

HOSPICE IS RIGHT IDEA

Newspaper Editorial

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Health Minister Michael Murphy and Premier Shawn Graham have spoken often of the need for transformational change in public health care. They've vowed to create efficiencies without compromising care, and expressed interest in exploring how public-private partnerships can reduce costs and improve service.

Given these commitments, it's a complete mystery why government seems uninterested in residential hospices.

A residential hospice is a volunteer-operated community home that cares for the dying. Patients are given their own private and comfortable apartments, 24-hour family access and medical care as required. They are not poked and prodded and tested and treated aggressively, as dying patients in hospitals often are. They are offered comfort and a peaceful, supportive environment, in which they and their family members can come to terms with death - often the most emotional journey in any of our lives.

In Ontario, the government has partnered with non-profit organizations to create a network of 10-bed community hospices. The government funds part of the operating costs, because the cost of caring for terminal patients in acute care hospital wards is significantly higher. And while hospice may sound like a Liberal or NDP innovation, Ontario's hospice network was established by Conservative Tony Clement, now the federal Minister of Health.

Officials at Hospice Greater Saint John have been told by Mr. Clement that he supports their efforts to bring the Ontario model to N.B. It's the proper care to offer dying patients; it frees up acute care beds for patients recovering from surgery; and it allows the province to redirect millions of dollars each year to other health initiatives.

Provincial Health Minister Michael Murphy has been less forthcoming - perhaps because there's no way to explain away hospice care as an innovation we cannot afford.

In Saint John, 200 terminal patients a year die in acute care beds. The average stay is 22 days. The cost to taxpayers is \$1,000 a day. The price paid by the dying and their families is incalculable; it is simply not the right environment.

Caring for the same patient in a more appropriate fashion through a residential hospice would cost the province \$300 a day - a fee Hospice of Greater Saint John is prepared to reduce to \$200.

Partnering with hospices is the right policy on every level - the right level of care, at the right time, for one fifth the cost. If the government can't see that, what hope does it have of improving health care while lowering the cost?