

## VIEW FROM QUEEN'S PARK: Patients First (Pt. 1)

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Dr. Eric Hoskins, Ontario's Minister of Health, unveiled the government's new action plan for improved health care during an Empire Club speech February 2. This column excerpts (and edits for space), a number of key points Dr. Hoskins made in that speech. This is the first of three columns focused on the new Patients First: Action Plan for Health Care.

Health care is undeniably one of the most important issues facing our government and facing all of us as Ontarians.

The stakes are high. Without exaggeration, the decisions that many of us make in the course of our work have life and death consequences, and it's a cause I've been championing my entire professional career.

So, the question then is not whether the system is unsustainable or whether universal health care is unattainable, or whether two-tiered alternatives are viable. These presume that principles of universality, equity and access in health care can be measured in degrees; that such rights are relative.

That's not a vision for health care that I can support, nor that this government supports. Instead, we have to approach the challenges facing health care from a different vantage point. If we believe in such rights to health and health care as we do, then the questions we really should be asking ourselves are, how do we ensure universality, how do we improve access and what does it take to deliver the highest quality of care?

Yes, there are economic and demographic realities and we will not hide from them. These are challenges we can manage together with determination and some ingenuity.

It's simply a matter of choices.

I believe that we have a tremendous opportunity in this province to lead, to demonstrate a bold vision for delivering universal health care that will, above all, improve patient outcomes and make the best use of our financial resources.

The first Action Plan for Health Care by Minister Deb Matthews made a commitment to be 'obsessively patient-centered'. Patients First, our new action plan, builds on that commitment and recognizes that the health system belongs to patients, to Ontarians, and therefore this plan is for them.

It is shaped by their experiences and seeks to empower them.

If we want our system to serve each patient, we need fast, timely and responsive care, which also means redefining access from the patient's perspective. So what might that redefinition look like? Well, for starters, we should be proud that 94 per cent of Ontarians have a primary care provider, two million more than did a decade ago. But six per cent still don't, and timely access to both primary care and specialists remains a challenge.

We need a front door to our medical system that is open 24/7 and that front door should be a dynamic primary care system with team-based integrated and coordinated care, leveraging the skills of more health care providers and with fewer unattached patients. That is how we can truly put the needs of patients first.

The reality is, these benefits are possible when we put patients first. And more, one of the greatest challenges right now facing our health care system, when it comes to access, concerns individuals in need of mental health and addictions services; not only acute care, but longer term care and supports that revolve around the patient.

That's why we're making targeted investments like the \$138 million over the next three years to shift more mental health services into the community; timely, effective and responsive ongoing care; and support that treats patients as people and breaks down the barriers that those struggling with mental illness and addictions too often face.

We've already made significant progress on mental health by working together. For the first three years, our strategy is focused on mental health supports for children and youth, almost 800 additional mental health workers are now providing services for children and youth in our communities, in our schools, in our courts and our tele-mental health services are providing nearly 3,000 psychiatric consults this year alone, to benefit children and youth in rural, remote and underserved communities.

We don't have to choose between bending our cost curve and putting patients first, both are possible. But it means being willing to challenge the status quo to find ways to better serve patients, by strengthening community-based care, improving transparency and accountability and developing evidence-based models that will tell us whether what we are doing is working.

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