Ontario Government Progress Report 2014: health care
The Ontario government has made significant progress in health care since 2003, strengthening and transforming key services. Ontario's 2014 health care progress report highlights achievements that are helping people across the province, such as:

- improvements in wait times
- delivering more vaccines for more people
- increasing access to family doctors

Recommended for you
Progress Report 2014: education
Progress Report 2014: pocketbook initiatives
Progress Report 2014: transit and infrastructure
More seniors to benefit from physiotherapy and exercise
Health and wellness infrastructure projects
**Graphic 1** - This graphic shows a large, red baby pacifier. To the right of the pacifier there is text that reads: “Newborn Screening Ontario screens all newborns for 29 inherited, treatable diseases, amounting to over 145,000 screens annually.”

**Graphic 2** – This graphic shows a large needle. To the right of the needle there is text that reads: “Publicly funded vaccines will save each family up to $1,042 per child if paid out of pocket.” Directly beneath this text is an asterisk and more text that reads “child between zero and 11 years of age only.”

**Graphic 3** – This graphic shows a large stethoscope. To the right of the stethoscope there is text that reads: “Approximately 2.1 million more Ontarians now have access to a family doctor, compared to 2003.”

**Graphic 4** – This graphic shows a pregnant woman in silhouette, standing with her hands on her back. To the right of her is text that reads: “Ontario opened two new Midwife-Led Birth Centres in 2014. Each centre will provide services for up to 450 births per year.”
Over the past decade, Ontario has worked to change the way it provides health care, moving the system from laggard to leader. In 2003, widespread doctor and nurse shortages and skyrocketing wait times meant many in Ontario were not getting the care they deserve. Soaring drug costs limited investments in other important areas.

As a province, we were not receiving value proportionate to what we were spending on health care, even as those costs were increasing rapidly.

An aging population added urgency to an already dire situation. These structural, fiscal and demographic realities were a challenge, but they were also an opportunity. We went to work transforming health care in Ontario by putting the patient first, giving people more options and better access to timely, quality care, and we did this while delivering better value for our health dollars.

While much has been accomplished, we still have more work to do.

We will continue to transform health care because we want every person in Ontario to be at their best. Our health is a key determinant of our quality of life. When we’re healthy, we can spend more time with loved ones, participate in our community, start a business or go back to school.

Providing the best care for people and their families is helping Ontario build strong, healthy communities, a vibrant economy and a bright future for our children and grandchildren.

Over the past decade, 23 new hospitals have been built or are underway. When it comes to surgical wait times for key services, Ontario is now the best in Canada. According to the Ontario Medical Association, over two million more Ontarians have a family doctor today than ten years ago. More than 3 million Ontarians now receive interdisciplinary care from a Family Health Team.

There are over 20,000 more nurses at work across the province than in 2003, caring for patients in a wider range of settings from community care access centres to long-term care homes. Our 2010 reforms to the prescription drug system have reduced the cost of generic drugs for patients, and are saving the province $500 million annually to fund the purchase of new drugs.

We’ve also made significant progress in cleaning up our lakes and the air we breathe to create a healthier environment for generations to come. Significantly, we improved people’s health and expanded their health care options without breaking the bank. For the first time since 1995/96-1996/97, annual increases to Ontario’s health care budget are below 3 per cent.

Health care transformation aims to make our universal public health care system sustainable, so it will be there to help our parents age with dignity and comfort and to support our children and our grandchildren as they reach for their potential and live happier, longer lives.

We’re also doing for future generations what previous generations have done for us — protecting and enhancing the cherished Canadian value that is universal health care.

We are on track to reach our goal for Ontario to be the healthiest place in North America to grow up and grow old. The three priorities of our Action Plan for Health Care outline the next steps
Ontario is taking to build a quality system that provides better care to patients and delivers better value for our health dollars.

**Health care transformation**

Here are some of the ways that we're transforming health care:

- shifting care into the community by expanding access to home care for 76,000 more seniors in the past two years
- providing funding to reduce wait times for in-home nursing services and personal support services for complex clients
- enhancing access to publicly funded physiotherapy, exercise and fall prevention services for more than 200,000 additional seniors and eligible patients
- creating 54 new community Health Links in just one year, covering more than half the province. They are providing coordinated care for seniors and patients with multiple, complex health issues by connecting all health providers in their circle of care
- transitioning Ontario's hospitals and Community Care Access Centres away from global budgets to a model where funding follows the patient, based on how many patients receive care, the services they receive, the quality of those services, and the specific needs of the local population
- moving forward with non-profit community-based Specialty Clinics to provide OHIP-insured services, starting with cataract and colonoscopy procedures. An application process for cataract community-based specialty clinics was launched in February 2014 and is underway
- expanding the community role for paramedics to help patients get the care they need in their communities while reducing the need for emergency room visits and hospital admissions
- enabling pharmacists to administer the flu shot and a number of other services including:
  - prescribing specified drugs for smoking cessation
  - adapting and renewing existing prescriptions
  - administering specific substances by injection or inhalation to a patient to show them how to do it themselves
  - piercing a patient's skin with a lancet-type device to educate and support the patient with chronic disease monitoring
- enabling registered nurses and registered practical nurses to dispense drugs in certain circumstances
- increasing the focus on preventative measures such as air and water pollution, smoking cessation, early detection, and dietary-related diseases

**Ontario’s Action Plan for Health Care**

Ontario’s Action Plan for Health Care, released in January 2012, has three priorities:

1. keeping Ontario healthy
2. faster access and a stronger link to family health care
3. right care, right time, right place

We have made great progress over the past two years in all three priority areas of the Action Plan.
Keeping Ontario healthy

With innovative programs that give people the tools, support and resources to stay healthy, we’re preventing diseases that have the greatest cost to people and our health care system. Ontarians’ well-being and quality of life is improving at every stage.

Healthy kids

We launched the Healthy Kids Strategy in response to the Healthy Kids Panel’s recommendations on how to encourage healthy weights among kids. Under the strategy the government has:

- introduced the Making Healthier Choices Act that, if passed, would make Ontario the first province to require restaurants and other food services to post calories on menus
- announced breastfeeding support to mothers, including 24/7 access to lactation consultants through Telehealth Ontario and funding to support hospitals and community-based health care organizations that are seeking to attain Baby Friendly Initiative (BFI) designation — the globally recognized standard for infant feeding and breastfeeding promotion — to give babies the healthiest start in life
- expanded Ontario’s Student Nutrition Program to more than 200 new breakfast or morning meal programs over two years for about 33,000 more kids in higher-needs communities, including those in some First Nations communities. During the last school year, the program helped provide nutritious breakfasts, snacks and lunches to more than 695,000 school-age children across the province
- launched the Healthy Kids Community Challenge for up to 30 communities to develop and implement programs and activities that promote healthy habits

Between 2010 and 2013, the overall health of 47,000 children and youth from low-income families was improved with the provision of free dental care under Healthy Smiles Ontario. During the same period, the Children In Need of Treatment dental program provided care for 92,613 children and youth with urgent dental conditions.

As of April 1, 2014, we’ve expanded eligibility for Healthy Smiles Ontario to 70,000 more children and youth from low-income families.

Today, over 460,000 children and youth are eligible for dental treatment through the province’s low-income dental programs. And beginning in 2015, all the programs will be integrated into one seamless process to make it easier for eligible children and youth to receive the dental care they need.

Smoke-free Ontario

In November 2013, we introduced new legislation and proposed new regulations to strengthen the Smoke-Free Ontario Act. The proposed amendments, if passed, would increase penalties for selling tobacco to kids, ban flavoured tobacco, and broaden restrictions on smoking in public areas including bar and restaurant patios.
Did you know?
Ontario’s smoking rate has declined from 24.5 per cent in 2000 to 19 per cent in 2012.

In 2012-13, we significantly increased the reach of services to help people of Ontario quit smoking, including:

- more than 15,000 smokers received no-cost nicotine replacement therapy and counselling through primary care and public health
- 8,400 Ontario Drug Benefit recipients received smoking cessation counselling from a community pharmacy
- 58,800 Ontario Drug Benefit recipients received smoking cessation prescription medications

Newborn screening and vaccines

In 2003, newborns in Ontario were screened for only two diseases. Today, Newborn Screening Ontario screens all newborns in Ontario for 29 inherited, treatable diseases, amounting to over 145,000 screens annually. Newborn screening is important because when a disease is detected, treatment can begin immediately.

Did you know?
Newborn screening is free and recommended for all newborns in Ontario.

In May 2013, the province added Severe Combined Immune Deficiency (SCID) to Ontario’s newborn screening program. SCID screening is expected to save the lives of up to 10 babies each year in Ontario.
In 2003, there were eight publicly funded vaccines in Ontario. Today there are 21, including chickenpox.

Each year, about 77,000 girls in Grade 8 are offered free vaccines to protect against the human papillomavirus (HPV), which can cause cervical cancer.

Did you know?

Ontario’s vaccination program saves people more than $2,500 over their lifetime.

The HPV vaccine saves families up to $405 per child.

Flu shots

Did you know?

You can find a health care provider offering the flu shot near you at Ontario.ca/flu.

For the second year in a row, Ontario is making it easier than ever to get a free flu shot close to home — through family doctors, nurse-led flu immunization clinics and participating pharmacies. Trained pharmacists can now give the flu shot to Ontarians age five and over. As of mid-March, 2014, pharmacists had delivered more than 765,000 flu shots this flu season through almost 2000 participating pharmacies.

Cancer screening, prevention and treatment

In the fall of 2013, Ontario passed new legislation to protect young people from skin cancer by restricting youth under 18 from using tanning beds and prohibiting the marketing of tanning services to youth.

Did you know?

Ontario provided 325,092 more breast cancer screening exams in 2012/13 than in 2003/04.

We’re increasing early-detection cancer screenings because we know that screening saves the lives of people living with cancer. Early detection also means more treatment options, so people can maintain a better quality of life while treating the disease. Ontario continues to have one of the most comprehensive cancer screening programs in the country, integrating breast, cervical and colorectal cancer screening into one coordinated program.
Did you know?

Surgical wait times for cancer surgeries are now 24 days shorter than in 2005.

Ontario is helping more cancer patients by funding more new drugs to treat conditions like chronic lymphocytic leukemia, melanoma and metastatic breast cancer. Since 2003, 79 new cancer drugs and 119 indications have been funded under the Ontario Drug Benefit Program and the New Drug Funding Program (NDFP).

Diabetes

Ontario is helping families affected by diabetes with the Ontario Diabetes Strategy, which includes initiatives designed to address the growing challenge of diabetes and improve health outcomes for people impacted by diabetes by:

- educating the public, especially those at high risk, about diabetes and ways to prevent it
- supporting patients in self-management of their disease
- increasing health care providers’ use of evidence-based clinical guidelines and improving access to proven care and treatment options
- improving local and regional coordination of diabetes services and care

Did you know?

100 per cent of Ontarians with diabetes who want to have a primary care provider are now attached to one.

Ontario was the first province in Canada to fully fund insulin pumps for children and youth with type 1 diabetes, saving families up to $18,300 per child in the first five years. The program was expanded to include adults with type 1 diabetes in September 2008.

Cleaner air

Coal-fired electricity generation contributes to air pollution, which has a negative impact on the health of Ontarians. We’re reducing air pollution to help people breathe easier while supporting healthier families and a healthier environment.

According to a 2005 study, the total annualized health, environmental and financial costs of coal were estimated to be $4.4 billion.

In November, 2013, we introduced the Ending Coal for Cleaner Air Act. The legislation proposes to end the use of coal at Ontario’s remaining coal-fired electricity generating facilities and to prohibit new stand-alone coal-fired generating facilities.
Did you know?

Replacing coal-fired electricity generation in Ontario is the single largest climate change initiative being undertaken to date in North America and, when fully implemented, is the equivalent to taking up to 7 million cars off the road.

As a result of Ontario’s coal replacement strategy, in 2013 coal-fired electricity generation was down 91% from 2003 levels, with a corresponding reduction in greenhouse gas emissions from coal-fired electricity generation. By the end of 2014, Ontario will be the first jurisdiction in North America to eliminate coal as a source of electricity.

To help keep our province healthy, Ontario has also introduced nearly 70 new or updated air pollution standards since 2005. The latest Air Quality in Ontario report shows levels of air pollutants have dropped and air quality continued to improve over the last 10 years, especially for nitrogen dioxide (NO2), carbon monoxide (CO) and sulphur dioxide (SO2) — pollutants emitted by vehicles and industry.

Did you know?

Ontario’s cosmetic pesticides ban is one of the strongest in the world, with more than 100 pesticides banned.

The province has also greatly reduced the use of harmful cosmetic pesticides, with the cosmetic pesticides ban celebrating its five year anniversary this year. We are finding the concentrations of three pesticides commonly used in lawn care products have decreased by about 70 percent in urban stream water since the ban. And by maintaining the Drive Clean program to ensure repairs are made to older, polluting vehicles, Ontario continues to reduce smog emissions from these cars and trucks and by one third.

Cleaner water

Did you know Ontario’s drinking water is among the best protected in the world?

The latest Chief Drinking Water Inspector’s annual report shows that over 99% of all municipal drinking water quality tests meet provincial standards.

Ontario has also taken steps to protect our drinking water. The Great Lakes Strategy and the proposed Great Lakes Protection Act set out the roadmap to tackle issues facing the lakes to ensure they are protected for generations to come.

We supported more than 150 community-based projects under the Great Lakes Guardian Community Fund since 2012 to protect habitat and species, clean up beaches and shorelines, reduce invasive species, and restore wetlands.

The Lake Simcoe Protection Plan is working. Ontario’s actions have reduced phosphorus levels by almost 40 per cent and have helped restore the cold water fishery.
Did you know?

Ontario was named the greenest province in Canada in the 2012 Green Provincial Report Card by Corporate Knights. Ontario was recognized for its efforts in reducing greenhouse gas emissions, phasing out coal-fired electricity generation and introducing the Great Lakes Protection Act.

Faster access and a stronger link to family health care

Family or primary health care providers are the first line of defence in helping to keep the people of Ontario healthy. That’s why it’s essential that everyone — regardless of where they live in the province — has access to family health care when and where they need it.

More doctors

A decade ago, there was a serious doctor shortage in Ontario. That’s why we introduced a number of initiatives to increase physician supply, improve retention and enhance the distribution of physicians across the province.

We’ve since stabilized the province’s physician supply by adding 4,910 more doctors. Today, more than 94 per cent of Ontarians have a family doctor. According to the Ontario Medical Association, over 2.1 million more Ontarians have access to a family doctor compared to 2003.

In 2005, Ontario opened the Northern Ontario School of Medicine (NOSM), with main campuses in Thunder Bay and Sudbury and research sites across Northern Ontario. NOSM now operates its undergraduate program at full capacity and has graduated 276 new doctors since 2009.

NOSM is still developing its postgraduate (PG) programs. As of 2013/14, NOSM had a total of 143 PG residents in all levels of training, and this is anticipated to grow to nearly 200 by the time the program reaches maturity in 2017/18. Since 2008, 70 per cent of physicians who have graduated from NOSM’s postgraduate residency programs are practicing in Northern Ontario.

Since 2007, Ontario has opened four new medical education campuses, in the Waterloo Region, St. Catharines, Windsor and Mississauga.

The province also created the HealthForceOntario Northern and Rural Recruitment and Retention Initiative to help attract more physicians to rural and northern communities. Since the program began in 2010, we approved funding for 374 of these grants to bring more doctors to the communities where they are needed.
More nurses

Today there are over 20,500 more nurses working than in 2003, including more than 4,000 new nurses in 2013 than the year before. We have increased the percentage of nurses working full-time by 30 per cent.

Did you know?

Telehealth Ontario is there for you. To speak with a nurse 24/7, call 1-866-797-0000. Now lactation experts are available to provide 24/7 support over the phone to nursing mothers.

We also made Ontario one of the few jurisdictions in the world to create a full-time job opportunity for new nurse graduates through our Nursing Graduate Guarantee Initiative. More than 16,000 new nursing graduates have benefited from a full-time job opportunity through this program.

Ontario is helping to keep experienced nurses on the job longer. Since its inception, the Late Career Nurse Initiative has supported more than 19,500 experienced nurses find work in less physically demanding, alternate roles.

We have also created new nursing roles to support nursing recruitment and retention by providing new opportunities for career enhancement and new skills development.

Family health teams

Did you know?

Today more than 10 million people are enrolled with primary care providers who practice in a group setting like a Family Health Group, Family Health Team or Nurse Practitioner-Led Clinic.

Since they were created in 2005, Ontario’s Family Health Teams are providing health care services to more than 3 million Ontarians, including 804,104 previously unattached patients.

Through Family Health Teams, there are now 2,792 doctors working with 2,347 interdisciplinary health professionals, such as Nurse Practitioners, social workers and pharmacists, in 206 communities across Ontario. That includes 42 new family health teams in northern communities. Family Health Teams take an interdisciplinary approach so they can provide better patient care to more people.
**Nurse practitioner-led clinics**

**Did you know?**

Ontario was the first Canadian province to introduce nurse practitioner-led clinics in our communities.

Nurses are highly trained, highly skilled health care professionals. We’re giving them more authority and utilizing their expertise to expand primary care to more people. There are now 25 nurse practitioner-led clinics serving 27 communities across the province, providing care to more than 43,000 patients, many of whom did not have access to a primary care provider.

**Nurse practitioners in long-term care homes**

Ontario is increasing the number of Nurse Practitioners in long-term care homes to strengthen the quality of care received by residents. Over the next three years, Ontario will increase the number of government-funded Nurse Practitioner positions in long-term care homes from 18 to up to 93.

**Community Health Links**

Patients with multiple, complex health issues have the greatest health care needs. That means finding new ways to provide better care for these high-need patients will reduce the strain on the entire health care system.

In December 2012, we introduced community Health Links to coordinate care for seniors and patients with multiple, complex health issues. Today, Ontario has 54 Health Links covering more than half the province — with more being planned to extend their reach to even more Ontarians.

Health Links encourage greater collaboration among local health care providers, including family care providers, specialists, hospitals, long-term care, home care and other community supports. Improved coordination and information-sharing allows patients to receive faster care, spend less time waiting for services and get care from a team of health care providers at all levels of the health care system.

Health Links ensure patients with complex conditions:

- no longer need to answer the same questions from different providers
- have support to ensure they are taking the right medications appropriately
- have a care provider they can call, eliminating unnecessary visits
- have an individualized comprehensive plan, developed with the patient and his/her care providers who will ensure the plan is being followed
Did you know?

The top five per cent of the most complex patients account for two-thirds of health care costs. By improving their care through Health Links, significant health care savings can be re-invested elsewhere in the system.

Over time, Health Links are expected to result in improvements such as:

- reduced unnecessary hospital admissions and re-admissions within 30 days of discharge
- reduced avoidable emergency department visits for patients with conditions best managed elsewhere
- same day/next day access to primary care
- reduced time from a primary care referral to specialist consultation for complex patients
- reduced time from referral to first home care visit
- reduced alternate level of care days in hospital
- an enhanced experience with the health care system for patients with the greatest health care needs

Right care, right time, right place

Patients receive the highest quality health care when it is timely and delivered as close to home as possible. This is essential to improving the patient experience, their satisfaction and their health outcomes, and to ensuring our health care system can contribute to Ontario’s thriving communities and vibrant economy. It is also critically important for the overall sustainability of the province’s health system.

Community and home care services and seniors

Our government has made significant new investments in the home and community care sector — because that’s where people want to receive care, and it can be delivered at a lower cost than in hospitals or long-term care.

From 2003/04 to 2012/13, funding to the community sector increased from $2.3 billion to $4.3 billion. To build on this progress, in the 2012 Budget, the government pledged to increase community services funding by 4% over the next three years. Last year, we allocated $260 million in new funding — by far our biggest new investment — to the home and community sector.

These investments are being used to enhance care in the community to:

- expand home care for 76,000 more seniors over the past two years alone
- help seniors and others receive services closer to home
- reduce ER/ALC and avoidable hospital readmissions
- reduce wait times for in-home nursing services and personal support services for complex clients; and
- expand access to mental health and addictions services

We have also expanded physician house calls for house-bound seniors, benefitting nearly 100,000 people across Ontario.
Seniors strategy

Dr. Samir Sinha’s report — *Living Longer, Living Well* — recommended investments in home and community care to provide greater access to care where seniors want it most — at home.

So far, we have implemented, or are in the process of implementing, two-thirds of the 134 health-related recommendations of Dr. Sinha’s report, including:

- expanded access to publicly funded physiotherapy, exercise and fall prevention services for more than 200,000 additional seniors and eligible patients
- an $8 million investment to help seniors with complex health conditions recover from illness or injury and live safely at home
- working to make it possible for seniors who need help living independently to receive personal support services through select community support agencies
- 250 more short-stay beds in long-term care homes to provide care to people who need time to recover strength, endurance and functioning following treatment in a hospital or from the community
- investments in the training of approximately 47,000 care providers to adapt to the changing needs of the most frail and vulnerable adults in long-term care, particularly those with challenging behaviours

We are also focused on other initiatives to help seniors. For instance, the Healthy Homes Renovations Tax Credits are intended to help seniors stay in their homes longer. Based on 2012 tax returns, about 25,000 people were able to claim the credits. The average amount of the tax credit was $560.

Did you know?

226,000 more Ontarians received care in their homes through CCACs in 2012-13 than in 2003-04.

Additionally, we have provided $1.5 million to the Alzheimer Society of Ontario’s wandering prevention program, to help protect the province’s most vulnerable seniors. The program has expanded to include Italian, Spanish and Portuguese to help reach people whose first language may not be English or French.

Mandatory sprinklers

We have moved to make automatic sprinklers mandatory in residences for seniors, people with disabilities and vulnerable citizens to improve safety. We are proud that Ontario has become the first province to make sprinklers mandatory in existing licensed retirement homes and care and treatment occupancies for our most vulnerable citizens.
New requirements that came into force on January 1, 2014 include:

- automatic sprinklers for all existing care homes with more than four residents and all licensed retirement homes
- additional fire safety measures such as self-closing doors
- enhanced fire inspections and staff training
- annual inspection and validation of fire safety plans by observing a fire drill by local fire services

The amendments will be phased in over the next five to eleven years and are based on recommendations made by a Technical Advisory Committee led by the Office of the Fire Marshal.

**Reducing wait times**

Since 2003/04, Ontario has invested about $1.7 billion to fund over three million more medical procedures. The Wait Times Strategy has helped reduce bottlenecks, measure progress and publicly report results.

Though historically a valued partner in improving health care in Ontario, the federal government recently withdrew funding for Ontario’s Wait Times Strategy. We are disappointed, but determined to keep reducing wait times and protect the progress we’ve made over the last ten years.

**Did you know?**

Ontario now has the shortest wait times in Canada. The days of waiting saved since 2005 would cover more than 6,000 lifetimes.

Ontario continues to invest resources to improve performance at hospital emergency rooms to support timely discharge to appropriate care in the community. In January of 2014, 89 per cent of patients with minor or uncomplicated conditions were treated and discharged within the four hour target.

Ontario has reduced wait times for the following procedures since 2004:

- cancer surgery by 24 days
- cataract surgery by 151 days
- hip replacement by 150 days
- knee replacement by 229 days
- MRI scans by 49 days
- CT scans by 44 days
Comprehensive Mental Health and Addictions Strategy

In 2011, Ontario launched the Comprehensive Mental Health and Addictions Strategy, which is focusing on children and youth in the first three years. The Strategy will help 50,000 more kids and their families access the supports they need, when and where they need it.

As part of the Strategy, the province has hired more than 770 new mental health workers in schools and communities. These workers provide timely and high quality services that have already helped 35,000 kids and their families. The new workers include:

- 260 new workers in community child and youth mental health agencies to provide kids access to services closer to home
- 144 nurses working with district school boards and local schools to support the early identification and treatment of students with potential mental health and/or addiction issues
- 72 Mental Health Leaders in school boards to provide leadership and coordination in effective school mental health
- 21 new workers in the court system to keep youth out of the justice system and refer them instead to community-based services
- 19 new full-time Nurse Practitioner positions for pediatric and adult eating disorders treatment services
- 175 additional new mental health workers in schools, who will provide kids support to address their mental health needs
- more than 80 new Aboriginal mental health and addictions workers in high-needs communities

As part of the Strategy, Ontario launched Moving on Mental Health, an action plan aimed at transforming the experience of children and youth with mental health problems and their families. This plan will ensure that, regardless of where they live in the province, families will know what mental health services are available to them and how to access the services that will meet their needs.

The Moving on Mental Health plan is introducing a lead agency model in communities across the province. Lead agencies will establish and maintain access to core, community-based child and youth mental health services. They will ensure more collaboration across education and health care systems, which will make the process more transparent so children and youth know what to expect.

In addition, a new Tele-Mental Health Service is expanding access to specialized mental health consultations to children and youth in rural, remote and underserved communities, providing more than 800 additional psychiatric consultations this year for a total of 2,040 this year. The province also provided education and training for professionals working in community-based agencies.

Helping Ontarians living with mental and physical illnesses

The Ontario government has joined with mental health leaders and other community partners to create the Medical Psychiatry Alliance. The province, the Alliance, which includes the Centre for Addiction and Mental Health, the Hospital for Sick Children, Trillium Health Partners, and the
University of Toronto and a private donor will each contribute $20 million for a combined total investment of $60 million over six years.

This new initiative will help people who are at risk of both physical and mental illnesses — or currently living with these illnesses — get the care and treatment they need.

**Midwife-led birth centres**

Ontario opened two new midwife-led birth centres in 2014, one in Toronto and one in Ottawa, to give pregnant women more choice in where to give birth. The Birth Centres offer women a safe, home-like setting where they are attended by midwives and surrounded by their family. Both the Ottawa Birth and Wellness Centre and the Toronto Birth Centre will provide services for up to 450 births per year. This will free up hospital beds so acute care facilities can focus on supporting more high-risk births. The centres will also provide complementary services such as prenatal classes, birth and early postpartum care, breastfeeding support and nutritional counselling.

**Hospitals**

Twenty-three new hospitals have been built or are underway. Since 2005, Ontario has invested more than $14 billion in health care infrastructure. In 2013-14, provincial infrastructure investments in our hospitals have supported nearly 26,000 jobs.

Completed hospitals include:

1. William Osler Health Centre (Brampton)
2. Royal Ottawa Health Care Group
3. West Parry Sound Health Centre
4. Peterborough Regional Health Centre
5. Thunder Bay Regional Health Sciences Centre
6. Mattawa General Hospital
7. Runnymede Healthcare Centre (Toronto)
8. Bloorview Kids Rehab (formerly Bloorview MacMillan Children's Centre, Toronto)
9. Health Sciences North
10. Pembroke Regional Hospital
11. Sioux Lookout Meno-Ya-Win Health Centre
12. Sault Area Hospital
13. North Bay Regional Health Centre
14. Woodstock General Hospital
15. Sarnia, Bluewater Health
Under construction:

20. Cornwall Community Hospital
21. Halton Healthcare Services
22. Humber River Regional Hospital (Toronto)
23. Women’s College Hospital (Toronto)

Construction is moving forward or is complete for more than 100 major projects at hospitals across the province.

Learn about our progress on education

Updated: July 8, 2014

- Government,
- Progress reports

Kathleen Wynne

Premier of Ontario

"Our government will build Ontario up. Ontario will be the best place to live, from childhood to retirement."

[This report taken from the Government of Ontario website: Health and wellness]