



Ministry of Health & Long-Term Care

Topics: Capacity & Access Pressures

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Capacity & Access Pressures at Brampton Hospitals

Our Asks:

To relieve the significant capacity and access pressures at William Osler Health System's (Osler) Brampton Civic Hospital (BCH) and Peel Memorial Centre for Integrated Health and Wellness (Peel Memorial) and avoid any negative economic impact, the City of Brampton and Osler are seeking a commitment from the Ministry of Health and Long-Term Care (Ministry) to:

- Provide a minimum of an additional \$19.2 million in ongoing funding;
- Expedite approvals and funding for planning, design and construction for additional phases at Peel Memorial to provide additional capacity; and
- Commence development of a third hospital in Brampton to meet the needs driven by rapid growth.

What are the funding needs for Brampton hospitals?

Overall required ongoing operating funding to meet service gaps:

- **Critical need:** In fiscal year 2017/2018, Peel Memorial's Urgent Care Centre (UCC) provided care for more than 61,000 patients. Current projections anticipate volumes will continue to increase to more than 72,000 visits in fiscal year 2018/2019, resulting in a \$14M funding gap.
- Critical need: Realize Peel Memorial's Post Construction Operating Plan (PCOP) endstate volumes for mental health and ambulatory outpatient services – \$5.2M
- **Critical need:** Approval to proceed with the development of Phase II of Peel Memorial Hospital

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Closer look at funding for Brampton hospitals

Demographics within the Central West Local Health Integration Network (LHIN)

- The highest population growth rate in Ontario, currently serving a population of more than 922,000. It is expected the population will increase 44 percent by 2041, adding approximately 420,000 new residents who may require health care services from Osler hospitals.
- Local pressures in service utilization continue beyond pure population growth BCH's Emergency Department (ED) and Peel Memorial's UCC see some of the highest ED/emergent care volumes in the country.
- The Central West LHIN's population is also aging. The number of seniors in the LHIN will grow by nearly 135% from 2017 to 2041, eventually making it the highest amongst the province's 14 LHINs.
- Brampton has approximately one bed per 1,000 residents based on the 2016 census –
 55% lower than the Ontario average.
- The provincial beds per 1,000 average is approximately 2.25, which is below the national average (2.58).
- The proportion of people living with diabetes has more than doubled between 1996 and 2015. The Central West LHIN has the third-highest diabetes prevalence rate in Ontario.
- Historical investments and funding formulas have created a significant disparity in per capita capital infrastructure and operational funding investments for Osler.

Peel Memorial's UCC

- The average daily visits at Peel Memorial's UCC is more than 200, surpassing the projected daily visits of approximately 120.
- The Functional Program for the UCC indicates a volume of 42,626 visits, including an assumption that 32,434 visits would transfer from the BCH ED volume - no significant reduction in BCH ED volume was realized.



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Peel Memorial's mental health and ambulatory care outpatient visits

As the only Schedule One Designated Psychiatric Facility under the *Mental Health Act* in the Central West LHIN and with limited outpatient mental health services available to the community, Osler faces increasing and distinct growth pressures for mental health and addictions services. Wait times to access the appropriate mental health care providers for residents can be several months.

At Peel Memorial, there is a functional program gap in mental health and ambulatory care. Osler will provide an additional 4,366 Mental Health Clinic visits (\$1.1M) and 27,485 Ambulatory Care visits (\$4.1M) that will not be funded through existing funding models. This discrepancy in incremental volumes would result in an additional annual operational funding gap of \$5.2M. Accessing timely and appropriate outpatient treatment for mental health and ambulatory services has the



potential to reduce avoidable ED visits and hospital readmissions.

INFORMATION CONTACT

Lowell Rubin-Vaughan Manager, Government Relations & Public Policy lowell.rubinvaughan@brampton.ca T: 905.874.5977