

Published plans and annual reports 2024–2025: Ministry of Health

Plans for 2024–2025, and results and outcomes of all provincial programs delivered by the Ministry of Health in 2023–2024.

Ministry overview

The Ministry of Health (the ministry) is making health care more connected and convenient across the province to ensure patients are provided with the right care in the right place.

Ministry's vision

The ministry is focused on connecting Ontarians to the care they need, when and where they need it. Ontario is building a patient-centred, equitable, results-driven, and sustainable public health care system in Ontario.

Connected and convenient care means providing people and families with a better health care experience during all stages of life, helping them to stay healthier and have better health outcomes.

This vision is supported by key ministry priorities outlined in the *Your Health: A Plan for Connected and Convenient Care* (<https://www.ontario.ca/page/your-health-plan-connected-and-convenient-care>) plan:

- designing care to better connect Ontarians to the right care in the right place within their communities, such as primary care, mental health and addictions services, home and community care, Ontario Health Teams, and virtual care
- supporting faster access to timely and more convenient care in hospitals, emergency care, pediatric care, community surgical and diagnostic centres, long-term care and in people's homes

- supporting and increasing the number of health care workers, by recruiting, retaining, and optimizing the workforce to meet growing demands on the health care system

It continues to provide overall direction to the health care system, guiding resources and funding, and monitoring and reporting on health care system performance.

Ministry programs

Digital health and information management

The ministry continues to deliver more connected digital health services. This is helping Ontarians to better manage their own health and making the health system smarter and more efficient, by reducing the administrative burden on health care providers so they can spend more time focused on delivering the best care for patients and less time on paperwork.

The Patients before Paperwork initiative is driving the transition to modern digital communication alternatives, streamlining processes, and enhancing the overall health care experience for both providers and patients. Through this initiative, paper-based workflows will be replaced by digital options across top use cases, such as faxing referrals, prescription and lab test orders and results, which will save providers time that can be redirected towards focusing on patient care. The ministry is also exploring the use of Artificial Intelligence (AI) to enable primary care providers to automatically document patient encounters and generate clinical notes through an AI Scribe pilot project.

The ministry is also advancing work to support a Centralized Waitlist Management program and digitization of referrals, such as expansion of eReferral, to facilitate seamless coordination and communication among health care providers and improve access to care for patients across Ontario. The Centralized Waitlist Management program, combined with investments in eReferral under the Patients Before Paperwork initiative, will enable primary care providers to refer patients to regional Central Intake hubs for priority surgical procedures. At a system level, this will support enhanced load balancing, optimize routing for referrals while still considering patient choice, and a reduction in patient wait times.

To address availability of primary care data in the Electronic Health Record, the ministry is funding a Primary Care Information Exchange project, which aims to develop a provincial strategy to enable sharing of primary care data across care settings to support integrated care.

Ontario continues to support medically appropriate virtual care services to improve patient access to care while ensuring quality of care, accountability, and value for money.

Emergency health services

To ensure Ontarians have high-quality and responsive emergency care when and where they need it, the government continues to work in partnership with paramedic services provincewide to provide the support they need to maintain ambulance availability in their communities.

Patient care models being led by paramedic services are now approved to provide more appropriate and timely care options for eligible 9-1-1 patients in the community instead of in the emergency department. Ontario is working with key partners to expand patient care models to different patient groups such as people with diabetes and epilepsy. The ministry has approved and is reviewing additional innovative proposals for emerging models with the goal of providing more 9-1-1 patients with safe and appropriate care in the community, while protecting hospital capacity for those who need it most.

Ornge Air Ambulance continues to provide Ontarians, especially those living in rural and remote communities, with consistent access to high-quality urgent care. The Dedicated Offload Nurses Program helps reduce delays paramedics encounter dropping off patients at a hospital and allows them to get back out to the community faster.

Industry-leading technology upgrades are being made to modernize Ontario's ambulance dispatch system, with Central Ambulance Communications Centres (CACCs) in Toronto, Kenora, Niagara, Mississauga, Thunder Bay, and Ottawa now using the Medical Priority Dispatch System – the international standard for call triaging. Progress is now being made to implement this technology at additional CACCs. Computer Aided Dispatch upgrades have also been completed at remaining sites across the province.

Health human resources

The ministry supports a range of initiatives to meet the health care capacity and workforce needs of Ontarians and ensure health care workers are adequately equipped and supported to provide patients with connected and convenient care now and for years to come.

The province continues to break down barriers for internationally and interprovincially educated health care professionals to work in Ontario. This includes ongoing efforts to

create expedited registration pathways for interjurisdictional and international health professionals, and collaboration with health regulatory colleges to streamline registration for internationally educated health professionals. For example, the temporary class of registration allows international nurses to practice while completing registration requirements.

The ministry is supporting training and education to grow the health care workforce and support increased access to health care services. This includes expanded medical school positions and paramedic student programs, expanded training positions for physician assistants and supporting thousands of people to launch careers as personal support workers in long-term care homes and in the home and community care sector. The Ontario Learn and Stay Grant (funded via the Ministry of Colleges and Universities) is helping recruit and retain health care workers in small, rural, and remote communities facing human health resources challenges.

Smaller, rural, and Northern hospitals are also being supported by offering nurse education and training grant for the development and standardization of emergency department skills and competencies. The Clinical Scholar Program is supporting recruitment and retention by creating at-the-bedside mentorship opportunities to support nurses onboarding in hospitals. The Community Commitment to Nursing Program (CCPN) provides \$25,000 in grant funding to Registered Nurses (RNs), Registered Practical Nurses (RPNs) and Nurse Practitioners (NPs) for a two-year commitment to work in regions and sectors of high need.

The ministry continues to support the optimization of health care professionals' scopes of practice, to help Ontarians have greater access to convenient and faster care and reduce pressures on the health care system.

Health programs

The ministry provides oversight of the Ontario Health Insurance Plan (OHIP), which is the province's public health care plan that pays for many of the health services Ontarians rely on. The ministry also provides oversight of public drug programs, assistive devices program, blood programs, laboratories, and diagnostic services. It ensures the sustainability of Ontario Public Drug Programs, including by implementing efficiencies to provide faster access to new innovative drugs for Ontarians, which have reduced the time to list products by 22%. The ministry also collaborates with federal, provincial, and territorial partners to advance priorities for publicly funded drug and blood programs.

The ministry has expanded the use of biosimilar drug treatment for Ontarians to support the sustainability of the drug program and continue to fund new, innovative drugs. The ministry is supporting faster access through co-leading with British Columbia a pan-Canadian initiative to develop a new drug negotiations process for drugs with early promise while clinical trials are ongoing. The pan-Canadian Temporary Access Process (pTAP) will allow funding to be expedited through all provincial, territorial, and federal public drug programs.

The ministry funds the Community Access Pilot for laboratory services, a program that allows Ontarians to receive access to 12 lab tests and specimen collection services for genetic testing in the community setting at no cost. These tests include certain cardiac-specific tests, rheumatology tests, and disease specific tests such as celiac testing, as well as specimen collection for a broad range of genetic tests performed through Ontario's provincial genetics centres. Providing these tests in the community allows Ontarians closer access for tests and alleviates burden on hospitals.

Home and community care

Home care services keep people healthy and at home, where they want to be, and plays an important role in the lives of approximately 700,000 families annually. It helps people who require health care services on a short-term or long-term basis to live safely and independently in the community, or to return home from hospital. Home care services are complemented by community care services including homemaking and other support services.

Ontario Health Teams, a model of integrated care delivery that have been established across the province, will begin to take on the delivery of home care. This will ensure that home care services are better linked with primary care, hospitals, and other parts of the health system. This also includes continuing to implement new models of care that are better connected and tailored to the needs of patients.

The government is also accelerating investments to stabilize the home and community care workforce. To further ensure quality care, the Health and Supportive Care Providers Oversight Authority is expected to begin providing registration and oversight of personal support workers, eventually expanding to include other health care provider groups.

The ministry is also supporting the expansion of palliative care services and improved supports for residential hospices.

Hospitals & health care infrastructure

The ministry supports an efficient, stable, and responsive hospital system that provides high-quality care to Ontarians. The province works with local hospital partners and Ontario Health to ensure communities have the hospital capacity they need to connect patients to care, close to home, and continues to invest in hospitals across the province.

These investments include increased funding for hospital operations, and support for acute, post-acute and critical care beds, and health human resources. The ministry continues to invest in reducing surgical and diagnostic imaging waitlists and funding initiatives to reduce Alternate Level of Care and support patient flow from hospitals to more appropriate care settings for patients. Improving connections across the health care system can also help reduce avoidable hospital readmissions and address hallway health care, which also decreases the pressure on emergency departments and helps to lower wait times.

Health capital investment is a critical part of the work to address growing demands on the health care system and end hallway health care. Ontario's investments over the next 10 years will lead to over \$48 billion in health care infrastructure across the province. This includes support for more than 51 major hospital projects that would add 3,000 new beds over 10 years, increasing capacity and access to reliable, quality care. In hospitals, build new health care facilities and renew existing hospitals and community health centres.

The province is also making record investments in pediatric health care to ensure children and youth can connect to emergency care, surgeries, ambulatory services, diagnostic imaging, and mental health services.

The ministry is working with patients, providers and health sector partners across government and the health sector, including the Ontario Hospital Association and Ontario's hospitals, to create an integrated, patient-focused supply chain for health care products and services. Hospitals are expected to benefit significantly through participation in the new supply chain with access to better tools, expertise, performance data and supports.

Mental health and addictions

The ministry continues to implement *Roadmap to Wellness* (<https://www.ontario.ca/page/roadmap-wellness-plan-build-ontarios-mental-health-and-addictions-system>) – Ontario's comprehensive plan to build a world-class mental health and addictions system of care.

Supported by a commitment to invest \$3.8 billion over 10 years, *Roadmap to Wellness* is making it easier and faster for people to connect to high-quality, evidence-based services while introducing new and innovative programs.

The government's mental health investments are improving access to various services, including specialized mental health care for children and youth, addictions treatment services and supports, mobile clinics, supportive housing, Indigenous mental health, peer supports and eating disorder services.

The Ontario Structured Psychotherapy program is providing free cognitive behavioural therapy and other related services across the province. Youth Wellness Hubs (<https://youthhubs.ca/>) are connecting youth and their families to a welcoming space where they can access mental health and substance use supports, primary health care, community and social supports, and other services tailored to their needs.

The province has also expanded One Stop Talk/Parlons maintenant (<https://onestoptalk.ca/>), which provides children and youth with an easy, convenient way to talk to a clinician by phone, video conference, text, or chat. The ministry is also expanding access to new and existing services for children and youth with intensive mental health needs.

Physician and provider services

The government is increasing patient access, attachment, and equity by creating and expanding interprofessional teams so that patients are able to connect to care where and when they need it.

Ontario has achieved the shortest surgical wait times of any province in Canada, with 80% of patients receiving their procedure within clinically recommended timelines.

To further reduce surgical backlogs and wait times, Ontario is expanding access to care at community surgical and diagnostic centres across the province by leveraging additional capacity of existing surgical and MRI/CT centres and supporting the delivery of additional OHIP insured MRI/CT scans, GI endoscopies, and orthopedic surgeries.

The COVID-19 pandemic had a significant impact on different phases of the surgical pathway for non-emergent surgeries and procedures. The ministry is working hard with its hospital sector partners to address higher wait times for non-urgent surgeries that have resulted and continues to invest in and implement the province's Surgical Recovery

Strategy.

The ministry is negotiating a new Physician Services Agreement (2024–2028) with the Ontario Medical Association (OMA). Together, the Ministry and the OMA are focused on ensuring physicians have support in delivering high-quality, patient-centred, sustainable publicly funded health care.

Population-based services & health equity

The government is advancing health equity for Ontarians by enhancing service delivery and access for diverse communities. Ontario is building a better, connected, equitable health care system where all Ontarians receive health care that is responsive to their needs, regardless of where they live and who they are.

The government is working with First Nations, Inuit, Métis, and urban Indigenous partners to improve health services and health outcomes for their communities. The ministry is supporting Indigenous Cultural Safety Training and Cultural Awareness courses for the health care sector through the Indigenous Primary Health Care Council and Ontario Health. The province is also working with Indigenous partners and the federal government to advance First Nations Health Transformation and improve access to safe and effective health care services closer to where people live.

Through the Roadmap to Wellness, the province has invested in Indigenous-specific mental health and addictions programming. The ministry funds 21 Indigenous Primary Health Care Organizations across the province, with sites both on- and off-reserve that deliver a wide range of services. The First Nation, Inuit, Métis, and urban Indigenous Cancer Strategy through Ontario Health continues to improve the performance of the cancer system for Indigenous populations. In addition, investments continue in primary care, public health, hospital services, home and community care, and mental health and addictions to address gaps in care and ensure equitable access to health services.

With guidance from *A Black Health Plan for Ontario* (<https://www.ontariohealth.ca/about-us/our-programs/provincial-equity-indigenous-health/equity-inclusion-diversity-anti-racism/black-health-plan>), the province is also investing in better ways to work with Black communities to improve health outcomes for Black populations in Ontario. This includes increasing access to culturally responsive screening for prevalent illnesses, including breast cancer, diabetes and hypertension and offering more wellness clinics. The Ontario government is supporting the creation of the Peel Black Health and Social Services Hub, to

conveniently connect Black individuals and families to health care and social services in one place, close to home.

Investments in Locally Driven Population Health Models (formerly known as the High Priority Communities Strategy) are providing culturally responsive supports and improving health outcomes for high needs communities. Investments will be made with community lead agencies to support communities that face systemic barriers to health care by deploying community ambassadors that provide local engagement, outreach, and health system navigation, delivering barrier-free health services and improving access to wraparound supports.

The government is committed to ensuring that Francophone Ontarians can access the health services they need in their preferred language. The ministry has been funding French Language programs and services for over 30 years to increase capacity and improve access to French language health services in Ontario.

Public health

Providing more convenient and consistent access to public health services is a priority for the province. That is why the government continues to increase investments required to build and sustain a strong public health sector that has the support and resources needed to connect people to faster, more convenient care in their communities. The province is also collaborating with municipalities on a longer-term sustainable funding approach for public health.

The Ontario Seniors Dental Care Program (<https://www.ontario.ca/page/dental-care-seniors>) is reducing unnecessary trips to the hospital, preventing chronic disease and increasing the quality of life for seniors. This program will be expanded to increase access to dental services through new and renovated dental clinics and the procurement of additional mobile dental buses.

The province will continue to invest in Indigenous public health services, and support First Nations and urban Indigenous public health providers in building health human resources capacity and addressing gaps in public health services. This investment ensures continuation of the system-recovery efforts and builds on Indigenous-led public health priorities through the delivery of public health programming and related supports for Indigenous populations in Ontario.

2024–2025 strategic plan

In the 2024 Budget, health sector expenses are projected to increase from \$84.5 billion in 2023–2024 to \$89.9 billion in 2026–2027.

Improving access to digital services

The government continues to invest in improved access to digital services for the people of Ontario. This includes enhancing Health811 services to enable increased access to virtual care, online appointment booking, and integration with Ontario Health Teams. This also includes continuing to invest in remote care management, which is integral to supporting patients in the comfort of their homes rather than in hospital for a wide range of conditions, including post surgical discharge and chronic disease management.

A ministry-level key performance indicator (KPI) that supports this strategic outcome is the percentage of Ontarians who had a virtual visit, which sets expectations through the Ontario Health Team model and modernizing virtual care billing frameworks to remove outdated barriers to virtual care.

Supporting home and community care

In the 2023 Budget, the government accelerated the commitment of \$1 billion over 3 years to stabilize the home and community care workforce and to support the expansion of home care services. In the 2024 Budget, the government is investing an additional \$2 billion over 3 years to boost this acceleration, support earlier investments to increase compensation for personal support workers, nurses, and other frontline care providers, and to stabilize expanded services. The government continues to invest in transforming the home care system, including new models of care, and modernizing the Client Health and Related Information System (CHRIS), the digital infrastructure system supporting home care. For community care, the government is providing supports for the workforce to strengthen adult day programs, meal services, transportation and assisted living services.

The government is expanding palliative care services in local communities by adding up to 84 new adult beds and 12 pediatric beds, bringing the total to over 750. This will provide people with comfort and dignity closer to their communities and loved ones when they are nearing the end of life.

Ministry-level KPIs that support integrated care across sectors and track progress on timely access to home care services include wait time from hospital discharge to first home care service and wait time from community to first home care service. The long-term outcome is to return to pre-pandemic levels.

Investing in hospitals

The government has the most ambitious plan for hospital expansion in the province's history, supporting more than 50 hospital projects that would add approximately 3,000 new beds over 10 years. This is supported by an investment of nearly \$50 billion over the next 10 years in hospital infrastructure, including close to \$36 billion in hospital capital grants. In addition, the government is committing \$620 million over 10 years to allow health care system partners to address urgent infrastructure renewal needs for much-needed equipment upgrades, building repairs, and to extend the life of hospital and community infrastructure. The government is also committing an additional \$500 million over 10 years for small hospital projects and community health programs.

The province is investing an additional \$965 million in hospital operating funding in 2024–2025, including through a 4% increase in total base hospital funding for an unprecedented second year in a row. This investment includes funding for stabilization and management of the surgical system, with a focus on maximizing capacity to increase the number of surgeries performed to provide the people of Ontario the care they need with shorter wait times. The government is also providing funding to ease pressures faced by small and Northern hospitals, to help address health human resources shortages, increased agency staffing costs, emergency department closures and other areas requiring stabilization.

Results from investments in the hospitals are monitored through various ministry-level outcomes such as ending hallway health care, reducing the Alternate Level of Care (ALC) rate, and improving conditions of infrastructure in hospitals.

Connecting more people to primary care

In the 2024 Budget, the government invested a total of \$546 million over 3 years starting in 2024–2025. This funding will support connecting approximately 600,000 people to team-based primary health care through new and expanded interprofessional primary care teams. This builds on the 2023 Budget commitment of an additional \$60 million in funding, bringing the total investment to \$606 million since 2023–2024. This investment will also provide support to all existing interprofessional primary care teams through ongoing operational funding for their facilities and supplies so that they continue to provide high-

quality care. Funding for new and expanded teams will focus on high need areas, bringing the government one step closer to connecting everyone in Ontario to primary care.

Strengthening the health care workforce

The government is strengthening and growing the health care workforce by investing \$743 million over 3 years to continue to address immediate health care staffing needs and grow the workforce for years to come. This includes making the Extern Program and Supervised Practice Experience Partnership Program permanent, and providing \$128 million over the next 3 years to support enrolment increases of 2,000 registered nurses and 1,000 registered practical nurses at publicly assisted colleges and universities. This will also merge the Clinical Scholar Program, support the upskilling of nursing students, and stabilize the emergency department nursing workforce.

Ontario is establishing a new medical school at York University, which will be the first medical school in Canada focused primarily on training family doctors. This investment builds on other existing medical education and training expansions within Ontario, including the establishment of a medical school at Toronto Metropolitan University. It will also help to alleviate pressures facing the health care system, attract and retain future doctors, enhance long-term community health outcomes, and support research, training, and technological innovation.

The province is expanding access to allied health professions by adding an additional 700 education seats for medical radiation and imaging technologists, medical laboratory technologists, medical lab technicians and medical radiation extenders. Ontario is also working with colleges to explore and pilot compressed programs for pharmacy technicians and medical radiation technologists so more qualified professionals can enter the workforce sooner.

The government is further helping to address the increasing demand for health human resources across the province, particularly in underserved communities, through the expanded Ontario Learn and Stay Grant. The province will also invest \$50 million over 3 years to recruit and retain health care workers in Northern communities.

Health care providers must be available and appropriately trained in order to continue to effectively respond to the health needs of Ontarians, and to continue to provide safe and high-quality care for patients. The ministry continues to monitor program-level metrics, including outputs, and directly contribute to various intended ministry-level outcomes

including increasing the number of staff through HHR programs and reducing the ALC rate.

Supporting adoption of innovative health care technologies

Ontario is providing \$12 million to establish a new Health Technology Accelerator Fund to help health care service providers buy and use promising new technologies to improve patient care. This fund will provide innovators, including Ontario-based companies, more opportunities to partner with the health care system to promote early adoption and create the conditions for companies to grow in Ontario. In collaboration with Supply Ontario, this fund would accelerate the review and adoption of promising new health innovations and bring them into the system faster for patients to benefit. Adopting Ontario technologies to solve some of the province's greatest health care challenges is a key pillar of *Ontario's Life Sciences Strategy, Taking Life Sciences to the Next Level* (<https://www.ontario.ca/page/taking-life-sciences-next-level-ontarios-strategy>) .

Supporting Northern and rural health care

The government is investing \$50 million over 3 years to enhance and stabilize health care capacity within Northern and rural communities. This investment will introduce long-term solutions encompassing education, recruitment, retention, scope of practice and care models to provide residents of Northern Ontario and those in remote areas with improved access to health care services. This funding will support the expansion of existing rural generalist pathways for physicians, additional supports and upskilling for other health care workers and expansion of services to help prevent emergency department shutdowns. The government is also investing \$45 million over 3 years to enhance the Northern Health Travel Grant Program, which plays a vital role in mitigating the financial burden of medical-related travel for the people of Ontario in Northern communities.

Investing in Indigenous and Northern community supports

The government is committed to enhancing the health and well-being of Indigenous and Northern communities through several investments totalling approximately \$94 million over 3 years. These investments focus on culturally responsive and safe care tailored to the needs of these communities, including public health initiatives such as vaccination, chronic disease prevention and management for diabetes and cardiovascular disease, maternal care, and mental health and addictions services.

The province continues to assess progress on improving the health and well-being of Indigenous and Northern communities such as percentages of self-identified Indigenous

people living outside of First Nations communities who report a positive mental health status and gap in life expectancy at birth between the Indigenous and non-Indigenous populations.

Supporting women’s and children’s health

The government is supporting women and children to access culturally responsive and safe care to strengthen the health of their families with investments of \$50 million over 3 years. This includes enhancing access to the Indigenous Healthy Babies Healthy Children Program across 160 Indigenous delivery sites, supporting innovative mobile maternal health care clinics that will improve the accessibility of maternal and newborn health care in remote and underserved communities, and funding to provide mothers in northern Indigenous communities with vital birthing supports, including more doulas, second attendants or birth helpers.

Connecting people to mental health services

Building on the investment of \$3.8 billion over 10 years through the *Roadmap to Wellness: A Plan to Build Ontario’s Mental Health and Addictions System*, the government is investing an additional \$396 million over 3 years. These investments support the stabilization, improved access and expansion of existing mental health and addictions services and programs. This includes the continuation of the Addictions Recovery Fund that provides access to enhanced specialized services and treatment, 3 Mobile Mental Health Clinics to support people living in remote, rural, and underserved communities, and 3 police-partnered Mobile Crisis Response Teams to support individuals having a mental health or addictions crisis.

The government is providing ongoing support for the innovative Ontario Structured Psychotherapy Program to support those with depression, anxiety, and anxiety-related conditions through cognitive behavioural therapy. Ontario is also adding 5 Youth Wellness Hubs in Port Hope, Thunder Bay, Oxford County, Vaughan and Brampton, and investing \$8.3 million over 3 years to add another 5 hubs, increasing the total number of hubs to 32.

Ministry financial information

Table 1: Ministry planned expenditures 2024–2025 (\$)

Category	Amount (\$)
Operating	78,415,357,665
Capital	2,422,542,200
Total	80,837,899,865

Table 2: Total operating and capital summary by vote

Operating Expense			
Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	%
1401 — Ministry Administration Program	99,495,400	866,000	0.9
1402 — Health Policy and Research Program	1,194,523,000	106,732,800	9.8
Total Including Consolidation & Other Adjustment	78,415,357,665	2,834,081,900	3.7

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
1403 — Digital, Data and Analytics Program	144,049,700	(33,935,700)	(19.1)
1405 — Ontario Health Insurance Program	24,996,948,600	(64,110,200)	(0.3)
1406 — Population and Public Health Program	1,538,834,000	(194,023,200)	(11.2)
1412 — Provincial Programs and Stewardship	3,349,676,500	472,416,200	16.4
1413 — Information Systems	186,968,100	(35,406,100)	(15.9)
1416 — Health Services and Programs	37,789,079,800	3,100,860,900	8.9
Total Operating Expense to be Voted	69,299,575,100	3,353,400,700	5.1
Total Including Consolidation & Other Adjustment	78,415,357,665	2,834,081,900	3.7

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
Statutory Appropriations	105,565	(397,066 ,800)	(100.0)
Ministry Total Operating Expense	69,299,6 80,665	2,956,33 3,900	4.5
Consolidation Adjustment — Hospitals	4,429,29 8,000	150,790, 700	3.5
Consolidation Adjustment — Home and Community Care Support Services	14,342,8 00	(3,473,9 00)	(19.5)
Consolidation Adjustment — Ornge	(27,438, 100)	(5,625,6 00)	N/A *****
Consolidation Adjustment — Funding to Colleges	(755,500)	6,584,10 0	N/A *****
Consolidation Adjustment — Ontario Agency for Health Protection and Promotion	(13,086, 700)	9,633,20 0	N/A *****
Total Including Consolidation & Other Adjustment	78,415,3 57,665	2,834,08 1,900	3.7

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
Consolidation Adjustment — Ontario Health	4,741,84 6,500	(280,756 ,300)	(5.6)
Consolidation Adjustment — School Boards	N/A *****	N/A *****	N/A *****
Consolidation Adjustment — Children's Aid Societies	(21,903, 000)	669,300	N/A *****
Consolidation Adjustment — General Real Estate Portfolio	(6,627,0 00)	(73,500)	N/A *****
Consolidation Adjustment — Ontario Infrastructure and Lands Corporation	N/A *****	N/A *****	N/A *****
Consolidation Adjustments	9,115,67 7,000	(122,252 ,000)	(1.3)
Total Including Consolidation & Other Adjustment	78,415,3 57,665	2,834,08 1,900	3.7

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Operating Assets

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
1401 — Ministry Administration Program	1,000	N/A *****	N/A *****
1402 — Health Policy and Research Program	N/A *****	(4,500,000)	(100.0)
1405 — Ontario Health Insurance Program	13,000,000	N/A *****	N/A *****
1406 — Population and Public Health Program	750,000	(207,001,000)	(99.6)
1412 — Provincial Programs and Stewardship	5,729,400	N/A *****	N/A *****
1416 — Health Services and Programs	38,107,600	N/A *****	N/A *****
Total Operating Assets to be Voted	57,588,000	(211,501,000)	(78.6)
Ministry Total Operating Assets	57,588,000	(211,501,000)	(78.6)

Capital Expense

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
1413 — Information Systems	1,000	N/A *****	N/A *****
1416 — Health Services and Programs	1,000	(5,215,100)	(100.0)
1407 — Health Capital Program	2,281,037,400	(59,782,200)	(2.6)
Total Capital Expense to be Voted	2,281,039,400	(64,997,300)	(2.8)
Statutory Appropriations	11,670,600	(5,021,600)	(30.1)
Ministry Total Capital Expense	2,292,710,000	(70,018,900)	(3.0)
Total Including Consolidation & Other Adjustments	2,422,542,200	144,414,800	6.3

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
Consolidation Adjustment — Hospitals	91,104,000	207,271,300	N/A *****
Consolidation Adjustment — Home and Community Care Support Services	1,227,000	(324,000)	(20.9)
Consolidation Adjustment — Ornge	17,642,200	133,800	0.8
Consolidation Adjustment — Ontario Agency for Health Protection and Promotion	12,571,200	5,066,700	67.5
Consolidation Adjustment — Ontario Health	8,287,800	2,052,700	32.9
Consolidation Adjustment — General Real Estate Portfolio	(1,000,000)	233,200	N/A *****
Total Including Consolidation & Other Adjustments	2,422,542,200	144,414,800	6.3

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
Consolidation Adjustments	(84 , 601 , 500)	214 , 433 , 700	N / A *****
Total Including Consolidation & Other Adjustments	2 , 422 , 54 2 , 200	144 , 414 , 800	6 . 3

Capital Assets			
Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
1413 — Information Systems	15 , 396 , 6 00	(4 , 649 , 1 00)	(23 . 2)
Total Capital Assets to be Voted	15 , 396 , 6 00	(4 , 649 , 1 00)	(23 . 2)
Ministry Total Capital Assets	15 , 396 , 6 00	(4 , 649 , 1 00)	(23 . 2)

Total Operating and Capital

Votes/Programs	Estimates 2024-2025 \$	Change from Estimates 2023-2024 \$	% ****
Ministry Total Operating and Capital Including Consolidation and Other Adjustments (not including Assets)	80,837,8 99,865	2,978,49 6,700	3.8

Operating and Capital Summary by Vote

Operating Expense

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
Total Including Consolidation & Other Adjustment	75,581,2 75,765	78,805,6 91,965	73,817,5 44,377

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
1401 — Ministry Administration Program	98,629,4 00	89,809,4 00	84,247,4 37
1402 — Health Policy and Research Program	1,087,79 0,200	1,179,23 0,700	973,343, 922
1403 — Digital Health and Information Management Program	177,985, 400	54,199,2 00	142,857, 170
1405 — Ontario Health Insurance Program	25,061,0 58,800	25,860,5 39,000	24,175,6 71,438
1406 — Population and Public Health Program	1,732,85 7,200	1,866,62 3,900	1,954,35 2,293
1412 — Provincial Programs and Stewardship	2,877,26 0,300	2,988,52 9,700	2,749,48 2,350
1413 — Information Systems	222,374, 200	217,639, 800	246,149, 121
1416 — Health Services	34,688,2	38,154,0	33,991,0
Total Including Consolidation & Other Adjustment	75,581,2 75,765	78,805,6 91,965	73,817,5 44,377

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
and Programs	18,900	35,700	24,944
Total Operating Expense to be Voted	65,946,1 74,400	70,410,6 07,400	64,317,1 28,675
Statutory Appropriations	397,172, 365	397,175, 265	1,324,42 8,023
Ministry Total Operating Expense	66,343,3 46,765	70,807,7 82,665	65,641,5 56,698
Consolidation Adjustment — Hospitals	4,278,50 7,300	4,080,14 1,800	4,627,97 2,995
Consolidation Adjustment — Home and Community Care Support Services	17,816,7 00	16,979,6 00	(111,611 ,208)
Consolidation Adjustment — Ornge	(21,812, 500)	(54,390, 400)	(31,605, 883)
Consolidation Adjustment — Funding to Colleges	(7,339,6 00)	(10,500, 500)	(22,377, 946)
Total Including Consolidation & Other Adjustment	75,581,2 75,765	78,805,6 91,965	73,817,5 44,377

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
Consolidation Adjustment — Ontario Agency for Health Protection and Promotion	(22 , 719 , 900)	(20 , 733 , 100)	(27 , 071 , 438)
Consolidation Adjustment — Ontario Health	5 , 022 , 60 2 , 800	4 , 018 , 34 2 , 000	3 , 817 , 83 2 , 688
Consolidation Adjustment — School Boards	N/A *****	N/A *****	(45 , 105 , 661)
Consolidation Adjustment — Children's Aid Societies	(22 , 572 , 300)	(22 , 103 , 000)	(22 , 951 , 841)
Consolidation Adjustment — General Real Estate Portfolio	(6 , 553 , 5 00)	(9 , 827 , 1 00)	(8 , 131 , 8 09)
Consolidation Adjustment — Ontario Infrastructure and Lands Corporation	N/A *****	N/A *****	(962 , 218)
Consolidation Adjustments	9 , 237 , 92 9 , 000	7 , 997 , 90 9 , 300	8 , 175 , 98 7 , 679
Total Including Consolidation & Other Adjustment	75 , 581 , 2 75 , 765	78 , 805 , 6 91 , 965	73 , 817 , 5 44 , 377

Operating Assets

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
Ministry Administration Program	1,000	N/A *****	N/A *****
Health Policy and Research Program	4,500,000	N/A *****	N/A *****
Ontario Health Insurance Program	13,000,000	13,500,000	13,000,000
Population and Public Health Program	207,751,000	750,000	1,348,460,996
Provincial Programs and Stewardship	5,729,400	5,729,400	4,368,400
Health Services and Programs	38,107,600	38,107,600	38,106,600
Total Operating Assets to be Voted	269,089,000	58,087,000	1,403,935,996
Ministry Total Operating Assets	269,089,000	58,087,000	1,403,935,996

Capital Expense

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
1413 — Information Systems	1,000	1,000	N/A
1416 — Health Services and Programs	5,216,100	1,000	28,478,217
1407 — Health Capital Program	2,340,819,600	1,951,754,400	1,314,580,824
Total Capital Expense to be Voted	2,346,036,700	1,951,756,400	1,343,059,041
Statutory Appropriations	16,692,200	16,453,400	16,059,547
Ministry Total Capital Expense	2,362,728,900	1,968,209,800	1,359,118,588
Consolidation Adjustment — Hospitals	(116,167,300)	321,508,700	817,015,895
Total Including Consolidation & Other Adjustments	2,278,127,400	2,326,276,000	2,212,920,729

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
Consolidation Adjustment — Home and Community Care Support Services	1,551,00 0	1,223,90 0	1,634,08 9
Consolidation Adjustment — Ornge	17,508,4 00	12,791,1 00	12,393,6 55
Consolidation Adjustment — Ontario Agency for Health Protection and Promotion	7,504,50 0	12,914,0 00	12,538,6 02
Consolidation Adjustment — Ontario Health	6,235,10 0	10,861,7 00	10,219,9 00
Consolidation Adjustment — General Real Estate Portfolio	(1,233,2 00)	(1,233,2 00)	N/A *****
Consolidation Adjustments	(84,601, 500)	358,066, 200	853,802, 141
Total Including Consolidation & Other Adjustments	2,278,12 7,400	2,326,27 6,000	2,212,92 0,729

Capital Assets

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
1413 — Information Systems	20,045,700	17,657,900	7,993,796
Total Capital Assets to be Voted	20,045,700	17,657,900	7,993,796
Ministry Total Capital Assets	20,045,700	17,657,900	7,993,796

Total Operating and Capital

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
Ministry Total Operating and Capital Including Consolidation and Other Adjustments	77,859,403,165	81,131,967,965	76,030,465,106

Votes/Programs	Estimates 2023-2024 \$ [1]	Interim Actuals 2023-2024 \$ [1]	Actuals 2022-2023 \$ [1]
(not including Assets)			

Historic Trend Table

Historic Trend Table				
Historic Trend Analysis Data	Actuals 2021 - 2022 \$ [1]	Actuals 2022 - 2023 \$ [1]	Estimates 2023- 2024 \$ [1]	Estimates 2024- 2025 \$
Ministry Total Operating and Capital Including Consolidation and Other Adjustments (not including Assets)	73 , 4 01 , 9 73 , 2 73	76 , 0 30 , 4 65 , 1 06	77 , 85 9 , 403 , 165	80 , 83 7 , 899 , 865
Percent change	N/A *****	3 . 6%	2 . 4%	3 . 8%

Agencies, Boards and Commissions (ABCs)

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Agencies, Boards and Commissions	Estimates 2024-2025 \$	Interim Actuals 2023-2024 \$	Expenditure Actuals 2022-2023 \$
Committee to Evaluate Drugs	N/A *****	701,700	350,371
Consent and Capacity Board	9,583,091	9,753,472	9,204,422
Health Boards Secretariat	5,359,657	5,535,305	4,604,152
Regulatory Board — Colleges (26)	1,081,830	1,264,489	971,867
Physician Payment Review Board	772	903	694
Health Professions Appeal and Review Board	2,392,651	2,796,634	2,149,449
Health Services Appeal and Review Board	230,809	269,780	207,349
Ontario Hepatitis C Assistance	97	113	87

Agencies, Boards and Commissions	Estimates 2024–2025 \$	Interim Actuals 2023–2024 \$	Expenditure Actuals 2022–2023 \$
Plan			
Medical Eligibility Committee	N/A *****	N/A *****	87
Ontario Review Board	7,112,700	6,787,775	6,733,732
Home and Community Care Support Services	4,005,252,4 21	4,059,499,4 83	3,631,662,4 97
Ontario Agency for Health Protection and Promotion	150,517,900	197,738,100	209,337,900
Ontario Health [2]	34,237,904, 242	35,621,691, 379	30,989,892, 314

Ministry of Health organization chart

April 8, 2024

Sylvia Jones, Minister

Michael Tibollo, Associate Minister, Mental Health and Addictions

Robin Martin, Parliamentary Assistant

Dawn Gallagher Murphy, Parliamentary Assistant

Deborah Richardson, Deputy Minister

Peter Spencer, Director, Legal Services

Lisa Legatto, Director, Communications

Justine Walker, Director, Policy and Delivery

Dr. Kieran Moore, Chief Medical Officer of Health, Office of Chief Medical Officer of Health, Public Health, & Assistant Deputy Minister, Public Health

Elizabeth Walker, Executive Lead, Public Health

Brent Feeney, Director, Accountability and Liaison

Colleen Kiel, Director, Public Health Strategic Policy, Planning and Communications

Jodi Melnychuk, Director, Health Protection, Policy and Partnerships

Heather Schramm, Director, Health Promotion and Prevention Policy and Programs

Robert Lerch, Vaccine Policy and Programs

Justine Hartley, Director, Health System Emergency Management

Dr. Karima Velji, Chief of Nursing and Professional Practice & Assistant Deputy Minister, Nursing and Professional Practice

David Lamb, Director, Capacity and Health Workforce Planning

Allison Henry, Director, Health Workforce Regulatory Oversight

Dr. Nathalie Boudreau, Director, Nursing and Health Professionals

Robert Crawford, Project Director, Health System Integrated Capacity Plan

Angela Copeland, Chief Information Officer, Health Services

I&IT

Cluster

Arden Tansey, Head, Drugs & Assistive Devices

I&IT

Solutions

Hélène Wong, Head, Public Health

I&IT

Solutions

Tanya Bobechko, Head, Payment & Registration

I&IT

Solutions

Mandeep Flora, Head, Corporate

I&IT

Solutions & Integration Management

Nicki Cunningham, , Head, Long-Term Care and Community Administration

I&IT

Solutions

Heather Berios, Head, Emergency Health

I&IT

Solutions & Technology Management

Milos Jkanovic, Director, Digital Technology Services

Shawn Lawson, Assistant Deputy Minister & Chief Administrative Officer, Corporate Services

Cherrie Lethbridge, Director, HR Strategic Business Unit

Rayomond Dinshaw, Director, Fiscal Oversight and Performance

John Amodeo, A/Director, Business Services

Jim Yuill, Director, Financial Management

John Amodeo, Director, Corporate Management

Greig Hein, Assistant Deputy Minister, Strategic Policy Planning and French Language Services

Robert Francis, Director, Strategic Policy

Jovan Matic, Director, Supply Chain Modernization

Jillian Paul, Director, Research, Analysis and Evaluation

Hanna Ziada, Director, Indigenous, French Language and Priority Populations

Michael Hillmer, Assistant Deputy Minister, Digital and Analytics Strategy

Kamil Malikov, Director, Health Data Science

Aileen Chan, Director, Health Data

Jennifer Bridge, Director, Health Analytics and Insights

Paul Pirie, A/Director, Digital Health Program

Christine Sham, Director, Information Management Strategy and Policy

Peter Kaftarian, Associate Deputy Minister, Clinical Care and Delivery

Patrick Dicerri, Assistant Deputy Minister, Health Programs and Delivery, General Manager of

OHIP , and Executive Officer, Ontario Public Drug Programs

Angie Wong, Director, Drug Programs Policy and Strategy

David Schachow, Director, Delivery and Eligibility Review

Rob Acheson, Director, Claims Services

Laura Pinkney, Director, Health Insurance

Lilly Whitham, Director, Laboratories and Diagnostics

Teresa Buchanan, Assistant Deputy Minister, Physician and Provider Services

Neeta Sarta, Director, Physician Relations and Contract Oversight

Nadia Surani, Director, Primary Health Care

Julie Ingo, Director, Provider Services

Nicole Williams, Director, Provider Negotiations Management

Catherine Wang, Assistant Deputy Minister, Hospitals and Capital

Director, Health Sector Models (Vacant)

Tara Wilson, Director, Hospitals

Caroline Proctor, A/Director, Health Capital Investment

Kristin Taylor, Director, Provincial Programs

Alison Blair, Associate Deputy Minister, Health Integration and Partnerships

Rhonda McMichael, Assistant Deputy Minister, Strategic Partnerships

Amy Olmstead, Director, Home and Community Care

Taryn Pimento, Director, Project Management Office

Allison Costello, Director, Ontario Health Teams Policy and Operations

Renee Mahalanobis, Director, Ontario Health Oversight

Susan Picarello, Assistant Deputy Minister, Emergency Health Services

Stuart Mooney, Director, Emergency Health Program Management and Delivery

Adam Langley, Director, Emergency Health Regulatory and Accountability

Kyle MacIntyre, Assistant Deputy Minister, Mental Health and Addictions

Rachel Robins, Director, Mental Health and Addictions Policy, Accountability and Provincial Partnership

Appendix

2023-24 Annual Report

In 2023-24, the ministry continued to support and make steady progress implementing *Your Health: A Plan for Connected and Convenient Care*.

Investing in pediatric health services

The Ontario government made an additional \$330 million annual investment in pediatric health services to connect children and youth to high-quality care close to home at hospitals, clinics, and community-based health care facilities across Ontario. With this new investment, over 100 high-priority initiatives will be quickly implemented to ensure children and youth in every corner of the province can connect to emergency care, surgeries, ambulatory services, diagnostic imaging, and mental health services.

These initiatives include hiring more pediatric surgical staff to increase the number of additional day surgeries, access to diagnostic imaging, and the number of beds and staff to connect more families to inpatient post-operative rehabilitation care. Investing in rapid access clinics that people can access instead of going to emergency departments during respiratory illness season will increase the number of people that can be seen, triaged, and cared for on-site.

Other priorities are to increase access to psychosocial supports for kids with cancer as well as eating disorder programs and reduce wait times for children and youth to connect to mental health services in hospitals and community settings, including Indigenous youth mental health programs. Expanding midwifery programs and services will support access to pregnancy, birth, and post-partum care, including for underserved communities.

Supporting and growing the health care workforce

Over the last year, the province continues to build on its progress. 2023 was a record year,

adding 17,000 new nurses, 2,400 new physicians and thousands of personal support workers to the health care workforce. Since 2018, 80,000 nurse have been added and more than 10,400 physicians have joined the health care system.

Another 30,000 nurses are currently studying at Ontario colleges and universities and Ontario's investment of \$225 million over 4 years is expanding nursing education in these institutions, which will increase enrolment by 2,000 registered nurses, 1,000 registered practical nurses and 150 nurse practitioner seats. Ontario also launched the largest medical school expansion in 15 years, including adding 106 medical school undergraduate training positions and 60 postgraduate positions, with over 75 more to be added in 2024.

The province also invested \$200 million in 2023–2024 to extend supports through the Enhanced Extern Program and the Supervised Practice Experience Partnership (SPEP) program to address immediate health care staffing shortages. As of January 2024, 2,900 internationally educated nurses have received licensure through the SPEP program. The Ontario Learn and Stay Grant (funded via the Ministry of Colleges and Universities), which helps recruit and retain health care workers in small, rural, and remote communities facing human health resources challenges, was expanded and provided 3,700 students in eligible health care programs with up-front funding for educational costs in the 2023/24 academic year.

New pathways to support health care workers

The Ontario government continued to create new pathways to connect more people to care across the province, and support health care workers through 3 new programs. The Practice Ready Ontario program for doctors, which will break down barriers for internationally educated physicians by removing the requirement to complete lengthy re-education programs, allowing them to practice in Ontario immediately.

The Clinical Scholar Program pairs an experienced front line nurse as a dedicated mentor with newly graduated nurses, internationally educated nurses and nurses wanting to upskill, to ensure they have the support they need to confidently transition into the nursing profession. 107 hospitals are participating in this program, through which 435 hired experienced frontline nurses have provided mentorship and support for more than 16,000 new graduate, internationally educated, or upskilling nurses.

The Models of Care Innovation Fund is a new \$40 million fund to encourage health care partners to bring forward innovative ideas to connect Ontarians to better services and

care. Applications from eligible organizations – including hospitals, health care facilities, long-term care homes, home care providers, family health teams, nurse practitioner-led clinics and Ontario Health Teams and others, including mental health service providers were submitted via Ontario Health and recipients will be finalized in 2024.

Bridging education grant in nursing milestone

The Bridging Educational Grant in Nursing program, a partnership between the province and Registered Practical Nurses Association of Ontario, reached a significant milestone in May 2023, surpassing 1,000 participants enrolled in the program. Participants in this program who receive up to \$10,000 per year in tuition funding to support their education commit to work in Ontario's Long-Term Care or Home and Community Care sectors following graduation for a period equivalent to the time they received the tuition grants.

Breaking down barriers through "As of Right" rules

In July 2023, new "As of Right" rules came into effect, making Ontario the first province to allow highly-trained physicians, nurses, respiratory therapists, and medical laboratory technologists already registered or licensed in another Canadian jurisdiction to start work immediately when they arrive without having to first register with one of Ontario's health regulatory colleges.

Health professional regulatory colleges are now also prohibited from requiring Canadian experience as a registration requirement unless an exemption is provided, and they are required to make registration decisions within 30 days. Applicants are now permitted to demonstrate language proficiency for registration with a college through passing a test that is approved under the the Immigration and Refugee Protection Act (Canada).

Emergency department staffing stabilization

The ED Staffing Stabilization Strategy was launched in 2023 in collaboration with Ontario Health to offer education for the development and standardization of ED skills and competencies for nurses working in smaller, rural, and Northern hospitals. 70 nurse education course sessions were offered to 1,171 nurses from over 70 hospitals and approximately 2,800–3,000 specialty ED course training grants will be allotted to nurses this year.

Nor-Star program supporting Northern communities

In 2023, Ontario launched the Northern Ontario Resident Streamlined Training and Reimbursement Program (Nor-Star), which reimburses medical residents for travel and accommodation expenses when completing clinical assignments in the Northeast and Northwest Ontario Health Regions. Nor-Star supports increased access to learning experiences in northern Ontario for medical residents and enables immediate and longer-term physician support to northern communities. 88 medical residents have participated in the program providing over 3,000 days of coverage in 25 Northern Ontario communities.

Additional training positions for nurse practitioners

Working together with Ontario universities across the province, the government added 121 additional training positions to the Primary Health Care Nurse Practitioner Program this year. This will help to grow the nurse practitioner workforce for years to come and make it easier for people to connect to primary care, especially in Northern and rural areas. This expansion brings the total number of nurse practitioner training positions up to 321 at schools across the province, and brings the province closer to its goal of 350.

This is in addition to the province investing \$80 million in 2023–2024 to increase enrolment in nursing education programs in publicly assisted colleges and universities, adding up to 500 registered practical nurse and 1,000 registered nurse education seats in 2023–2024. This is in addition to the 1,500 nursing education spaces added in 2022–2023.

Expanding paramedic college programs

To help more students who want to become a paramedic, the Ontario government added more than 300 spaces in paramedic programs at provincial colleges across Ontario. More student spaces in primary care paramedic programs at Ontario colleges will make it easier for future paramedics to access education and training closer to home and bolster the paramedic workforce.

Expanding scope of practice for registered nurses

The Ontario government expanded the role of registered nurses to prescribe medications, after meeting specific requirements, for conditions such as contraception, immunizations, smoking cessation, and topical wound care in a variety of settings close to home, including long-term care homes and retirement homes. Registered nurses will apply to complete the additional education requirements to work more independently in their community settings. These requirements were developed and approved by the Council of the College of Nurse of Ontario.

Expanding pharmacist prescribing

Ontario allowed pharmacists to treat and prescribe medications for an additional 6 common medical ailments. This is in addition to the 13 common ailments that pharmacists have already been prescribing for since January 1, 2023. Ontario is now one of the leading jurisdictions in Canada in providing convenient health care services through pharmacies. As of March 2024, more than 700,000 pharmacist assessments were completed since pharmacists were allowed to treat and prescribe for 19 common medical ailments. More than 4,600 pharmacies across the province are participating in the program.

Primary care

More interprofessional primary care teams

As part of government's commitment to increase access to primary care, the government announced an investment of \$110 million to connect up to 328,000 people to primary care teams. The new and expanded teams will include Family Health Teams, Nurse Practitioner-Led Clinics, Community Health Centres, and Indigenous Primary Health Care Organizations. The new and expanded teams are the result of a province-wide call for proposals that took place in 2023. All proposals were thoroughly reviewed by Ontario Health based on criteria prioritizing areas of greatest need, to connect a greater number of people currently without a regular primary care provider with these services closer to home.

Expanding breast cancer screening

In October 2023, the Ontario government announced that it will be lowering the eligibility age of self-referral for publicly funded mammograms through the Ontario Breast Screening Program (OBSP) from 50 to 40 starting in fall 2024. This historic expansion will help more than 305,000 people connect to important screening services to detect and treat breast cancer sooner.

Community surgical and diagnostic centres

Ontario established regulatory changes that named Accreditation Canada as the inspection body responsible for ensuring the highest quality standards and strong oversight of the 900+ current and future community surgical and diagnostic centres, effective April 1, 2024.

Given its national leadership role in this type of work for over 65 years, Accreditation Canada was chosen to develop an enhanced oversight and quality assurance program for community surgical and diagnostic centres that will have the same strong requirements as public hospitals, in order to improve quality standards at facilities and ensure consistent patient safety and quality health care. The province consulted extensively with health care sector partners, regulatory colleges representing providers, and patients and families on the development of the new oversight and quality assurance program.

For over 30 years, community surgical and diagnostic centres (formerly known as Independent Health Facilities) have been a part of Ontario's publicly funded health care system. Beginning in spring 2024, the government will take the next step in expanding the number of community surgical and diagnostic centres licensed in the province to deliver additional OHIP insured services to people closer to home, including more MRI/CT scans, GI endoscopies, and orthopedic surgeries.

In the last year, approximately 32,000 cataract surgeries funded for people conveniently completing the surgery at community surgical and diagnostic centres, with 14,000 of these funded at 4 new centres. Centres were also funded to provide over 96,70012,000 service hours of MRIs and CTs for patients.

Connecting to midwifery services

The government invested \$8.27 million for new and expanded midwifery services across the province that will connect thousands of families to faster care in their own community. This funding includes \$4.82 million to expand midwifery services in community health centres, hospitals, family health teams and existing midwifery practices, as well as \$3.45 million to support future initiatives put forward by health care providers to expand midwifery services in their community, including for the province's Indigenous Midwifery Program.

Services are being expanded in every region of the province and will increase access to low-risk pregnancy and newborn care in both hospital and at home. This will build better integration between midwifery, newborn care, and primary care to improve transition through every stage of care. It will also connect people to more culturally appropriate health care options, including traditional Indigenous health services, and improve outcomes.

Ontario Health Teams

In 2023–2024, the Ontario government, in partnership with Ontario Health, approved 4 new Ontario Health Teams, bringing the total number of teams to 58 and marking an important milestone in achieving full provincial coverage.

The new Ontario Health Teams are:

- Équipe Santé Ontario Cochrane District Ontario Health Team, serving Chapleau, Cochrane, Matheson, Iroquois Falls, Hearst, Hornepayne, Missinabie, Kapuskasing, Smooth Rock Falls, and Timmins
- Équipe Santé Ontario Sudbury Espanola Manitoulin Elliot Lake Ontario Health Team, serving Greater Sudbury and Sudbury East, Espanola, Manitoulin, Elliot Lake, and surrounding areas
- Timiskaming Area Ontario Health Team, serving the Timiskaming District and surrounding region
- West Parry Sound Ontario Health Team, serving the eastern shore of Georgian Bay from the northwest corner of Muskoka to the French River, and inland along the Highway 11 corridor

An initial group of 12 Ontario Health Teams were chosen to accelerate their maturity and prepare for potential designation, including accelerating their work to deliver home care in their local communities starting in 2025. With support from the ministry and Ontario Health, these teams will focus on seamlessly transitioning people experiencing chronic disease through their primary care, hospital, and home and community care needs. This initial group of Ontario Health Teams is also working on innovative solutions to provide people access to tools to navigate local health care services 24/7, including online information and referral services and telephone referral services. Over time, these services and Health811 will be connected, providing a seamless navigation experience.

The government also announced that starting in 2024–2025, the province will invest up to \$130.5 million to provide every Ontario Health Team with \$2.25 million over 3 years, to continue to support their critical role in transforming the way people access health care. Ontario Health Teams continue to design and implement new and innovative integrated models that are responsive to the unique needs of the communities they serve. Examples include a housing project that provides safe and stable housing and on-site services to individuals with mental health and addiction challenges, a Neighbourhood Care Team offering low-income seniors a range of comprehensive support and care services, and an Integrated Patient Care Team model that integrates home care services into existing

primary care teams to support improved care planning and delivery, and better patient, caregiver, and provider experiences.

Home and community care

The ministry anticipates that in June 2024 the *Convenient Care at Home Act, 2023* (<https://www.ontario.ca/laws/statute/s23019>) , will be proclaimed into force, consolidating the 14 Home and Community Care Support Services organizations into a new, single organization called Ontario Health atHome. The new organization will provide a strong and centralized foundation for home care services now and support Ontario Health Teams as they take on responsibility for connecting people to home care services in the future.

The province listened carefully and worked closely with service provider organizations, home and community care staff, patients and families, and other system partners to develop these next steps to transition home care to Ontario Health Teams. With these changes, the province is making it easier for people to connect to the home care services they need and breaking down long-standing barriers between home care and other parts of the health care system.

Ontario Health atHome care coordinators will be assigned to work within Ontario Health Teams and other front-line care settings. They will also work alongside care providers like doctors and nurses, and directly with patients while in the hospital or in other care settings to facilitate seamless transitions for people from hospital or primary care to home care services. With the support of Ontario Health atHome, Ontario Health Teams will be a one-stop shop that provides people with easy-to-understand home care plans that let them know the care they are going to receive.

In 2023, the government announced it was accelerating investments in home and community care, to bring funding in 2023–2024 up to \$569 million. This includes nearly \$300 million to support contract rate increases to stabilize the home and community care workforce. As part of 2023–2024 investments, approximately \$100 million in new funding was provided to the community care services sector.

Mental health and addictions

In 2023, the government announced an additional investment of \$425 million over 3 years for mental health and addictions services, including a 5% increase in base funding for community-based service providers funded by the Ministry of Health. This investment is supporting a broad range of mental health and addictions services available across

Ontario making it more convenient for people to access services when needed. This investment builds on Ontario's *Roadmap to Wellness*, the government's plan to build a world-class mental health and addictions system, supported by a commitment to invest \$3.8 billion over 10 years.

Youth Wellness Hubs

Eight Youth Wellness Hubs officially launched across the province, making it faster and easier for young people to connect to mental health, substance use and other supports and services in Algoma Region, Kingston, London-Middlesex, Sagamok Anishnawbek First Nation, Sarnia-Lambton, Sudbury, Thorncliffe Park in Toronto, and West Toronto.

Through these hubs, which were co-designed with local youth, families and stakeholders, young people can connect to convenient and free mental health, substance use and primary care services in different ways, including through walk-in services, booked appointments and virtual services. The youth wellness hubs also provide a range of other services and supports such education, employment, training, housing and other community and social services. In the Sagamok Anishnawbek First Nation Youth Wellness Hub, Indigenous youth and their families can also be connected to traditional healing and wellness services in a safe, welcoming space.

Since 2020, Ontario has launched a total of 22 hubs, connecting over 43,000 youth and their families to mental health and wellness services, accounting for over 168,000 visits. Based on the success of Ontario's Youth Wellness Hubs, the province announced in 2023 that it will be opening an additional 5 hubs.

The province is also making it more convenient for young people to access mental health supports. Launched provincially in September 2023, One Stop Talk/Parlons maintenant is in an innovative provincial mental health counseling service for children and youth across Ontario ages birth to 17. The service provides equitable, in-the-moment access to free, brief virtual counselling services and connects clients with registered and trained clinicians across the province. Interpretation services are available in 200+ languages, including French, American Sign Language and Langue des signes Québécoise (Quebec Sign Language). Services are provided Monday to Friday: 12 p.m. – 8 p.m. and Saturday: 12 p.m. – 4 p.m.

By the end of 2023:

- 26,265 people had called and/or visited the website for information

- 1,274 total clients were served
- client data showed that approximately 85% of clients were not receiving ongoing mental health services elsewhere
- 32% of clients surveyed noted they would have nowhere else to turn for support if One Stop Talk/Parlons maintenant was not available

Ontario structured psychotherapy program

The Ontario government continued to accelerate the reach of the Ontario Structured Psychotherapy (OSP) program, offering more mental health services in every region of the province. Through this program, adults who have depression, anxiety, and anxiety-related concerns, can conveniently connect to free cognitive behavioural therapy and other related treatment options and services through 10 network lead organizations with over 100 service locations across Ontario. To date, over 76,100 people have enrolled in the OSP program and it continues to accept new clients. Initial success of the program shows over half of those who completed high-intensity treatments had significant reduction in their symptoms, helping them lead happier and healthy lives.

Connecting children and youth to mental health services

As part of the government's investment of an additional \$330 million each year in pediatric health services, an additional \$44.6 million per year was allocated to connect children and youth to mental health services across the province. This includes funding to expand access to new and existing services for children and youth with intensive mental health needs, One Stop Talk/Parlons maintenant a brief, mental health counseling service, and the Complex Transition Fund, which provides short term, flexible support for children and youth as they transition into or out of community-based live-in treatment programs.

This investment will add 10 complex care beds in London and Owen Sound to reduce wait times, create 2 new Step-up and Step-down live-in treatment programs that help youth with complex mental health needs who require short-term supports to step down from hospital care to less intensive community-based services or step up from less intensive supports to provide stabilization through intensive interventions, including one in Northern Ontario. It will also establish quality guidelines and standards for live-in treatment programming, so that children and youth with intensive mental health needs have consistent high-quality services no matter where they are in the province and develop and implement a provincial bed registry to track and manage live-in treatment capacity

that will support planning and faster and more direct access to services and reduce wait times.

Investing in Indigenous mental health in Northern Ontario

Ontario invested over \$2.6 million to connect Indigenous communities across Northern Ontario to safe and effective mental health and addictions supports. This funding to the Nishnawbe Aski Nation (NAN), which represents 49 First Nations and approximately 45,000 Indigenous people, will support community-driven, culturally appropriate services and supports, including for crisis response teams and for First Nations schools in Thunder Bay and Sioux Lookout in response to the Seven Youth Inquest. This investment was part of a \$20 million one-time investment in Indigenous-specific MHA services and programs in 2023–2024.

Supportive treatment beds in Sioux Lookout

Through the Addictions Recovery Fund, the province invested over \$4 million to bring addictions treatment beds and services to Sioux Lookout and surrounding areas. The Ontario government, in partnership with the Sioux Lookout Friendship Accord and Kenora District Services Board, opened 22 new supportive treatment beds in Sioux Lookout to connect people and families in the region facing mental health and addictions challenges with high quality services closer to home. In addition to the 22 new supportive treatment beds, this funding also supported 15 new addiction treatment beds.

The Addictions Recovery Fund is boosting capacity for addictions services across the province, supporting the opening of more than 380 new addictions treatment beds and helping to provide care for approximately 7,000 clients per year.

Hospitals / health care facilities

The Ontario government continues to invest in local hospitals and health care facilities to support easier and faster care, close to home:

- Brant Community Healthcare System - Ontario provided a capital grant of up to more than \$28.4 million and approval for the Emergency Department Part 1 Redevelopment Project at Brant Community Healthcare System.
- Centre for Addiction and Mental Health - Ontario has invested more than \$1.6 billion to support the design and construction of 2 new buildings at the Centre for Addiction and Mental Health's (CAMH) Queen Street West campus in Toronto – the Secure Care

and Recovery Building and the Discovery Centre. This investment will help provide enhanced mental health and addictions services to patients from across the province.

- Haliburton Highlands Health Services - Ontario supported the installation of 2 new Computerized Tomography (CT) scanners at Haliburton Highlands Health Services, to improve access to diagnostic imaging services in the region.
- Health Sciences North - The Ontario government invested an additional \$5 million in Health Sciences North in Sudbury to support early capital planning associated with improving acute capacity. The hospital also opened its Reactivation Care Centre, supported by a \$9.6 million provincial investment, to house an additional 52 beds for older adults with specialized needs. Ontario also invested \$1.1 million in permanent pediatric funding to support pediatric outpatient ambulatory care at Health Sciences North.
- Peter Gilgan Woman and Children's Hospital, Trillium Health Partners - Ontario is supporting the consolidation and expansion of dedicated women's and children's programs and services at the new Peter Gilgan Women's and Children's Hospital, within the Peter Gilgan Mississauga Hospital.
- St. Mary's General Hospital, Kitchener - The Ontario government is connecting communities in Southwestern Ontario to life-saving cardiac care by supporting St. Mary's General Hospital with the planning, design, and implementation of a new Cardiac Catheterization Lab. With the addition of this third lab, St. Mary's can reduce wait times and complete more life-saving procedures such as angiograms, angioplasties, and minimally invasive surgeries.
- St. Michael's Hospital, Toronto – The province is connecting critically ill newborns and their families in the Toronto area to better, more convenient neonatal intensive care by supporting Unity Health Toronto with the planning, design and implementation of their relocated Neonatal Intensive Care Unit (NICU) at St. Michael's Hospital.
- Toronto Western Hospital - The Ontario government is investing \$794 million in the University Health Network's (UHN) new state-of-the-art patient tower at Toronto Western Hospital. The new 15-storey patient tower will add 82 patient beds, including new critical care beds and 20 state-of-the-art operating rooms, including 3 new image-guided operating rooms for complex neurosurgical and spinal procedures.
- Trenton Memorial Hospital, Bay of Quinte - Ontario is connecting people in the Bay of Quinte Region to better, more convenient emergency care by supporting Quinte Health with the planning, design, and implementation of a redeveloped and expanded

emergency department at Trenton Memorial Hospital.

- Waypoint Centre for Mental Health Care - The Ontario government is connecting communities throughout Georgian Bay and Simcoe Muskoka to mental health supports by investing in a new inpatient acute care unit at the Waypoint Centre for Mental Health Care. The new unit will expand access to specialized, urgent mental health and addictions services, including an additional 20 acute mental health inpatient beds.

Capital investment

In 2023–2024, approved capital funding for hospital projects under the ministry's Health Capital Program was more than \$2.2 billion. Ontario's investments over the next 10 years will lead to over \$48 billion in health care infrastructure across the province. This includes support for more than 50 major hospital projects that would add 3,000 new beds over 10 years, increasing capacity and access to reliable, quality care. In hospitals, build new health care facilities and renew existing hospitals and community health centres.

Infrastructure renewal

This year, Ontario increased the Health Infrastructure Renewal Fund by over 14% and the Community Infrastructure Renewal Fund by over 10%. Together, over \$208 million was invested through these programs to support critical upgrades and repairs at 131 hospitals and 58 community health care facilities across the province. This funding helps Ontario's health care system partners address urgent infrastructure renewal needs such as upgrades or replacements of roofs, windows, security systems, fire alarms and back-up generators.

Investing in hospital beds and operations

To support the high-quality care provided by Ontario's hospitals, the government invested over \$1.18 billion this year to continue funding over 3,500 hospital beds across the province. Through this ongoing and permanent investment, Ontario is ensuring patients will continue to have access to over 3,500 acute, post-acute and critical care beds. The government is also providing an additional \$850 million investment to hospitals in 2023–2024, representing a 4% increase from last year, which ensures that all publicly funded hospitals receive a minimum 2% increase to their budgets to manage operations and better meet patient needs. In the past year, over 13,200 Alternate Level of Care patients were also connected to the care they need in a long-term care home instead of a hospital.

Surgical and diagnostic imaging recovery

In 2023–2024, the government invested \$125 million in continuation of the province's Surgical Recovery Strategy, bringing the total investment to over \$1 billion. The strategy includes funding incremental surgeries, supporting additional hours of MRI and CT diagnostic imaging scans, funding innovative solutions to address local needs, as well as providing training pathways to increase the number of operating room and diagnostics professionals in the province.

The province made progress providing faster access to care by achieving the shortest surgical wait times of any province in Canada in 2023, with nearly 80% of people receiving their procedure within clinically recommended target times. Ontario eliminated the backlog of cervical cancer screening tests at the end of August 2023 with testing turnaround times returning to the pre-pandemic standard of 10 to 14 days. As of December 2023, completion rates of pediatric surgeries reached 112% of pre-pandemic levels.

Emergency services

Reducing emergency department wait times

To help reduce wait times and provide people with faster access to timely care, the province invested an additional \$44 million in 163 high volume and smaller emergency departments across Ontario. \$29 million is to support 75 high volume emergency departments to increase their capacity to help more patients and reduce the amount of time people have to wait to access care. \$15 million is to expand the number of smaller hospitals now eligible to receive this funding, supporting up to 88 hospitals across the province, so they can hire and retain the staff they need to keep their emergency departments open.

This funding is in addition to the \$90 million Ontario invests each year to reward emergency departments that put in place innovative solutions to reduce ED wait times including hiring additional health care staff, accessing more transportation to help transfer medically stable patients out of emergency departments, and creating new beds. Hospitals have the flexibility to decide how to spend this funding on local solutions that will help people receive care faster and reduce their length of stay in an emergency department. Prior to the COVID-19 pandemic, this annual funding helped emergency departments connect people to care sooner by decreasing the average time spent in emergency departments by 12.2%.

Land ambulance funding

In 2023, Ontario provided upper-tier municipalities and designated delivery agents with more than \$811 million to support land ambulance services, representing a 6% increase provincially over 2022 land ambulance services funding. The government continued to fund 100% of the costs for land ambulance services to First Nations communities to deliver equitable emergency health services. In Northern regions, the ministry also doubled funding to support non-ambulance transportation for medically stable patients, to support improved hospital flow and increase ambulance availability for 9-1-1 calls.

Dedicated offload nurses programs

The province invested an additional \$51 million into the Dedicated Offload Nurses Program over 3 years, which helps reduce delays paramedics encounter dropping off patients at a hospital and allows them to get back out into the community faster. For 2023–2024, this investment will help 30 municipalities cover around 800,000 dedicated hours to support offloading ambulance patients in the emergency department, ensuring paramedics can get back out in the community faster.

The province also continues to expand 9-1-1 patient care models that empower paramedics to provide timely care to eligible 9-1-1 patients in the community, protecting hospital capacity for those who need it most. The ministry has now approved over 200 patient care models led by more than 55 paramedic services.

By prioritizing patient offloading through increased Dedicated Offload Nurses Program funding and fostering innovative collaborations, the province has helped stabilize offload times. By November 2023, year-over-year provincial ambulance offload times declined by 15%. Delays in offload times dropped significantly in regions such as Middlesex-London (80%), Guelph (71%), and Hamilton (77%).

Expanding Ornge Air Ambulance

The Ontario government is investing over \$108 million to expand Ornge Air Ambulance's fixed wing fleet with 4 additional state-of-the-art planes and replace their existing 8 fixed wing fleet. This investment will ensure Ornge's air ambulance service can continue to provide Ontarians, especially those living in Northern, rural, remote, and Indigenous communities, with reliable, timely access to high-quality urgent care. Once the new 12-plane fleet is ready, Ornge will be able to add 2 fully staffed, 24/7 air ambulance crews to further connect people in need of rapid emergency care.

In addition to updating and expanding Ornge's fleet of aircraft, Ontario is providing Ornge with nearly \$10 million to move from their existing Sudbury base to a larger hangar in the city that can house both their helicopter and expanded fixed wing services in one base. This new hangar will help better coordinate emergency care in the north.

Ornge conducts approximately 21,000 air ambulance and critical care land ambulance patient transports annually, with approximately 98% of Ornge's fixed wing patient transports originating in Northern Ontario.

Palliative care

The government is investing up to \$147.4 million over 3 years to expand palliative care services across the province and improve supports for residential hospices.

These investments will be used to make sure local providers have the resources they need to deliver palliative care in the community, with a special focus on continuing to provide a range of palliative and end-of-life supports in long-term care homes and Indigenous communities. The Ontario Palliative Care Network will also work with Ontario Health Teams, hospices, and long-term care homes to ensure local providers have access to standardized models of care, clinical expertise, and training to deliver equitable and compassionate palliative and end-of-life care.

In addition, this investment will contribute to an operational funding increase of 45% for all approved hospice beds in Ontario and an additional increase for hospice beds in small facilities.

This funding will also strengthen grief and bereavement supports for families and caregivers and advance care planning that helps patients and families prepare for future health care decisions. It will also support perinatal palliative care programs that provide specialized grief, bereavement, and peer support that help parents prepare for the loss of their infant.

Drug programs

In 2023–2024, the ministry negotiated new contracts with home oxygen vendors, ensuring continuity of supply to Ontarians across the province. The ministry also put 11 Ontario Drug Benefit Program forms fully online, enabling the submission of applications and receipts, which reduced burden and increased accessibility for Ontarians.

On March 31, 2023, Ontario Drug Benefit (ODB) recipients who were on certain originator biologics were required to transition to a Health Canada approved biosimilar version of the drug, as part of the ministry's biosimilar policy. As of January 2024, the transition was successfully completed. A biosimilar is a biologic drug that enters the market after the patent for the originator biologic has expired and is determined by Health Canada to be highly similar in efficacy and safety. Biosimilars bring significant savings compared to the originator biologic product. As new biosimilars enter the Canadian market, transitions to these biosimilars from their corresponding originator biologic drugs are being planned. Patients will continue receiving the same high-quality treatment, while allowing the government to fund more new drug therapies, bring innovation to the health care system and continue its work to deliver better, connected patient care.

Public health

Investing in a stronger public health sector

Starting January 1, 2024, the province restored \$47 million in provincial annual base funding for public health units, which is the level previously provided under the 2020 cost-share ratio. The province also provided local public health units with an annual 1% funding increase over the next 3 years so they can more effectively plan ahead and prepare. Since 2018, provincial funding for public health units to support the delivery of public health programs and services has increased by approximately 17%.

The province is collaborating with municipalities on a longer-term sustainable funding approach that will support a robust public health sector without putting any additional financial burden on municipalities. Ontario is also working with its partners to refine and clarify the roles of local public health units, to reduce overlap of services and focus resources on improving people's access to programs and services close to home. One-time funding, resources and supports have been offered to public health units that voluntarily merge to streamline and reinvest back into improving programs and services.

COVID-19 vaccination and flu shots

In Spring 2023, based on guidance from Health Canada and the National Advisory Committee on Immunization (NACI), Ontario's Chief Medical Officer of Health recommended high-risk individuals receive their next COVID-19 booster dose. Individuals in certain high-risk groups were recommended to book an appointment for a spring COVID-19 booster if it has been at least 6 months since their last dose or confirmed

COVID-19 infection. Individuals 5 years and older who had not yet received a booster dose since September 1, 2022, were recommended to receive a booster dose if it has been at least 6 months since their last dose or confirmed COVID-19 infection.

In the fall of 2023, Ontarians were able to receive their free flu shot and the new, most recent COVID-19 vaccine at local pharmacies, public health units and primary health care providers across the province. The new COVID-19 vaccines were specifically designed to target the XBB variant, per the approval by Health Canada. Flu shots and COVID-19 vaccines were first made available for the most vulnerable high-risk populations, including hospitalized individuals, hospital staff and residents and staff in long-term care homes, followed by those in retirement homes and other congregate settings. Ontario also continues to provide convenient access to antivirals, such as Paxlovid, through physicians, nurse practitioners and pharmacists.

In fall 2023, Ontario also introduced its first publicly funded RSV vaccine program for older high-risk adults, targeted for high-risk individuals and settings.

Digital / virtual health

Currently, almost 300,000 frontline providers can access provincially held patient health records, leading to more integrated care and better decision making. Over the last year, approximately 59% of Ontarians had a virtual visit, and the continued use of virtual care as an adjunct to traditional in person care highlights patient and provider expectations about the use of digital tools in all aspects of their health care journey.

As part of the focus of integrating modern tools into clinical workflows, the ministry has supported several regionally led projects to help digitize and streamline referral pathways for high priority services. Implementation of central intakes will help take the guesswork out of the referral process, alleviate burden on providers, and enable faster access to care for patients. For example, the implementation of a central intake pathway for colonoscopy at Lakeridge Health has realized a 5-day reduction in patient wait times for seeing a specialist following a referral from their primary care provider.

To date, investments into system connectivity have saved over 6,000 hours of frontline staff time per year during transfers between long-term care homes and hospitals. Through the Evidence2Practice (E2P) program, digital tools are made available for frontline clinicians to provide care that meets Ontario's evidence-based quality standards. Over 4,000 clinicians in primary care and 10,000 in acute care now have access to E2P tools

integrated into their Electronic Medical Records or Hospital Information System.

Health811 (<https://health811.ontario.ca/static/guest/home>) is a tool that lets Ontarians call or chat online with a registered nurse and find the health care services and information they need all in one, easy-to-use website, while also helping Ontarians to avoid unnecessary trips to emergency departments. Health811 receives up to 90,000 call/chat requests per month, and 90% of those requests are directed to an advisor or clinical staff member in less than 1 minute.

This past year, triage pathways were introduced to direct users to virtual care nurse practitioner led programs for appropriate lower acuity health issues and video visits were introduced for certain health symptoms. Work continues to broaden the scope of video visit capabilities, allowing users to engage with a select group of trained clinical advisors, for a more comprehensive assessment of symptoms. Health811 also launched community support pages where Ontarians can learn more about the services available in their communities from their local Ontario Health Team, which facilitates easier access to local support services.

Digital and data tools are also key to enabling Ontario Health Teams and the ministry is working closely with these teams to support digital health adoption, giving frontline providers better access to tools and information to meet local needs. Over \$18.9 million has been allocated across 147 projects in 2023–2024, with approximately 90% of projects being led by Ontario Health Teams.

Improving population-based services and health equity

Expanding Indigenous cultural safety training

Ontario is investing up to \$2 million over 2 years to expand the Indigenous Primary Health Care Council's (IPHCC) Indigenous cultural safety training program. This expansion will allow the program to deliver more cultural training sessions to health care organizations. This will provide health care providers with the knowledge and tools to better meet the health care needs of First Nations, Métis, Inuit, and urban Indigenous people across the province to the culturally appropriate care they need.

In 2023–2024, nearly 2,000 health care providers including physicians, nurses, pharmacists, counsellors, community health/patient navigators and personal support workers were expected to participate in the expanded program. Since 2021, over 170 health

organizations in Ontario have participated in training offered by IPHCC. Ontario is also investing multi-year funding to support local Indigenous cultural safety projects across the province, which is anticipated to provide training to approximately 27,000 individuals by the end of 2025–2026. The funding will also support the development of Métis-specific and Inuit-specific training, and training that will address the specific challenges faced by Indigenous women in accessing care.

Black health - Peel black health and social services hub

The Ontario government has committed \$33 million over 4 years starting in 2023 to create the Peel Black Health and Social Services Hub, a full-service location for Black individuals and families to conveniently access health care and social services in one place, close to home. Co-designed by residents in the growing community of Peel, where 20% of Ontario's Black communities live, the Peel Black Health and Social Services Hub is expected to open as early as summer 2024. The hub will connect people to a team of primary care, mental health, and social service professionals, while also connecting to other social and community supports that can help improve their overall health and well-being.

Supporting people experiencing homelessness

Ontario invested \$15 million to make it easier for people experiencing homelessness in Toronto to connect to primary health care, mental health and other supports they need. Supporting the Health Services for Individuals Experiencing Homelessness Initiative is helping connect more people to health care services through local shelters, mobile clinics, and drop-in clinics. Services include interprofessional primary care, mental health and psychiatric services, overdose prevention, and peer worker support.

The initiative was developed by Ontario Health Toronto in collaboration with community partners such as Inner City Health Associates, Parkdale Queen West Community Health Centre, and the Neighbourhood Group. In 2023 this initiative helped more than 9,000 people experiencing homelessness get the right care in the right place, including intervening and preventing more than 1,300 overdoses, and has helped to significantly reduce hospital emergency department visits and admissions in Toronto.

French language services

To enhance the accessibility and quality of health services for Francophone individuals in Ontario, the government has taken significant strides in the development and implementation of French Language Health Services (FLHS). The province has developed a

FLHS Strategic Plan for implementation and monitoring over the next 5 years. An in-depth analysis of Ontario's French Language Health Planning Entity structure was conducted to enhance the delivery and effectiveness of FLHS. Future capacity building initiatives, to empower Long-Term Care homes with access to Ontario's French Translation Network and to strengthen Medical Interpretation and Translation programs was developed.

Such targeted investments were instrumental in advancing the availability and quality of FLHS, ensuring that Francophone Ontarians received care that was accessible and culturally and linguistically aligned with their needs. The government is investing over \$8 million every year to ensure Franco-Ontarians receive health services in French.

Key performance indicators

The ministry is committed to delivering Ontario's plan to connect Ontarians to convenient care by steadily implementing *Your Health: A Plan for Connected and Convenient Care*, which is built on 3 pillars:

- the right care in the right place
- faster access to care
- hiring more health care workers

A key part of this plan is measuring the province's progress on 20 ministry-level key performance indicators as well as a diverse set of program-level measures. These KPIs are related to government-directed and ministry-identified priorities. Listed below are 7 examples of KPIs that the ministry is tracking annually and the most recent performance results of each measure. The 7 ministry-level KPIs listed below enables tracking of progress towards strategic ministry outcomes and priorities, such as ending hallway health care, access to virtual care, Alternate Level of Care (ALC) rate, and timely access to care for mental health patients in crisis.

Outcome Measure #1 - Daily average number of inpatients receiving care in hallway health care beds

- The ministry is working to end hallway health care, and to ensure that all patients receive timely access to high-quality health care. There was a daily average of 1,189 inpatients receiving care in hallway health care beds as of August 2023. The target is to have zero inpatients receiving hallway health care and the plan to achieve the target includes managing better patient flow within the hospitals, creating additional bedded

capacity, and ensuring patients receive care in the right setting at the right time.

Outcome Measure #2 - Percentage of Ontarians who had a virtual visit

- The ministry is setting expectations through the Ontario Health Team model and modernizing virtual care billing frameworks to remove outdated barriers to virtual care. A survey conducted in the period of November 2021 to December 2022 had indicated that 71.3% of Ontarians had a virtual visit in the last 12 months, far exceeding the target of 50% by 2022–2023. The impact of COVID-19 on service/care patterns has accelerated the achievement of the target.

Outcome Measure #3 - Alternate Level of Care (ALC) rate

- The ministry is working with Ontario Health and hospitals to address capacity and ALC challenges (creating capacity across the continuum; supporting growing demand for hospital services; and ensuring appropriate patients' transition). As of August 2023, the ALC rate was 15.4%, which was higher than the average rate in 2021–2022.
- The increase may be related to staffing shortages across the health sector and changes in clinical need of patients, impacting patient flow. Other factors affecting increased rates in ALC include patient flow challenges within post-acute care settings linked to availability of capacity, and capacity type to support patient needs as they transition out of acute care settings or reside in post-acute settings while awaiting availability in more appropriate care settings.

Outcome Measure #4 - Rate of repeat ED visits for mental health or substance abuse conditions

- Improved connections of patients with mental health or substance use problems in crisis to community mental health and addictions services can reduce short-term repeat emergency department visits. As of March 2023, the rate of repeat emergency department visits for mental health or substance abuse conditions was 26.2%.

Outcome Measure #5 - Percentage of Ontario population served by an Ontario Health Team (OHT) at maturity

- In January 2024, the province brought the total number of OHTs to 58, marking an important milestone in achieving full provincial coverage.

Outcome Measure #6 - Wait time from community to first home care service

- The wait time from community to first home care service indicator is intended to measure timely access to home care services. As of March 2023, the wait time from community to first home care services was 8 days. The long-term outcome is to return back to the baseline target median wait time of 6 days from 2018-19, ensuring that patients are getting timely access to the necessary frontline home care service they require to remain safe and independent in their home.

Outcome Measure #7 - Number of staff added through HHR programs since winter 2020

- The province is committed to hiring over 21,000 workers to Ontario’s health care system from winter 2020 to March 2024. The target of 13,000 by March 2024 reflected the maximum capacity supported by the HHR programs. As of July 2023, the addition of 18,325 staff through the HHR programs surpassed the target.

In addition to the 20 government-directed and ministry-identified KPIs, the ministry tracks outcomes and outputs measures at the program level and reports on them through quarterly report backs and other in-year submissions to support evidence-based decision making.

Table 3: Ministry Interim Actual Expenditures 2022–2023

Ministry Interim Actual Expenditures 2023–2024 [3]	
Item	Amount \$..
Operating	78,805,691,965

Item	Amount \$
Capital	2,326,276,000
Total	81,131,967,965
Staff Strength ^[4] (as of March 31, 2024)	3,091.54

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Footnotes

- [1] ^ Estimates, Interim Actuals and Actuals for prior fiscal years are re-stated to reflect any changes in ministry organization and/or program structure. Interim actuals reflect the numbers presented in the 2024 Ontario Budget.
- [2] ^ Ontario Health includes funding flowed from the Ministry of Long-Term Care. In 24-25, the estimated amount to be flowed to Ontario Health from the Ministry of Long-Term Care is \$5,201,494,900.
- [3] ^ Interim actuals reflect the numbers presented in the 2024 Ontario Budget for the Health Sector.
- [4] ^ Ontario Public Service Full-Time Equivalent positions.