Council Direction:

On 22 June, 2009, the Hamilton Health Coalition (HHC) presented to the Board of Health to describe funding challenges at local hospitals and enquire as to the position of the Board and City Council. At that time, the Board of Health moved “That the delegation be received and Nancy Phillip’s written notes be referred to Public Health Services staff for a general response to the Board respecting the issues raised.”

Information:

Health Impacts to the Hamilton Population

When considering such issues, Public Health Services (PHS) uses the population health and determinants of health approaches. The main questions posed here are:

- How does this affect the health of the people of Hamilton?
- How does this affect the determinants of health of the people of Hamilton?

We know that there are several fundamental elements that impact the health of a population (the “determinants of health”). The Public Health Agency of Canada has elucidated these, and PHS and other City departments have programs in place that aim to improve all of those that can be impacted through public policy and programming:
1. Income and Social Status  
2. Social Support Networks  
3. Education and Literacy  
4. Employment/Working Conditions  
5. Social Environments  
6. Physical Environments  
7. Personal Health Practices and Coping Skills  
8. Healthy Child Development  
9. Biology and Genetic Endowment  
10. Health Services  
11. Gender  
12. Culture  
(Source: http://www.phac-aspc.gc.ca/ph-sp/determinants/index-eng.php)

The funding cuts identified in the HHC presentation may relate to three of these determinants. First and foremost, they could be expected to have some impact on access to health services. The HHC presentation gives several examples of this, both in terms of services that are no longer available in Hamilton, and in terms of the level of care available in some settings.

It is important that such cuts are managed carefully in order to minimize the potential of increased risk of hospital-acquired infections. Recent studies confirm that hospital overcrowding and sharing rooms in hospital contribute to the spread of infections in hospitals. If these cuts result in less private rooms and more room sharing, then the rate of hospital-acquired infections such as Clostridium difficile (C. diff) and ‘superbugs’ such as methicillin-resistant Staphylococcus aureus (MRSA) may increase. At this point, Public Health Services does not have sufficient information to determine if these cuts will pose such risks.

In some cases, these cuts will mean reduced services, which would also be expected to impact the income and employment status of some members of our community. Health care is a leading industry in Hamilton in terms of both employment and economic activity. This means that reductions in hospital budgets may have an effect on employment and economic activity in Hamilton. It also may have a direct financial impact on users of health care services who may have expenditures related to travel out of town for care or new fees associated with rehab services, phototherapy, speech and language services, and laboratory testing.

By impacting both the health services and the economy of our City, it is possible that hospital cuts could have an impact on the health of our community. Public Health Services does not currently have enough information to provide an adequate assessment of the magnitude of this impact, nor to provide a quantitative comparison of the costs and benefits of advocacy on this issue with engagement on other important
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Values: Honesty, Accountability, Innovation, Leadership, Respect, Excellence, Teamwork

challenges facing the health of our community such as poverty, environmental health, smoking, obesity, and early childhood development.

Financial Impacts to the City of Hamilton

Public Health Services does not have the resources to conduct a detailed analysis of cost implications for the City of Hamilton. The March 2009 report from Hamilton Emergency Services (HES09002) identifies that changes to hospital locations may increase EMS costs by increasing travel times. Reorganization of health care services may also have an impact on transit costs if routes have to change to provide adequate services for transit users.