

## **Why won't government support Hospice?**

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Health Minister Michael Murphy has pledged to reduce costs, shorten wait times, and give everyone access to appropriate treatment.

New Brunswickers want to believe him - but the Department of Health's failure to fund a residential hospice makes the minister's speeches sound like doubletalk.

Palliative care patients occupy more than 200 acute care hospital beds each year. This costs the province \$800 more per patient per day than palliative care in a hospice would, and it ties up beds patients need to recover from surgery.

Hospice of Greater Saint John is proposing a partnership. It wants to provide palliative care at a cost of just \$200 per patient per day. One 10-bed hospice would free up \$2.28 million a year in a hospital's acute care budget.

Acutely ill patients would be treated more quickly, surgical wait times would drop, and terminally ill patients would receive the care they want in better surroundings. It's a win-win-win proposal - but government hasn't agreed to participate.

New Brunswickers want to know why.

Hospice of Greater Saint John was founded in 1982 by Dr. Nancy Grant, a radiation oncologist. The hospice model has worked well in Ontario, and medical staff say it would work just as well here. It has the support of many medical professionals, including those involved in palliative and acute care. All Saint John-area MLAs have backed the idea, and various government departments have contributed \$200,000 to its capital fundraising campaign.

So what's the hold-up? Is this another example of lawyers and clerks thinking they can run the health care system better than physicians?

Mr. Murphy has said he believes this project has merit. If that is the case, his department should come up with the funding in its 2009 budget.

If the government leaves hospice out of its budget for the second year in a row, it will be incumbent on the minister to explain why. New Brunswickers aren't will to wait indefinitely for medical programs that work.