

Context:

Providing patients and families with quality hospice palliative care and grief & bereavement services:

1. Lowers overall health care costs
2. Keeps people out of hospital - ending hallway medicine and ER overcrowding
3. Delivers wholistic care that is highly valued by and responsive to patients, families, and communities
4. Supports mental and emotional well-being preventing escalation to clinical interventions

A hospice bed costs about one third the cost of a hospital bed and volunteer home hospice services cost about \$80 a day. On average 50% of hospice costs are covered by community donations.

Recommendations:

Support the sustainability of, and equitable access to, these lower cost and highly valued hospice services:

1. **Fund 100% of clinical costs** in existing and developing hospice residences with an additional annual investment of **\$43.2M starting in 2022/23 up to \$55.8M by 2025/26.**

SYSTEM SAVINGS OF \$200M a year AND \$2B over 10 years

Number of Hospice Beds	Cost of care in Hospital	Cost of Care in Hospice	Annual System Savings
By 2025/26 - 645 Hospice Beds (491 Existing and 154 in Development)	\$324,645,600	\$145,376,038	\$199,559,912

- These clinical costs would be covered if patients were in hospital (e.g. staffing, all IPAC required equipment/protocols, cleaning, psycho-social supports, medical supplies)
- Covering the same clinical costs in hospices will support the sustainability/viability of these **lower cost community supported settings AND improve equitable access to care in small, rural and remote areas.**
- This new investment would help address the increased costs associated with retention and recruitment of health human resources. Hospitals and other care settings are offering increased wages, bonuses, benefit/pension packages, with which hospices cannot compete under the current funding model.

2. **Improve funding for In-Home Visiting Hospice Services that fall below the provincial funding average. \$4M annually**

- Visiting hospices provide vital supports and services that help people stay home by supporting home care and keeping patients out of hospital.
- On average, government funds 61% of the cost of In-Home Visiting hospice but half of the in-home hospices are below this level of funding due to a patchwork of funding agreements. This funding would bring all In-Home Visiting Hospice Services to a funding level of 61% and support equitable across the province.

Systems savings are estimated at \$20,000,000 a year.

16,000 trained volunteers in Hospice at Home programs help over **25,000 patients a year** stay home while also supporting the well-being of family caregivers. In a survey of 1000 family caregivers, over half reported that **volunteer support averted a trip to the ER.**

3. Address the pandemic of grief - Provide funding for patient, family and community grief and bereavement services. \$10M new annual investment in 2022/23 up to \$25M by 2025/26

- So many families are grieving throughout Ontario in the wake of COVID, and this pandemic of grief will continue as our aging population nears the end of life and more of us face grief and bereavement.
- Hospice services support the wellbeing of people experience grief and bereavement, preventing more complex mental health issues and the need for clinical interventions.
- Hospices are the main providers of grief and bereavement services in communities. Hospices support the health and wellbeing not just of patients and their families but of people of all ages throughout communities. This keeps people functioning well and out of the health care system.
- Both Hospice Residences and Hospice at In-Home Hospice Services provide grief and bereavement programs, with both peer-based and regulated professional supports. Services are offered both in person and virtually.

In 2020, hospices in Ontario conducted over 10,000 bereavement groups, mostly virtually, supporting over 35,000 bereaved individuals.

Conclusion:

With these strategic investments, Government can realize significant annual savings, keep people out of more costly hospital beds, provide an excellent patient, caregiver, and health care worker experience, and support the wellbeing of grieving families.

People and communities highly value their hospice services. Their donations demonstrate that. However, costs are outstripping fundraising potential. Small but significant investments in the hospice sector will lower overall health care costs and provide excellent and meaningful patient and caregiver experience.

Impact of Hospice Care in Ontario:

Since 2017, over 23,000 people were either discharged from hospital to a hospice residence or bypassed hospital admission by going straight from home to a hospice bed, saving \$396M in health care costs and freeing up 369,880 hospital bed days for other patients.

1. Keep the Dying Out of Hospital

- Hospices provide right care in right setting for patients not needing acute care.
- Without hospices, more people will needlessly end up in hospital beds.
- In-Home Visiting Hospice Services support people at home with practical, emotional, spiritual, psychological supports. 53% of family caregivers report they would not have been able to keep their loved ones at home without the support of the visiting hospice service.
- Hospice Residences provide medical and holistic care for patients when they can no longer stay at home but who do not need the more expensive level of care hospitals were designed for.

2. Make lower cost care services sustainable

- Community based hospice palliative care is jointly funded by the Government and Grassroots donors.
- Hospice Residences need an average of 50% of costs to be covered through fundraising.
- Hospice visiting services have a patchwork of funding that varies widely from region to region.

3. Support cost effective care that people need and want

- The number of people with complex illness or nearing end of life is rapidly increasing with aging population.
- People nearing the end of life want to be at home or in a home like setting.
- Hospice palliative care is holistic care for patients and families, allowing for the necessary connections, meaning and comfort that are essential to a quality end of life experience.
- Hospice Residences must meet the high-quality standards set by HPCO.

4. Address a Pandemic of Grief:

- COVID has created a pandemic of grief. People of all ages died prematurely, and often with loved ones unable to be with them, to say goodbye, to have closure, or to be supported through the intense experience of grief.
- Visiting Hospice and Hospice Residences make up the largest provider of grief and bereavement services in Ontario, supporting the well-being of those left behind.