

When will government support hospice?

Published Monday December 1st, 2008

When Dr. Nancy Grant was named one of the powerful women in Canada, Saint Johners applauded. In her role as a radiation oncologist, Dr. Grant has saved many lives. But it's her commitment to care at the end of life that has people talking, and fundraising, and campaigning.

Twenty-five years ago, Dr. Grant founded Hospice of Greater Saint John. The organization's goal is to operate a residential hospice in which dying patients can receive appropriate care alongside their families - a respite which is not available in New Brunswick's hospitals.

Dr. Grant and her colleagues have won the admiration of local MLAs, but no long-term commitment from the provincial government. This oversight is inexplicable, given that Hospice's plans would save the Department of Health an estimate \$2.28 million.

Palliative care patients occupy more than 200 acute care hospital beds each year - beds that are meant for emergency room admissions and post-operative care. Patients don't receive the calm atmosphere they need, and their stay in hospital costs the province \$800 more per patient per day than better care in a hospice would.

The hospice model exemplifies the partnership between government and non-profit organizations that Health Minister Michael Murphy has praised. The minister's failure to fund it casts a shadow over the government's commitment to reduce costs and improve the quality of health care.

We've no doubt Dr. Grant will keep on lobbying. The question is, why should Hospice's supporters have to lobby for a policy that would serve patients and taxpayers better?