Hospital study recommendations raise eyebrows at OTMH board

By DIANE HART Special to the Beaver

nderestimated population forecasts and a dramatic cut in hospital beds are just two of the concerns listed in a lengthy response by Oakville-Trafalgar Memorial Hospital to a controversial hospital study.

The \$150,000 study - by health care consultant Dr. John Atkinson - is a wide ranging look at how Halton hospitals could better use their resources. Recommendations in the study could have profound impact on the future operations at the hospital.

For example, the Atkinson study called for a reduction to 241 beds in 1994/1995. The hospital, however, suggests a number around 306 would be more realistic. In their response, they note that Oakville already has a low average length of stay and has one of the lowest beds per population in the province.

"I have to say we were flabbergasted by the 241," acknowledged chief of staff, Keith Phillips, at a special board meeting this week. "We can live with the 300 much better."

As well, the hospital noted population forecasts - which can have tremendous impact on the future needs of a hospital - are lower in the study than what has been forecasted by Halton region. One significant result is the

study's conclusion that there will be "little growth in hospital services such as paediatrics/maternal care" and its suggestion to concentrate new services on the 45+ age group.

The hospital listed other concerns including oncology services out of hosp:tal - OTMH president Dieter Kunz said with the population hovering at 150,000, it warrants a ful.-time oncologist, as well as, the need to offer chemotherapy closer to home; and a concern with the lack of support services within the community when they move towards outpatient care.

Clause LuBois, vice president of finance, noted a curious paradox that has the province encouraging outpatient care on the one hand and not following through with the dollars on the other hand.

He said the current funding formula can actually penalize a hospital that moves towards exactly what the province has been encouraging for some time community bealth care.

"Outpatient care sounds good, but when we look at the real dollars, it's a lot different," he said. He pointed out a tonsillectomy now nets a hospital about \$1,500 for inpatient care. For outpatient care it's about \$180.

And, although the costs of outpatient care are less, the hospital would still be financially penalized. DuBois said later that the

funding formula is in the process of change.

Board member, Dr. Merc Gafoor noted that another recommendation in the study that has already taken place - an establishment of a Halton Hospital Consortium - is supposed to allow both Joseph Brant hospital and OTMH to share service deliv-

However, he pointed out that since the agreement was signed in August, two separate systems for the hospital operating rooms have been purchased. A shared system would have been less expensive.

"I hope this isn't indicative of the kind of cooperation we'll be seeing in the future," he said.

DuBois said the commitments to the separate suppliers had already been made well in advance of the Consortium agree-

Board members also expressed unease with the process and the fact that the Halton District Health Council is the deciding body on the study. Board member, Gordon Mills, questioned whether the recent upheaval at the district health council - the sudden departure of executive director, Marlene Longdon, and subsequent resignations by council members - would have any impact on their report to the province.

"There are a lot of important issues here affecting our future," said Mills.

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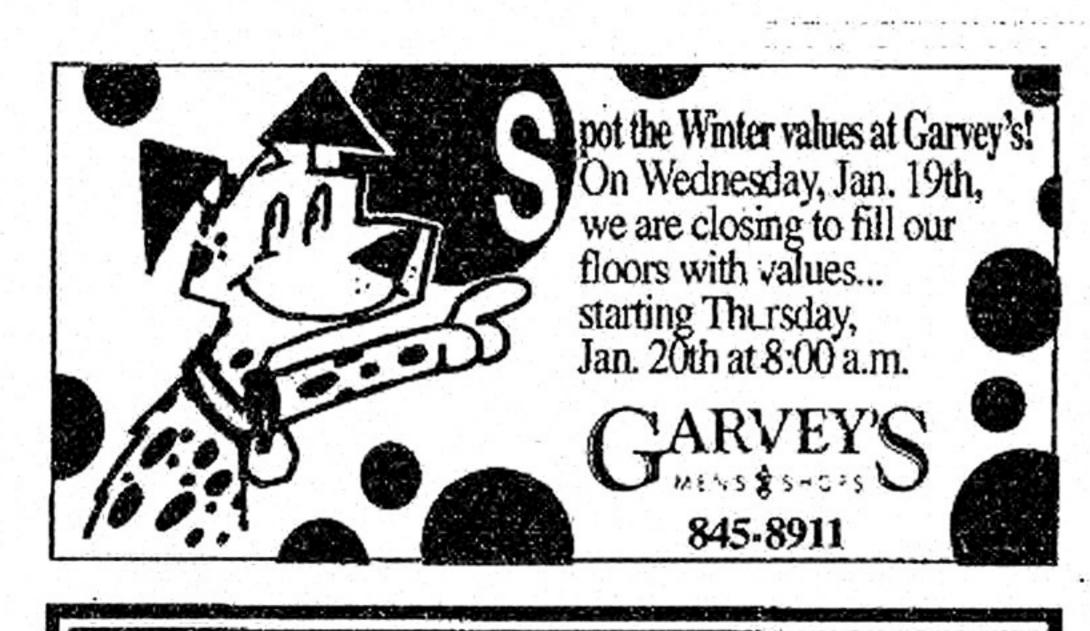
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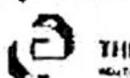
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