

Attitude surprises senator
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Hospice Carstairs calls health minister 'closed-minded' in disputing figures

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SAINT JOHN - A senator who has worked to ensure that the needs of end-of-life citizens are being met says she is astonished that Health Minister Mike Murphy is so defensive when disputing figures that support arguments that a residential hospice would save the province money.



File/Telegraph-Journal

Senator Sharon Carstairs says if it was more expensive to be caring for the dying in residential hospices, provinces such as Alberta, British Columbia and Ontario would not have built them. 'There is no question' hospices provide significant savings, she says.

"I am surprised that he is so closed-minded about it when it's not just a matter of dollars and cents, it's also a matter of what is the best care for those individuals," Senator Sharon Carstairs said in an interview Wednesday.

Carstairs was responding to Murphy's insistence earlier in the week that widely accepted residential hospice funding estimates are wrong and that it is cheaper to look after dying patients at the Saint John Regional Hospital.

"If it was more expensive to care for the dying in residential hospices, then governments in provinces like British Columbia, Alberta and Ontario would not have built them," Carstairs said.

"I can't imagine those governments making those decisions if they did not find that there were significant savings. There is no question that there are significant savings."

On Wednesday, a spokesperson for Murphy's office said he had no further comment.

Earlier in the week, Murphy insisted that a residential hospice cannot fund beds for less than \$385 a day, which, he says, is what the Regional Hospital spends to look after patients in palliative care.

But Hospice executive director Sandy Johnson and others, including Hospice founder and radiation oncologist Dr. Nancy Grant, along with director of the Regional Hospital's palliative care unit, Dr. Chris O'Brien, say they can do it for \$300: \$200 from the province and \$100 from Hospice.

They say the 10-bed residential hospice they are renovating at 385 Dufferin Row would allow more than \$2.28 million a year to be reassigned to acute care services because, each year, more than 200 acute care hospital beds meant for emergency room admissions and post-operative care are occupied by palliative care patients. Treating palliative care patients in an acute setting costs the province \$800 more per patient per day than better care in a hospice would, Hospice proponents say.

The fight required to get provinces to buy into the financial feasibility of residential hospice is nothing new to Carstairs.

"It's always been a hard sell because it's new," she said.

"One of the difficulties is moving money from one envelope to another envelope - that is always a huge issue with any minister of health."

Last week while in Saint John, Carstairs said it has historically been difficult to convince governments of the economics of paying substantially less to care for palliative care patients in a residential hospice as opposed to an acute care setting -- unless the acute care beds they are taking up are closed once the palliative patients are moved out.

"That's where the economics become a difficulty," she said.

One of the problems in New Brunswick is that there is no model operating in this "have-not" province, she said.

"The have-not provinces have experienced the greatest conflict in terms of how to fund their provincial budgets, with escalating health care costs," she said.

"The pressures on a Manitoba, New Brunswick, Nova Scotia and Prince Edward Island are so much greater than they are in an Ontario, Alberta and a British Columbia - their revenues keep increasing,"

With enormous budget strains, ministers have to be as efficient as possible, she said.

"That is the difficulty - when you add the pressures of funding from the federal government that doesn't get significantly larger, that just puts extra burdens on the have-not provinces."

Nevertheless, Carstairs says she doesn't understand where Murphy is coming from.

"Yes, he's facing incredible outside pressures, but I think that's all the more reason why he should be looking at efficiencies. This is an example of where you can provide better service at less cost."

Carstairs believes the only way to sway the minister is to convince the public to jump on board.

"They (Hospice) have to make their case to the people," she said. "That is the only way it ultimately changes.

"When enough New Brunswickers say, 'This is what we want,' governments react. We know that's what happens."