



# News Release

For Immediate Release

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## Physician and Nurse Shortages and Lack of a Northern Ontario Health Strategy Impact Access to Care at Northern Hospitals

(TORONTO) Physician and nurse shortages, and the lack of a dedicated health-care strategy for Northern Ontario, create barriers to timely and equitable patient care, Acting Auditor General Nick Stavropoulos said today.

“Northern hospitals became increasingly more reliant on agency nurses than other parts of Ontario. While these nurses fill important gaps, this comes at a much higher cost,” said Stavropoulos. “The province needs to ensure better access to appropriate and equitable levels of care for people in northern communities.”

The audit found that patient care and access to services more readily available in southern Ontario are limited by staff shortages at northern hospitals. For example, physician and nurse shortages led to obstetrics services closing at 10 hospitals in the region between July 2022 and September 2023, and four remained closed as of September, with three of those closed for more than one year. Ontario Health, the provincial agency responsible for overseeing hospitals, does not centrally monitor all instances of service closures at hospitals.

Northern hospitals also face the high cost of nurses hired from agencies to address staff shortages. Between 2018/19 and 2022/23, the use of agency nurses increased 25 times for hospitals in Northern Ontario compared to about two and a half times for hospitals in the rest of the province. Agencies charged the northern hospitals that we visited during this audit about three times the hourly rate of a permanent nurse, in addition to accommodation and travel costs, in 2022/23.

The audit also found more than 330 patients occupying northern hospital beds were waiting for long-term care or home care. This limits hospitals' capacity to care for other patients and adds to wait times. It also cost an estimated \$65 million — funds that the province could have saved if spaces in other care settings had been readily available. The cost to keep a patient in a hospital is higher than a long-term care home, and a long-term care home costs more than home care.

Ontario hospitals are expected to purchase magnetic resonance imaging (MRI) and computed tomography (CT) scan machines by fundraising, but many northern hospitals are located in rural areas, which may make it challenging to raise the required funds to purchase these machines.

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