

## Province should fund community hospices

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Hospice of Greater Saint John is taking a \$1.5 million leap of faith.

It's moving ahead with plans to renovate a community home into a centre that can accommodate 10 palliative care patients at a time. To operate this community hospice, the organization will require \$800,000 in annual government funding - a pledge the Department of Health has not yet been willing to make.

Hospice of Greater Saint John is asking for a firm commitment in the 2009-2010 budget. We believe Premier Shawn Graham, Health Minister Michael Murphy and Social Development Minister Mary Schryer should find a way to come up with the funding.

Hospice's 10-bed facility is expected to treat up to 150 people each year, freeing up acute care beds in area hospitals and allowing the government to reallocate \$2.28 million a year to other medical care. It will do so by giving dying patients and their families access to more appropriate care, at no charge to the individual. The cost of care will be shared, with \$100 per patient per day coming from private fundraising and \$200 per patient per day coming from the government.

In Ontario, the community hospice model has been embraced as a cost-effective way of serving all patients better. It offers dying residents appropriate end-of-life care in calm surroundings where family members can be present, and it makes more acute care beds available for patients who need the treatment only a hospital can provide. Hospices establish a partnership in medicine at the community level - one that involves patients and their families, medical professionals, non-profit organizations and the provincial hospital system.

That's the kind of health care innovation New Brunswick so desperately needs.

It's time for the government to offer Hospice of Greater Saint John a real commitment - the annual funding required to operate. Hospice's first 10-bed home could provide a new model for palliative care province-wide - one that will allow the province to re-allocate millions in health care funding for acute care.