

Plan to Stay Open

Health System Stability
and Recovery



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A Message from the Ministers

While COVID-19 and its variants remain with us today, Ontario now has the tools needed to manage the virus and live with current variants for the long term.

The province has one of the highest COVID-19 vaccination rates in the world, with second booster doses for all adults and pediatric vaccines for Ontario's youngest patients now available.

At-home antiviral medications are helping to keep thousands of people healthier and out of hospitals. Our government continues to provide free rapid antigen tests directly to Ontarians, as well as to workplaces, schools and hospitals, long-term care and retirement homes. Over 145,000 standalone HEPA filter units have been deployed to improve the safety of spaces like schools, child-care centres and hospitals, as well as long-term care and retirement homes.

This fall, Ontario expects Health Canada to approve a new COVID-19 vaccine that will better protect against Omicron variants of the virus, providing another layer of protection as we move forward.

These tools are providing the stability we need to focus our efforts on supporting the health system to rebuild and recover. As we do, we are mindful of both immediate and looming challenges.

Over the past few weeks, we have been actively engaging with frontline partners, hospital, long-term care and union leadership, and our best experts to identify concrete and actionable solutions to respond to urgent pressures, as well as prepare for any potential surge in the winter months.

This plan is the culmination of those conversations. Our goals are clear: provide the best care possible to patients and residents while ensuring the resources and supports are in place to keep our province and economy open.

When we released our first Plan to Stay Open in March 2022, we made a promise to build an Ontario that is ready for the challenges of tomorrow. We have dramatically expanded Ontario's health workforce with more doctors, nurses and personal support workers. We have added thousands of hospital beds with the most significant expansion of long-term care beds well underway. We are investing in building new hospitals while breaking down barriers so that qualified newcomers can safely care for patients rather than wait in limbo for years.

Many of the pressures currently facing the health system are not new; none are unique to Ontario. In response to these pressures and in preparation for a likely winter surge, Plan to Stay Open: Health System Stability and Recovery builds on the work we are already doing by adding over 6,000 additional health care workers to the system, temporarily removing exam and accreditation fees for internationally trained and retired nurses, expanding innovative 9-1-1 models of care that provide people better, more appropriate care away from emergency departments and freeing up over 2,500 hospital beds to ensure they are there for patients when they need them.

In short, this is our plan to care for patients while keeping our province and economy open.

Sylvia Jones

Deputy Premier
and Minister of Health

Paul Calandra

Minister of Long-Term Care

Introduction

In March 2022, Ontario released its first Plan to Stay Open. We have urgently acted on that plan to hire nurses, doctors and personal support workers, as well as add more beds to the system.

We launched the new “Learn and Stay” grant, which pays for the full cost of tuition and supplies for in-demand health care professions like nurses in exchange for committing to practice for two years in an underserved community.

We provided nurses with a \$5,000 retention bonus and gave personal support workers a permanent raise.

The government is undertaking the largest expansion of undergraduate and postgraduate medical school education in over a decade. In 2023, the government will increase medical school positions within our existing schools and has committed to funding new Brampton and Scarborough medical schools starting in 2024.

Over the next 10 years, Ontario is investing billions in new hospital and health care infrastructure, supporting more than 50 major hospital projects that would add another 3,000 permanent new beds, in addition to the more than 3,500 beds the province has added since the start of the pandemic.



We are on track to build 30,000 new long-term care beds in the province by 2028, with 31,705 new and 28,648 upgraded beds in development. This is the largest long-term care development program in a generation and these beds have already started to come on-line and will continue to do so over the next decade.

We are investing over \$1 billion more to expand home and community care services over the next three years to enable people to live and get the care they need outside of hospital and long-term care.



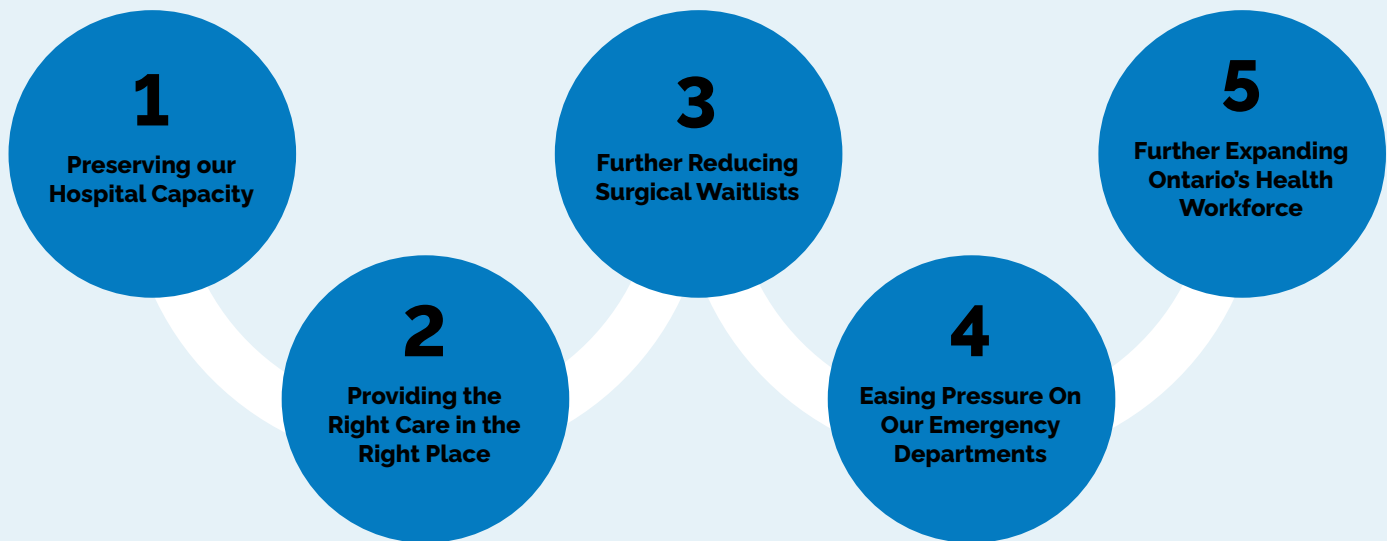
These actions have helped to stabilize the health system and keep our province open during the recent seventh wave, which evidence suggests has now peaked and will soon recede. However, like other jurisdictions across Canada and North America, Ontario is experiencing pressures in its health system, including stressed emergency departments and periodic staff shortages because of fatigue, well-earned vacations and illness.

Historically, fall and winter are when cases of respiratory illnesses rise, putting strain on emergency departments, hospitals and the broader health system, including long-term care. This year will also include Omicron. In order to address current pressures, make more progress with surgical backlogs and be properly prepared for any upcoming winter surge, we need to do more.

Plan to Stay Open: Health System Stability and Recovery takes the necessary actions to further bolster Ontario's health care workforce, free up hospital beds and ease pressures on emergency departments. The plan will add more than 6,000 additional health care workers, temporarily remove exam fees for internationally trained and retired nurses, expand 9-1-1 models of care to provide better, more appropriate care away from emergency departments and free up over 2,500 hospital beds to significantly reduce the current hospital bed shortage so that care continues to be there for those who need it and Ontario stays open, now and in the future.

Stability and Recovery

To address the immediate pressures facing the health system, and to stabilize the health and long-term care sectors for the future, Plan to Stay Open: Stability and Recovery is the next step in the government's ongoing efforts to build a stronger, more resilient health system. The plan includes five areas of focus:



When fully implemented, this next phase of our Plan to Stay Open will add up to 6,000 more health care workers. Combined with the initiatives included in the first phase of the plan that are adding 13,000 more staff, the two plans together are adding 19,000 more health care workers, including nurses and personal support workers, to Ontario's health workforce. The plan will free up and make available over 2,500 more hospital beds on top of the 3,500 the province has so-far added so that care is there for those who need it and the province can stay open during any winter surge.



1 Preserving our Hospital Capacity

Preventing respiratory illnesses is the best tool in keeping people healthy, keeping Ontario open and relieving pressures on hospitals.

Our goal is to improve vaccine uptake and ensure that Ontarians stay up to date with their vaccinations, particularly those who are most vulnerable. A healthier population that is protected against both COVID-19 and influenza will mean fewer hospitalizations and severe outcomes.

First and second booster doses of COVID-19 vaccine are available to anyone who is eligible, and children aged six months to under five years can now get their COVID-19 vaccine.

There are also effective COVID-19 therapeutic options available to Ontarians that will help keep them healthy and out of the hospital. The antiviral treatment, Paxlovid, is available for free to high-risk individuals by prescription at community pharmacies and clinical assessment centres across the province. Evusheld is also available and provides pre-exposure protection from COVID-19 to high-risk immunocompromised individuals for six months.

More Ontarians are getting the flu vaccine than prior to the pandemic, which will continue to be important as Ontario launches its annual flu shot campaign this year for those six months of age and older to help keep Ontarians safe and healthy. The initial focus will be on those at greatest risk, including targeted vaccines for seniors. Based on global trends, Ontarians should prepare to get vaccinated as soon as supply is available this fall based on their risk group.

To further bolster the fight against COVID-19 and help stop its spread, free rapid antigen tests will continue to be available at participating grocery and pharmacy retailers throughout the province, as well as for workplaces, schools, and congregate settings. PCR testing is also available for those who live and work in highest-risk settings and those who may benefit from treatment.

Ontario implemented a number of changes to physician funding at the outset of the pandemic in order to ensure as much flexibility in deploying physician resources to aid in pandemic response. These measures are being extended to continue to ensure hospitals have flexibility in responding at a local level to changing needs. These initiatives also enable community response measures such as COVID-19 Assessment Centres and high-volume vaccination to continue.





2 Providing the Right Care in the Right Place

Ontario's plan will better connect seniors to the most appropriate care settings by providing faster access to care and reducing the number of emergency department visits, especially where people can receive care in the comfort of their own home.

More Long-Term Care Beds

Based on advice from the Office of the Chief Medical Officer of Health, we are taking immediate action to further increase bed capacity in long-term care homes by right-sizing the number of COVID-19 isolation beds, based on community demand and COVID-19 risk levels. By the end of this summer, approximately 300 long-term care beds that were set aside for COVID-19 isolation will be safely available for people on long-term care wait lists, with a potential of 1,000 more beds available within six months.

Supporting Transitions to Long-Term Care and Preventing Hospitalization

We are introducing legislation that, if passed, will support patients whose doctors have said they no longer need hospital treatment and should instead be placed in a long-term care home, while they wait for their preferred home. There will be mandatory guidelines used by placement coordinators to ensure patients continue to stay close to a partner, spouse, loved ones or friends, and ensure these patients won't be out of pocket for any cost difference between their temporary home and their preferred home. Before implementing this policy, Ontario is consulting with its agencies and frontline partners on these placement guidelines.

This new policy will provide patients with the care they need and a better quality of life in a more appropriate setting, while freeing up at least 250 hospital beds in the first six months alone for those who need them, and supporting better patient flow into the future.

We are also helping patients avoid unnecessary hospitalization by expanding access to specialized supports that help people living in long-term care or while in their own home before their admission to long-term care. These supports include behavioural supports for patients with dementia specialized staff resources, on-site treatment and upgrading equipment to match patient needs in the home.

Keeping Ontarians Safe at Home

Helping seniors and recovering patients stay in their homes and avoid hospital admission preserves our hospital capacity for those who need it most. Work is underway to expand adult day programs and supports for caregivers. Ontario continues to fund community paramedicine to provide additional care for seniors in the comfort of their own homes. Ontario is also investing in specialized nursing teams within the emergency departments to identify at-risk individuals earlier and connect them with community supports.

These efforts will free up to 400 hospital beds.



We are also taking steps to help patients safely return home after a hospital stay and giving them the support they need to stay home, with the goal of reducing readmission to a hospital. Ontario is investing in programs, such as hospital@home, that provide patients with additional transitional services and specialized beds, lifts or other equipment to help them safely leave the hospital.

More assisted living spaces will be created to provide appropriate care for people who don't require a hospital bed, but still need more frequent service or behavioural supports. Increased funding for 20 additional hospice beds in residential hospice or a home setting will support people in a more compassionate end-of-life-care setting that they and their families need.

Expanding Successful 9-1-1 Models of Care

The first phase of Ontario's 9-1-1 models of care was hugely successful in diverting patients away from emergency departments so they can receive better, more appropriate care in alternative care settings community. Patients received the care they needed up to 17 times faster with 94 per cent of patients avoiding the emergency department in the days following treatment.

Ontario is expanding these models of care to include additional ailments and is now giving paramedics the flexibility to treat patients and have them stay at home, take them to a more appropriate care centre, or treat and refer them to another care provider. This expansion will help more people avoid emergency departments altogether.



3 Further Reducing Surgical Waitlists

Timely access to surgery is important for keeping patients healthy and reducing pressure on the health care system in the long-term. That is why the government is investing over \$300 million in 2022–23 as part of the province's surgical recovery strategy, bringing the total investment to approximately \$880 million over the last three fiscal years.

In addition to supporting patients who require urgent, immediate procedures and surgeries, Ontario's surgical recovery strategy prioritizes patients waiting longer than recommended in clinical guidelines. In 2022-23, our government continues to offer premiums to hospitals to support completion of over 200,000 surgeries and procedures. Ontario is investing more to increase surgeries in paediatric hospitals and existing private clinics covered by OHIP, as well as more than 150,000 additional operating hours for hospital-based MRI and CT machines.

We are funding new and innovative initiatives that will increase surgical capacity across the province, provide additional training for surgical staff and improve management of waitlists to allow for surgery to be prioritized for those in greatest need.

We are exploring opportunities to improve the efficiency of surgical delivery, including a system for distributing high demand surgeries among all available surgeons. We will also consider options for further increasing surgical capacity by increasing the number of OHIP-covered surgical procedures performed at independent health facilities.



4 Easing Pressure on our Emergency Departments

Ontario is taking action to ensure that hospital emergency departments remain open across the province and that wait times for patients are reduced.

Northern and Rural EDs

Increasing physician coverage in emergency departments will allow hospitals to care for patients in a timely manner.

We are supporting emergency care in northern and rural hospitals by extending the COVID-19 temporary summer locum program to eligible hospitals to March 31, 2023, which will help northern communities address staffing shortages and help maintain 24/7 emergency department services.

Ontario is also launching a new provincial emergency department peer-to-peer program to provide additional on-demand, real-time support and coaching from experienced emergency physicians to aid attending physicians in the management of patients presenting to rural emergency departments. This new program will start in five early adopter hospitals, followed by up to 37 small and rural hospitals across the province.

Additionally, we will add 400 physician residents supporting the workforce in northern and rural Ontario through a new program that links physician residents with physicians in northern and rural emergency departments.

We are also working with the College of Physicians and Surgeons of Ontario to expedite the registration of doctors, including those from out-of-province and who may want to work in rural and northern emergency departments, so they can start working and caring for patients sooner.

Other Initiatives

To avoid hospital overcrowding and ensure patient safety, emergency departments experiencing high demand will continue to be supported by Ontario Health regions in transitioning patients to other nearby hospitals when needed.

In addition, by modifying the community commitment program for nurses, the province will fully leverage the capabilities of nurse practitioners and nurses who can be deployed fulltime across multiple hospitals in a region to help address staffing needs. This will not only assist with hospitals addressing staffing shortages, but also aid in the retention of nurse practitioners and nurses with full-time, reliable work.

Increased access to the family health organization model of primary care will improve access to primary care and reduce demand for emergency department care.

Lastly, additional funding is being made available to provide hospitals with the flexibility to increase emergency department physician coverage as needed.





5 Further Expanding Ontario's Health Workforce

Ontario's world-class health care system depends on a wide network of health professionals. We will ensure that Ontario's nurses, doctors, personal support workers and other health care professionals have the resources, support and guidance they need to continue delivering care.

Internationally Educated Workers

Our government is bringing more internationally educated health care providers to Ontario.

A new program for internationally educated personal support workers will bring 500 new home and community care and long-term care workers into the system.

We are also working with the College of Nurses of Ontario and Ontario Health to expand funding for the supervised practice experience partnership program to the home and community care sector, which has already supported over 600 international nurses in getting licensed since January. We anticipate that by the end of the fiscal year, another 400 international nurses will gain the practice and language requirements necessary to work in Ontario.

Nursing Fees

The Ontario government is also working with the College of Nurses of Ontario to reduce the financial barriers that may be stopping some retired or internationally trained nurses from receiving accreditation so that they can resume or begin practicing. Ontario will temporarily cover the costs of examination, application and registration fees for internationally trained and retired nurses, saving them up to \$1,500.

Long-Term Care Recruitment and Retention

Beginning this fiscal year, we will be investing up to \$57.6 million over 3 years to further increase the number of nurse practitioners by up to 225 by 2024-25 working in long-term care homes to ensure that residents continue to receive safe, high-quality care.

We will also increase the number of personal support worker and nursing students getting hands-on experience in the field through the preceptor resource and education program. The program ensures that personal support workers and nursing students receive critical hands-on experience to better serve the needs of residents and provides more opportunities for career development within long-term care. This includes work with Humber College to pilot and potentially expand a new education program that will provide personal support worker training for individuals already working in the long-term care sector.





Nurse Leadership

The province will expand on its clinical preceptor program so that over 200 mid-to-late career nurses, retired nurses or that are nearing the end of their careers will have the opportunity to transition into leadership roles, where they can mentor newer nurses while continuing to provide front line care.

Continuation of Critical Care Staffing Programs

Ontario is extending critical care programs that can help address the current staffing pressures in hospitals including providing students more hands-on training placements in hospitals with high staffing needs and increasing mentorship opportunities so existing nurses can help provide guidance and assistance to new hires.

We will also continue to work with the College of Nurses of Ontario to accelerate the registration of internationally educated nurses so they can start working in hospitals as quickly as possible.

Stabilizing Agency Fees

We recognize that agency rates have increased significantly, creating instability for hospitals, long-term care homes and emergency departments. In response, the government will engage with our frontline partners to better understand how we can bring stability to hospitals and emergency departments, while protecting quality of care.