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Report demands Ford government scrap private surgeries and invest in public hospitals

Toronto, Ontario – Drawing on new data from Freedom of Information requests, financial and statistical analysis, and research, a new report raises red flags about the Ford government’s privatization of our public hospitals’ core services including diagnostics and surgeries. The report, ***At What Cost? Ontario hospital privatization and the threat to public health care*** published by the Canadian Centre for Policy Alternatives lays out the negative impact of the Ford government’s plans for Ontario’s public hospitals and patients. It makes startling revelations such as the massive difference in stated government expenditures on private clinics versus the actual spending.

“Increasing surgical and diagnostic capacity depends on the availability of qualified staff, which is not magically increased by the addition of profit,” said Andrew Longhurst, political economist and author of the new report. “Ontario has the physical space and equipment to improve wait times for surgeries and medical imaging; what is missing is the health-care workforce and funding necessary to do the work.” Longhurst, a Simon Fraser University health policy researcher, is concerned that Ontario is set to repeat the mistakes of Alberta, a province that saw wait times increase and total surgical volumes decline as public funding and staffing were diverted into investor-owned centres.

“Today, 1,290 patients are on stretchers in hospital hallways waiting for beds. There are 170,000 patients waiting beyond medically recommended guidelines for surgeries, 17,000 of these are children. Of that 170,000, over 2,400 died last year waiting for surgeries and 9,000 died on waiting lists for MRIs and CT scans. 145 emergency departments are closed due to lack of staff,” added Michael Hurley, president of the CUPE’s Ontario Council of Hospital Unions (OCHU). “The Ford Conservatives promote private hospitals and private surgeries, even though it is well documented that private hospitals have higher death rates and worse outcomes than public hospitals – and that private surgeries are much more expensive. This report details clearly why the Ford government must scrap its campaign to reward its rich investor friends and instead do its job to properly fund our public hospitals.”

“In Toronto and across Ontario, hospitals have operating rooms that are closed after 4 pm and on weekends,” noted Natalie Mehra, executive director of the Ontario Health Coalition (OHC). “For example, in Toronto on April 1, Michael Garron and Sunnybrook hospitals partnered on an initiative to expand central intake for hip and knee surgeries and open additional operating room time on weekends to provide 1,335 hip and knee surgeries and plan to reduce Toronto and region wait lists by 24% in one year. The Ford government could – and should – have opted to expand public capacity in this way but instead is choosing to go the much more costly, dangerous, and slower route of expanding privatization.”

Ontario has [increased](#) overall health funding by 1.2% this year, less than rate of inflation of 5.6% – in economist terms “a real dollar cut.” However, the sky’s the limit for private clinics and hospitals. The new report revealed that the Ford government has increased their funding for for-profit surgeries by 45% and public funding to the for-profit Shouldice Hospital and Don Valley Surgical Unit have increased 19% and 278% respectively since the Ford Conservatives were elected.

The report finds that provinces that have the most for-profit clinics and hospitals (British Columbia, Quebec, Alberta) generally show poorer wait time performances than provinces with no or little to no privatization.