

Ontario Health Coalition

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McGuinty MPPs Pass Hospital Secrecy Clause Process “Reprehensible”: Coalition

Toronto – Six McGuinty government MPPs voted to pass the “hospital secrecy clause” in this morning’s Finance and Economic Affairs Committee. The clause (Bill 173, Schedule 15), a loophole which will allow hospital CEOs to deny requests for public access to an array of information regarding quality of healthcare in hospitals, was slipped into the government’s Budget Bill after lobbying of the government by the Ontario Hospital Association and insurance companies. It has nothing to do with the budget. It has prompted a flurry of opposition from groups in addition to the Ontario Health Coalition, including the Canadian Civil Liberties Association, the Ontario Nurses’ Association, Impatient for Change, the Council of Canadians, the Registered Nurses’ Association, health care unions such as CUPE, CAW, SEIU and OPSEU, the Association for Reformed Political Action, the Ontario Trial Lawyers Association, the Ontario Federation of Labour, the Medical Reform Group, and concerned citizens.

Both NDP and Conservative MPPs on the Finance Committee voted against the hospital secrecy clause this morning. They were outnumbered on the committee by Liberal MPPs who pushed the secrecy measure through. In the next step, the Budget Bill, including the hospital secrecy clause, will go to the legislature where the government will use its majority to pass it into law.

“The process used by the government to slip a clause expanding hospital secrecy in a Budget Bill at the behest of vested interests is reprehensible. The secrecy clause has nothing to do with the budget, except, ironically, to undermine public accountability,” said Natalie Mehra, coalition director. “Dozens of organizations have spoken out in opposition to this expansion of hospital secrecy.”

“The hospital secrecy law allows hospital CEOs to deny public, patients, media and others access to an array of quality of care information if the CEO claims that the hospital intended the information to be confidential. CEOs can determine that the information was intended to be confidential, even retroactively,” she noted. “Patients and those seeking information will then be forced to go through a lengthy and complex appeals process that can take more than a year, where patients and public advocates will have to overcome the arguments of hospital lawyers to force disclosure.”

“The government cannot honestly claim now or leading into the provincial election that it extended access to information over hospitals. Today, it undid a substantial portion of its own legislation passed last fall to expand hospital accountability in the wake of the e-health scandal,” she concluded.

More background and information on our website: www.ontariohealthcoalition.ca

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