamant that there will be no co-pay to patients; under its plan, the government would fund \$200 a day per patient, with hospice providing the additional \$100.

"As Minister Murphy said recently in the paper, 'The people of New Brunswick should know that they will not be paying for their health care,'" said Johnson.

"Palliative care is health care. People should not have to pay to die."

Hospice of Greater Saint John has been lobbying the province to help fund a 10-bed residential hospice to allow more than \$2.28 million a year to be reallocated to acute care services and has offered to cost-share the residence with the government.

Hospice is willing to pay \$100 per bed, per day, leaving the province to fund \$200 per bed.

Historically, Social Development assesses individuals on their ability to pay, a policy that would have to be amended to cover all hospice residents, says Johnson. A fast-track process would also have to be implemented, she said, to give people immediate admission.

"I'm hoping we're able to work around those issues," said Johnson.

Dr. Chris O'Brien, director of the Saint John Regional Hospital's palliative care unit and honorary medical director for Hospice, says the group remains optimistic.

"There's no doubt it's the right thing to do. How we go about it is the question," he said. "Why they chose not to put it in the health plan, I'm not sure. It bewilders me sometimes."

Johnson said the last time she and Murphy spoke he told her "we're going to get this done." That was in December 2006, she said, and communication with the Health Department stopped in the spring of 2007 despite requests for meetings. Last September, Premier Shawn Graham met with residential hospice proponents, telling them "it's definitely a model of how partnerships can do great things."

Residential hospice is part of the health-care system in seven other provinces with government providing up to 90 per cent of annual operational funds through provincial health departments, said Johnson.

The residential hospice, at 385 Dufferin Row, would provide palliative care for people suffering from any terminal medical illness, such as cancer, heart and kidney disease or severe stroke.

Hospice has launched a \$1.2-million capital campaign to raise the money needed to renovate the residence and has raised \$515,000 to date.